PROBLEM GAMBLING PREVENTION
MASSACHUSETTS CENTER OF EXCELLENCE

Applying Evidence-Based Models to Problem Gambling Prevention
Stages of Change, Motivational Interviewing, & Diffusion of Innovation

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MCOE INTRODUCTION

DISCLAIMER

Introducing Today's Presenters

Jacqueline Dick MS.
Project Director

**Haner Hernandez, PhD
CPS, CADCII, LADCI**
Training and Technical
Assistance Associate

**Sarah Jerome,
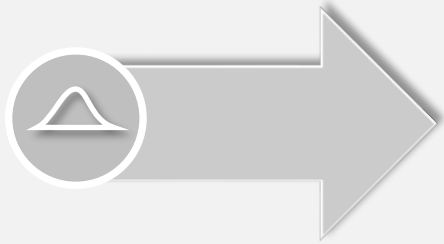MPH, MA**
Training and Technical
Assistance Associate

PROBLEM
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Introductions and Question

Please put in the chat:

✓ Organization

✓ Position Title

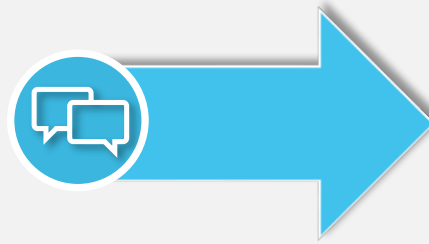✓ What does change mean to you?

Key Objectives

01 — Describe the Diffusion of Innovations (DOI) theory.

02 — Describe the Trans-theoretical Model of Behavior Change and the five stages of change.
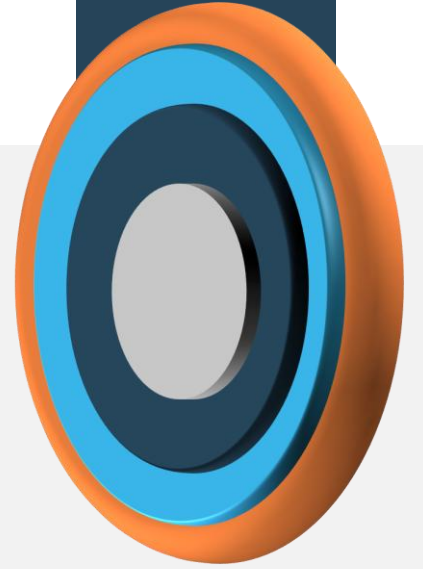
03 — Discuss Motivational Interviewing (MI) and its application to Behavior Change.

04 — Identify at least 5 strategies and techniques for applying evidence-based models into problem gambling prevention.

Evidence-Based Models

Evidence-based prevention strategy. Programs, policies or other strategies that have been evaluated and demonstrated to be effective in preventing health problems based upon the best-available research evidence, rather than upon personal belief or anecdotal evidence.

The U.S. Preventive Services Task Force

What are the theories we will discuss

Diffusion of Innovation
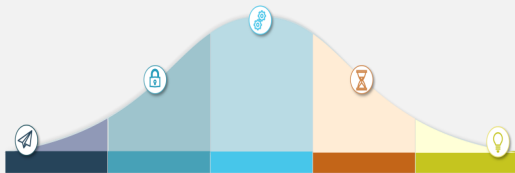
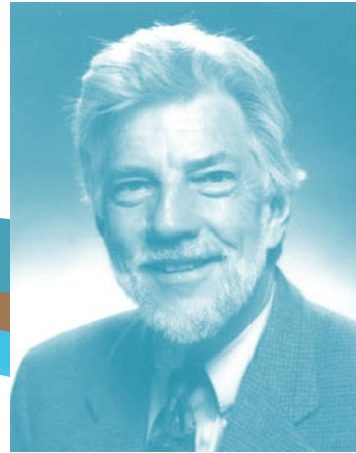Trans-Theoretical Model (Stages of Change)

Motivational Interviewing

Diffusion of Innovations
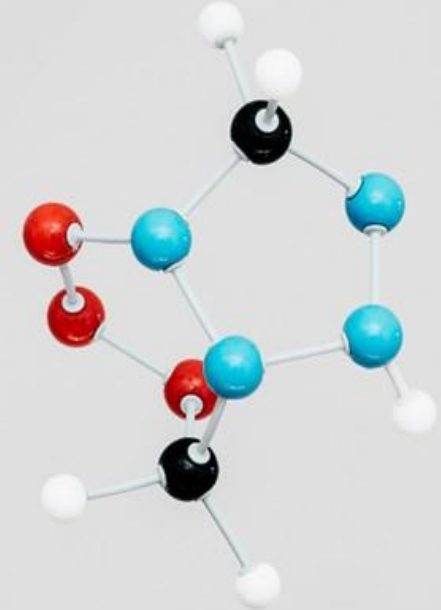## The Roger's Adoption and Innovation Curve

Everett M. "Ev" Rogers defined diffusion as "the process in which an innovation is communicated through certain channels over time among the members of a social system". The Diffusion of Innovation (DOI) Theory postulated by E.M. Rogers, is a profound theory in social science.

Diffusion of Innovation Theory

Diffusion of Innovation Theory refers to how and when individuals adopt new ideas. This theory guides us in considering two things:
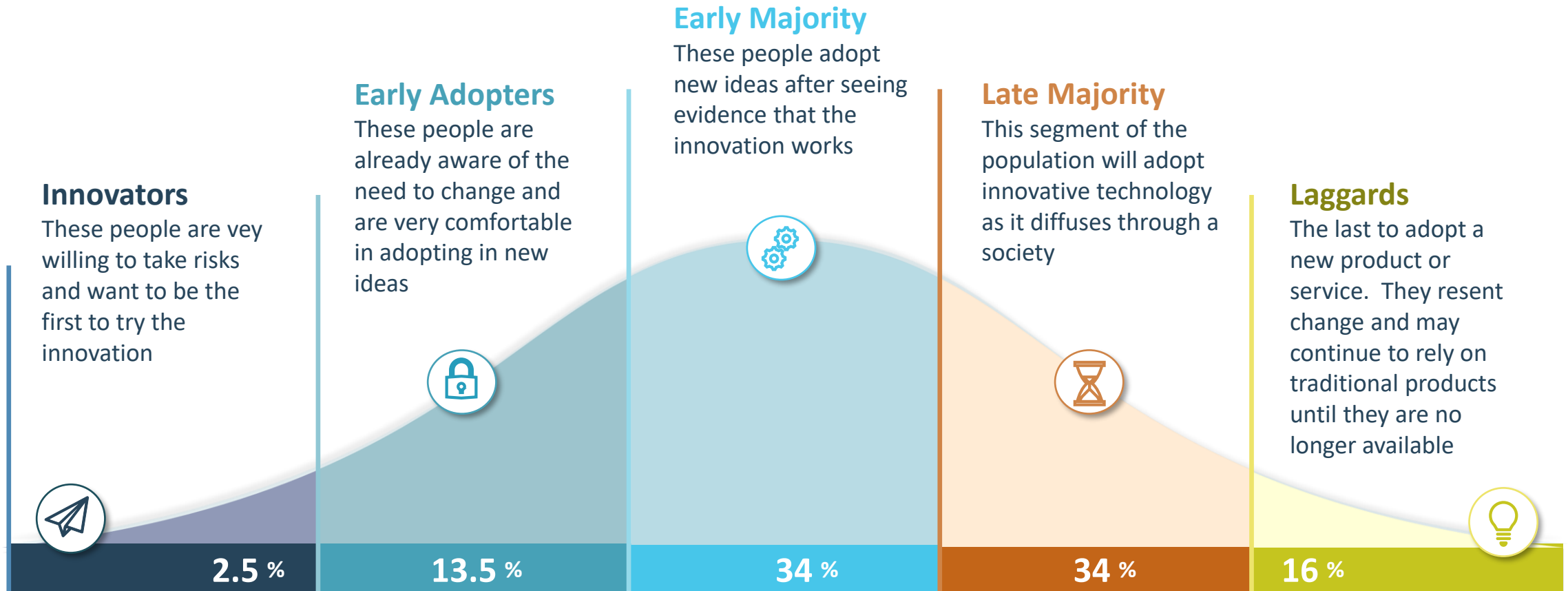
1. How to market innovations so that we can effectively reach out to those who may be more intrigued about new ideas and willing to try them, and

2. Where do our audience(s) look for new ideas and who can influence or persuade them to take up a new idea.

(E.M. Rogers, 1963)

The Roger's Adoption and Innovation Curve

Diffusion of Innovation Theory categorizes members of a given group into five types of idea adoption:

Early Majority
These people adopt new ideas after seeing evidence that the innovation works

Early Adopters
These people are already aware of the need to change and are very comfortable in adopting in new ideas

Late Majority
This segment of the population will adopt innovative technology as it diffuses through a society

Innovators
These people are vey willing to take risks and want to be the first to try the innovation

Laggards
The last to adopt a new product or service. They resent change and may continue to rely on traditional products until they are no longer available

| 2.5 % | 13.5 % | 34 % | 34 % | 16 % |

Source: Iqbal, M., & Zahidie, A. (2022). Diffusion of innovations: a guiding framework for public health. *Scandinavian journal of public health*, *50*(5), 533-537.

Innovators

- **This group of individuals sets the trends – they are pioneers. They may be researchers, thought leaders in technologies, labor, health, or successful early implementers with impressive results.**

- **Early adopters may look to innovators for new ideas and see how these new ideas play out.**
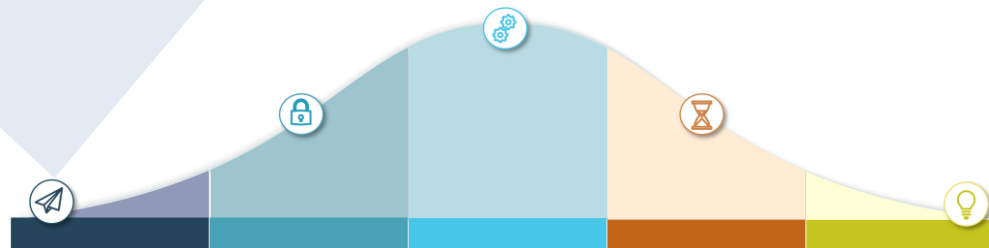
Early Adopters

- **This group often looks to innovators to determine whether adopting a new idea or system is worthwhile. The early adopters are often the "beta test" group. Sure, the innovators may have great ideas, but will the ideas really work?**

- **Enticed by the appeal of what the innovators have brought to light, early adopters take the challenge up and create their own experiential body of evidence.**
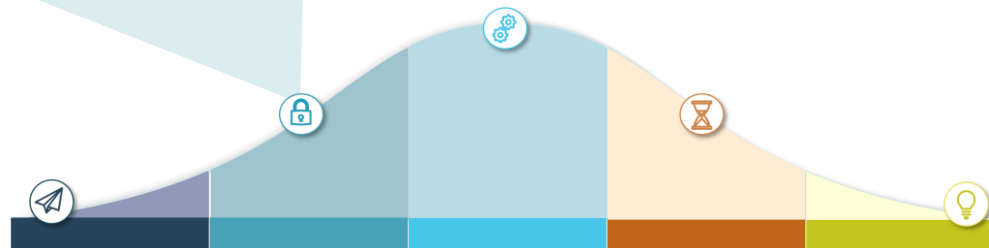
Early Majority

- **This This group holds back a bit longer when a new idea or action is presented, waiting to see whether it has worked for the early adopters. Questions:**

- **Have all the obstacles or hurdles been overcome through the trials and errors of the early adopters?**

- **What can they learn from the early adopters that will make their path easier?**

- **Have the early adopters been successful?**

- **Is there clear evidence that the idea has merit and will result in benefits for this group?**
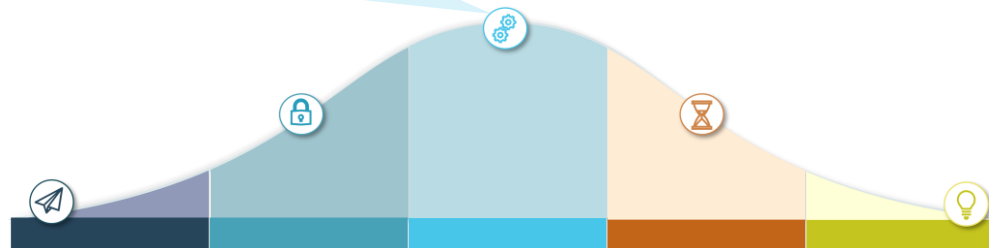
Late Majority

- The Late Majority will wait to see whether the idea has taken hold in the early majority – they need more convincing and will look to the early majority to show them that the idea is worthy.

- Once they deem the idea worthy, they don't want to be left out. If the early majority has clearly accepted and is adopting the innovation, they will be on board.
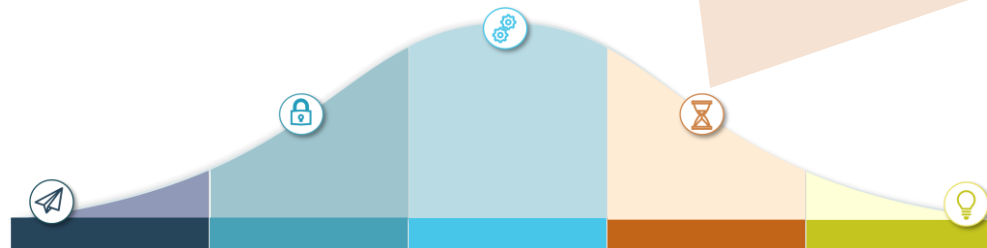
Laggards

- **This group may or may never take action.**

- **They will probably have the most resistance to an idea or action either because of disinterest or because of long held and entrenched beliefs.**

- **This doesn't mean that we should not try to engage them.**
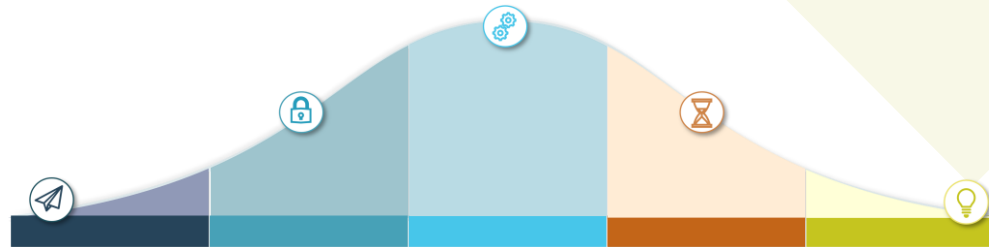
Implementation Considerations

Question

How could this model inform your practice moving forward?

Implementation Considerations

Question

*In the field of problem gambling prevention, what are some new and existing innovations?*

The Transtheoretical Model
(often referred to as the "stages of change")

Among many other considerations, James Prochaska and Carlo DiClemente understood that individuals go through a logical series of decision changes on the way to adopting a new behavior.

The Transtheoretical Model
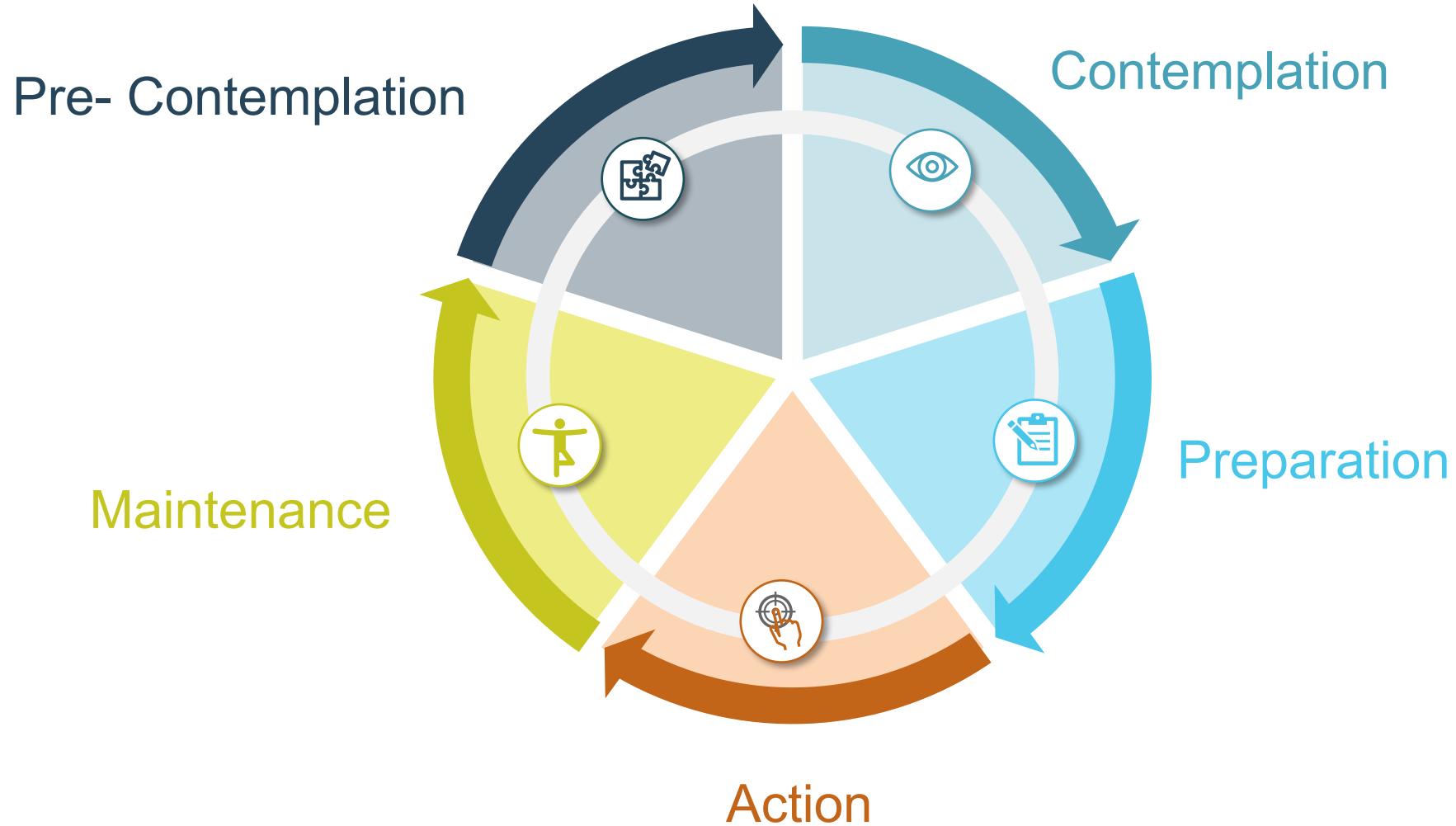
(Prochaska & DiClemente, 1982)

Important Considerations

✓ Change is a Process, Rather than an Event.

✓ Should Never be Driven by Punitive Measures.

✓ Change is Challenging and Rewarding.

✓ Involves Cognitive and Behavioral Processes.

✓ Has been Applied to Individuals, Organizations and Communities.

Pre-Contemplation Stage

Key Characteristics:

- No intention to change behavior;

- Individual with the problem can be aware, unaware, or under-aware of problem;

- Families, friends, and neighbors are often more aware of problem than person who has it!; and

- People/systems will use influence, threats, and/or coercion to produce change.

Contemplation Stage

Key Characteristics:

- Individual is aware that problem exists;

- Seriously thinking about making change;

- Has not yet made a full commitment to change;

- In this stage the pros and cons are weighed: What's the problem and what are the potential solution(s)?; and

- *Key Question (WIFM): What's in it for me?*

Preparation Stage

Key Characteristics:

- Development of behavioral intention and goal(s);

- Intend to take action within the next month;

- May have acted unsuccessfully within the last year;

- Some behavior change may be observed (e.g., gamble less, smoke fewer cigarettes, use less cocaine, etc.); and

- Key element of stage: behavioral intent.

Action Stage

Key Characteristics:

- Clear goal: overcome identified problem;

- Successful alteration of behavior;

- Period of time: 3 to 6 months;

- Individual makes modifications to behavior, experience, and/or environment;

- Involves overt behavioral changes; and

- Requires knowledge, commitment of time, energy, and resources (Recovery Capital).

Maintenance Stage
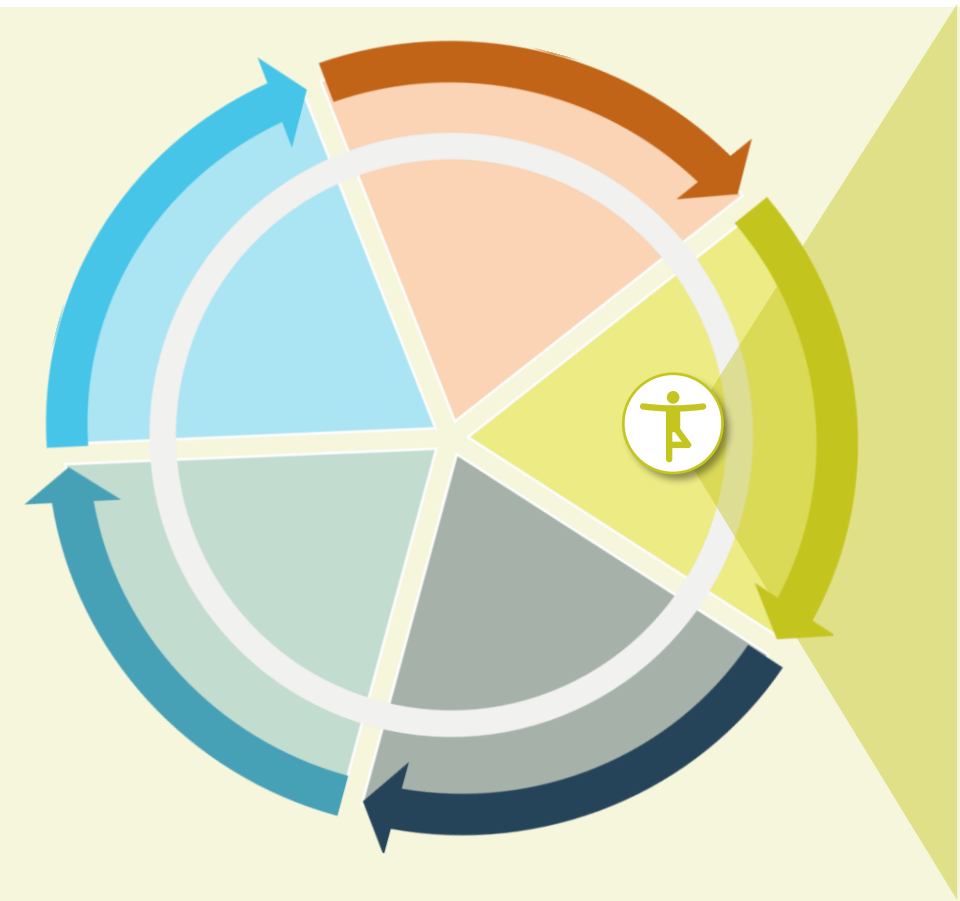
Key Characteristics:

- Continuation of newly-adopted behavior for more than 6 months;

- Actively engaged in Wellness and/or Recovery;

- Support network, recovery community; and

- Knowledge/Resources and Lifelong commitment.

Implementation Considerations

?

Poll Question

Can an individual be in more than one behavior stage?

Implementation Considerations

Question

How are you (or how might you) use Stages of Change to facilitate conversations and change?

Motivational Interviewing

Introduced in 1983 by clinical psychologists William R. Miller and Stephen Rollnick, motivational interviewing (MI) is a collaborative, person-centered way of having conversations about change.

Motivational Interviewing

Poll Questions

- *What level of motivational interviewing training have you received?*

- *How often do you use Motivational Interviewing in your work?*

Motivational Interviewing

Plan

Evoke

Focus
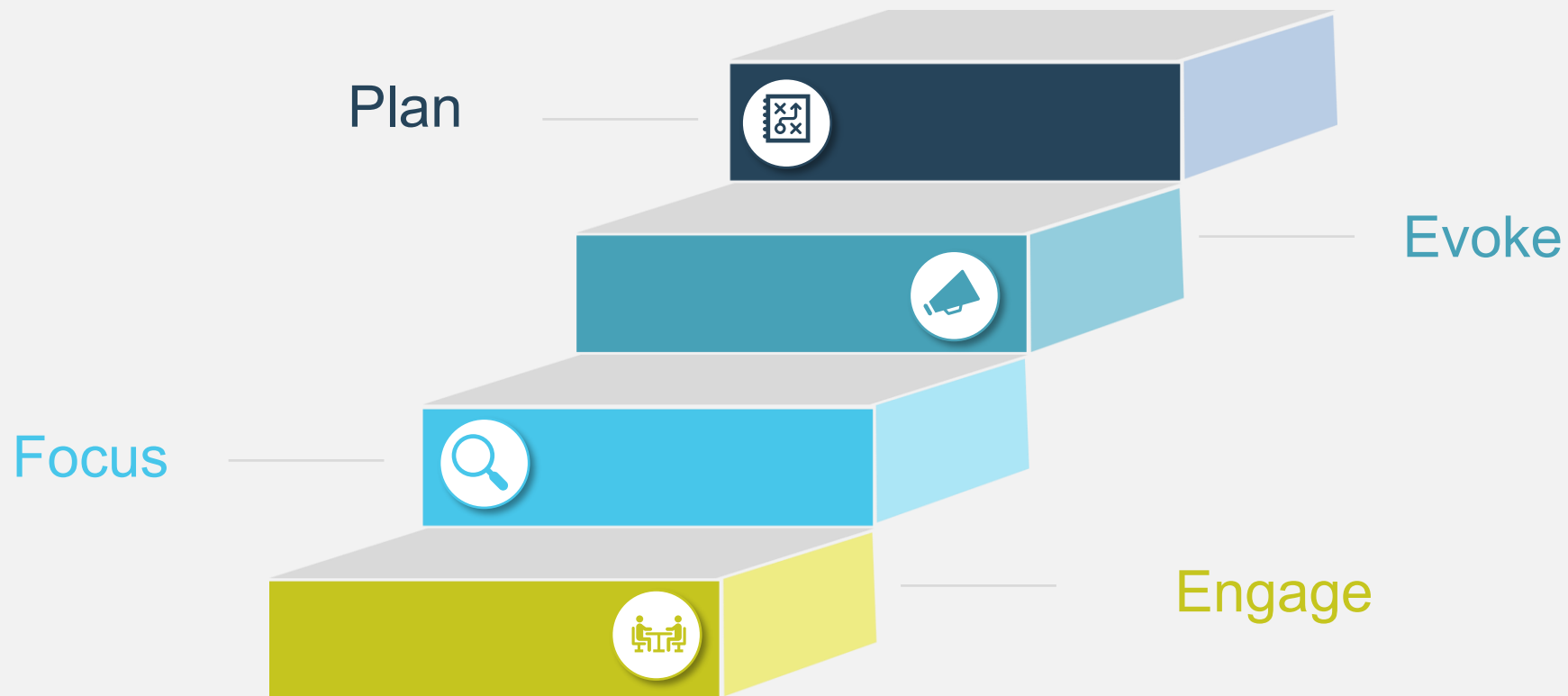
Engage

Motivational Interviewing

Engage

Engagement is used to involve the participant in talking about issues, concerns and hopes, and to establish a trusting relationship- using open ended questions and listening actively.

Motivational Interviewing

Focus

Focus is used to narrow the conversation to habits or patterns that clients want to change-- Ask where the person wants to go
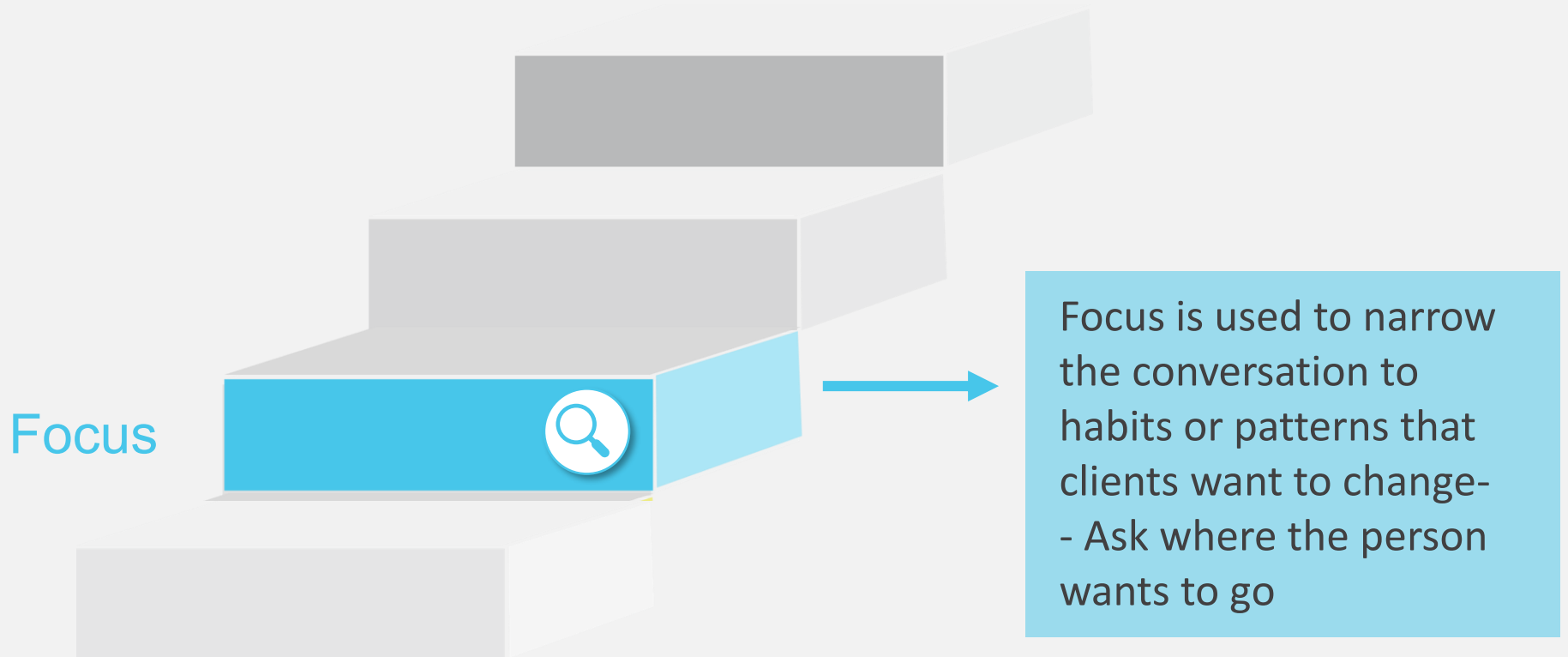
Motivational Interviewing

Evoke

Evoking this focuses on the individual's personal motivation for change and is used to elicit motivation for change by increasing sense of the importance of change, their confidence about change, and their readiness to change.

Motivational Interviewing

Planning used to develop the practical steps clients want to use to implement the changes they desire- Listen to and respect what the person wants and offer help accordingly.

Plan
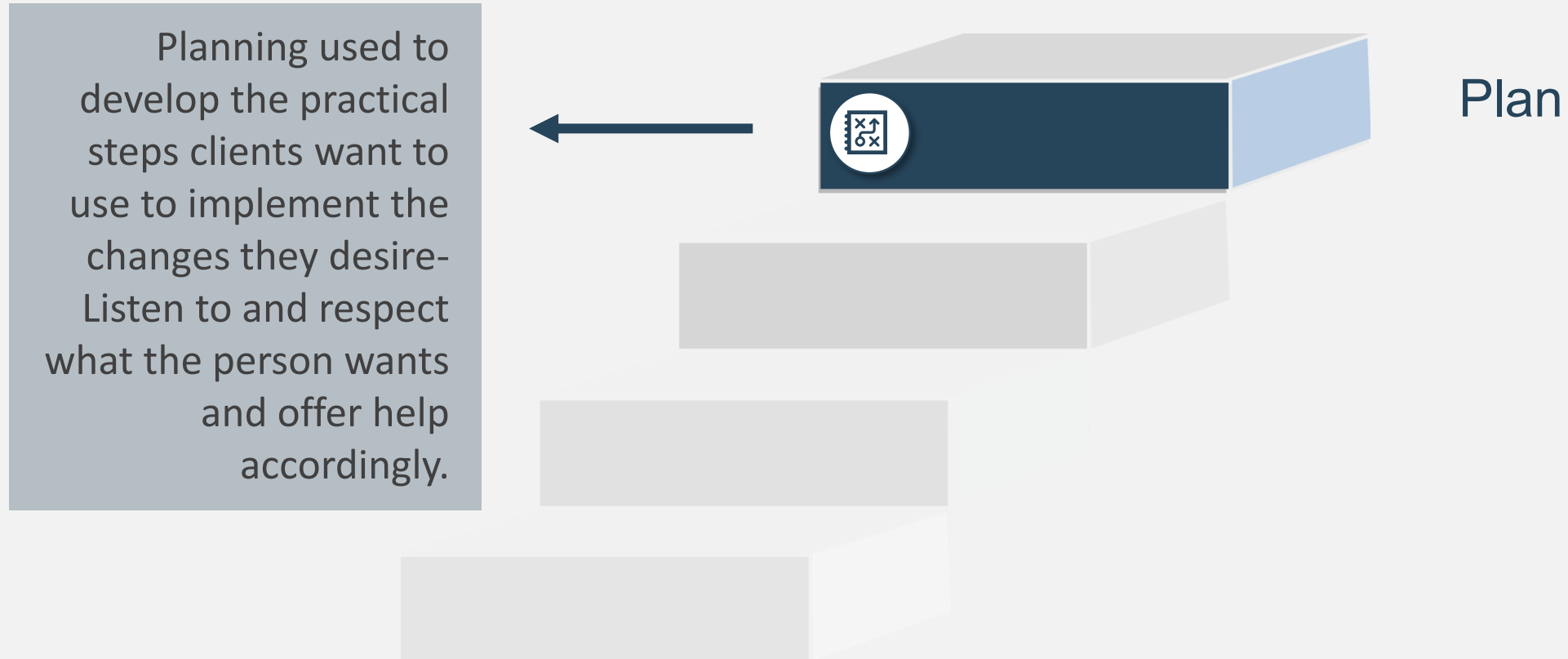
Spirit of Motivational Interviewing

Collaborative

Develop a partnership in which the individual's expertise, perspectives, and input are central to conversations

Foster and encourage power sharing

Evocative (not educational)

Motivation for change resides within each person

Enhance motivation by drawing on the individuals' perceptions, experiences, and goals

Spirit of Motivational Interviewing

Autonomous (not authoritative)

Respect the persons right to make informed changes

Individuals are responsible for their choices and outcomes

Emphasize their control and choice

Compassionate
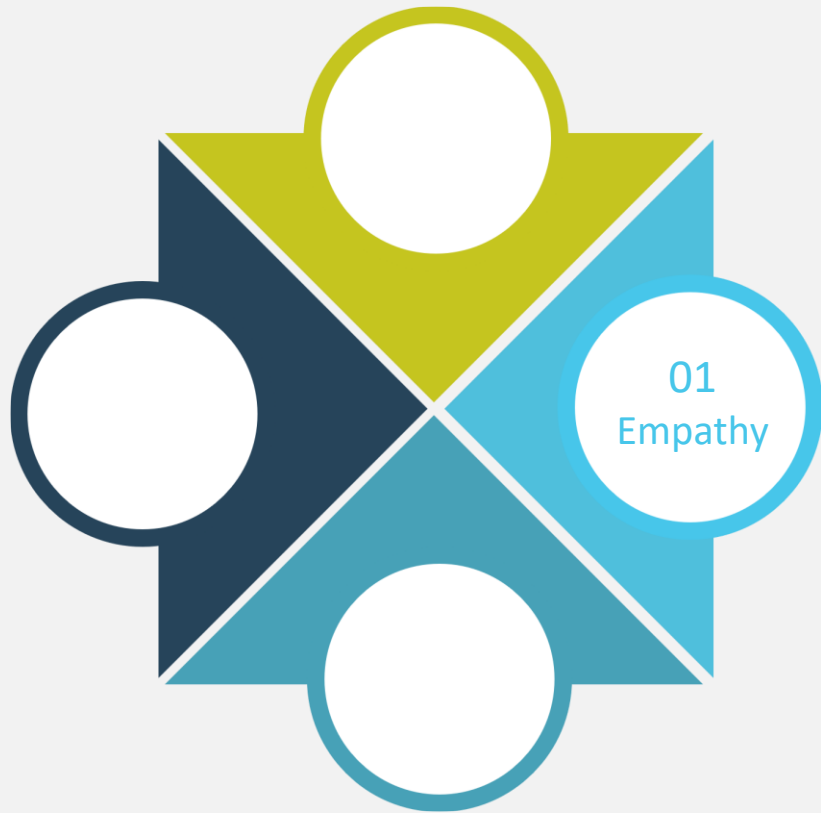
Empathy for the experience of others

Belief and commitment to act in the best interest of all peers

Guiding Principles

Express Empathy

Develop Discrepancy

Roll with Resistance

Support Self-Efficacy

01 Empathy

02 Discrepancy

03 Resistance

04 Self-Efficacy

Guiding Principles

Express Empathy

Assumes that another person's perspectives are understandable, comprehensive, and valid Communicates acceptance without judgment, which facilitates change.   *Ambivalence is normal.*

Skillful reflective listening is fundamental to expressing empathy:

- ✓ Ask clarifying questions
- ✓ Good eye contact
- ✓ Responsive facial expression
- ✓ Body orientation
- ✓ Verbal and nonverbal communication

Guiding Principles

Develop Discrepancy

Developing discrepancy refers to the gap between an individual's current behavior and their broader goals or values.

The idea is that when people become more aware of the inconsistency between their present actions and their future aspirations, they may be more motivated to change their behavior.

02
Discrepancy

Guiding Principles

Develop Discrepancy

Identify the Gap: Help the person recognize the difference between where they are (their current behavior) and where they want to be (their desired outcomes or values

Eliciting Self-Motivational Statements: Guide individuals to express their own reasons for change you can enhance the discrepancy. such as, "I want to be healthy for my kids," highlight the person's internal desire to change, making the discrepancy more vivid and personal.

Evoking Emotional Responses: Reflect on how the current behavior negatively impacts their goals, values, or relationships, and also recognizing how change could align with their deeper aspirations.

Reducing Defensiveness: It's important to use a non-confrontational and empathetic approach. The goal is to facilitate the person's own recognition of the discrepancy, which reduces defensiveness and encourages self-driven change

Guiding Principles

Roll with Resistance

Individual: I don't plan to quit gambling any time soon.
Coach: You don't think that abstinence would work for you right now.

OR

Individual: My spouse is always nagging me about my gambling and is always calling me a compulsive gambler. It really bugs me.
Coach: It sounds like your spouse really cares about you and is concerned, although it is being expressed in a way that makes you angry.

Guiding Principles

Support Self-Efficacy

Individuals are responsible for choosing to change and then carrying out actions to do so

OARS Strategies Used in MI

Open-ended questions

Affirmations

**Reflective listening**

Summarizing

Using Ruler of Confidence

Can be a useful tool to explore and enhance discrepancy as part of the behavior change process.

It's typically a scale from 1 to 10, where 1 represents "not at all confident" and 10 represents "extremely confident." The person is asked to rate their confidence level in making the change.

On a scale of one to ten, how confident are you that you will not go to the casino next Saturday or Sunday? If the individual says 7 then the coach asks what it would take to be a 9 or 10 on confidence.

It means that to get to a 9 or 10 the goal might need to be changed such as not going to the casino one of the two days.
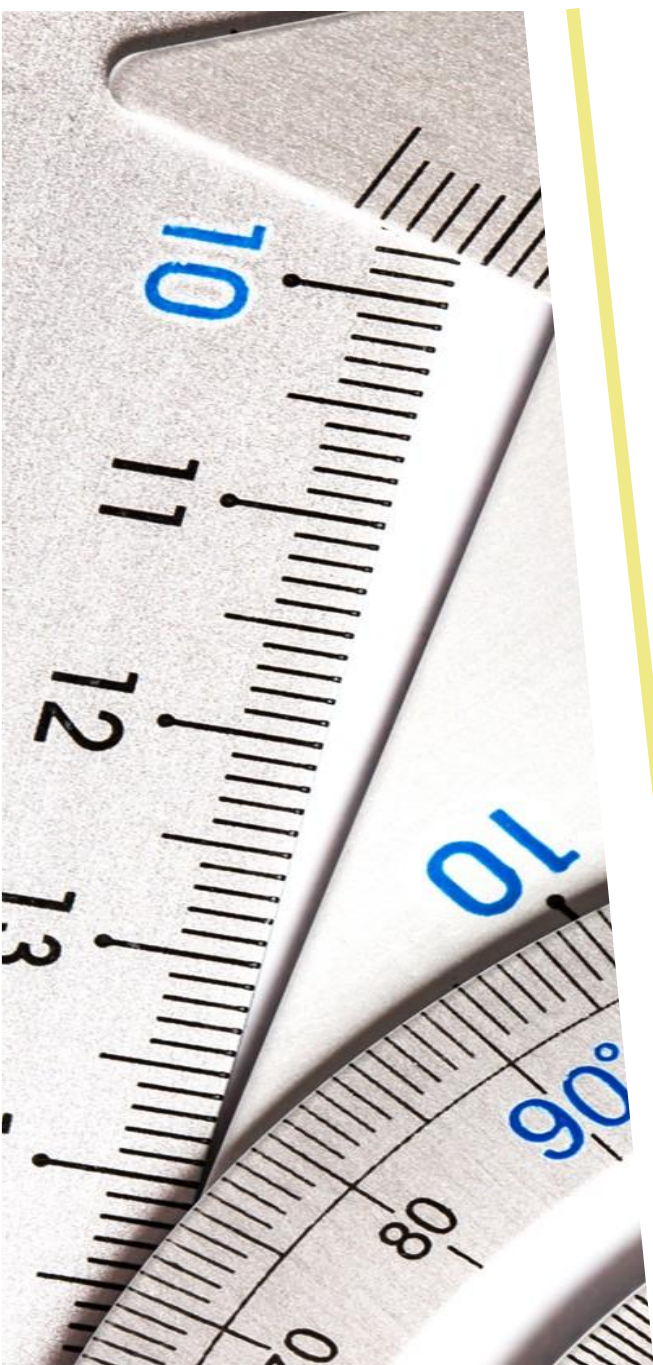
Change talk – are you hearing this?

Desire: I wish I could _____

Ability: I could probably cut back….

Reasons: I want to save some money

Need: I want to send my child to college

Commitment: I will, I promise, I am ready to….

When you hear change talk you're on the right track. If you find yourself arguing for change and the person defending the status quo, you're off course.

Case Study: Angelica

You have a new client, Angelica. Angelica has lived in this country for 5 years and lives alone. She met some friends from the restaurant she works at and has recently been talking about going to the casinos near her town with some of her friends. She mentions that she is often lonely and that going to the casino with friends makes her feel less lonely. However, she mentions to you that it has become expensive when she loses, and this means she is not able to save towards her dream. She hopes to pay for her children to come to the US and go to college.

Questions

1. In relation to gambling less, what stage of change is Angelica in?
   (pre-contemplation, contemplation, preparation, action, maintenance)

Case Study: Angelica

You have a new client, Angelica. Angelica has lived in this country for 5 years and lives alone. She met some friends from the restaurant she works at and has recently been talking about going to the casinos near her town with some of her friends. She mentions that she is often lonely and that going to the casino with friends makes her feel less lonely. However, she mentions to you that it has become expensive when she loses, and this means she is not able to save towards her dream. She hopes to pay for her children to come to the US and go to college.

Questions

2. Using MI, how would you engage Angelica in this conversation *(using the strategies and skills we discussed)?*

It is *not* MI if your approach

- Argues

- Offers direct advice

- Uses an authoritative or "expert" stance

- Does most of the talking

- Tries to trick people into doing what you want them to do

- Is punitive or coercive

Questions

We Value Your Feedback!

Your input helps us improve and make future sessions even better.
Please take 2 minutes to complete our evaluation survey.

Scan the QR code or click the evaluation link in our chat.

Thank you for helping us grow!

Upcoming MCOE PGP Health Equity Academy Trainings

Title	Date and Time
Applying a Public Health Approach to Problem Gambling Prevention	February 24, 2025 1– 3pm EST
Engaging Black Men and Boys to Prevent Problem Gambling	March 13, 2025 1– 2:30pm EST

We Are
on Social Media!

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References

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MUCHAS GRACIAS

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