

---

## CHAPTER 3: *Preparing for Change*



Making changes in our lives can be difficult. Each year in late January or early February, for example, we hear stories from friends about New Year's resolutions that have fallen by the wayside. Descriptions of failed diets, smoking cessation programs, or exercise plans are ubiquitous. You, too, have likely made promises to yourself about changing your cybersex behavior, only to find you've been unable to keep them.

Making life changes happen takes more than a promise to yourself. While it is often difficult, the success of countless people who have done so is proof that it's possible. That's what this and the next two chapters are about: learning how to make and maintain the changes you've decided are best for you.

First, we'd like to help you look more closely at the process of change. In their book *Changing for Good*, authors James Prochaska, John Norcross, and Carlos DiClemente state that there are six steps, or stages, that people go through when making changes in their lives, regardless of their goal.<sup>1</sup> For example, if you think about a specific problem that you have resolved, chances are you will recognize immediately that its resolution didn't happen all at once. Perhaps for a while you ignored the problem; then you considered tackling it; after that, you may have made definite plans to change. Then, once you had garnered your forces—mental, physical, and social—you acted and began to struggle with the problem. If you succeeded, you worked at maintaining this change. If you failed, you probably gave up for a time, went back to the drawing board, and then tried once more.

Each of these steps is a predictable, well-defined stage: it takes place over a period of time and includes a series of tasks that must be completed before moving on to the next stage. Each stage doesn't inevitably lead to the next; it is possible to become stuck at one stage or another. However, by understanding these stages, you can gain control over the cycle of change and move through it more quickly and efficiently—and with less struggle.

As you read through these stages, we suggest that you keep in mind some changes that you've made, or tried to make, in your life and try to see how these

stages apply to them. At the end of this section, we'll ask you to describe a change you've made, or tried to make, and relate the process you used to the process we're about to describe.

### Stage 1: Precontemplation

In this stage, it's not that you can't see the solution; it's that you can't see the problem! People at this stage usually have no intention of changing their behavior and typically deny having a problem. Although family members, friends, neighbors, doctors, or co-workers can see the problem quite clearly, the typical person in this stage can't.

Most people in this stage don't want to change themselves, just the people around them. Often, they come to therapy because of pressure from others—a partner who threatens to leave them, an employer who threatens to fire them, or judges who threaten to punish them. Their first response in therapy is often, “How can I get others to quit nagging me?” When all else fails, they may change, but only as long as there is constant outside pressure. When that's gone, they quickly return to their old ways.

Precontemplators resist change. When their problem comes up in conversation, they shift the subject. They lack information about it and they intend to maintain ignorant bliss at all costs. Denial is characteristic of precontemplators, who place the responsibility for their problems on factors such as genetic makeup, family, society, or whatever, all of which they see as being out of their control. Precontemplators also tend to be demoralized as well. They don't want to think, talk, or read about their problems because they feel the situation is hopeless.

So how can you change if you don't want to? The answer is in the approach; even precontemplators will progress toward change if they have the proper tools at the proper time.

### Stage 2: Contemplation

“I want to stop feeling stuck.” These words are typical of contemplators. In the contemplation stage, people acknowledge that they have a problem and begin to think seriously about solving it. Contemplators struggle to understand their problem, to see its causes, and to wonder about possible solutions. Many have indefinite plans to take action within the next six months or so.

In this stage, you have become aware that something is amiss in your life. You've begun noticing that some “difficulties” have arisen. Your work supervisor recently had a meeting with you specifically to talk about those missed deadlines and the fact that you've been late getting to work more and more often. You know that both situations are due to your increasing cybersex involvement. The thought occurs to

you that perhaps cybersex is a “bit of a problem.” You contemplate making some changes, putting some controls on your use, and cutting down a bit.

The nature of contemplation can seem puzzling: you know your destination and even how to get there, but you are not quite ready to go yet. Many people remain in this stage for a long time. Many spend years telling themselves that someday, they’ll change. When contemplators begin the transition to the preparation stage, their thinking is clearly marked by two changes. First, they begin to focus on the solution rather than the problem. Then they begin to think more about the future than the past. The end of the contemplation stage is a time of anticipation, activity, anxiety, and excitement.

### **Stage 3: Preparation**

Most people in the preparation stage are planning to take action soon, often within the very next month, and are making the final adjustments before they begin to change their behavior. An important step now is to make public the intended change. But although people in this stage are committed to acting and may appear ready to do so, they have not necessarily resolved their ambivalence. They may still need to convince themselves that this is what is best for them. People in the preparation stage may already have instituted a number of small behavioral changes, such as cutting their cigarette intake or counting calories. Awareness is high, and anticipation is palpable. People who cut short this stage—for example, waking up one morning and deciding to quit smoking cold turkey—actually lower their chances of success. It’s better to make use of this time by planning carefully, developing a firm, detailed scheme for action, and making sure that you have learned the change processes you need to carry you through the process.

You might be asking yourself questions like, “Do I need to get rid of the computer altogether?” “Do I need to put limits on how much time I spend on the computer or where I use it?” “What do I need to be cautious of?” “What is it exactly that I need to change?” In other words, what preparations do you need to make to effect the change?

Often anxiety is the impetus for finally taking action. While anxiety is often seen as a negative state, in this case, it has a positive effect in that it can impel us to finally move out of contemplation and into preparation and action. Without anxiety, there is often no change. If life is comfortable, why rock the boat? Concern and discomfort push us to take action to relieve anxiety.

### Stage 4: Taking Action

The action stage is the one in which people most obviously change their behavior and their surroundings. They stop smoking cigarettes, remove all tempting desserts from the house, pour the last beer down the drain, send all the pornography to the dump, or confront their fears. In short, they make the move they've been planning.

The danger in this stage is that many people, including professional therapists, often mistakenly equate action with change, overlooking not only the critical work that prepares people for successful action but the equally important (and often more challenging) efforts to maintain the changes following action.

It's important to recognize that the action stage is not the only time you can make progress toward overcoming your problem. Although modifying your behavior is the most visible form of change, it is far from the only one: you can also change your level of awareness, emotions, self-image, thinking, and so on. And many of those changes take place in the stages that precede action.

Furthermore, any movement from one stage of change to the next represents considerable progress. If, after years of avoiding a problem, you consciously begin to acknowledge that it exists and think seriously about changing it, the transition from precontemplation to contemplation is no less significant than from preparation to action.

### Stage 5: Maintenance

There are great challenges at every stage, and the maintenance stage is no exception. It is here that people must work to consolidate the gains that they have made during the previous stages and struggle to prevent lapses and relapse. Change never ends with action. Although traditional therapy sees maintenance as a static stage, in fact it is a critically important continuation that can last from as little as six months to the rest of one's life. Without a strong commitment to maintenance, there will surely be relapse, usually to the precontemplation or contemplation stages. Programs that promise easy change—crash diets, one-day smoking cessation sessions, or whatever—usually fail to acknowledge that maintenance is a long, ongoing process.

## Stage 6: Relapse

While Prochaska and his colleagues described this change process in a linear sequence—precontemplation, contemplation, preparation, action, maintenance—life is not so clear-cut and simple. Most people do slip up at some point, returning to earlier stages before renewing their efforts.

Relapse means slipping back into the behaviors you've decided to leave behind. Prochaska and many others who help people make changes in their lives strongly emphasize several points about relapse. First, relapse is a normal part of the change process. Making changes is not like flipping a light switch—as in, “I did things this way yesterday,” and now (flipping the switch) “I’ll do those things differently today.” The average successful self-changer relapses several times.

Needless to say, the feelings relapse evokes are not pleasant. You may feel like a complete failure, embarrassed, ashamed, and guilty and may believe that all of your hard efforts at change have been wasted. Demoralization sets in, and you may want to give up on changing entirely. You may slide all the way back to the precontemplation stage.

After several setbacks, you may feel as though you are going in circles. But you're not. Think of the change cycle not as a circle, but as an upward spiral. You may be in the contemplation or planning stage again, but this time you can draw on the lessons you've learned from your previous efforts. Relapse, or recycling, gives you the opportunity to learn. Viewed in this way, relapsing into old behaviors is not a failure, but rather a learning experience. You've prepared and taken action. Then, when you slip up, you simply move back to stages 2 and 3 to reevaluate what you're doing, how you slipped, and what you can do to minimize the chances of future relapse. Your goal is to learn from your slip. Prochaska says we can always expect some level of relapse to occur, particularly if the change is a difficult one such as dealing with cybersex. Taking action and slipping is much better than taking no action at all.

Choose one change you've tried to make. It might be one you made successfully



Next, refer to the six stages of change we've just described. In the spaces below, jot down the steps you went through in each stage.

**Stage 1: Precontemplation**

---

---

---

---

---

**Stage 2: Contemplation**

---

---

---

---

---

**Stage 3: Preparation**

---

---

---

---

**Stage 4: Taking Action**

---

---

---

---

---

**Stage 5: Maintenance**

---

---

---

---

---

**Stage 6: Relapse**

---

---

---

---



How far did you progress in terms of the six stages?

---

---

---

Did you get stuck? If so, at what stage (or stages)?

---

---

---

Did you have to go back to a previous stage? If so, to which one?

---

---

---

How did you feel when you got stuck?

---

---

---

Do you think you would have felt differently about this if you'd known more about the process of change? Or, given what you now know about the process, do you view what happened differently now? Please explain.

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

You may find that you will cycle through these stages in various areas of your life at different levels for many years. Let's say, for example, that you've come to grips with your cybersex behavior. It's no longer a problem. Then, however, you notice that the relationship between you and your partner isn't all that you want it to be . . . so you apply the change process to this issue.

In its broadest sense, this change and recovery process is really a way of living life more fully and consciously. It's not something that you do for a few days, weeks, or months and then say, "Great! That's done. Time to move on."

Remember that while we are applying these stages to the problem of cybersex, everyone moves through them when they make any change in their life. The stages are applicable to all behaviors, whether relatively harmless of seriously dysfunctional.

## Making Changes

Before we look at specific changes you can make in your cybersex behavior, we want to introduce you to three levels of change—First Order, Transition, and Second Order changes.<sup>2</sup> First Order changes are very concrete actions that are taken to quickly stop a problem and to address specific consequences. First Order changes are also well-described by the French aphorism “The more things change, the more they remain the same.” For example, think of Marie, a woman who’d been married three times, each time to an alcoholic. She changed husbands, but still found herself in the same situation. She did not change her life with each marriage. Instead, she continued to marry and live with alcoholics. First Order change won’t help anyone solve a compulsive or addictive behavior on a permanent basis.

It is important to understand that compulsion or addiction of any kind is a First Order phenomenon. The harder people struggling with these behaviors try to stop their behavior alone and in secret, the more their failure is guaranteed. Only when they seek help for their problem will they be able to begin making the Second Order changes needed to free themselves of these behaviors.

Second Order changes are those steps that you take to actually change the dynamics of your life and the way you live. Second Order changes for Marie, for example, would include going to therapy and temporarily stopping dating. During therapy, she learns that the lessons she internalized growing up in an alcoholic family form the basis for her selection of men.

To further illustrate the difference between these two types of change, imagine that you have just been injured in an auto accident. When the paramedics arrive, the first action they take is to determine if you’re breathing. Then they look for and control any severe bleeding that could bring immediate death. They would also immobilize any broken bones at this time. First Order changes are the splints, airways, and pressure bandages needed to take care of the obvious and immediate problems. They will stabilize your life in the short run. However, if you have internal injuries, your life will still be in danger. Treating only the superficial wounds won’t save your life. Dealing with such injuries takes more time and care, as well as professional help. You therefore need Second Order changes to heal and completely recover from more serious problems. Second Order changes take more time, but eventually the whole person is healed, inside and out.

You may be tempted to skip over the First Order changes and go straight to the Second Order changes. Carrying our analogy further illustrates why this is a bad idea. Focusing only on the internal injuries—with “Second Order” care—would not be effective because you’d die of hemorrhage or shock before treatment for the internal injuries could begin. Thus, both first- and Second Order changes play a crucial role in healing.

Transition changes serve as the bridge between First and Second order changes and contain elements of both types. We will look more closely at Transition changes in chapter 5

## Exercise 2: First Order, Transition, and Second Order Changes

The following exercise will help you better understand the concepts of First Order, Transition, and Second Order changes. Don't worry if the differences still seem a bit unclear. The information and exercises in chapters four, five, and six will make them clear. Right now, we simply want you to have a general idea of these concepts in preparation for the work in the coming chapters.

The **behaviors** listed below are ones typically taken by a person who is attempting to lose weight. In the space next to each behavior, mark whether you think it is a First Order, Transition, or Second Order change. Our answers are upside down at the bottom of the page. **F** = First Order, **T** = Transition, and **S** = Second Order.

1. \_\_\_\_\_ Joining a support group.
2. \_\_\_\_\_ Buying healthier groceries, such as fruits and vegetables.
3. \_\_\_\_\_ Planning weekly menus that are enticing, yet nutritious, low in fat, and include some favorite foods.
4. \_\_\_\_\_ Attending an overeaters support group regularly.
5. \_\_\_\_\_ Looking at how stress influences your eating.
6. \_\_\_\_\_ Looking at the feelings you have when you want to overeat.
7. \_\_\_\_\_ Planning what to do in case of a relapse.
8. \_\_\_\_\_ Buying some clothes in a smaller size than currently fits as an incentive.
9. \_\_\_\_\_ Researching various weight-loss programs to see which ones work.
10. \_\_\_\_\_ Getting rid of all candy and other sweets in the house, as well as fattening junk foods like chips.
11. \_\_\_\_\_ Determining what things in your life seem to impel you to eat too much.
12. \_\_\_\_\_ Keeping a personal daily journal or diary.
13. \_\_\_\_\_ Counting calories.
14. \_\_\_\_\_ Starting an exercise routine.
15. \_\_\_\_\_ Choosing healthy restaurants.
16. \_\_\_\_\_ Keeping a food diary.

**Answers:**  
1. F 2. F 3. T 4. S 5. S 6. S 7. S 8. T 9. F 10. F 11. S 12. S 13. F 14. T 15. T 16. T

## **In Conclusion**

In this chapter, you've looked at the process of change. You've learned more about how you have moved through this process at other times in your life. We have also introduced you to three kinds of change: First Order, Transition, and Second Order.

All of your work in this and the previous chapters has been important and necessary to set the stage for actually addressing and effectively dealing with your problem with cybersex behaviors. In the next chapter, we will help you take the first steps needed to get control of your cybersex behaviors. The final chapters of the book will help you make these changes permanent.