

The Change Process



Stages of Change

The following information is based on the theory that there are a series of stages that people move through when changing their behaviours. They move from a state of:

Pre-contemplation (no awareness or willingness to acknowledge problems): At this stage you increase your understanding of your addictive behaviour and its associated risks.

to

Contemplation (an increased awareness of problems, characterised by ambivalence and conflict): You initiate reasons within yourself for change and look at the risks associated with not changing.

to

Determination (decision making and preparation for action): You determine the best course of action to change your behaviour.

to

Action (increased activity in the process of change and behavioural coping): You identify and use strategies that prevent relapse.

to

Maintenance (continued action to reinforce the new behaviour): You continue to identify and use strategies to prevent relapse.

The **Relapse** stage is also an important part of the process, rather than regarded as a failure. Should a relapse occur, you can renew your process of change by beginning at the contemplation stage of the process again.

However you need to be ready to change. You need to be willing to change and you need to have the ability to change. However, all change requires motivation. Your motivation to change is best determined by your actions.

Your motivation for change is best judged not by what you say you will do, but rather by what you do, (that is your actions).

You may appear motivated by the verbal statements you make about your commitment to your recovery, but words are no guarantee that you are motivated or will actually change. A practical way of viewing motivation is to see it as action, as opposed to a state of being. Motivation is a central and integral aspect your program and your ongoing recovery.

There is little evidence to suggest that accepting a diagnosis or label such as "I am an addict" is predictive of recovery. Many people in active addiction freely admit their problems or accept the diagnostic label of being an addict. What does appear to predict change in your behaviour is continued adherence to advice or a plan. The best plan available for dealing with your addiction is the Bridge Program and the 12 Steps Program.

Rarely have we seen a person fail who has thoroughly followed our path. Those who do not recover are those who cannot or will not completely give themselves to this simple program. (Alcoholics Anonymous Big Book, p58).

Following your Case Worker's input and adherence to your 12 Step Program are linked more times than not to a successful recovery. A key dimension to a successful outcome for your recovery program must be your level of motivation and adherence to and compliance with the suggestions of both the Bridge Program and the 12 Steps Program.

It is likely that at some time in the program you will be in a state of 'pre-contemplation' or 'contemplation' about some aspects of yourself or your behaviour. You may find yourself resistant to this change and your motivation for change may be low. If you are at the pre-contemplative stage in the change process you may be in a position where you have not seriously considered the possibility that the behaviour requires some sort of action.

If you are in the stage of 'contemplation' regarding change you may experience a considerable amount of ambivalence about whether or not you want to change. Don't be surprised to find that most, if not all, Bridge Program participants, experience such feelings and thoughts at different times. It would be most surprising if everybody in the program was not experiencing some level of resistance, surprise or ambivalence at some time or other during their program.

The challenge is to use your resources to maximise your motivation to change your behaviour or situation through adherence to a plan of action, i.e. your personal recovery program.

Resistance to Change

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Resistance to Change

You may at times become resistant to change. Resistance is a normal reaction to being told "you have to change". You have to take personal responsibility for your own change so you can work through the resistance. There are a number of strategies that you can employ to move through your resistance:

- Work at accepting yourself and your life experiences.
- Take responsibility for and accept that you have an addiction.
- Be open with those working your program with you, i.e. your peers, Case Workers and Officer staff.
- Set specific recovery goals for yourself.

Check for the Expression of Resistance to Change

1. ARGUING

You may become argumentative towards your group, your Case Worker, work supervisor, the Court and your family.

2. CHALLENGING PREVIOUSLY ACCEPTED CONCEPTS

You may begin to question whether you still have a problem with drugs, alcohol or gambling or whether or not you need to be in the Bridge Program. You may question whether or not your Case Worker knows what they are talking about. You may question whether or not the group you are in is of any value to you. Some of your resistance may express itself passively, by simply dismissing any possibility of change.

3. IGNORING

Another way you may express resistance to change is to ignore your group, 12 Step meetings, staff etc. You might not pay attention in group or one to one support sessions, choose not to answer questions or give short answers thus avoiding going into detail.

4. DENYING

You may begin to deny that you have any problems. You may deny that you have any unresolved issues that need attention. You may blame others for your current situation - 'the system' or being 'in the wrong place at the wrong time' or 'falling in with the wrong crowd'. You may minimise your problems, seeking to divert attention from your issues by hi-jacking your group or one to one support sessions.

Resistance to Change is Normal

Your reluctance or resistance to change is something we expect otherwise you would have changed before now. However change you must. The goal of your work is not to accept yourself as you are and stay that way, the goal is to continue your change process.

Motivation for change is created when a person perceives a discrepancy between their present behaviour and important personal goals. In a therapeutic situation, people often perceive a discrepancy between where they are and where they want to be. In the Bridge Program some of you are likely to be experiencing this discrepancy, if only at the level of "I'm here in this program..and I don't want to be or need to be".

You need to remember that the program will increase your awareness of your situation and problems and the need to do something about them. It will therefore, be confrontational in and of itself. You need to embrace your change process; this will bring about an altering of your perception of yourself. Remember you can change; you just need to develop the belief that can.

From Our Perspective

Participants who give in to the need to change and initiate change can remain abstinent, and therefore continue their process of change. When we speak of someone being ready to change, motivation to change is often referred to. A person's motivation is often determined by a number of their behaviours. Remember, your motivation for change is best judged not by what you say, but rather by what you do.

Participants who lack a tolerance for the uncertainty of changing their behaviour and lack faith in God and their own ability to effect change usually end up simply hoping that life could be better without active addiction, instead of being actively involved in a meaningful and fulfilling existence. They take a passive rather than active role in their recovery.

These are the participants we see 'hoping', 'trusting', 'looking forward to', 'believing' and 'imagining' their life will be better. Participants in this situation have a range of expectations about their personal change that extend from anticipating positive, but unspecified outcomes, to anticipating specific outcomes, *for example*, 'hoping' that life will be better without active addiction is a vague expectation when compared to hoping for a new job or looking forward to a spouse returning.

Some participants will say at first that they will do anything to recover, but then the old thinking comes back and they want recovery on their own terms - they DO NOT continue to change.

Change and Vulnerability

To change you need to become vulnerable. Allowing yourself to be vulnerable determines whether you take the path of recovery and positive change or relapse. You have to assume personal responsibility for your recovery and develop an accurate perception of your reality.

Once your change process is embraced and under way recovery becomes a desired personal goal. Your change process will become more internally focused and less externally driven.

Some Points for Discussion

1. What stage in the process of change are you currently in?
2. How have you managed to maintain your recovery at this stage of your change process?
3. What benefits are there for you in staying this way?
4. What action steps can you take to enhance your recovery?