

MATCHING TYPES OF INTERVENTIONS FOR TOBACCO USE STAGES OF CHANGE AND STAGE OF TREATMENT

Person’s Stage of Change	Person’s Stage of Treatment	Provider Goals and Interventions	Tools and Methods	Pitfalls to Avoid
<p><b>Pre-Contemplation</b></p> <ul style="list-style-type: none"> <li>• Doesn’t think their tobacco is a problem</li> <li>• Not interested in reducing or stopping tobacco use</li> <li>• May feel hopeless about quitting</li> <li>• Doesn’t like being told what to do</li> </ul>	<p><b>Engagement</b></p> <ul style="list-style-type: none"> <li>• Not sure treatment would be helpful</li> <li>• Feels hassled about smoking</li> <li>• Has mixed feelings about being involved in treatment</li> <li>• Not sure the provider would be helpful</li> <li>• Doesn’t have a trusting relationship with the provider</li> </ul>	<p><b>Goal</b> Establish a working alliance with the person</p> <p><b>Interventions</b></p> <ul style="list-style-type: none"> <li>• Build the relationship</li> <li>• Communicate in the spirit of Motivational Interviewing</li> <li>• Conduct outreach</li> <li>• Assist with practical needs unrelated to tobacco use (e.g., food, housing, finances)</li> <li>• Apply harm reduction principles</li> </ul>	<ul style="list-style-type: none"> <li>• Communicate warm respect, friendliness, interest, patience, and sincerity</li> <li>• Person receiving services sets the agenda</li> <li>• MI OARS for active listening (empathy)</li> <li>• Show acceptance and support</li> <li>• Peer Support</li> <li>• Offer, with permission, NRT for tobacco-free environments or temporary abstinence</li> <li>• Obtain consent to ask questions about smoking. If yes, complete an assessment like the one in LAHL and give feedback</li> <li>• Raise awareness (with permission) through psychoeducation</li> <li>• Focus on meaningful life goal as identified by the person</li> <li>• Consider Learning About Healthy Living Education group (Track 1, Sessions 1-20)</li> </ul>	<ul style="list-style-type: none"> <li>• Pushing your agenda (e.g., saying they should quit tobacco)</li> <li>• Offering ideas too early on how to stop using tobacco (the “Righting Reflex”)</li> <li>• Giving advice and information without permission</li> <li>• Premature focus: Deciding that smoking is the problem before the person does</li> <li>• Referring to a group that is focused on “quitting smoking”</li> </ul>

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<p><b>Contemplation</b> Thinking about changing tobacco use but still ambivalent: Not sure they want to change, not sure they can change</p> <p><b>Preparation</b> Has decided to change and is in the process of developing a plan</p>	<p><b>Motivation</b> Weighing pros and cons of changing tobacco use</p>	<p><b>Goal</b> Help person decide whether to decrease or stop their tobacco use</p> <p><b>Interventions</b></p> <ul style="list-style-type: none"> <li>• Help person recognize the negative effects of tobacco use</li> <li>• Develop hope that change is possible</li> <li>• Normalize ambivalence</li> <li>• Use MI strategies to elicit their thoughts and commitment to changing tobacco use</li> <li>• Help person identify important goals and values</li> <li>• Develop discrepancy between current tobacco use and their goals and values</li> </ul>	<ul style="list-style-type: none"> <li>• MI strategy: Decisional Balance</li> <li>• Importance and confidence rulers</li> <li>• Agenda mapping</li> <li>• <u>Value card sort</u></li> <li>• Psychoeducation on impact of tobacco use on physical and mental health</li> <li>• Motivation groups such as Learning About Healthy Living (Track 1, Sessions 1-20)</li> <li>• Explore past change successes and what helped</li> <li>• Encourage small steps like Quit for a Day or reduction with medication</li> <li>• Explore and teach alternative coping skills such as meditation</li> <li>• Offer NRT and medications to reduce cravings and withdrawal</li> <li>• Identify network of people (friends and family) who support their plan</li> <li>• Identify steps in setting a quit date</li> <li>• Set quit date</li> </ul>	<ul style="list-style-type: none"> <li>• Pushing person to make decision too quickly</li> <li>• Spending a lot of time reflecting person's talk about why they can't change their smoking</li> <li>• Offering options for change before eliciting the person's own ideas and preferences</li> <li>• Offering information and advice without asking permission</li> </ul>

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<p><b>Action</b> Person's is taking steps towards changing tobacco use but hasn't yet fully stopped, or has stopped for fewer than six months</p>	<p><b>Active Treatment</b></p> <ul style="list-style-type: none"> <li>• Person's is engaged in the treatment process and has significantly reduced tobacco use or stopped and is still implementing change plan</li> <li>• Be prepared for slips and relapses that can derail treatment</li> </ul>	<p><b>Goal</b> Help the person reduce or stop using tobacco</p> <p><b>Interventions</b></p> <ul style="list-style-type: none"> <li>• Identify triggers and manage cravings and urges</li> <li>• Teach how to refuse offers of cigarettes</li> <li>• Build social support network</li> <li>• Recognize signs that may lead to resumption of tobacco use</li> <li>• Provide social network interventions</li> <li>• Provide social skills training to address substance-related situations</li> <li>• Encourage substitute activities (e.g. work, sports)</li> <li>• Provide individual and family problem solving</li> </ul>	<ul style="list-style-type: none"> <li>• Cognitive behavioral interventions for both mental health and substance use disorders</li> <li>• Relapse Prevention Counseling (managing cues, triggers, negative thoughts and feelings)</li> <li>• Mindfulness meditation</li> <li>• Medications for nicotine addiction (NRT, Bupropion, Chantix)</li> <li>• Healthy activities (e.g., exercise)</li> <li>• Active Treatment Group such as Learning About Healthy Living (Track 2, Sessions 1 to 8)</li> <li>• Employment (Individual Placement and Support (IPS) model of supportive employment)</li> <li>• Stress management skills and strategies</li> <li>• Nicotine anonymous and other community self-help groups</li> <li>• Individual and family problem solving techniques</li> </ul>	<ul style="list-style-type: none"> <li>• Taking charge</li> <li>• Not listening to person ideas</li> <li>• Being disappointed if person starts smoking again</li> <li>• Not offering a menu of options for reducing or quitting tobacco use</li> <li>• Not working in a collaborative fashion to develop and modify, when necessary, the person's tobacco use change plan</li> <li>• Stopping treatment too soon when ongoing support is needed</li> </ul>

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<p><b>Maintenance</b></p> <ul style="list-style-type: none"> <li>Achieved goals for tobacco use and is working to maintain change</li> <li>Develop new skills to maintain recovery</li> </ul>	<p><b>Relapse Prevention</b></p> <p>No tobacco use for at least 6 months</p>	<p><b>Goal</b></p> <p>Help person maintain abstinence from tobacco</p> <p><b>Interventions</b></p> <ul style="list-style-type: none"> <li>Maintain supportive contact</li> <li>Maintain awareness relapse is possible</li> <li>Prepare a plan to respond if relapse should occur</li> <li>Expand recovery to other goal areas such as social relationships, work, health, independent living</li> <li>Support self-efficacy</li> <li>Help develop new coping strategies to avoid returning to tobacco use</li> </ul>	<ul style="list-style-type: none"> <li>Cognitive restructuring (managing negative thoughts and feelings)</li> <li>Social skills training</li> <li>Relapse prevention therapy</li> <li>Family problem solving</li> <li>Support healthy lifestyle changes (e.g., exercise, healthy diet)</li> <li>Stress management techniques</li> <li>Independent housing</li> <li>Becoming a role model for others</li> <li>Identify tobacco-free reinforcers</li> <li>Celebrate successes</li> <li>Nicotine Anonymous and other community self-help groups</li> </ul>	<ul style="list-style-type: none"> <li>Forgetting relapses might happen</li> <li>Being disappointed if relapse occurs</li> <li>Losing contact with the person</li> <li>Not helping person identify a smoke-free support network</li> </ul>