

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
<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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
<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Motivational Interviewing • The Payoff Matrix • Emphasize the freedom to choose • Develop new coping strategies 	<ul style="list-style-type: none"> • Stimulus control • Replacement of behavior • Positive enhancement • Planning for possible relapse • Active use of previous experiences 	<ul style="list-style-type: none"> • 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
<ul style="list-style-type: none"> • Denial / Hesitation • Rationalization / Justification • Projection / Protest • Introjection / Tiredness and despair 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • Social pressure • Determination to change challenged by oneself • Triggers or demanding situations become too challenging