<table>
<thead>
<tr>
<th>Client's Stage of Change</th>
<th>Appropriate Motivational Strategies for the Clinician</th>
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</table>
| **Precontemplation**    | • Establish rapport, ask permission, and build trust.  
|                         | • Raise doubts or concerns in the client about substance-using patterns by  
|                         |   o Exploring the meaning of events that brought the client to treatment or the results of previous treatments  
|                         |   o Eliciting the client's perceptions of the problem  
|                         |   o Offering factual information about the risks of substance use  
|                         |   o Providing personalized feedback about assessment findings  
|                         |   o Exploring the pros and cons of substance use  
|                         |   o Helping a significant other intervene  
|                         |   o Examining discrepancies between the client's and others' perceptions of the problem behavior  
|                         | • Express concern and keep the door open. |
| **Contemplation**       | • Normalize ambivalence.  
|                         | • Help the client "tip the decisional balance scales" toward change by  
|                         |   o Eliciting and weighing pros and cons of substance use and change  
|                         |   o Changing extrinsic to intrinsic motivation  
|                         |   o Examining the client's personal values in relation to change  
<p>|                         |   o Emphasizing the client's free choice, responsibility, and self-efficacy for change |</p>
<table>
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<tr>
<th>Preparation</th>
<th>Action</th>
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<tbody>
<tr>
<td>The client is committed to and planning to make a change in the near future but is still considering what to do.</td>
<td>The client is actively taking steps to change but has not yet reached a stable state.</td>
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- Elicit self-motivational statements of intent and commitment from the client.
- Elicit ideas regarding the client's perceived self-efficacy and expectations regarding treatment.
- Summarize self-motivational statements.

- Clarify the client's own goals and strategies for change.
- Offer a menu of options for change or treatment.
- With permission, offer expertise and advice.
- Negotiate a change--or treatment--plan and behavior contract.
- Consider and lower barriers to change.
- Help the client enlist social support.
- Explore treatment expectancies and the client's role.
- Elicit from the client what has worked in the past either for him or others whom he knows.
- Assist the client to negotiate finances, child care, work, transportation, or other potential barriers.
- Have the client publicly announce plans to change.

- Engage the client in treatment and reinforce the importance of remaining in recovery.
- Support a realistic view of change through small steps.
- Acknowledge difficulties for the client in early stages of change.
- Help the client identify high-risk situations through a functional analysis and develop appropriate coping strategies to overcome these.
- Assist the client in finding new reinforcers of positive change.
- Help the client assess whether she has strong family and social support.
**Maintenance**

The client has achieved initial goals such as abstinence and is now working to maintain gains.

- Help the client identify and sample drug-free sources of pleasure (i.e., new reinforcers).
- Support lifestyle changes.
- Affirm the client's resolve and self-efficacy.
- Help the client practice and use new coping strategies to avoid a return to use.
- Maintain supportive contact (e.g., explain to the client that you are available to talk between sessions).
- Develop a "fire escape" plan if the client resumes substance use.
- Review long-term goals with the client.

**Recurrence**

The client has experienced a recurrence of symptoms and must now cope with consequences and decide what to do next.

- Help the client reenter the change cycle and commend any willingness to reconsider positive change.
- Explore the meaning and reality of the recurrence as a learning opportunity.
- Assist the client in finding alternative coping strategies.
- Maintain supportive contact.