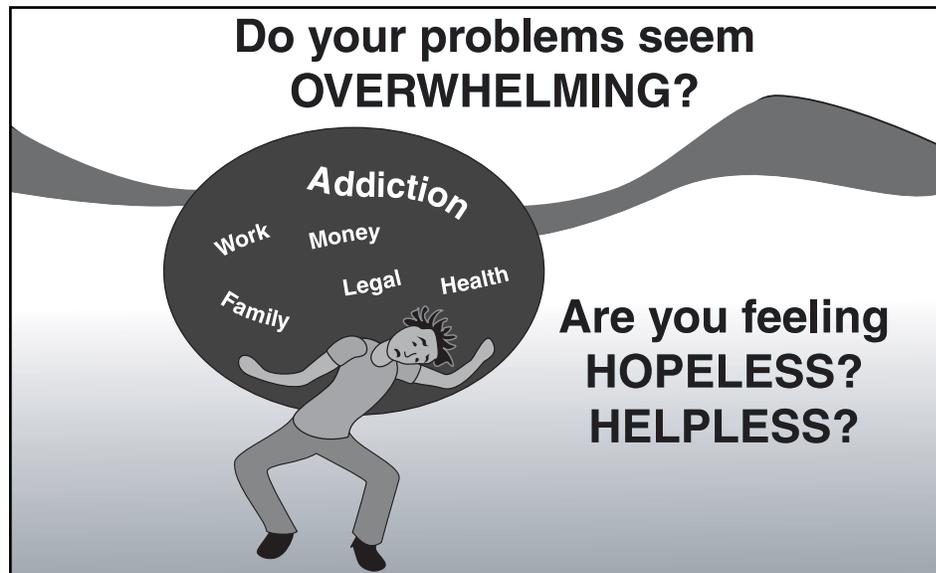


MOTIVATION FOR CHANGE: OVERCOMING HELPLESSNESS

Skills to Be Learned

- Understanding the Source and Consequences of Helplessness
- Identifying Situations in Which You Can Become Empowered
- Assessing Readiness for Change
- Increasing Motivation to Pursue a Healthy Lifestyle

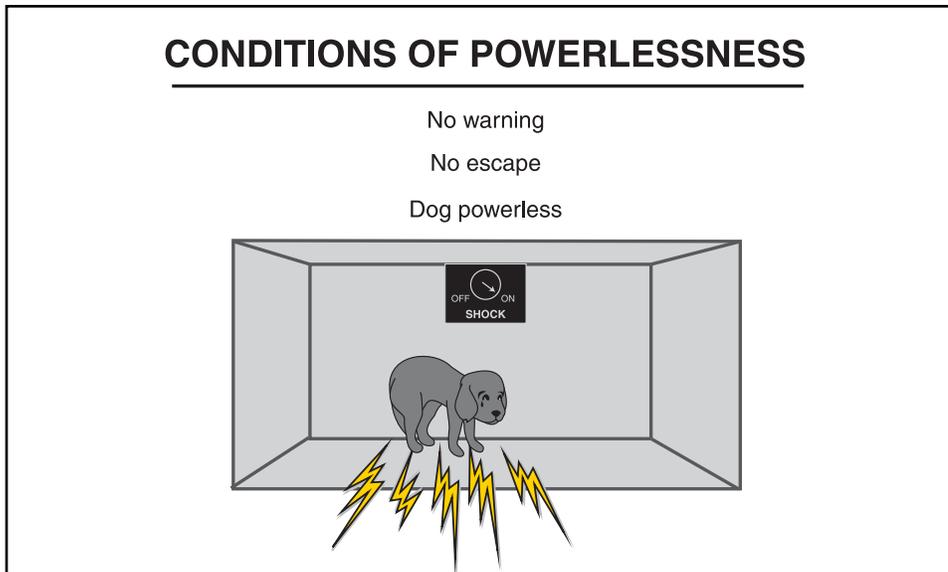
It is certainly understandable that you may feel quite overwhelmed at times by the heavy burden of addiction as well as all the associated medical, legal, financial, family, social, and employment problems.



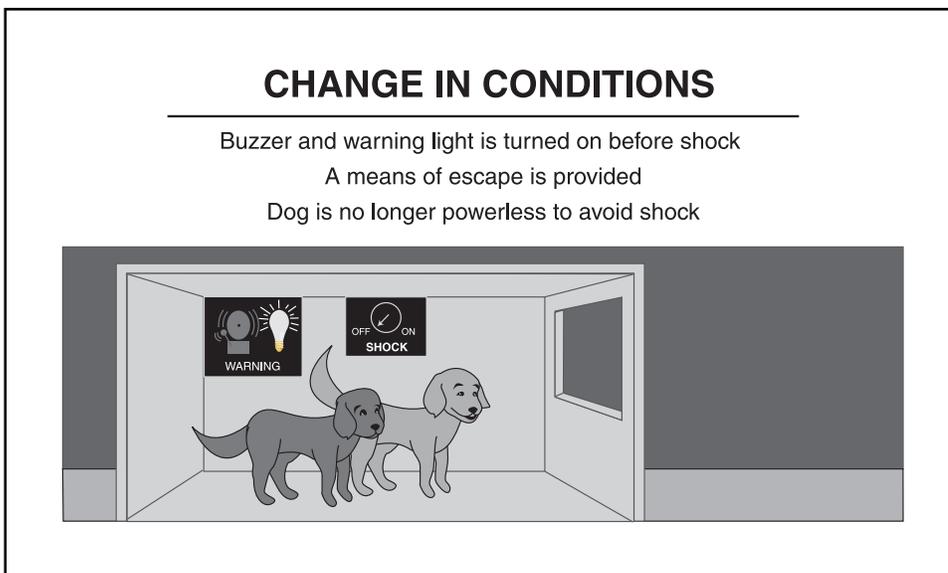
When people feel overwhelmed, they can feel hopeless, helpless, and powerless to do anything about their problems. They may think “I can’t change” or “nothing I do will make any difference.” Feelings of helplessness and hopelessness, and thoughts such as these can quickly lead to relapse to drug use and other high risk behaviors. It can also lead to a relapse to old ways of thinking such as believing that heroin or cocaine will relieve the physical and emotional pain they are experiencing. The goal of this chapter is to help you understand the source, as well as the consequences, of helplessness, to help you increase your sense of control over your health and your life, and to help you increase your motivation to pursue a healthy lifestyle.

Learned Helplessness

“Learned Helplessness” refers to feeling powerless to help yourself now and in the future due to the experience of being powerless in the past. Many years ago an experiment was conducted that illustrates learned helplessness.

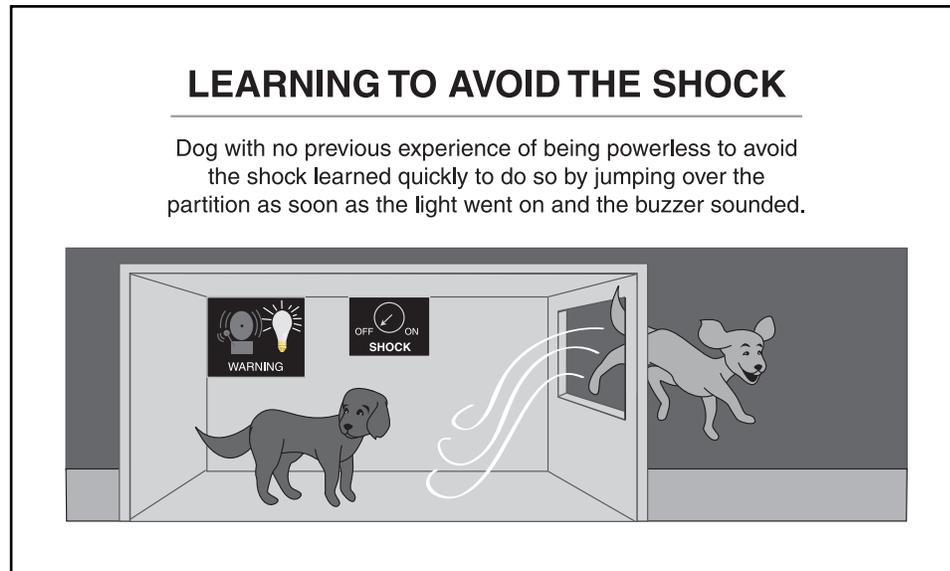


In the first part of the experiment, dogs were placed in a box with electric grids in the flooring and were subjected to numerous electric shocks from which they could not escape. No matter what they tried, they were completely powerless to do anything about the shocks. Because nothing they tried was ever successful in stopping the shocks, eventually they gave up trying and just passively accepted the shocks.

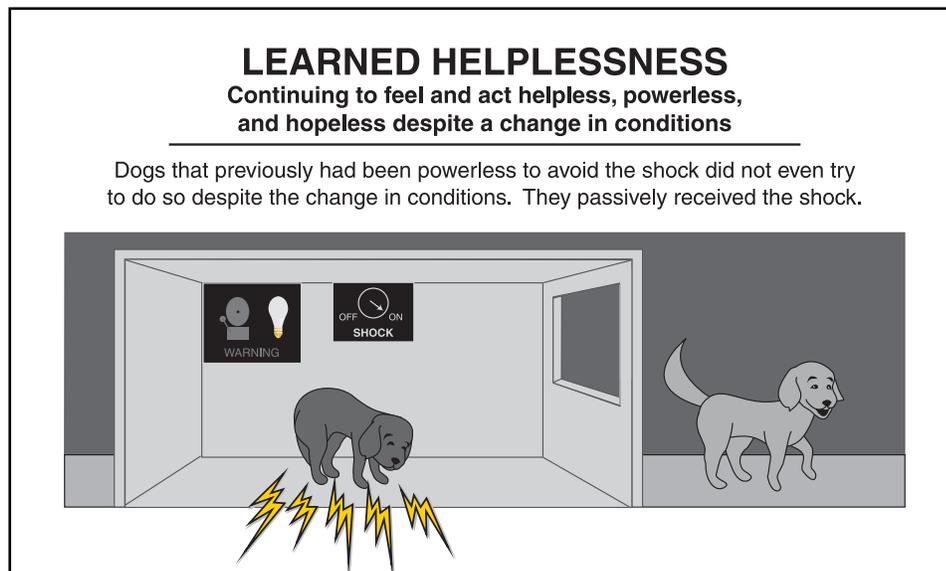


In the second part of the experiment, the conditions were changed. The same dogs that had been in the first part of the experiment, as well as new dogs that had never experienced the inescapable shocks, were placed in a similar apparatus. This time, however, the conditions were changed such that a buzzer was sounded or a light was turned on prior to the shock being

delivered so that the animal could avoid the painful shock if it learned to jump over a partition into the next compartment of the box as soon as it heard the warning buzzer or saw the warning light.



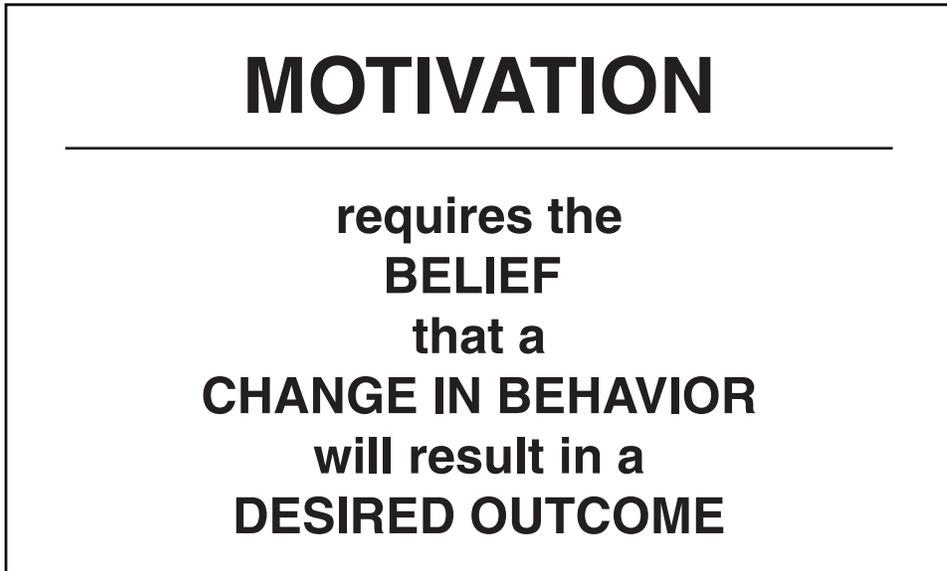
The animals with no prior experience of the inescapable shocks learned quickly to jump over the partition as soon as the warning buzzer or light came on and therefore avoided being shocked.



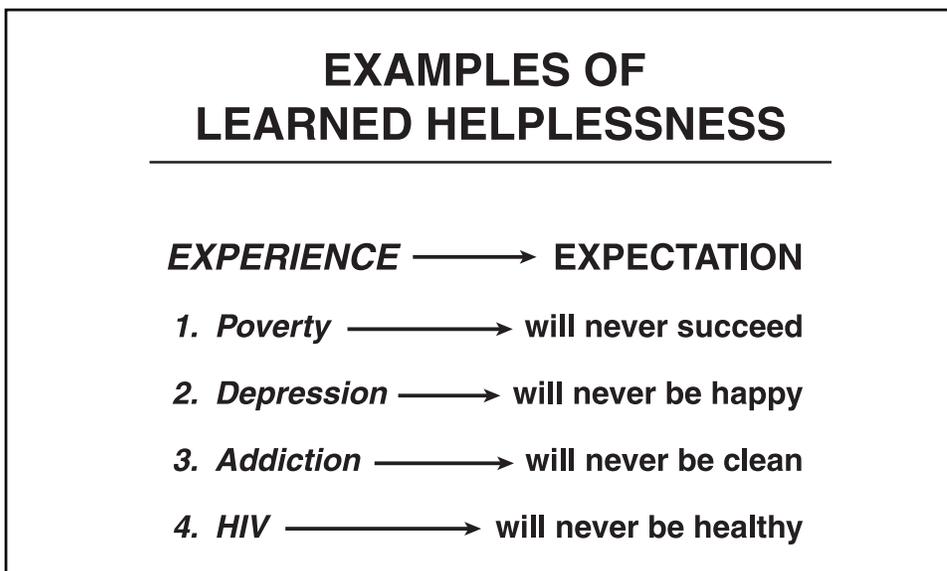
However, the animals that previously had experienced being powerless to avoid the shocks did not learn how to avoid the shocks despite the change in conditions. These dogs just remained passively in the compartment that had the electric grids in the floor and they did not learn how to use the buzzer and light as signals to jump over the partition and avoid being shocked.

This is an example of learned helplessness. These animals “learned” from their previous experience with the shocks that they were powerless to stop them and that there was no point in trying to escape. Their previous experience prevented them from realizing that they were no longer powerless.

Association between Learned Helplessness and Motivation



Motivation for change involves having the belief that changing one’s behavior can influence the outcome. If you don’t believe that what you do will have any effect, then you will be unmotivated to make any changes. The dogs in the experiment had no motivation to jump over the partition because they still believed that they could do nothing to prevent the shocks.



Consider the examples of learned helplessness that occur in human beings that are shown in the illustration, and how it could affect motivation.

1. **Poverty.** Children raised in poverty or in the inner-city may feel that they won't ever succeed so may not even try, they may drop out of school, and live out their lives in poverty.
2. **Depression.** People suffering from depression may feel so bad that they start to believe there is nothing they can do to make themselves feel better and that it is going to last forever, making the depression even worse.
3. **Addiction.** People struggling with addiction who have tried to stop using drugs many times in the past and have not been able to stay clean, may begin to believe that nothing will make a difference. They stop trying, drop out of treatment, and continue to use drugs.
4. **HIV.** Some people with HIV disease think "why should I bother to change my behavior. I'm powerless to change my HIV status." They continue to use drugs, continue to engage in unsafe sex, and believe that they have no control over their health and their lives any more, even though they actually do have a lot of control.

To summarize, learned helplessness is a phenomenon seen in both humans and non-humans. For people who are addicted to drugs and have tried many times to quit, learned helplessness reduces the motivation to continue trying to quit, and can contribute to continued drug use and risky behavior. They feel powerless to do anything that could maintain or improve their health. In fact, there is a great deal you can do to increase your motivation to be abstinent and to lead a healthy lifestyle.

The Three W's of Change

In this chapter we will discuss the three W's of change:

- **Why** you should change
- **What** you change, and
- **When** you will change

The question is: Are you going to be like those dogs in the experiment just sitting in the cage accepting the pain or are you going to avoid it by learning something new. This is what HHRP is about—acknowledging that there are things over which you have no control, such as **the physical effects of drugs or the medical effects of viral infections from unsafe sex and drug use**, identifying what you do have control over now, and learning strategies for improving the quality of your life in the present and for the future. Remember the serenity prayer:

God grant me the serenity
to accept the things I cannot change,
the courage to change the things I can,
and the wisdom to know the difference.

We refer to the serenity prayer frequently in HHRP. Let's see how it relates to learned helplessness, motivation, and the three W's of change.

Let's begin with **Why**. Why should you stop using drugs, stop sharing needles, and stop having unprotected sex? What's in it for you? You may remember this from other chapters.

You can remember this by the word **CARE**.

WHY CHANGE?
Reasons to CARE

- C** *Compromised Immune System* (drug users are susceptible to life threatening blood borne and sexually transmitted infections)
- A** *Altruism* (you can help protect others)
- R** *Resistance* (you can be infected with a strain of HIV that is resistant to new medications)
- E** *Evidence* (Research shows that behavior change reduces the spread of HIV and other sexually-transmitted diseases)

C = Compromised immune system. Your past drug use and addictive lifestyle may have weakened your body's defense system, making you particularly vulnerable to infection including HIV and viral hepatitis. You therefore need to do everything in your power to protect your health.

A = Altruism. You can make a difference in protecting the lives of other people.

R = Resistance. You could potentially be infected with a different strain of HIV that is resistant to medication, thus reducing your chances for survival

E = Evidence from research. There is convincing evidence that if you change your behavior you can have a substantial impact on protecting your own health and the health of others.

Let's go to the next W—**What**.

WHAT CAN YOU CHANGE?

 <p>Knowledge <i>Become more knowledgeable about HIV and addiction</i></p>	 <p>Participation <i>Actively participate in your health care</i></p>
 <p>Abstinence <i>stay clean and sober</i></p>	 <p>Risk reduction <i>don't exchange body fluids</i></p>

You cannot change the fact that you are now infected with HIV, so what can you change?

We discuss these lifestyle changes in detail in other chapters, but let's review them again briefly:

Knowledge. You can become more knowledgeable about the consequences of addiction, especially consequences to your health. People who are not knowledgeable about their health cannot make informed decisions.

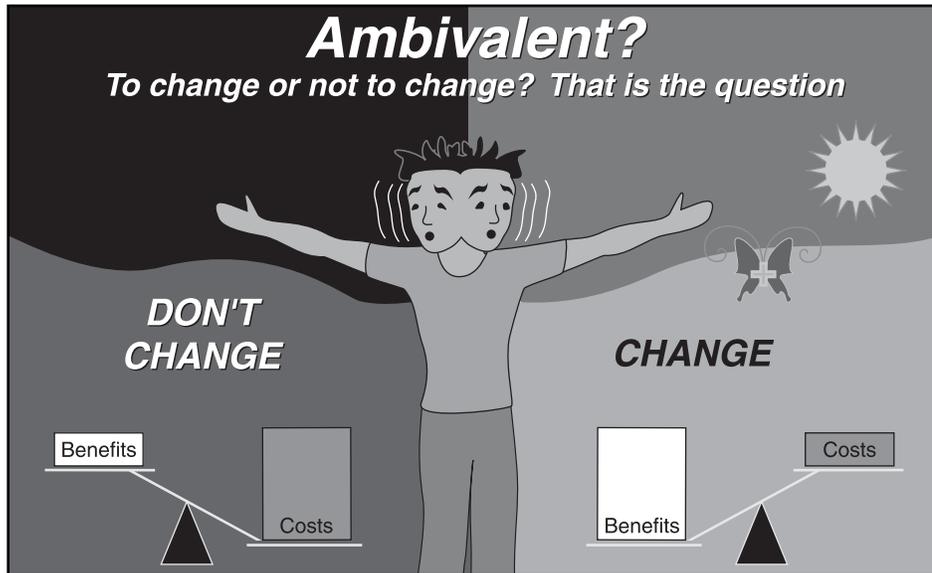
Participation. Be an active participant in your health care. Schedule routine medical check-ups, keep your medical appointments, ask questions, and follow medical recommendations to treat any existing conditions and to prevent illness in the future. Eat well and exercise regularly. Ultimate responsibility for your health care is yours. Others can advise you, but unless you actively participate you will not maintain your health.

Abstinence. Stay in treatment, work the program, and stay clean and sober one day at a time. If you continue to use drugs, you will further weaken your immune system, and you will do more damage to your physical and mental health. Drugs and alcohol also affect decision making, and often lead to unhealthy lifestyle choices.

Risk Reduction. Don't share body fluids. This means no sex without condoms or other latex protection, and no sharing of needles or other drug paraphernalia, including cookers, cotton, or rinse water. Do not engage in behaviors that place you and others at risk for HIV infection or re-infection or that place you and others at risk for becoming infected with other sexually-transmitted and blood-borne diseases.

When will you change?

We've covered **Why** you should change and **What** you can change. The 3rd W is **When**. When will you change? Are you ready right now to make these lifestyle changes or are you ambivalent?



You will not make lasting changes until you believe that a change in behavior will result in some desired outcome and that the benefits of changing outweigh the costs of change. It is normal to feel ambivalent about change. Feeling ambivalent does not mean that you will never be able to change. As shown in the illustration, ambivalence is feeling conflicted—feeling torn between two choices—and not knowing what course to take. Just because you want to be healthy does not necessarily mean you want to change your lifestyle. For example, although there are many good reasons not to inject drugs or have unprotected sex, you probably have your own reasons for continuing to engage in these high risk behaviors. The personal benefits to you of engaging in these behaviors may make them extremely difficult to give up. When you feel “ambivalent” you should acknowledge your ambivalence and **begin to weigh the costs and benefits of making the change**. Before you can move forward, you need to identify additional reasons to change that will help tip the scales in favor of making the change.

The Stages of Changes

It is important to know if you are ready for change because your readiness or lack of readiness will affect your motivation to make healthy lifestyle choices. Researchers have identified specific stages of change, as shown in this illustration:

WHEN WILL YOU CHANGE?

Pre-contemplation

"I don't have a problem"



Contemplation

"I have a problem. I might need to make some changes"

Preparation

"I'm getting ready to make some changes"

Action

"I'm beginning to make some changes"

Maintenance

"I like the changes I've made and I'm working on not sliding backwards"



Stage 1:

If you are in the “pre-contemplation” stage of change, you have no intention to change and you deny that there is any need to change. You’ve probably been in this stage at some point in your life with regard to your drug use. It’s the **“I don’t have a problem” stage**. Sometimes people have to hit bottom before they leave this stage, or they can be helped to move out of this stage by weighing the costs and benefits of change. Once the benefits of change outweigh the costs, you are ready to graduate to the next stage.

Stage 2:

If you are in the “contemplation” stage of change, you have not yet begun to make changes, but you are **seriously considering changing** in the next 6 months. You acknowledge that you have a problem, and that the benefits of change outweigh the costs.

Stage 3:

If you are in the “preparation” stage of change, you have made the decision to make changes in your life and you are now **preparing to make changes** (for example, by learning the skills you will need).

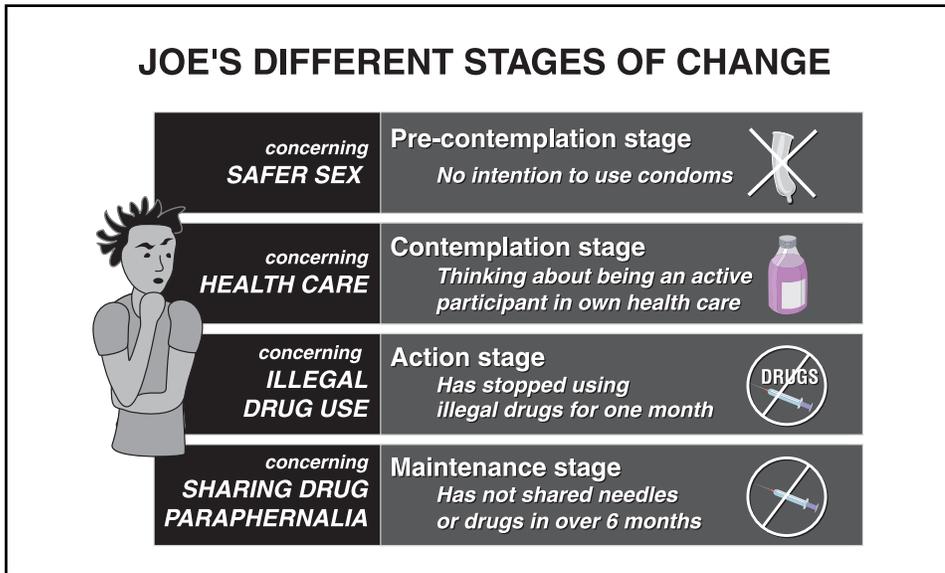
Stage 4:

If you are in the “action” stage of change, you have **recently begun to change** your behavior (you have been making changes for less than six months).

Stage 5:

If you are in the “maintenance” stage of change, you have been actively changing your behavior for a long period of time (for six months or more) and are now ensuring that you have the skills to **maintain the changes permanently**.

Different Behaviors May Be in Different Stages of Change



The fellow in the illustration is in the pre-contemplation stage with regard to safer sexual behavior. He has no intention to use condoms. However, he is in the contemplation stage with regard to becoming an active participant in his own health care. He realizes he needs to schedule a physical examination and follow treatment recommendations, but hasn't started yet. With regard to his addiction, he is in the action stage; he hasn't used any illegal drugs for the past month, and he is in the maintenance stage of change with regard to sharing drug paraphernalia. He hasn't shared works with anyone for over six months. So if you asked Joe what stage he is in, how could he answer? Clearly, it is extremely important to identify your stage of change **for each type of behavior** in order to know what you need to do next.

Review

Let's review what we've covered so far. We've talked about learned helplessness and its influence on motivation and readiness for change. Learned helplessness refers to feeling powerless now and in the future due to feeling powerless in the past. Individuals in addiction treatment may feel helpless when in fact there are many aspects of their health and life that they do in

fact have control over. It is extremely important to identify what you have control over and what you don't, so that you can begin to make necessary lifestyle changes, such as becoming more knowledgeable, participating in your health care, being abstinent from drugs, and not sharing body fluids. We also talked about feeling ambivalent about making changes. Feeling ambivalent means feeling conflicted or torn between two choices. Feeling ambivalent is normal. Change often doesn't come easily. When you feel "ambivalent" you should not assume that you will never change your behavior, but instead you should acknowledge your ambivalence and **begin to weigh the costs and benefits of making the change**. When you weigh the costs and benefits, the strength of the benefits can move you from ambivalence to action. We also discussed how important it is to identify your readiness for changing various behaviors because you might be ready to change one behavior, but not another. We talked about five different stages of change: **Precontemplation**—this is when you don't have any intention to make a change—it's the "I don't have a problem stage;" **Contemplation**—in this stage you recognize that you have a problem and plan to change in the future but haven't done so yet; **Preparation**—in this stage you are actively preparing to make a lifestyle change; **Action**—in this stage you have actually begun to make changes, and have been doing so successfully for less than six months; and finally the **Maintenance stage**—in this stage you have been successfully making changes for more than six months. Depending on what stage you are in currently, you will need to use a different strategy to help you graduate to the next stage.

Practice Exercise: Identifying Your Stage of Change

Now let's see what stage of change you are in for various behaviors: Turn to the worksheet entitled "Readiness Assessment" located at the end of this chapter.

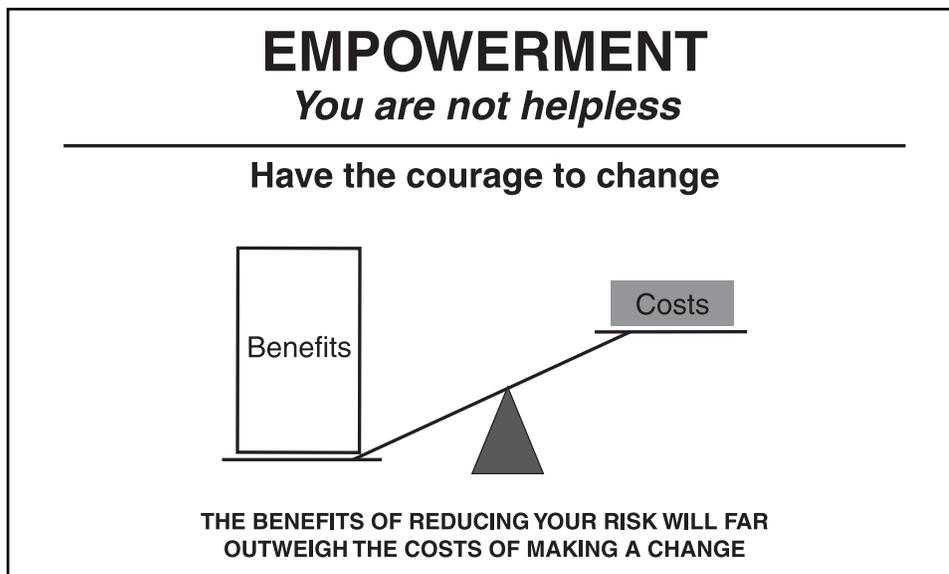
Instructions:

1. Circle the number next to the statement that matches your current intentions for each of the four behaviors: sexual practices, drug use, health care, and sharing drug paraphernalia (needles/works).
2. In the space labeled **Stage:** _____ in each of the four boxes,
If you circled 1 in that box, write in the space the word "precontemplation"
If you circled 2 in that box, write in the space the word "contemplation"
If you circled 3 in that box, write in the space the word "preparation"
If you circled 4 in that box, write in the space the word "action"
If you circled 5 in that box, write in the space the word "maintenance."

3. On the reverse side of this worksheet select one behavior that you are **least ready to change** (for example, a behavior on which you scored in the “precontemplation” stage (if none, then “contemplation,” if none, then, “preparation,” and so forth).
4. Consider your reasons for **not** wanting to change your behavior, and write these on your worksheet. These are the costs of change.
5. List the potential benefits of making a change on your worksheet so that there are more benefits than there are reasons not to change.
6. Identify the next stage and write it on your worksheet. List the strategies you will use to move you to this next stage.

Empowerment

Drug addiction is not a diagnosis of helplessness. Feeling helpless can lead to depression, drug use, and behaviors that risk your health and the health of other people.



Empowerment entails becoming calm and centered and conducting an honest cost-benefit analysis. It means having the courage to move beyond denial and acknowledge that you have a problem and that you may feel ambivalent about making lifestyle changes. There is much within your power that you can do to tip the balance on the cost:benefit scale in favor of reducing your risks and maintaining your health. List all the benefits of making necessary changes in your behavior. Then identify things in your life that you do have control over; list all the things you can do to reduce your risk and maintain your health and then prioritize them. Then systematically start working on each item on your list. Change does not necessari-

ly come all at once, and sometimes can be difficult. You may go through stages where you feel quite ambivalent. This is normal and not to be taken as a sign of failure. The important point to remember is that you do have control and you can make choices that will move you through the ambivalence and into an improved quality of life. Unlike the dogs in the ‘learned helplessness’ experiment that remained helpless and did not even try to help themselves, you do **not** have to remain helpless. As we have discussed in this chapter, although you are powerless to change the effect of drugs on your health, you are not powerless to protect your health and the health of others. It is within your power to find the serenity to accept the things you can’t change, the courage to change the things you can, and the wisdom to know the difference. This is empowerment.

Quiz

1. **“Learned Helplessness” refers to feeling powerless to help yourself now and in the future due to an experience of being powerless in the past.**
 - a. True
 - b. False

2. **Which of the following decisions are under your control?**
 - a. not using drugs
 - b. not exchanging body fluids
 - c. participating actively in your health care
 - d. all of the above

3. **If you are already HIV-positive, why should you bother changing your behavior?**
 - a. compromised immune system—you are vulnerable to other infections
 - b. altruism—desire to protect others
 - c. reinfection—you may be infected with a different strain of HIV
 - d. evidence from research—you are not powerless to protect your health
 - e. all of the above

4. **If you feel “ambivalent” about using condoms:**
 - a. you are not normal
 - b. you will never use condoms
 - c. you should weigh the costs and benefits of using condoms
 - d. none of the above

- 5. Your friend is still using drugs, says he doesn't have a problem, and has no intention to stop. He is in the:**
- a. contemplation stage of change
 - b. action stage of change
 - c. maintenance stage of change
 - d. none of the above

Practice Exercise: Stress Management/Relaxation

We recommend that you conclude each chapter by doing a 10-minute relaxation exercise. Use this time to practice meditation or deep breathing, or to play an audiotaped relaxation or visualization technique. Dim the lights, get comfortable in your chair, uncross your legs, and sit quietly with your eyes closed. Remember that learning to relax is a skill that takes practice, so if you feel restless at first, just remind yourself that this is a 10-minute gift of quiet time that you give to yourself. With practice, you can use meditation and relaxation in many areas of your life. For example, you can use this time to find serenity in accepting what cannot be changed, and you can gain courage to make changes in your life that are under your control, and you can consult with your inner guide—your wisdom—which knows the difference between what can and cannot be changed. By doing this you can overcome helplessness.

Readiness Assessment

Instructions: Circle **one** of the responses in each of the four boxes.

Sexual Practices

1. I have no intention to start using condoms every time I have sex.
2. I am seriously considering starting to use condoms soon, but haven't made any definite preparations yet.
3. I am now actively preparing myself to begin engaging in safer sexual practices, but haven't started yet.
4. I've used condoms *every time I have sex* for **less than six months**.
5. I've been using condoms *every time I have sex* for **longer than six months**.

Stage: _____

Illegal Drug Use

1. I have no intention to quit using all illegal drugs.
2. I am seriously considering quitting all illegal drugs but haven't made any definite preparations yet.
3. I am now actively preparing myself to quit using all illegal drugs, but haven't quit yet.
4. I have now stopped using all illegal drugs and have been *completely abstinent* for **less than six months**.
5. I stopped using all illegal drugs and have been *completely abstinent* for **more than six months**.

Stage: _____

Health Care

1. I have no intention to see a doctor regularly, take all medications as directed and be active in my own health care.
2. I am seriously considering becoming more active in my health care, but haven't made any definite preparations yet.
3. I am now actively preparing myself to form a partnership with my health care provider so that I can participate more actively, but haven't done so yet.
4. I have now begun participating actively in my health care and have been *100% compliant with all medical recommendations* for **less than six months**.
5. I have been participating actively in my health care and have been *100% compliant with medical recommendations* for **more than six months**.

Stage: _____

Sharing Drug Paraphernalia

1. I have no intention to stop sharing drug paraphernalia with other people (e.g., needles, cookers, cotton, rinse water).
2. I am seriously considering not sharing paraphernalia any more, but haven't made any definite preparations yet.
3. I am now actively preparing myself to stop sharing paraphernalia, but haven't stopped yet.
4. I stopped sharing drug paraphernalia and *haven't shared anything* for **less than six months**.
5. I stopped sharing drug paraphernalia and *haven't shared anything* for **more than six months**.

Stage: _____

Stage of Change Graduation Game Worksheet

My current Stage of Change: In the space provided below, write the name of the stage (precontemplation, contemplation, action, preparation, or maintenance) from your Readiness Assessment.

Sexual practices _____ Health care _____
Drug use _____ Sharing "works" _____

The behavior I'm most *ambivalent* about changing is: Select the behavior, from the four above, that you are least motivated to change and write it here. _____

List the reasons for not wanting to change your behavior (costs):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

(a) Total number of costs of change and enter here:

List the potential benefits of change:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

(b) Total the number of potential benefits of change and enter here:

(c) Subtract costs (a) from benefits (b) and enter results here:

Write in the name of the next Stage of Change here: _____

List below the strategies you will use to help you graduate to the next stage for changing this risky behavior:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

(d) Total the number of strategies for graduation and enter here:

