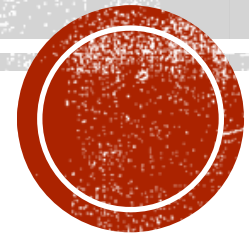# HOW TO INTEGRATE COACHING IN YOUR PRACTICE

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My Background

- CEO / CFO Healthy Adventures Foundation
- Education
  - Ph.D. Organizational Psychology
  - MPH Public Health
  - MSW Social Work
  - MS Organizational Psychology
  - BS Physical Education, Athletic Training
  - AS Intelligence Collections
- Part-time professor at Southwestern college and USC

Healthy Adventures Foundation's Background and Mission

- Non-profit, specializing in health and wellness programming and development for communities, organizations, groups, and individuals for seniors, adults, employees, and children

- We seek to improve quality of life, while seeking balance in healthy behaviors.

INTRODUCTION

- Coaching defined

- Therapy vs. coaching

- Discuss effective health coaching strategies

- Tools for your toolbox: Learn new techniques and/or reinforce techniques you have learned but may not be using

WHAT IS COACHING

- The practice of coaching is a partnership between a qualified coach and an individual or team that supports the achievement of results based on goals set by the individual or team.

International Coach Federation. Retrieved on August 31, 2006, from
http://www.coachfederation.org/ICF/ForCoachingClients/WhatisaCoach/FAQs/

CHANGE AND HOW TO GET THERE

"Clients come to therapy or coaching wanting change, and both professions assume that significant change will occur over time" (Hayden & Whitworth, 1995, p. 1).

WHEN TO USE COACHING

- Coaching models seem best suited to goal-oriented therapists who prefer to enable clients to take responsibility for their own process and outcomes, rather than to "fix" the problem (Steele, 2000).

- Coaching fits well with more strength-based and positive psychology perspectives (Kauffman & Scoular, 2004).

- Therapy resistance

MEN AS A VULNERABLE GROUP

- Men make fewer contacts with physicians across the life span and seek help less often than women for an array of problems including depression, drug and alcohol use, and medical concerns (Mansfield, Addis, & Mahalik, 2003).

- Men's underutilization of mental and physical health services continues to be one of the most consistent findings in the help-seeking literature (Addis & Mahalik, 2003; Blazina &Watkins, 1996; Good, Dell, & Mintz, 1989; Kim & Omizo, 2003; Mahalik, Good, & Englar-Carlson, 2003).

COACHING AND MEN

- Coaching may address possible conflicts and paradoxes between men's gender role socialization and help-seeking attitudes and behaviors.

- Given that coaching is often success-oriented and competitive in nature, it may be a better approach for men with high needs of success, power, and competition where the culture of therapy may be in opposition to the culture associated with traditional masculine roles and values.

McKelley, R.A., & Rochlen, A.B. (2007). The Practice of Coaching: Exploring Alternatives to Therapy for Counseling-Resistant Men. Psychology of Men & Masculinity, Vol. 8, No. 1, 53–65. DOI: 10.1037/1524-9220.8.1.53

COACHING AND SKILL BUILDING

- Central goals of coaching engagements often focus on building skills (e.g., listening, communication, interpersonal skills) and sustained behavior change (Frisch, 2001).

- Individuals in a coaching relationship are expected to learn new perspectives on personal challenges and opportunities, enhanced thinking and decision-making skills, improved interpersonal effectiveness, and increased confidence in work and life roles (ICF, 2006).

THOSE RESISTANT TO THERAPY

- Grodzki (2002) suggests that coaches can attract a segment of the population that some economists call the "worried well—higher functioning adults who would rate themselves as 'content,' but want more or feel blocked in some areas of their lives."

- 85% of the "worried well" do not seek counseling or psychotherapy when they have personal problems because they do not see themselves as psychologically "ill."

- Coaching results in decreased stigma and resistance (Kiselica et al., 2004).

COACHING AND EXPECTED OUTCOMES

- In a meta-analysis, coaching was positively and significantly related to five critical outcomes—

  - Performance
  - Coping
  - Work attitudes
  - Goal-directed self-regulation
  - Well-being

(Theeboom, Beersma, & van Vianen, 2014)

COACHING TARGETS

- Intrapersonal goals

- Interpersonal goals

- Performance goals

WHAT IS NEEDED FOR COACHING TO WORK

- Clients
  - Stewart and colleagues (2008) offered some preliminary evidence that individual factors, including conscientiousness, openness, emotional stability, and general self-efficacy, contribute to the attainment of desired coaching outcomes.

- Coach
  - Challenging, listening, reflecting, and checking back on understanding have been identified as integral to overall effectiveness (Hall, Otazo, & Hollenbeck, 1999).
  - Gessnitzer and Kauffeld (2015) found that coachee-initiated agreement on goals and tasks fostered more positive coaching outcomes.
  - Another recent study indicated that when coaches exhibited overt friendly behavior toward their coachees, goal attainment was enhanced (Ianiro, Lehmann-Willenbrock, & Kauffeld, 2014).
  - Similarly, Ianiro and Kauffeld (2014) also found that the coach's overt friendliness was associated with the coachee's positive perception of the working alliance.

COACHING INPUTS NEEDED

Coach inputs

Personality (e.g. conscientiousness, openness, emotional stability)	Individuals' dispositional psychological attributes.	Stewart, Palmer, Wilkin, & Kerrin (2008)
Age/Background/Expertise	The culmination of the executive coach's professional and personal experience (e.g. psychology vs. non psychology). A particular knowledge domain in which the executive coach has extensive experience.	Feldman & Lankau (2005); Bozer, Sarros, & Santora (2013)
Tenure	The length of time an executive coach has been in his or her current position.	McGovern et al. (2001)
Provision of feedback	Information provided to the coachee from the coach on progress; core tactics include rational persuasion, inspirational appeals, consultation, and collaboration.	Kochanowski, Seifert, & Yukl (2010)
Coach's transformational leadership	Coach explores the values and life vision of the client and helps the coachee experience a "felt-shift" where he or she begins to think, feel, and act differently; involves exploration of beliefs, attitudes, and emotional reactions underlying the coach's habitual way of responding to situations.	Sun et al. (2013)
Relational skills	Coach's capacity for empathy, respect, trust, presence, and availability.	Baron & Morin, 2009
Communication skills	Coach's tendency to engage in questioning, reformulating, reinforcing, and confronting.	Baron & Morin, 2009
Ability to facilitate learning and results	Establishing a development plan, assessing learning, and identifying obstacles.	Baron & Morin, 2009
Coach's regulatory focus and implicit person theory	Individuals dispositional subjective past success with using promotion-related eagerness or prevention-related vigilance.	Sue-Chan, Wood, & Latham (2012); Jarzebowski, Palermo, & Berg (2012)
Psychological Mindedness	Coach's ability to self-regulate and sustain attention throughout the coaching process and to reflect on his or her psychological state.	Nyklícek, & Denollet, 2009; Castonguay, Constantino, & Holtforth, 2006
Mood	Degree to which the coach expresses a pleasant affective state.	Ianiro & Kauffeld (2014)

COACHEE INPUTS NEEDED

Coachee inputs		
Self-efficacy	The coachee's perception of his or her ability to obtain a goal or produce outcomes.	Baron & Morin (2009); de Haan, Duckworth, Birch, & Jones (2013)
Goal orientation	Coachee's/Protégé's disposition toward achievement.	Godshalk & Sosik (2003)
Personality (e.g. conscientiousness, openness, emotional stability)	Individual's dispositional psychological attributes.	Stewart, Palmer, Wilkin, & Kerrin (2008)
Motivation to transfer	Coachee's desire to utilize the knowledge, skills, and abilities learned throughout the coaching process.	Baron & Morin (2009)
Learning agility	Coachee's speed to learn accurately.	Trathen (2008)
Planning skills	Coachee's ability to self-regulate by planning his or her workdays, creating new ways of organizing and planning, and to having control over his or her life.	Ladegard (2011)
Job demand/Job control and social support	Captures aspects of quantitative workload, decision latitude, and support from supervisors and colleagues.	Ladegard (2011)

RELATIONSHIP VARIABLES

Coach–coachee relationship variables

Working alliance	The relative strength of the partnership between a coach and coachee.	Baron & Morin (2009); Baron & Morin (2009); de Haan, Duckworth, Birch, & Jones (2013); Sun et al. (2013)
Relationship strength	The potency of the tie between a coach and coachee.	de Haan, Duckworth, Birch, & Jones (2013); Baron & Morin (2009); Passmore & Rehman (2012).
Trust	Chemistry and characteristics that exist between an executive and the external professional coach.	Alvey & Barclay (2007)

OUTCOMES

Outcomes		
Resilience	Coachee's ability to positively adjust and continue functioning after issues arise.	Grant, Curtayne, & Burton (2009)
Workplace well-being	Coachee's degree of satisfaction and fulfillment as it relates to the workplace.	Grant, Curtayne, & Burton (2009)
Goal attainment	The extent to which the coachee has reached the goal identified during the initial phase of the coaching relationship.	Grant (2008); Yu, Collins, Cavanagh, White, & Fairbrother (2008)
Leadership behaviors	Coachee's possession of behaviors associated with successful leadership (e.g., transformational leadership, providing feedback, decision-making).	Kochanowski, Seifert, & Yukl (2010); Cerni, Curtis, & Colmar (2010); MacPhee et al. (2014); MacKie (2014)
Job satisfaction	The coachee's level of positive affect towards his or her current position.	Wexley & Nemeroff (1975)
Health outcomes	Physical outcomes of the coaching relationship (e.g., burnout, psychological strain reduction).	Barrett (2007); Biggs, Brough, & Barbour (2014); Ladegard (2011)
Problem-solving skills	Coachee's ability to think critically and solve issues.	Sue-Chan, Wood, & Latham (2012)
Satisfaction with coaching	The degree to which the coaching relationship fulfills the coach and coachee's needs and expectations.	Yu et al. (2008)

OUTCOMES

Self-efficacy	The coach or coachee's perception of his or her ability to obtain a goal or produce outcomes.	de Haan, Duckworth, Birch, & Jones (2013); Baron, Morin, & Morin (2011); Moen & Allgood (2009)
Insight	Coachee's achievement of clarity in regards to his or her behavior and thoughts.	Trathen (2008); Ladegard (2011)
Job performance	Task-related activities expected of the coachee, how well the coachee executes these activities, and their value to the organization.	Bozer, Sarros, & Santora (2013); Cortvriend, Harris, & Alexander (2008); Huang & Hsieh (2015)
Motivation/Levels of engagement and hope	Effort exerted by coachee towards coaching goals and desire to continue coaching program.	Jarzebowski, Palermo, & van de Berg (2012); Madden, Green, & Grant (2011)
Mood	Degree to which coachee experiences positive or negative feelings.	Jarzebowski, Palermo, & van de Berg (2012)
Self-awareness	Coachee's degree of consciousness as it pertains to his or her identity and self-perceptions.	Bozer, Sarros, & Santora (2013); Leonard-Cross (2010)
Anxiety/Stress	Reduction of coachee's psychological and physiological feelings of unease.	Leonard-Cross (2010); Ladegard (2011); Cortvriend, Harris, & Alexander (2008)
Work–life balance	Coachee's ability to manage and prioritize work and lifestyle activities.	Cortvriend, Harris, & Alexander (2008)
Openness to new behaviors/Adaptability	Coachee's openness to experience and ability to alter one's behavior in response to unpredictable, changing circumstances.	Finn (2007)
Coaching transfer	Improved individual and organizational distal outcomes resulting from enhanced individual-performance behaviors associated with positive transfer of coaching.	Stewart, Palmer, Wilkin, & Kerrin (2008)

COACHING RELATIONSHIP

- Several behaviors that are especially salient to the coaching relationship:

  - *Rapport building* refers to "mutual understanding, agreement, and liking between the client and coach" (Boyce, Jackson, & Neal, 2010, p. 917).
  - We defined *providing content* as a coach behavior aimed at structuring the coaching relationship around goal achievement, encompassing several relevant constructs such as assessment (Gettman, 2008) to yield a more parsimonious behavior.
  - *Coaching authentically* refers to the coach promoting an authentic sense of mutual respect and commitment between the coach and coachee (e.g., Noer, 2005).
  - *Regulating motivation* refers to engaging in various strategies to enhance motivation to further the attainment of relevant outcomes (Wolters, 1999, 2003).
  - *Boundary setting* can be defined as the coach providing clear guidelines for goal achievement (e.g., Hall et al., 1999; Kombarakaran, Yang, Baker, & Fernandes, 2008).

COACHING SIMILARITIES TO THERAPY

- Similar theoretical construct

- Similar practitioner/client issues

- Based on an ongoing, confidential, one-to-one relationship

- Similar methods of inquiry, propensity for advice giving, boundary issues, and potential power differentials

Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy: *A Perspective.* Consulting Psychology Journal: Practice and Research, Vol. 53, No. 4, 229-237. DOI 10.1037//1061-4087.53.4.229

COACHING VS THERAPY

	Therapy	Coaching
Focus	Retrospective	Prospective
Conversation	Undefined discovery, therapist talks less	Structured and task focused, coach talks more
Perspective	Client is more likely to be reticent, not "seeing the door" or feeling afraid to find out what is on the other side.	The coach opens the door, the client walks through with little, if any, difficulty.
Boundaries	Rigid, concerned about transference issues	Looser and flexible, transference issues are ignored

COACHING VS THERAPY

	Therapy	Coaching
Relationship	Therapist is the "healer", expert	Collaborative, client is the expert on self
Stigma	Major issue	Non-issue
Delivery	Face-to-face, limited tele-sessions	Phone, email, tele-sessions, face-to-face
Therapy Coaching Mix	Can integrate coaching	Cannot integrate therapy
Outcomes	"Works to achieve wellness,"	Focuses more on increasing capacity and reaching goals.

COACHING VS THERAPY

	Therapy	Coaching
Sessions	Timing, scheduling, and setting an agenda directed by therapist	Schedule varies dramatically
Control of process	Therapist 80%	Client guides the process and sets agenda; or collaborative
Contracts	Less formal or defined	More formal and defined
Confidentiality	Extremely important	Looser
Privacy	Less – gets billed through insurance	More – tends to be private pay

FOCUS: THERAPY VS. COACHING

- Therapy
  - Retrospective, dealing with unconscious issues and repair of damage from earlier experiences. Encourages awareness of past injuries in order to promote insight and healing
  - Interpersonal health and an identifiable issue that interferes with the client's level of functioning and current psychodynamic or psychosocial adjustment.
  - May involve medication, adjunct therapies, and coordination of services.

- Coaching
  - Prospective, focusing on goals, untapped potential, and critical success factors in a whole person who seeks to maximize his or her fulfillment in life and work.
  - Focuses on untapped present possibilities in order to link awareness to action.

Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy: *A Perspective.* Consulting Psychology Journal: Practice and Research, Vol. 53, No. 4, 229-237. DOI 10.1037//1061-4087.53.4.229

CONVERSATION: THERAPY VS. COACHING

- Therapy
  - Undefined, wandering process of uncovering and discovery
  - Therapeutic dialogue more often involves expressing feelings and emotional processing.
  - Therapist talks less

- Coaching
  - More structured and task focused; concrete action plans designed toward defined goals.
  - Coaches likely to initiate topics for discussion and to provide ideas and suggestions.
  - Interactions as more active, informal, and self-disclosing
  - Clients are the experts on themselves

Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy: *A Perspective.* Consulting Psychology Journal: Practice and Research, Vol. 53, No. 4, 229-237. DOI 10.1037//1061-4087.53.4.229

COACHING

- Goal directed

- Action based

- Outwardly defined

- Looser boundaries, being more relaxed, using the self as a vehicle for change, and not addressing transference issues.

- Coaches expect more from their coaching clients.

- Less of a caretaking role

Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy: *A Perspective.* Consulting Psychology Journal: Practice and Research, Vol. 53, No. 4, 229-237. DOI 10.1037//1061-4087.53.4.229

COACHING DEFINED BY CLIENTS

- Coaching clients define the agreement as "self-revelatory," "having a skilled friendship," and "in partnership."

- Participants reported using more humor, being more actively engaged, and having greater flexibility within the coaching relationship.

Hart, V., Blattner, J., & Leipsic, S. (2001). Coaching Versus Therapy: *A Perspective.* Consulting Psychology Journal: Practice and Research, Vol. 53, No. 4, 229-237. DOI 10.1037//1061-4087.53.4.229

WHEN NOT TO USE COACHING

- Client is stuck in a victim role or emotional drama
- Not showing up, not following through
- Has serious emotions in more than one session
- Expressing that they cannot go on
- Low affect, high degrees of chaos
- Inability to take action and move forward on a path

- Coach is feeling overly responsible
- When a client states, "You are the only one who cares about me."
- Persistent anger or aggression
- Suicidal ideation
- Self-destructive impulses or behaviors
- Extreme dependency

COACHING SKILL SETS

- Accountability

- Acknowledge client is expert on self

- Active listening and communication skills

- Challenge the status quo

- Champion / provide support

- Mindfulness; being present

- Follow client agenda

- Redirect

- Question / inquiry

- Reframing

- Look at the big picture – outcome based

- Goal setting and objectives

- Provide resources, tools and homework

SELF MANAGEMENT

- Kanfer (1975) – you must believe that you have control over the situation in order to reinforce changes.
  - How are your skills in self-management?
  - Goal setting?
  - Self-monitoring?
  - Self-evaluation?
  - Self-reinforcement?

LOCUS OF CONTROL

- External
  - The person believes that their decisions and life are controlled by environmental factors that they cannot influence.
    - "My mom has diabetes, my brother has diabetes, my grandmother has it, too. There's no way I'm going to avoid it."
    - "It doesn't matter how much I exercise, I will never lose the weight. So why even try?"

- Internal (may benefit from coaching)
  - The person believes they can control their own life.
  - People with high internal locus of control are **more motivated** and are less likely to relapse.

SELF MANAGEMENT STRATEGIES

- Self-monitoring
  - Diaries / Journaling (Belar & Deardorff, 1995; Bennett, 1994)

- Goal setting/contracting

- Modifying the environment

- Changing the consequences of behavior

- Use of internal and external cues
  - Friend who follows up with you or notes to yourself on a calendar (Bennett, 1994)

GOAL SETTING

- Goal setting affects performance in at least three ways:
  - Focuses behavior in the direction of the goals rather than elsewhere.
  - Energize behavior, motivating people to put forth effort to reach difficult goals that are accepted.
  - Leads to persistence in effort over time when goals are difficult yet achievable.

- Coach your clients through their own goal setting process

- Have them put it down in writing, as this creates a commitment to the process and the goal. It also makes it more likely to be remembered. Think it, write it, say it, share it, monitor it, evaluate it, and revisit it!

USE SMART GOALS

- SMART goals
  - S **specific:** Who, What, Where, When, Which and Why
  - M **measurable:** *How will you know if the goal has been reached?*
  - A **attainable:** *Which actions will you take to achieve the goals?*
  - R **realistic:** *Are they achievable?*
  - T **timely:** *By when?*

Suggested Words to Use When Writing Smart Goals

- **Choose a verb**
  - increase, decrease, reduce, improve, deliver, grow

- **Define the object**
  - what you wish or will work toward to get better at and for whom

- **Identify how much**
  - target goals and a reference to the meeting of success

- **Identify by when**
  - time frame for completion of goal

LONG TERM VS. SHORT TERM

- Long Term Goals - simply a description of future self -- about 2 to 3 years out
  - A wish list with (hopefully) a basis in reality.

- Then set short term goals to reach that plan.
  - What can I do today?
  - What can I do in the next week?
  - What can I do in the next 30 days?
  - What can I do in the next 3 months?
  - What can I do 6 months from now?

OBSTACLES, SETBACKS, AND RELAPSE PLANS

- What might some of the obstacles be in accomplishing these goals?

- What strategies could be implemented beforehand to overcome some of these obstacles?

- Relapse – Forgive and move on
  - Falling off the wagon is normal
  - Discuss that before hand to mentally prepare for it
  - Leave the all or nothing mentally behind
  - Be self-forgiving
  - Start fresh each day

REFERENCES

- SMART Goal template and instructions
  - http://capsnet.usc.edu/ProfessionalDevelopment/SupportTools/documents/GoalSettingwithSMARTGoals.pdf

- SMART Goal instructions
  - http://www.oma.ku.edu/soar/smartgoals.pdf

- Questions to ask
  - http://www.unh.edu/hr/performance-management/SMART-Goals.pdf

MOTIVATIONAL INTERVIEWING

- Techniques are empathy, open-ended questions, and reflective listening

- Explore client ambivalence and to decrease

- resistance to behavior change

- Client-centered, directive and provide information in a nonjudgmental manner

- Affirmation, summarization and elicit self-motivational statements

Reference: Miller WR. Motivational interviewing with problem drinkers. *Behav Psychother.* 1983;11:147-172.

MOTIVATIONAL INTERVIEWING

- The mnemonics:
  - FRAMES - feedback, responsibility, advice, menu, empathy, and self-efficacy
  - OARES - open-ended questions, affirm, reflective listening, elicit self-motivational statements, and summarize

  - Reference: Miller WR, Rollnick S. Teaching motivational interviewing. In: Miller WR, Rollnick S, eds. *Motivational Interviewing: Preparing People to Change Addictive Behavior*. New York, NY: The Guilford Press; 1991:158-184.

PRINCIPLES OF MI

1. Advice

- **Give advice only when individuals will be receptive**

- **Target advice to stage of change**

2. Reduce Barriers
- Bolster self-efficacy
- Address logistical barriers

3. Provide Choices
- It's the individual's choice:
- *Whether* to change
- *How* to change

4. Decrease Desirability
- Help individuals:
- Decrease their perceptions of the desirability of the behavior
- Identify other behaviors to replace the positive aspects of alcohol use

5. Empathy
- Develop and communicate an understanding of the individual's situation and feelings around the behavior
- Explore pain around the behavior

6. Feedback
- Help the individual identify and understand relevant:
- Risks of the behavior
- Negative consequences of the behavior

EMPATHY

- To be able to put yourself in their shoes

- Recognize and share what they are feeling

- Be able to identify what they may be feeling

CLOSED-ENDED VS. OPEN-ENDED QUESTIONS

- Open provides richer information

- Engages the participant in the process

- Examples
  - Closed
    - Are you enjoying the class?
  - Open
    - Can you tell me about what you enjoyed most about the class?

REFLECTIVE LISTENING

- Listen for the feeling behind the problem
- Listen for the situation that creates the feeling
- Reflect back to the speaker about what you heard them say, mirror language
- Acknowledge that the reflection is a perception that should be left open for correction

- Creates a sense of safety for the patient
- Deepens the conversation
- Helps clients understand themselves
- Says:
  - "I hear you"
  - "This is important"
  - "Please tell me more"
  - "I'm not judging you"

AFFIRMATION

- Conveys support, respect, and encouragement
- Helps clients reveal less positive aspects about themselves
- "You've tried very hard in this process."
- "You are very courageous to be so revealing about this."
- "You've accomplished a lot in a short time."
- "I can understand why stress eating makes you feel as though you are in control."

SUMMARIZATION

- "What you've said is important."

- "I value what you say."

- "Here are the salient points."

- "Did I hear you correctly?"

- "We covered that well. Now let's talk about …"

ELICIT SELF-MOTIVATIONAL STATEMENTS

Problem recognition

- Why did you want to start coaching?

Concern

- "Do you ever worry about you're your health?"

Intention to change

- "What might be some advantages of losing the weight?"

- "On a scale of 0 to 10, how important do you think it is for you to lose the weight?

- Why didn't you say (1 or 2 points lower)?"

Optimism

- "What difficult goals have you achieved in the past?"

- "What might work for you if you did decide to change?"

FOR AMBIVALENCE – DEARS

Develop discrepancy
- Compare positives and negatives of behavior
- Positives and negatives of changing in light of goals
- Elicit self-motivational statements

Empathize
- Ambivalence and pain of engaging in behavior that hinders goals

Avoid Arguments
- Don't push for change, avoid labeling

Roll with resistance
- Change strategies in response to resistance
- Acknowledge reluctance and ambivalence as understandable
- Reframe statements to create new momentum
- Engage client in problem-solving

Support self-efficacy
- Bolster responsibility and ability to succeed
- Foster hope with menus of options

BEHAVIOR MODIFICATION

- Readiness for Change

- Resistance

- Decisional balance sheet

Prochaska & DiClemente: Stages of Readiness to Change (continued)

Stage	Description	Objectives
Pre-contemplation	Not considering change	▪ Identify goals ▪ Gather information ▪ Bolster self-efficacy
Contemplation	Ambivalent about change	▪ Develop discrepancy between goal & behavior ▪ Use self-motivational statements
Determination	Committed to change	▪ Strengthen commitment to change ▪ Plan strategies for change

PROCHASKA & DICLEMENTE: STAGES OF READINESS TO CHANGE (CONTINUED)

Stage	Description	Objectives
Action	Involved in change	▪ Identify and manage new barriers ▪ Recognize relapse or impending relapse
Maintenance	Behavior change (6 mo.)	▪ Assure stability of change ▪ Foster personal development
Relapse	Undesired behaviors	▪ Identify relapse when it occurs ▪ Reestablish self-efficacy and commitment ▪ Behavioral strategies
Termination	Change is very stable (2 years)	▪ Assure stability of change

BEHAVIORAL TECHNIQUES

- Overcoming resistance
  - What "resistive" statements do you use that may indicate that you are not really ready to make change
  - Develop reflective statements that would help diffuse resistance
    - Acknowledge the resistance
    - Identify the obstacles
    - Come up with solution
    - State them out load to reaffirm commitment
    - Reflection side steps the defensiveness and redirects

REWARDS

- Positive language

- Self-affirmations

- Stages of levels of success

- Positive reward systems, that you create and direct

Decisional Balance Sheet

- Gain of making the behavior change

- Losses with making the behavior change

TIME MANAGEMENT

- Prioritizing the important things

- Give yourself enough time to adequately accomplish goals

SUMMARY OF COACHING TECHNIQUES

- Self-Management

- SMART Goals

- Motivational interviewing

- Stages of change

- Behavior modification

- In what ways can you apply this training?

- Any feedback on training session?

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PROVIDER STRATEGIES

- Evaluate when coaching might be more effective for your clients than traditional therapy

- Use a blended approach when working with clients when it seems to be a good fit

- Use coaching with clients who may be more resistant to therapy

- Consider using coaching with men, when stigma seems to be an issue

- Learn new coaching tools

CONTACT INFORMATION

- Any questions?
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