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The Transtheoretical Model (also called the Stages of Change Model), developed by Prochaska and DiClemente in the late 1970s, evolved through studies examining the experiences of smokers who quit on their own with those requiring further treatment to understand why some people were capable of quitting on their own. It was determined that people quit smoking if they were ready to do so. Thus, the Transtheoretical Model (TTM) focuses on the decision-making of the individual and is a model of intentional change. The TTM operates on the assumption that people do not change behaviors quickly and decisively. Rather, change in behavior, especially habitual behavior, occurs continuously through a cyclical process. The TTM is not a theory but a model; different behavioral theories and constructs can be applied to various stages of the model where they may be most effective. The TTM posits that individuals move through six stages of change: precontemplation, contemplation, preparation, action, maintenance, and termination. Termination was not part of the original model and is less often used in application of stages of change for health-related behaviors. For each stage of change, different intervention strategies are most effective at moving the person to the next stage of change and subsequently through the model to maintenance, the ideal stage of behavior.

Precontemplation – In this stage, people do not intend to take action in the foreseeable future (defined as within the next 6 months). People are often unaware that their behavior is problematic or produces negative consequences. People in this stage often underestimate the pros of changing behavior and place too much emphasis on the cons of changing behavior. **Contemplation** – In this stage, people are intending to start the healthy behavior in the foreseeable future (defined as within the next 6 months). People recognize that their behavior may be problematic, and a more thoughtful and practical consideration of the pros and cons of changing the behavior takes place, with equal emphasis placed on both. Even with this recognition, people may still feel ambivalent toward changing their behavior. **Preparation (Determination)** – In this stage, people are ready to take action within the next 30 days. People start to take small steps toward the behavior change, and they believe changing their behavior can lead to a healthier life. **Action** – In this stage, people have recently changed their behavior (defined as within the last 6 months) and intend to keep moving forward with that behavior change. People may exhibit this by modifying their problem behavior or acquiring new healthy behaviors. **Maintenance** – In this stage, people have sustained their behavior change for a while (defined as more than 6 months) and intend to maintain the behavior change going forward. People in this stage work to prevent relapse to earlier stages. **Termination** – In this stage, people have no desire to return to their unhealthy behaviors and are sure they will not relapse. Since this is rarely reached, and people tend to stay in the maintenance stage, this stage is often not considered in health promotion programs. To progress through the stages of change, people apply cognitive, affective, and evaluative processes. Ten processes of change have been identified with some processes being more relevant to a specific stage of change than other processes. These processes result in strategies that help people make and maintain change. **Consciousness Raising** – Increasing awareness about the healthy behavior. **Dramatic Relief** – Emotional arousal about the health behavior, whether positive or negative arousal. **Self-Reevaluation** – Self reappraisal to realize the healthy behavior is part of who they want to be. **Environmental Reevaluation** – Social reappraisal to realize how their unhealthy behavior affects others. **Social Liberation** – Environmental opportunities that exist to show society is supportive of the healthy behavior. **Self-Liberation** – Commitment to change behavior based on the belief that achievement of the healthy behavior is possible. **Helping Relationships** – Finding supportive relationships that encourage the desired change. **Counter-Conditioning** – Substituting healthy behaviors and thoughts for unhealthy behaviors and thoughts. **Reinforcement Management** – Rewarding the positive behavior and reducing the rewards that come from negative behavior. **Stimulus Control** – Re-engineering the environment to have reminders and cues that support and encourage the healthy behavior and remove those that encourage the unhealthy behavior. **Limitations of the Transtheoretical Model** There are several limitations of TTM, which should be considered when using this theory in public health. Limitations of the model include the following: The theory ignores the social context in which change occurs, such as SES and income. The line between the stages can be arbitrary with no set criteria as to how to determine the person's current stage of change. The questionnaire that assigns a person to a stage of change are not always standardized or valid. There is no clear sense of how much time is needed for each stage, or how long a person can remain in a stage. The model assumes that individuals make coherent and logical plans in their decision-making process when this is not always true. The Transtheoretical Model provides suggested strategies for public health interventions to address people at various stages of the decision-making process. This can result in interventions that are tailored (i.e., a message or program component has been specifically created for a target population's level of knowledge and motivation) and effective. The TTM encourages an assessment of an individual's current stage of change and accounts for relapse in people's decision-making process. **SMART Goal Setting** Have you ever said to yourself that you need to "eat healthier" or "exercise more" to improve your overall health? How well did that work for you? In most cases, probably not very well. That's because these statements are too vague and do not give us any direction for what truly needs to be done to achieve such goals. To have a better chance at being successful, try using the SMART acronym for setting your goals (S= Specific, M= Measurable, A=Attainable, R= Realistic, T= Time-oriented): Specific – Create a goal that has a focused and clear path for what you actually need to do. Examples: I will drink 8 ounces of water 3 times per day I will walk briskly for 30 minutes, 5 times per week I will reduce my soda intake to no more than 2 cans of soda per week Do you see how that is more helpful than just saying you will eat healthier or exercise more? It gives you direction. Measurable – This enables you to track your progress, and ties in with the "specific" component. The above examples all have actual numbers associated with the behavior change that let you know whether or not it has been met. Attainable – Make sure that your goal is within your capabilities and not too far out of reach. For example, if you have not been physically active for a number of years, it would be highly unlikely that you would be able to achieve a goal of running a marathon within the next month. Realistic – Try to ensure that your goal is something you will be able to continue doing and incorporate as part of your regular routine/lifestyle. For example, if you made a goal to kayak 2 times each week, but don't have the financial resources to purchase or rent the equipment, no way to transport it, or are not close enough to a body of water in which to paddle, then your goal is not realistic. Time-oriented – Give yourself a target date or deadline in which the goal needs to be met. This will keep you motivated and motivated to reach the goal, while also evaluating your progress. Are you thinking about being more active? Have you been trying to cut back on less healthy foods? Are you starting to eat better and move more but having a hard time sticking with these changes? Old habits die hard. Changing your habits is a process that involves several stages. Sometimes it takes a while before changes become new habits. And, you may face roadblocks along the way. Adopting new, healthier habits may protect you from serious health problems like obesity and diabetes. New habits, like healthy eating and regular physical activity, may also help you manage your weight and have more energy. After a while, if you stick with these changes, they may become part of your daily routine. New habits may help you look better and have more energy. The information below outlines four stages you may go through when changing your health habits or behavior. You will also find tips to help you improve your eating, physical activity habits, and overall health. The four stages of changing a health behavior are contemplation preparation action maintenance What stage of change are you in? Contemplation: "I'm thinking about it." In this first stage, you are thinking about change and becoming motivated to get started. You might be in this stage if you have been considering change but are not quite ready to start believe that your health, energy level, or overall well-being will improve if you develop new habits are not sure how you will overcome the roadblocks that may keep you from starting to change Preparation: "I have made up my mind to take action." In this next stage, you are making plans and thinking of specific ideas that will work for you. You might be in this stage if you have decided that you are going to change and are ready to take action have set some specific goals that you would like to meet are ready to put your plan to take action "I have started to change." In this third stage, you are acting on your plan and making the changes you set out to make. You might be in this stage if you have been changing eating, physical activity, and other behaviors for at least a few months so are adjusting to how it feels to eat the healthier, be more active and make other changes such as getting more sleep or reducing screen time have been trying to overcome things that sometimes block your success Maintenance: "I have a new routine." In this final stage, you have become used to your changes and have kept them up for more than 6 months. You might be in this stage if your changes have become a normal part of your routine you have found creative ways to stick with your routine you have had slip-ups and setbacks but have been able to get past them and make progress Did you find your stage of change? Read on for ideas about what you can do next. Contemplation: Are you thinking of making changes? Making the leap from thinking about change to taking action can be hard and may take time. Asking yourself about the pros (benefits) and cons (things that get in the way) of changing your habits may be helpful. How would life be better if you made some changes? Think about how the benefits of healthy eating or regular physical activity might relate to your overall health. For example, suppose your blood glucose, also called blood sugar, is a bit high and you have a parent, brother, or sister who has type 2 diabetes. This means you also may develop type 2 diabetes. You may find that it is easier to be physically active and eat healthy knowing that it may help control blood glucose and protect you from a serious disease. Making the leap from thinking about change to taking action can be hard and may take a while. You may learn more about the benefits of changing your eating and physical activity habits from a health care professional. This knowledge may help you take action. Look at the lists of pros and cons below. Find the items you believe are true for you. Think about factors that are important to you. Healthy Eating Pros Cons have more energy improve my health lower my risk for health problems maintain a healthy weight feel proud of myself set an example for friends and family spend more money and time on food may need to cook more often at home may need to eat less of foods I love may need to buy different foods may need to convince my family that we all have to eat healthier foods

Preparation: Have you made up your mind? If you are in the preparation stage, you are about to take action. To get started, look at your list of pros and cons. How can you make a plan and act on it? The chart below lists common roadblocks you may face and possible solutions to overcome roadblocks as you begin to change your habits. Think about these things as you make your plan. Roadblock Solution I don't have time. Make your new healthy habit a priority. Fit in physical activity whenever and wherever you can. Try taking the stairs or getting off the bus a stop early if it is safe to do so. Set aside one grocery shopping day a week, and make healthy meals that you can freeze and eat later when you don't have time to cook. Healthy habits cost too much. You can walk around the mall, a school track, or a local park for free. Eat healthy on a budget by buying in bulk and when items are on sale, and by choosing frozen or canned fruits and vegetables. I can't make this change alone. Recruit others to be active with you, which will help you stay motivated and safe. Consider signing up for a fun fitness class like salsa dancing. Get your family or coworkers on the healthy eating bandwagon. Plan healthy meals together with your family, or start a healthy potluck once a week at work. I don't like physical activity. Forget the old notion that being physically active means lifting weights in a gym. You can be active in many ways, including dancing, walking, or gardening. Make your own list of options that appeal to you. Explore options you never thought about, and stick with what you enjoy. I don't like healthy foods. Try making your old favorite recipes in healthier new ways. For example, you can trim fat from meat and reduce the amount of butter, sugar, and oil you cook with. Use low-fat cheeses or milk rather than whole-milk foods. Add a cup or two of broccoli, carrots, or spinach to casseroles or pasta. Once you have made up your mind to change your habits, make a plan and set goals for taking action. Here are some ideas for making your plan: After making your plan, start setting goals for putting your plan into action. Start with small changes. For example, "I'm going to walk for 10 minutes, three times a week." What is the one step you can take right away? Action: Have you started to make changes? You are making real changes to your lifestyle, which is fantastic! To stick with your new habits review your plan look at the goals you set and how well you are meeting them overcome roadblocks by planning ahead for setbacks reward yourself for your hard work Track your progress Tracking your progress helps you spot your strengths, find areas where you can improve, and stay on course. Record not only what you did, but how you felt while doing it—your feelings can play a role in making your new habits stick. Recording your progress may help you stay focused and catch setbacks in meeting your goals. Remember that a setback does not mean you have failed. All of us experience setbacks. The key is to get back on track as soon as you can. You can track your progress with online tools such as the NIH Body Weight Planner. The NIH Body Weight Planner lets you tailor your calorie and physical activity plans to reach your personal goals within a specific time period. Overcome roadblocks Remind yourself why you want to be healthier. Perhaps you want the energy to play with your nieces and nephews or to be able to carry your own grocery bags. Recall your reasons for making changes when slip-ups occur. Decide to take the first step to get back on track. Problem-solve to "outsmart" roadblocks. For example, plan to walk indoors, such as at a mall, on days when bad weather keeps you from walking outside. Ask a friend or family member for help when you need it, and always try to plan ahead. For example, if you know that you will not have time to be physically active after work, go walking with a coworker at lunch or start your day with an exercise video. Reward yourself After reaching a goal or milestone, allow for a nonfood reward such as new workout gear or a new workout device. Also consider posting a message on social media to share your success with friends and family. Choose rewards carefully. Although you should be proud of your progress, keep in mind that a high-calorie treat or a day off from your activity routine are not the best rewards to keep you healthy. Pat yourself on the back. When negative thoughts creep in, remind yourself how much good you are doing for your health by moving more and eating healthier. Maintenance: Have you created a new routine? Make your future a healthy one. Remember that eating healthy, getting regular physical activity, and other healthy habits are lifelong behaviors, not one-time events. Always keep an eye on your efforts and seek ways to deal with the planned and unplanned changes in life. Eating healthy and being physically active are lifelong behaviors, not one-time events. Now that healthy eating and regular physical activity are part of your routine, keep things interesting, avoid slip-ups, and find ways to cope with what life throws at you. Add variety and stay motivated Mix up your routine with new physical activities and goals, physical activity buddies, foods, recipes, and rewards. Deal with unexpected setbacks Plan ahead to avoid setbacks. For example, find other ways to be active in case of bad weather, injury, or other issues that arise. Think of ways to eat healthy when traveling or dining out, like packing healthy snacks while on the road or sharing an entrée with a friend in a restaurant. If you do have a setback, don't give up. Setbacks happen to everyone. Regroup and focus on meeting your goals again as soon as you can. Challenge yourself! Revisit your goals and think of ways to expand them. For example, if you are comfortable walking 5 days a week, consider adding strength training twice a week. If you have limited your saturated fat intake by eating less fried foods, try cutting back on added sugars, too. Small changes can lead to healthy habits worth keeping. Carlos Diclemente's Stages of Change model, also known as the Transtheoretical Model, is a widely recognized framework for understanding and facilitating behavior change. Developed in collaboration with James O. Prochaska, this model has had a profound impact on fields such as psychology, counseling, and healthcare. The Stages of Change model outlines a series of psychological stages that individuals typically progress through as they modify or alter a behavioral pattern. These stages offer valuable insights for individuals and professionals seeking to understand and facilitate personal transformation. The stages of change, also known as the transtheoretical model, describe a series of stages that individuals may go through when making a significant behavior change. These stages include:Precontemplation: At this stage, individuals may not yet acknowledge the need for change.Contemplation: Individuals at this stage are considering the possibility of change but have not yet committed to it.Preparation: This stage involves specific intentions to take action within the near future.Action: During this stage, individuals modify their behavior, experiences, or their environment in order to achieve the desired change.Maintenance: Once the desired change has been achieved, this stage involves maintaining the new behavior and avoiding relapse.Termination: In this stage, the individual has complete confidence in their ability to maintain the behavior change despite any challenges or temptations.These stages provide a framework for understanding the process of behavioral change and can be applied to various areas such as health, addiction, and personal development.Carlos Diclemente wrote "the road that leads individuals to change an established behavior pattern begins in the Precontemplation stage, where they have no current interest in change. A person moves through the Contemplation, Preparation, and Action stages before arriving at the Maintenance stage. Maintenance becomes the final stage in the transition to the new pattern of behavior and ultimately can lead to the termination of the change process." (DiClemente, 2005).While the stages of change appears linear, in practice an individual may bounce back and forth between the different phases during their difficult path to lasting change. The stages of change is "a transtheoretical model of motivation, incorporating five stages of readiness to change: precontemplation, contemplation, preparation, action, and maintenance. Each stage represents a different level of motivational readiness, with precontemplation representing the lowest level of readiness" (Donovan & Marlatt, 2005).The underlying concept is that therapists use match techniques to encourage and support change that matches the client's current stage of readiness and motivation. James Prochaska and John Norcross explain "at each stage, different processes of change optimize the production of progress. Matching change processes to their respective stage of change" (Prochaska & Norcross, 2001).Basically, the stages of change is a theoretical model to assist practitioners assist individuals achieve desired changes. However, the individual outside of therapy may also find helpful information within the model to assist them in their personal endeavors for self-improvement.At this initial phase, individuals are not seriously considering change and may be unaware of the necessity for it. They may exhibit resistance or denial when confronted with the need to change. Interventions at this stage often focus on increasing awareness and understanding of the potential benefits of change. Basically, during the precontemplation stage a person is not motivated to change. Precontemplation is actually a position of stability, holding onto sameness of behavior.DiClemente wrote, "precontemplation represents a status quo. An individual in the Precontemplation stage is satisfied with, or at least unwilling to disrupt, a current behavior pattern. Precontemplators are not considering change in the foreseeable future." He continues "change is seen as irrelevant, unwanted, not needed, or impossible to achieve" (DiClemente, 2005).Precontemplators may wish to change. However, wishing to change is not synonymous with seriously contemplating change (Prochaska & Norcross, 2001).It is crucial to approach individuals in this stage with empathy and understanding, acknowledging their current perspectives while gently introducing the possibility of an alternative course. By providing relevant information and fostering a supportive environment, it becomes more feasible to guide these individuals towards recognizing the positive outcomes that could arise from embracing change. This stage can lay the groundwork for the subsequent steps in the change process, ultimately leading to sustainable growth and development.Individuals in this stage may benefit most from the internal enhancement they seek. The individuals in this stage of the process are in a critical phase where they are more receptive to the concept of change and are carefully evaluating the advantages and disadvantages. Contemplation is moving from the stability of the norm to a state of discomfort. DiClemente explains that the contemplation stage entails the consideration of the value and need for change. He continues, "with this, the individual enters into a period of instability" (DiClemente, 2005). Consideration of change by nature suggests an internal struggle, facing the possibility of leaving one behavior pattern in exchange for a different pattern of behavior.Prochaska and Norcross describe it this way, "contemplation is the stage in which people are aware that a problem exists and are seriously thinking about overcoming it but have not yet made a commitment to take action" (Prochaska & Norcross, 2001). During contemplation, an individual may experience overwhelm contemplating the change. The necessary steps toward the final goal may appear as impassable mountains.These contemplation stir fear and uncertainty. Because of the cognitive dissonance between thoughts that life is not right now and thoughts that change is unobtainable, this stage can be emotionally draining. The strain of contemplation is a breeding ground for defense mechanisms (denial, projection, etc.)...Contemplating change creates discomfort, but reality may continuously remind that change is necessary. A person may leap back and forth between precontemplation and contemplation many times before proceeding to an actual planning stage of change. Once a person acknowledges the dramatic reality of their situation, denying it requires more cognitive juggling than before reality of deprivation was noticed. It's common for them to feel ambivalent about moving forward and taking action. This phase presents an opportunity for individuals to delve into the potential obstacles to change and to gain a more profound understanding of their motivations. By doing so, they can clarify their internal drives and gain insights that are essential for making informed decisions and initiating meaningful changes in their lives. Understanding the factors that may be holding them back and becoming more attuned to their own needs and desires can be pivotal in guiding them toward a path of positive transformation and growth.See Contemplating Change for more on this topicDuring this phase, individuals actively prepare for change and may take overt initial steps or set a clear intention to modify their behavior. During the phase, individuals should establish strategies and align support to help facilitate the change process. This preparatory phase is crucial as it sets the foundation for the journey towards meaningful transformation. It's a time of reflection, self-evaluation, and decision-making.DiClemente states that the preparation stage "entails developing a plan of action and creating the commitment needed to implement that plan" (DiClemente, 2005). During the preparation stage, an individual must identify some of the probable setbacks and dangers that they may encounter during the initial efforts for change, strategizing responses for when these critical moments occur.During the change process motivation will wane, impulses to quit trying will get stronger, and the likelihood of relapse swirls in tighter and tighter circles around the person engaged in the change process. Coping with these impulsive desires without quitting one's final objective is a key skill.Dennis M. Donovan and Alan G. Marlatt wrote "based on the cognitive-behavioral model of relapse, the most critical predictor of relapse is the individual's ability to utilize effective coping strategies in dealing with high-risk situations. Coping includes both cognitive and behavioral strategies designed to reduce danger or achieve gratification in a given situation" (Donovan & Marlatt, 2005). Preparation stage establishes a few notable coping strategies for the intense moments when temptations to give in are strongest.Seeking support from professionals, mentors, or peers can significantly enhance the chances of successful implementation and maintenance of new behaviors. This proactive approach demonstrates a strong commitment to personal growth and development. The preparation stage creates a solid framework for the all upcoming stages in the process.See Planning Stage of Recovery for more on this topicAt this point, individuals have already taken proactive measures to make substantial adjustments to their behavior and have wholeheartedly committed to the process of change. They are currently in the phase of executing various strategies that effectively deal with the inevitable challenges of change. Prochaska and Norcross wrote "action is the stage in which individuals modify behavior, experiences, and environment in order to overcome their problems. Action involves the most overt behavioral changes and requires considerable commitment of time and energy" (Prochaska & Norcross, 2001).Real change begins here. T. Franklin Murphy wrote, "thinking entertains, distracting burdensome thoughts away from our wretched life, but thoughts alone do not create the escape from poverty, unless, of course, we act on the thoughts" (Murphy, 2018). The first few steps of action are difficult. Habits of change are not yet formed.DiClemente explains, "action is the initial behavioral step on the path to creating a new pattern of behavior." He continues, "however, the new behavior must be sustained over time in order to create the new habit. A behavior cannot simply be done several times and automatically become established." He then pointedly warns, "the old pattern retains its attraction and returning to it is often easier than sustaining a new pattern. It takes a long time to establish a new pattern of behavior" (DiClemente, 2005).This particular stage typically demands persistent dedication and ongoing support. Essential to the stage of action is maintaining the momentum by employing the prepared coping mechanisms as necessary, and drawing upon prepared resources as needed.See Staying Motivated for more on this topicMaintenance:After successfully making changes and implementing new behaviors, individuals enter the maintenance stage. It is a crucial phase characterized by a focus on consolidating progress, preventing relapse, and integrating the new behavior into daily lives. During this phase, support and reinforcement play a vital role in sustaining the positive changes. This phase is about turning the newly adopted behavior into a lasting habit. During this phase of change, stability begins to return.Marlatt and Norcross define "maintenance is the stage in which people work to prevent relapse and consolidate the gains attained during action" (Prochaska & Norcross, 2001). DiClemente adds that "to become habitual the new behavior must become integrated into the lifestyle of the individual. This is the task of the Maintenance stage of change. During this stage the new behavior pattern becomes automatic, requiring little thought or effort to sustain it. It truly becomes an established habitus pattern. DiClemente continues by reminding that "during maintenance there is still an ever-present danger of reverting to the old pattern." He concludes by saying that "the new behavior becomes fully maintained only when there is little or no energy or effort needed to continue it and the individual can terminate the cycle of change" (DiClemente, 2005).Because new patterns of behavior have been established, individuals often feel empowered to let their guard down. They feel they can return to old environments without falling prey to old habits. This is a fools game. Behavior reactions are often still strongly in place, tied to old stimuli. Reinroduce the previous environments and the old habits will likely follow.During this phase, the individual puts effort into establishing habits that yield long-term benefits. It's a time for individuals to cultivate self-awareness. The heightened awareness of self provides protections, flagging potential triggers, and developing effective strategies to overcome such challenges. The commitment to maintaining change during this phase can lead to a sense of accomplishment and empowerment, further solidifying the newly acquired behaviors.In some formulations, the model also include a final stage known as "termination." At this stage, individuals have full confidence in their ability to maintain the change. Consequently, the old behavior is no longer appealing. Not all individuals reach this stage, and it's more common in certain types of behavior change, such as addiction recovery.During this termination stage, individuals exhibit a remarkable level of self-assurance in their capacity to uphold the positive changes they have made. They deeply internalize the transformation and no longer find their previous behavior enticing or compelling. It's truly a remarkable phase, one that signifies the profound shift. In this stage, change is expressed in the individual's mindset and habits. In many cases, this stage is particularly noticeable in the context of addiction recovery, where individuals undergo a comprehensive process of self-reflection and development. They reach the pinnacle of confidence and resolve. This stage is not only a testament to their dedication to their transformation but also a symbol of the tremendous personal growth.Courage to Change: This refers to being willing to confront and overcome fears, uncertainties, and doubts in order to make a transformation in one's life. It involves embracing the discomfort of the unknown, letting go of familiar but limiting patterns, and taking proactive steps towards growth and improvement.Commitment to Change: This refers to the unwavering dedication to continuously better oneself in various aspects of life. This concept encompasses a proactive and persistent approach to growth, where an individual actively seeks opportunities to enhance their skills, knowledge, and behaviors.Precautio Adoption Process Model (PAPM): This is a theoretical framework used in health psychology and related fields to understand how individuals perceive and respond to potential hazards or risks. It describes a series of stages that individuals go through as they consider and ultimately adopt precautionary behaviors.Persistence: This refers to the ability to continue working towards a goal despite encountering obstacles, setbacks, or difficulties. It involves maintaining effort and focusing on the task at hand, even when faced with challenges.Self-Esteem: While self-efficacy is about belief in one's ability to succeed in specific tasks, self-esteem refers to one's overall sense of self-worth. Both are interrelated, as high self-efficacy can boost self-esteem.Self-Regulation: This involves controlling one's behavior, emotions, and thoughts in pursuit of long-term goals. Self-efficacy influences self-regulation by affecting how individuals set goals, monitor progress, and persist in the face of challenges.Locus of Control: This concept refers to the degree to which people believe they have control over the outcomes of events in their lives. Individuals with a high internal locus of control often have higher self-efficacy because they believe their actions directly impact their success.Empowerment Theory: Empowerment theory examines the interrelated internal and external determinants influencing behaviors.The Stages of Change model acknowledges that behavioral change is not a linear process, and individuals may move back and forth between stages. It emphasizes the importance of tailoring interventions to an individual's specific phase of change. The likelihood of successful change. This move has been applied to a wide range of behaviors, including smoking cessation, weight loss, exercise adoption, and more.Understanding this model can equip individuals and professionals with valuable insight into the process of change, enabling them to provide more effective support and interventions. By acknowledging the nuanced nature of behavior change and the different stages individuals may experience, the Stages of Change model offers a comprehensive and empathetic approach to personal transformation.Last edited: November 8, 2024Weekly updates of newly published articles DiClemente, Carlos C. (2005) Addiction and Change, Second Edition: How Addictions Develop and Addicted People Recover. The Guilford Press; Second edition.Donovan, Dennis M.; Marlatt, G. Alan (2005) Relapse Prevention: Maintenance Strategies in the Treatment of Addictive Behaviors. The Guilford Press.Murphy, T. Franklin (2018). Change Through Action. Psychology Fanatic. Published 11-1-2018. Accessed 1-30-2024Prochaska, James O., Norcross, John C. (2001). Stages of Change. Psychotherapy, 38(4), 443-448. DOI: 10.1037/0033-3204.38.4.443Many of the quotes from books come books I have read cover to cover. I created an extensive library of notes from these books. I make reference to these books when using them to support or add to an article topic. Most of these books I read on a kindle reader. The Kindle location references seen through Psychology Fanatic is how kindle notes saves my highlights.Please note that some of the links in this article are affiliate links. If you purchase a product through one of these links, I may receive a small commission at no additional cost to you. This helps support the creation of high-quality content and allows me to continue providing valuable information. The peer reviewed article references mostly come from Deepdyve. This is the periodical database that I have subscribe to for nearly a decade. Over the last couple of years, I have added a DOI reference to cited articles for the reader's convenience and reference. The stages of change are: Precontemplation (Not yet acknowledging that there is a problem behavior that needs to be changed) Contemplation (Acknowledging that there is a problem but not yet ready, sure of wanting, or lacks confidence to make a change) Preparation/Determination (Getting ready to change) Action/Willpower (Changing behavior) Maintenance (Sustaining behavior change) Termination (Achieving long-term success and no longer being tempted to go back to the old behavior) People in the precontemplation stage are not thinking about changing and are not involved in the change process. People in the contemplation stage are thinking about changing and are involved in the change process. People in the preparation stage are preparing to change and are involved in the change process. People in the action stage are actively changing and are involved in the change process. People in the maintenance stage are maintaining the change and are involved in the change process. People in the termination stage are no longer involved in the change process. People in the precontemplation stage are not thinking about changing and are not involved in the change process. People in the contemplation stage are thinking about changing and are involved in the change process. People in the preparation stage are preparing to change and are involved in the change process. People in the action stage are actively changing and are involved in the change process. People in the maintenance stage are maintaining the change and are involved in the change process. People in the termination stage are no longer involved in the change process. People in the precontemplation stage are not thinking about changing and are not involved in the change process. 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