



The Addiction Technology Transfer Center Network  
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# ADDICTION Messages

*Ideas for Treatment Improvement*

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## SERIES 14

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## Group Skills - Part 2 “Stages-of-Change & Group Therapy”

*“Change and growth take place when a person has risked himself and dares to become involved with experimenting with his own life”*

~ Herbert A. Otto ~

Another approach to effective group therapy is described in a manual by Velasquez, et al (2001), “**Group Treatment for Substance Abuse: A Stages-of-Change Therapy Manual**”. This manual is a structured guide to a comprehensive 29-session group treatment model based on the transtheoretical model of behavior change (TTM). This model offers a consistent theoretical framework for helping clients move through the stages of change in group treatment. TTM is based on research that found five characteristics common to all types of successful change in all types of circumstances. The five distinct “Stages of Change” are:

### **Precontemplation**

Not seeing a problem exists.

### **Contemplation**

Seeing a problem and considering whether to act on it.

### **Preparation**

Making concrete plans to change behaviors.

### **Action**

Doing something toward making a change.

### **Maintenance**

Working to maintain the change.

The TTM encourages understanding of the

client’s present stage of change, and providing services that are appropriate to their current level of readiness. Since the outline of this manual is highly structured it can be a useful foundation for group leaders just beginning to use TTM. Experienced leaders may want to adopt the concepts and strategies in a more flexible manner.

While this manual does not use Motivational Interviewing (MI) per se, its effectiveness is enhanced when the group leader uses MI principles. The Mid-Atlantic Addiction Technology Transfer Center has also published a good resource on this topic: “**Motivational Groups for Community Substance Abuse Programs**” available at [www.mid-attc.org](http://www.mid-attc.org).

## Motivational Techniques

“**Group Treatment for Substance Abuse: A Stages-of-Change Therapy Manual**” is unique because it couples established therapy tools and strategies with particular processes of change. The table on page two summarizes the various techniques that can be used in each stage of change. Below are brief treatment goals for each of the techniques.

### **Psychoeducation**

Teaching clients about psychologically relevant information such as relapse and recovery.

### **Values Clarification**

Having clients define their own values system and what they hold most important in their life.

**Problem Solving**

Enhancing client's ability to logically identify alternate behaviors.

**Goal Setting**

Understanding the difference between a realistic goal and one that is unattainable.

**Relapse Prevention Planning**

Proactively planning for times when the client may be tempted to use substances.

**Relaxation Techniques**

Teaching techniques that help clients calm themselves in stressful situations.

**Assertion Training**

Teaching refusal skills to help clients resist drugs if offered.

**Role Playing**

Learning by "acting out" situations before they occur.

**Cognitive Techniques**

Teaching new ways of thinking, such as cognitive restructuring, recognition and framing.

turing, recognition and framing.

**Environmental Restructuring**

Encouraging clients to alter or avoid tempting situations.

**Role Clarification**

Identifying various roles the client plays in their daily life.

**Reinforcement**

Using reinforcement to reward positive behaviors.

**Social Skills and Communication Skills Enhancement**

Teaching effective communication and respect for others.

**Needs Clarification**

Identifying the areas of the client's life that need attention.

**Assessment and Feedback**

Providing the opportunity for the client to realistically look at the extent of their substance use.

This manual utilizes several empirically-based, conventional therapeutic techniques to help clients understand and engage in the process of change as shown in the chart below.

### Techniques Used to Enhance Process Movement

Process of Change	Session topic(s)	Technique(s)
Consciousness raising	Daily Usage Physiological effects Expression of concern	Assessment/feedback Psychoeducation Cognitive recognition
Self-reevaluation	Expectations of use Values	Cognitive recognition Values clarification
Decisional balance	Weighing pros and cons	Decision making
Environmental reevaluation	Relationships Roles	Cognitive recognition Role clarification
Efficacy	Confidence and temptation Problem solving	Problem solving
Self-liberation	Goals Action plan Recommitting after a slip	Goal setting Relapse prevention planning Framing
Stimulus control	Triggers	Psychoeducation Environmental restructuring
Counterconditioning	Stress Assertiveness Refusal skills Thought management	Relaxation imagery Assertion Role play Cognitive restructuring
Reinforcement management	Rewarding success Cravings and urges Alternatives to using	Reinforcement Cognitive restructuring
Helping relationships	Social support	Social skills enhancement Communication skills
Social liberation	Identifying needs and resources	Needs clarification Psychoeducation

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### **Change Process Objectives**

The 29 sessions are divided into two sequences: the first 14 meetings are devoted to the Precontemplation, Contemplation and Preparation (P/C/P) stages while the final 15 meetings focus on Action and Maintenance (A/M). Since you will be working with your clients “where they are” regarding readiness to change you may find less resistance using this model. The following treatment themes illustrate the progression through these stages. Your client will enter the appropriate sequence based on your assessment of their readiness.

### **Precontemplative/Contemplative/Preparation**

#### *Consciousness Raising*

Consciousness raising is used during the first 5 sessions and includes understanding the stages of change model and increasing the client’s knowledge of themselves, their drug use, and reasons for using.

#### *Self-reevaluation*

Sessions 6 and 7 focus on client’s reevaluating their behaviors in relation to their personal values.

#### *Decisional Balance*

Session 8 concentrates on the client weighing the pros and cons of their behavior, the decisional balance.

#### *Environmental Reevaluation*

Exploring the client’s relationships and roles clarifies the effects of their behaviors on their life and environment in Sessions 9 and 10.

#### *Efficacy*

Sessions 11 and 12 help the client understand situations in which they may be tempted to use, and to use problem solving skills to change behaviors.

#### *Self-liberation*

Self-liberation is the focus of Session 13 and involves goal setting regarding substance use and making a commitment to changing behaviors. Session 14 is devoted to review and discussion of progress.

#### **Action/Maintenance**

The first session of this sequence focuses on consciousness raising as a foundation.

#### *Stimulus Control*

Stimulus control in Session 2 involves identifying and avoiding potential “triggers” for substance use.

#### *Counterconditioning*

Counterconditioning skills taught in Session 3 help clients to substitute unhealthy behaviors for healthy ones.

#### *Reinforcement Management*

Session 4 stresses rewarding even the smallest behavior changes made by clients. Sessions 5-7 use a combination of counterconditioning and reinforcement management. Sessions 8-10 continue addressing these objectives but include a focus on stimulus control.

#### *Social Liberation*

Social liberation, or the client’s belief in the ability to change, is emphasized in Sessions 11, 12 and again in 14.

#### *Helping Relationships*

Social support networks and helping relationships that support change are the focus of Session 13. Session 15 uses self-efficacy and reinforcement management to discuss the progress clients have made as the group is terminated.

*Next Issue:*

**“Leadership and Interventions”**

### **Sources:**

Norcross, JC (Ed.). (2001). **Empirically supported therapy relationships: Summary Report of the Division 29 Task Force.** *Psychotherapy*, 38(4).

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Ingersoll, KA, Wagner, CC, & Gharib, S. (2000). **Motivational Groups for Community Substance Abuse Programs.** Richmond, VA: Mid-Atlantic Addiction Technology Transfer Center, Virginia Commonwealth University.