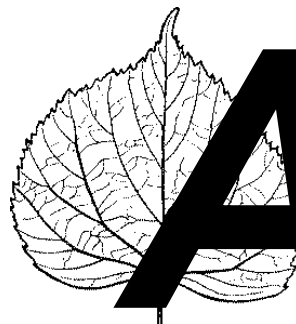


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# ASPN

## **Adult Services Practice Notes**

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*The aspen is perhaps the world's  
largest organism. Although some  
aspen forests cover acres and seem to  
be composed of individuals in all  
stages of life, they share a common  
root system.*

*ASPN: Adult Services  
Practice Notes* is  
dedicated to providing  
information on excellent  
family-centered social  
work practice with adults  
and their families.

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## **Working for Change**

### **Our Story to Date . . .**

In our last issue, you met Mr. Pirelli and his daughter and saw how their social worker helped them develop a plan ([http://ssw.unc.edu/cares/aspn/aspn5\\_2.pdf](http://ssw.unc.edu/cares/aspn/aspn5_2.pdf)). You might have said, "Well, that's nice, but how do you get all of that to happen? It might work with really motivated clients, but in my caseload. . . ." Putting in the effort up front is important, but how do you help the client and family put their plan into action? What is going on when something the client, family, and you have all agreed to do just doesn't get off the ground?

Much of your success working with clients and families depends on their readiness to change. When you're working with several people, you may find that some family members are quite ready to change, while others are more reluctant or even resistant. You can often help them spot the barriers and get around them, though, if you keep in mind the process by which people make changes.

Understanding where your clients are in the change process may also keep *you* from getting frustrated when things don't go as planned. Because clients and families are responsible for their own change, they may take time to get through the stages and even regress a little before progressing. Remembering this may help you take a more objective view of the situation, come up with practical ways to help them move on, and be patient with their struggles.

Understanding the stages of change may help you modify your own behavior. For example, if you want to try something new to improve your practice, understanding the stages can help you plan ways to do so. Being aware of how your own change feels—both bad and good—will give you insight into and empathy for your clients' emotions.

### **How Do People Change?**

When you are working with clients or deciding to do something new in your own life, you go through a process to get to your goal. In 1983, two researchers, Prochaska and DiClemente, studied how people go through changes, and they identified five stages that have been used as the basis for public health and social marketing campaigns to help people abandon risky behaviors such as substance abuse or unprotected sex or to adopt positive behaviors such as eating more vegetables and exercising regularly. Here's a quick a run-down of the stages.

**Precontemplation.** The person who could make the change has no awareness of the need to change or motivation to change. Many information campaigns (and a lot of advertisements) are aimed at people in this category, to raise their level of awareness.

**Contemplation.** The person is aware that a change is necessary, possible, or desirable but doesn't know how to begin.

**Preparation.** The person gathers resources, makes a plan, and takes beginning steps for making the change.

### **Stages of Change**

Precontemplation  
Contemplation  
Preparation  
Action  
Maintenance/Termination

**Action.** The person works hard on the change but needs a lot of support to maintain progress.

**Maintenance/Termination.** The person is maintaining the change, though there is some risk of going back to earlier, less-positive behaviors. When this model is applied to recovery from addiction, maintenance means that the person continues to work to prevent relapse, and the struggle often continues throughout his or her life. For changes in other realms, though, this stage may eventually reach termination, where the person adopting the new behavior will probably never go back to the earlier state.

Your clients and their family members may be in very different stages of change, when you first see them and throughout your work together. If you think about Mr. Pirelli and his daughter, you might decide that he is probably in the precontemplation or contemplation stage, depending on which of his problems/needs we're talking about. Mr. Pirelli's daughter, though, is probably in the action stage—she is at the point where the riskiness of coming to your DSS and her worries or fears about it are less pressing than her concerns about her father. Perhaps she talked to someone who worked with your DSS who had been very pleased with the service, so she was encouraged to come to your agency. For whatever reason, she has learned that you might be able to help, and she has taken action.

When you look at the plan you've developed with the client and family with your understanding of the stages of change, you can begin to see where the rough spots might be. Mr. Pirelli's daughter may be all for getting an in-home aide to come fix his meals, because she's ready for action. He may fiercely resist the idea of having someone he doesn't know in his

house. Although he's concerned with his weight loss, he hasn't gotten to the stage of taking that particular action to make a change. However, he might be much more ready to have help getting his dentures fixed. If they are particularly uncomfortable, he may be somewhere in the contemplation stage—he'd like them fixed but doesn't quite know how to go about it. As you work with him through the comprehensive assessment, you will be helping him get to the preparation stage (identifying resources and making a plan) relatively painlessly. An early "victory" may be important. When you begin to implement the plan together, Mr. Pirelli and his daughter will be testing how good a resource you are for making harder changes in the future. Working with the two of them, things may go more smoothly if you can identify where they are for each task and help them move to the next stage, while helping them avoid conflict where there is a big difference in readiness.

## Helping People Move On

There are interventions that help people go from stage to stage. To go from precontemplation to preparation, most of the "work" people do is internal—they think and feel about the pros and cons of

## The Stages of Change with Some Examples of Strategies

(Note that strategies that work in one stage may also work in later stages.)

<b>Area for Change</b>	<b>Precontemplation</b> <i>Increase awareness of area for change.</i>	<b>Contemplation</b> <i>Respond emotionally to benefits/costs of changing behavior. Acknowledge impact of current behavior on others, environment, and self.</i>
Mr. Pirelli's effort to gain and maintain a healthy weight	Present Mr. P. with information from the doctor on desirable weight for his age and height.	Ask Mr. Pirelli to remember how he felt and what he did that he enjoyed when his physical condition was better. Ask him about favorite meals his wife used to prepare. Ask/help Mr. Pirelli's daughter express her concern about his well-being. Ask what he would like to see happen. Ask him who else can help.
Social worker's effort to enhance family-centered case planning	Read the last issue of <i>ASPN</i> and re-view the case example.	Select and review past cases that went well or that went poorly, looking for your contribution to the outcome. Remember clients/families that were transferred to you. How did the groundwork set by the first worker help you or make things difficult?
Supervisor's support for enhanced planning	Arrange an in-service demonstrating the difference between well- and poorly prepared service plans and how they influenced the outcome for the client/family.	Review a sample of each worker's case records regularly and provide feedback on practice.

making the change. In the action and maintenance stages, people change their behaviors in ways other people can see and identify. If you know which strategies work for each stage, you can develop effective ways to help your clients and families through them. If you're contemplating a change of your own—in your practice or personal life—understanding what people have to know and do to move on can help you, too.

The chart below shows the stages and strategies and provides an example from Mr. Pirelli's plan. It also shows how you might work on your professional development and how support from your peers and supervisor can help you refine your professional skills.

Something to remember is that people like Mr. Pirelli, who was referred by his daughter, or mandated clients, have been catapulted from precontemplation (nothing was wrong, so far as they knew or were willing to acknowledge) to action. It is often hard for people who want to change to go through the stages, and it is even harder for clients whose family members sought your involvement without consulting them or for mandated clients. When changing is not the client's idea, the plans you make together are prone to failure, even when the client seems to want them. You may need to support clients in understanding for themselves why the change is necessary and desirable and what help there is for making it. And you (and other family members) will need to be patient while they do so.

Changing an organization is no different—some people are ready and willing to adopt new behaviors and procedures, while others take longer to adjust. The more involved the people who must carry out the change are involved in designing it, the earlier it is likely to be adopted and implemented.

## Resources for Change

First of all, people making changes are their own best resource, whether it's a client, family members, or you as social worker or supervisor. Doing something in a new and untested way is

risky, because it challenges people's sense of self. Depending on the importance of the change, it also requires considerable courage. Something to consider when you work with your clients is that what they do themselves between visits accounts for about 40 percent of the likelihood of making a successful change. It is important to identify and acknowledge actions toward change that clients and families make. Your relationship with clients and family members accounts for another 30 percent of the likelihood of success, so it is important to be mindful of your interactions and value your own contribution. Another 15 percent of the likelihood of success is attributable to "hope," that taking action will work. The last 15 percent, at least in psychosocial interventions, was the treatment

### Preparation

*Identify sources of support for change.*

Help Mr. Pirelli identify his strengths. Describe and discuss the various strategies as you identify them on the service plan. How would he feel about congregate meals or home-maker services? Could his daughter teach him to cook some of his favorite dishes?

Identify coworkers who would be willing to participate in a peer review group (case staffing) or to consult with you one-on-one. Establish a time for case review with your supervisor.

Hold case staffings. Support peer reviews. Negotiate individual professional development plans with workers and support training.

### Action

*Modify environment to support change. Seek personal support for change. Substitute the new behavior. Get reward for new behavior.*

You have arranged transportation to the congregate meal site, and his daughter has agreed to go with him to check it out. Mr. Pirelli and his daughter will get together, and she will show him how to cook his favorite dishes. Mr. Pirelli has set a day each week for weigh-in.

Get your supervisor's support for a possible increase in time spent with new clients. Choose a new client/family and commit to trying your new way of working with them. Ask your clients for feedback on how the process is working.

Help workers carve out sufficient time for work with families and good documentation. Be available to coach workers through difficult situations. Check in with workers regularly (professionally and personally, as appropriate).

### Maintenance

*Make commitment to sustain change. Measure progress or stability (past vs. current).*

Mr. Pirelli plans to continue monitoring his weight weekly. He also decides to go twice a week to the congregate meal site at the senior center.

Keep a log or journal of what worked well and what didn't. Celebrate clients' victories and your own (discuss with your supervisor and unit how to do this).

Find ways to document and reward improved planning. Catch workers doing something good and praise them.

model used, although none stood out as more effective than others (see Miller and Duncan 2003 for more details).

So, to promote change, identify where your client and family are in the process (or where you are, if you want to make a change yourself). First, help your client and family learn more. Then, address the feelings about the change—get testimonials, hear from people affected, hear the client's feelings. Next, identify the possible resources—work through the service plan and look at the options together, considering not only whether they are “logical” or “obvious,” but also how they feel to the client and family. Identify a place to start— which things are the client and family most ready to do? What would be a quick victory? Then, as you monitor the plan, identify ways to acknowledge and reward their progress. Identify ways to support continued success. Through the concrete goals you have developed together, you can see when the change is made, and your work together can end.

### Sources about Change

See <http://www.uri.edu/research/cprc/TTM/detailedoverview.htm> for a detailed discussion of the stages of change prepared by Prochaska and his colleagues. For an application of the stages that focuses on developing leadership skills (rather than on reducing unwanted behaviors), see [http://www.cba.uri.edu/Scholl/Notes/Leadership\\_TTM.htm](http://www.cba.uri.edu/Scholl/Notes/Leadership_TTM.htm)

See also Scott D. Miller and Barry L. Duncan (2003), “What Works in Therapy” at <http://www.talkingcure.com/whatworks.htm>.

### Talking Change by the Stages: Some Words to Use

“Here’s some information I’d like to give you about \_\_\_\_\_. I’ll be happy to answer any questions.”

“I can arrange for you to talk to someone who has been through the same thing. Would that help?”

“How does this issue affect you now? How does it affect your family members? How do you feel about it? How do they feel about it?”

“If things were a little better, what would be different? How would it feel?”

“Have you had something like this happen in the past? What did you do about it then that worked? What didn’t work? What would you like to try now?”

“Tell me what you’ve tried since we last met. What worked? Congratulations.”

“What do you plan to do next? Let me know how it works and if I can help.”

“If a similar situation happens after we stop working together, what do you plan to do? Who would you ask for help?”

Visit the CARES web site at <http://ssw.unc.edu/cares/cares.htm>  
for on-line copies of this newsletter, updated calendar of workshops,  
links to background materials for events, and much more.

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**Next time:  
Better Outcomes**

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