

1a

# Transtheoretical Model

## Behavior Modification

### Precontemplation (The “I won’t or I can’t”)

2a

- This is the stage in which there is no intention to change behavior in the foreseeable future.
- Many individuals in this stage are unaware of problems or that there is a need for change. It is not important to them\or life is too complicated to do it even though they know it is important.

### Contemplation (The “I may”)

3a

- This is the stage when individuals have identified a problem.
- Where a person is thinking that s\he might start doing the behavior within the next 6 months.
- Do the pros and cons of change outweigh the pros and cons of maintaining present behavior?

### Preparation (The “I will”)

4a

- This is the stage when the individual decides there is a need to take some action.
- Where a person is planning to start the behavior within the next 30 days and some type of action has been attempted.

### Action (The “I am”)

5a

- This is the stage in which the individual puts their plans into action and change their behavioral patterns.
- Where a person has begun doing the behavior according to the definition and has sustained it for less than 6 months.

### Maintenance (The “I still am”)

6a

- This is the stage when the individual works to prevent relapse and consolidate the gains attained during the action.
- Where a person has begun doing the behavior and has maintained it for longer than 6 months.

### Step I: Explore the problem (Past)

2b

- “What is the hardest thing about taking care of your diabetes?”
- “Tell me more”
- “Give me some examples”
- “What has worked, what hasn’t”

### Nondirective vs Directive Support

1b

#### •Nondirective

- “Check-in” with pt.
  - Cooperating without taking over.
  - Accepting patients choices and feeling and recognizing limitations.
  - Offer range of suggestions
  - Show interest in their wellbeing.

#### •Directive

- “Check-on” patient
  - Taking responsibility for tasks/care, the charge/control, and monitor their health.
  - Directing choices and feelings, problem solving.

### Step III: Develop a PLAN

4b

- “What is it you want?”
- “Where do you want to go today?”
- “What are your options?”
- “Why not?”
- “What is there to gain?”
- “What is there to lose?”
- “How important is this to you?”

### Step II: Clarify meaning, feelings, and conceptions

3b

- “What are your thoughts about this?”
- “Tell me why this is/isn’t working for you?”
- Having an understanding of the patients Life is critical- where and with whom do they live, resources available, how important is it to the patient, etc.

### Step V: What happened? (Reinforcement)

6b

- “How did it go?”
- “What did you learn?”
- “What didn’t work?”
- “What would you do differently?”
- “What do you want to do next?”

### Stage IV: Commitment to Action

5b

- “What, when, where, how often...are you going to do (goal quality)
- “Are you ready?”
- “How will you know if you have been successful?”
- “How likely is it that you will be successful?” (1-10)