

RECOVERY HAPPENS

Substance Using Teens, Experiential Learning & the Process of Change

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CHANGE IS A PROCESS

Traditionally, drug treatment programs have heavily focused on abstinence, forgetting or simply ignoring that change is a process and even voluntary participants have obstacles to sobriety. Slowing down requires us to set aside our abstinence agendas and meet participants where they're at in their process of change. I believe this is an essential first step for providing trauma-informed care.

Once you've slowed down, take a few moments to explore where participants are at in the Stages of Change. Developed by Prochaska, Norcross, & DiClemente (1994), the Stages of Change is an evidence-based transtheoretical model that identifies five steps in the change process:

- *Pre-contemplation.* The person doesn't believe they have any problems related to the target behavior, so sees no reason to make changes. To help participants in this stage, we can focus on relationship building, validate the participant's lack of desire to change, and provide objective information.
- *Contemplation.* The person is considering the possibility that a problem exists, but hasn't yet decided if change is necessary. Explore the pros and cons of continuing to use, identify contradictions in the participant's self-reported goals, and provide opportunities to imagine or experience alternatives.
- *Preparation.* The person has identified a problem related to the target behavior and is determining what to do next. To help participants in this stage, encourage small initial steps or experiments, continue to explore and solidify motivation for change, and help eliminate obstacles to change.
- *Action.* The person has decided to change the target behavior, has developed a plan, and is now putting that plan into action. To help participants in this stage, we can explore ways to implement change, provide support, foster self-efficacy, and remain solution focused.
- *Maintenance.* When the new behavior has become habit, the person has entered this stage. Six months of sobriety is a good milestone for this. To help participants in this stage, we can provide ongoing support, continue to explore real or perceived obstacles, and foster resiliency.

Recycle vs. Relapse

In addition to these five stages, there's also Recycle, which occurs when a participant committed to change reverts to old behaviors. Recycling isn't necessarily the same as relapsing. Someone can only relapse when they've made a sincere commitment to long-term sobriety and this commitment has been put into practice. If a participant is in the Pre-contemplation or Contemplation stage, that commitment hasn't been made; if in Preparation, that commitment hasn't yet been put into practice.

Although participants can't relapse in these earlier stages, they can recycle anywhere in the Stages of Change. In fact, it's a normal part of the change process. When a participant recycles, many helpers blame a lack of skills, situational factors, or an unwilling to change. These may be extenuating circumstances, but it seems to me that participants recycle because we push them into Action too quickly. As such, when a participant recycles, we should see it is a potent reminder to slow down and address unfinished or overlooked business from earlier stages.

Slowing down gives us time to help participants discover and deepen their motivation. When participants report treatment is the least bad option, that their only problem is others think there's a problem, or make similar comments, they're not expressing resistance. They're telling us that they're willing to engage.

FACILITATING FOR CHANGE

Framing is how you, as the facilitator, talk about an activity when introducing it and while it's in progress. Although I speak in metaphors a lot, when introducing an activity, I almost always use a strictly **nuts-and-bolts** approach, providing only the minimum amount of information necessary. This includes just the basic rules and any relevant safety guidelines.

This nuts-and-bolts approach is less directive than others, which is developmentally appropriate for teens and allows them to find their own meanings in activities. As an activity progresses, I often start integrating metaphorical language that reflects comments made by the participants, reinforces an increased awareness of challenges or obstacles, and amplifies their change talk.

Processing creates links between an activity and the real world. Creating these links helps assure transfer of learning and lasting change. Processing is often thought of as a discussion or Q&A session after an activity or session. However, with many teens this may not be the most effective approach. That's why I use **in-the-moment** processing instead of waiting until the end of the activity.

In-the-moment processing helps participants become more aware of what they're feeling and doing at a time when this information will be most useful. It also encourages making thoughtful choices and immediately putting those choices into practice. I suggest the following steps for processing in the moment:

- When you believe at least some participants are nearing their peak of frustration tolerance, freeze the activity.
- Ask questions such as, "What is the obstacle for the group right now?"
- Explore times participants have been successful overcoming similar obstacles, as a group and as individuals.
- Brainstorm what they could do differently right now.
- Once participants have a plan they believe will be effective, resume the activity and encourage them to put their plan into action.
- Never fix the problem for them.

THE FIVE R's

Relevance Why is change important to you?

Risks What are the risks of changing?

Rewards What will you gain from change?

Roadblocks What are the obstacles to change?

Repetition Review these at every session.

PLANNED ACTIVITIES

Part One Mingle Bingo, Stages of Use, Endless Loops, Group Juggle, Chiji Zones

Part Two Step into the Circle, Fill the Crate, Blindfold Ball Toss, Gutter Ball, Web of Gratitude

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