IDDT – In which phase of the process of change is the patient at the time?

ENGAGEMENT	MOTIVATION	ACTIVE TREATMENT	RELAPSE PREVENTION
GOAL: Developing a working alliance	GOAL: Motivation / starting to make a change	GOAL: Making the desired change	GOAL: Stabilizing and preventing relapse
SIGNS	SIGNS	SIGNS	REMEMBER
 I don't have a problem This information is not relevant for me There is no need for change The pros are larger than the cons Others believe I have a problem, I don't Behavioral change can appear when there is an external pressure, but the change is unstable and likely to reverse when the external pressure ceases to exist 	 Experiences negative consequences, but is not certain how big the problem actually is Ambivalence – the current situation has both positive and negative consequences Considering change, but is not certain Shifting in behavior and motivation Determination to go through with the change in the near future Making plans, such as setting a date for when to start Making small attempts to change Having beliefs and expectations about life after the change 	 A positive and optimistic phase The change becomes visible for others Reducing undesirable behavior Significant effort by the patient – a change of behavior, thinking and environment occurs Actively using coping strategies 	 All change is difficult – for everyone Starting to change does not equal permanent change Relapse is frequent. Try, and try again. Get back up on your feet!
TOOLS	METHODS	METHODS	FOCUS
 Assistance and support in practical everyday tasks Offer something the person needs here and now Expect to be tested to see if you have what it takes / are up to the job 	 Motivational Interviewing The Payoff Matrix Emphasize the freedom to choose Develop new coping strategies 	 Stimulus control Replacement of behavior Positive enhancement Planning for possible relapse Active use of previous experiences 	 Making the change more robust Working on motivation to keep it strong Preventing relapse – identifying triggers Learning from the relapses – revise the plans Making changes in ways of life
MECANISMS / PSYCHOLOGICAL DEFENSE	TRAPS	TRAPS	COMMON CAUSES FOR RELAPSE
 Denial / Hesitation Rationalization / Justification Projection / Protest Introjection / Tiredness and despair 	 Waiting for the magical moment Seeking 100% certainty Wishful thinking Searching for an impossible compromise Acting too early Giving advice / helping the patient making good choices 	 Poor planning and preparation Few coping strategies sticking with one strategy only Little investment in change I do as I have always done, although it was not successful 	 Social pressure Determination to change challenged by oneself Triggers or demanding situations become too challenging