

This entry reproduces with minor amendments the original abstract or equivalent of a document collected by Drug and Alcohol Findings. Findings collects any scientific or UK policy document relating to evaluations of drug or alcohol interventions or to the interpretation and use of their findings. Unlike documents selected for fuller analysis, its citation here does not imply that this document is particularly relevant to Britain and of particular merit (though it may well be both) and no attempt has been made to validate the facts or interpretations given by the authors or to offer a critical commentary. The original document was not published by Findings; click on the [Title](#) to obtain copies. Free reprints may also be available from the authors – click [Request reprint](#) to send or adapt the pre-prepared e-mail message. Links to source documents are in [blue](#). Hover mouse over [orange](#) text for explanatory notes.

Click [HERE](#) and enter e-mail address to be alerted to new studies and reviews

---

► [Adapting psychotherapy to the individual patient: Stages of change.](#)

Norcross J.C., Krebs P.M., Prochaska J.O. [Request reprint](#)

*Journal of Clinical Psychology*: 2011, 67(2), p. 143–154.

Prochaska and DiClemente's stages of change reliably predict how well psychotherapy patients will do based on their initial stage, but no relevant studies were found on whether matching therapy to the patient's initial stage of change improves outcomes.

**Original abstract** The [transtheoretical model](#) in general, and the stages of change in particular, have proven useful in adapting or tailoring treatment to the individual. We define the stages and processes of change and then review previous [meta-analyses](#) on their interrelationship. We report an original meta-analysis of 39 studies (Findings: of which it seems 20 concerned substance abuse including alcohol problems) encompassing 8238 psychotherapy patients, to assess the ability of assessments of the patient's stage of change and related readiness measures to predict psychotherapy outcomes.

Clinically significant [effect sizes](#) were found for the association between initial stage of change and psychotherapy outcomes, indicating that clients who start treatment at more advanced stages of change reliably tend to make greater progress during treatment. (In particular, this association was found across the relevant 14 studies of addiction outcomes.) We examine potential influences on this relationship including study outcome measures, patient characteristics, treatment features, and diagnosis. For patient characteristics, we found no statistically significant difference in the strength of the stages-of-change/outcomes relationship between adolescent and adult samples or patients of different race/ethnicity. However, this relationship was stronger among samples with higher proportions of women. For treatment features, we found no differences in the strength of the stages-of-change/outcomes relationship between inpatient and outpatient treatment settings, treatments which did or did not follow a manual, and programmes with varying numbers of therapy sessions. However, among studies which made their primary theoretical orientation explicit, the stages-of-change/outcomes relationship was strongest among patients in 12-step programmes as

compared to cognitive-behavioural or other orientations.

We also review the large volume of behavioural health research, but scant psychotherapy research, which demonstrates the efficacy of matching treatment to the patient's stage of change. Unfortunately, the aim to assess outcomes from psychotherapy studies which matched treatment to specific stages of change could not be carried out, because no controlled group studies were found which met the review's criteria and matched psychotherapy to the clients' stage or readiness.

Limitations of the extant research are noted, and several practice recommendations are advanced. Probably the most obvious and direct implication is to assess the stage of a client's readiness for change and to tailor treatment accordingly, and in particular to be beware of treating all patients as though they are in the action stage.

**FINDINGS** This article was in a [special issue](#) of the *Journal of Clinical Psychology* devoted to adapting psychotherapy to the individual patient. For other Findings entries from this issue see:

- ▶ [What works for whom: tailoring psychotherapy to the person](#)
- ▶ [Adapting psychotherapy to the individual patient: Preferences](#)
- ▶ [Adapting psychotherapy to the individual patient: Culture](#)
- ▶ [Adapting psychotherapy to the individual patient: Coping style](#)
- ▶ [Adapting psychotherapy to the individual patient: Expectations](#)
- ▶ [Adapting psychotherapy to the individual patient: Attachment style](#)
- ▶ [Adapting psychotherapy to the individual patient: Resistance/reactance level](#)
- ▶ [Adapting psychotherapy to the individual patient: Religion and spirituality](#)

A [Findings analysis](#) has specifically analysed the theory and evidence related to whether assessments of the stage of change of addiction patients can be used to improve treatment outcomes.

Last revised 09 March 2011

- ▶ [Comment on this entry](#) ▶ [Give us your feedback on the site \(one-minute survey\)](#)

---

## Top 10 most closely related documents on this site. For more try a [subject or free text search](#)

[What works for whom: tailoring psychotherapy to the person](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Resistance/reactance level](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Expectations](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Coping style](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Attachment style](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Preferences](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Religion and spirituality](#) ABSTRACT 2011

[Adapting psychotherapy to the individual patient: Culture](#) ABSTRACT 2011

[Cognitive-behavioral treatment with adult alcohol and illicit drug users: a meta-analysis of randomized](#)

Your selected document

[controlled trials](#) REVIEW 2009

[Client-receptive treatment more important than treatment-receptive clients](#) NUGGET 2000