

The *University of Rhode Island Change Assessment Scale*¹ (URICA) is based on the *Transtheoretical Model* (TTM) of intentional behavior change. The TTM posits that “behavioral change can be thought of as occurring as a progression through a series of stages” (see below). The URICA is applicable in a variety of mental health and addiction problem areas.

The Stages of Change (Precontemplation, Contemplation, Preparation, Action, and Maintenance)

Precontemplation: Individuals in the Precontemplation stage are not thinking about or intending to change a problem behavior (or initiate a healthy behavior) in the near future (usually quantified as the next six months). Precontemplators are usually not armed with the facts about the risks associated with their behavior. Additionally, many individuals make unsuccessful change attempts, becoming discouraged and regressing back to the Precontemplation stage. The inclusion of the Precontemplation stage represents a significant contribution of the TTM, as individuals in this stage comprise a large proportion of individuals engaged in risky or unhealthy behaviors. In comparison to many traditional, action-oriented theories of behavior change, which view individuals in this stage as resistant and unmotivated, the TTM can be useful in guiding treatment and prevention programs by meeting the needs of these individuals, rather than ignoring them.

Contemplation: An individual enters the Contemplation stage when he or she becomes aware of a desire to change a particular behavior (typically defined as within the next six months). In this stage, individuals weigh the pros and cons of changing their behavior. Contemplators also represent a large proportion of individuals engaged in unhealthy behaviors, as ambivalence between the pros and cons of change keeps many people immobilized in this stage. Resolving this ambivalence is one way to help Contemplators progress toward taking action to change their behavior.

Preparation: By the time individuals enter the Preparation stage, the pros in favor of attempting to change a problem behavior outweigh the cons, and action is intended in the near future, typically measured as within the next thirty days. Many individuals in this stage have made an attempt to change their behavior in the past year, but have been unsuccessful in maintaining that change. Preparers often have a plan of action, but may not be entirely committed to their plan. Many traditional action-oriented behavior change programs are appropriate for individuals in this stage.

Action: The Action stage marks the beginning of actual change in the criterion behavior, typically within the past six months. By this point, where many theories of behavior change begin, an individual is half way through the process of behavior change according to the Transtheoretical Model. This is also the point where relapse, and subsequently regressing to an earlier stage, is most likely. If an individual has not sufficiently prepared for change and committed to their chosen plan of action, relapse back to the problem behavior is likely.

Maintenance: Individuals are thought to be in the Maintenance stage when they have successfully attained and maintained behavior change for at least six months. While the risk for relapse is still present in this stage, it is less so, and as such individuals need to exert less effort in engaging in change processes.

Scoring (The scoring for the URICA takes into consideration that raw scores will always be skewed because people tend to under-endorse precontemplation questions and over-endorse action and maintenance questions. Therefore, there are two ways to score and interpret the URICA: Profiles and Readiness Score. [Readiness Scoring is described below. . . . Information about Profile Scoring is available at http://www.umbc.edu/psyc/habits/content/ttm_measures/urica/scoring.html].)

Readiness Score: Scoring with profiles utilizes score totals for the stages, whereas the other scoring option, the Readiness Score, utilizes means. Using means is more applicable across populations and samples and may be the best way for you to use the URICA to understand readiness in your study or group. The Readiness Score was created for Project MATCH because it was not feasible to do clusters (too many groups were needed). Instead, a second order factor analysis was done using means. The range of possible readiness scores is +2 to +14. In project MATCH, the mean was +9 and +9.7 in the aftercare arm of the study.

Uses of the Readiness Score: The readiness score derived from the URICA can be used prior to treatment to predict outcomes. However, when the scores from the URICA are being used to indicate progress during treatment or as end-of-treatment predictors of drinking outcomes, action and maintenance subscale scores and not the readiness score should be used. Remember, though, that these subscale scores represent attitudes and activities related to the stages of change and not precisely state status. The shifts in subscale scores are associated with the shifting people go through during the process of change, which is not a linear, single variable. Further information is available in the article cited in Footnote 1.

Calculating the Readiness Score: Calculating the Readiness Score is done by calculating the means for precontemplation responses, contemplation responses, action responses and the struggling to maintain responses. Once means are found for each of the stage subscales, the mean from the precontemplation is subtracted from the summation of the other three stages. Below you will find grids showing which questions are used to calculate each of the subscale totals, the number to divide by to obtain the mean and the formula below each grid to calculate the readiness score. Remember, if you alter the order of the questions from the order already used in our versions of the URICA, you must adjust the grid to account for changes in numbering to be certain the questions are correctly linked to the stages.

Cut-off scores: Cut-off scores can be created for the readiness score, but it is important to consider your population and how conservative you want to be. Cut-off scores are essentially arbitrary and you should be thinking about the stages as least ready, middle, and most ready. For the general population, the following cut-off scores may be appropriate:

8 or lower classified as Precontemplators; >8 to 11 classified as Contemplators; >11 to 14 classified as Preparers into Action Takers. For intensive service populations, it may be more appropriate to use only score in the range of 12 to 14 to classify those in preparation and action.

	Precontemplation	Contemplation	Action	Maintenance
Question Numbers:	1	2	3	6
	5	4 (omit)*	7	9 (omit)*
	11	8	10	16
	13	12	14	18
	23	15	17	22
	26	19	20 (omit)*	27
	29	21	25	28
	31 (omit)*	24	30	32
Total:				
Divide by:	7	7	7	7
Mean:				

*For the questions that say “(omit),” do not include them in your summation of scores for each stage subscale.

To obtain a Readiness to Change score, first sum items from each subscale and divide by 7 to get the mean for each subscale. Then sum the means from the Contemplation, Action, and Maintenance subscales and subtract the Precontemplation mean ($C + A + M - PC = \text{Readiness}$).

Excerpted and adapted from content published by the HABITS Lab—University of Maryland, Baltimore County (<http://www.umbc.edu/psych/habits>)

¹DiClemente CC, Schlundt D, & Gemmell L. Readiness and stages of change in addiction treatment. *American Journal on Addictions*, 13:103-119, 2004.

UNIVERSITY OF RHODE ISLAND CHANGE ASSESSMENT SCALE

Each statement below describes how a person might feel when starting therapy or approaching problems in their lives. Please indicate the extent to which you tend to agree or disagree with each statement. In each case, make your choice in terms of how you feel right now, not what you have felt in the past or would like to feel. For all statements that refer to your "problem," answer in terms of problems related to _____. The words "here" and "this place" refer to the place of treatment. indicate problem

There are FIVE possible responses to each of the items in the questionnaire.

Circle the number that best describes how much you agree or disagree with each statement.

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Undecided</i>	<i>Agree</i>	<i>Strongly Agree</i>
1. As far as I'm concerned, I don't have any problems that need changing.	1	2	3	4	5
2. I think I might be ready for some self-improvement.	1	2	3	4	5
3. I am doing something about the problems that had been bothering me.	1	2	3	4	5
4. It might be worthwhile to work on my problem.	1	2	3	4	5
5. I'm not the problem one. It doesn't make much sense for me to be here.	1	2	3	4	5
6. It worries me that I might slip back on a problem I have already changed, so I am here to seek help.	1	2	3	4	5
7. I am finally doing some work on my problem.	1	2	3	4	5
8. I've been thinking that I might want to change something about myself.	1	2	3	4	5
9. I have been successful in working on my problem, but I'm not sure I can keep up the effort on my own.	1	2	3	4	5
10. At times my problem is difficult, but I'm working on it.	1	2	3	4	5
11. Trying to change is pretty much a waste of time for me because the problem doesn't have to do with me.	1	2	3	4	5
12. I'm hoping this place will help me to better understand myself.	1	2	3	4	5
13. I guess I have faults, but there's nothing that I really need to change.	1	2	3	4	5
14. I am really working hard to change.	1	2	3	4	5
15. I have a problem and I really think I should work on it.	1	2	3	4	5
16. I'm not following through with what I had already changed as well as I had hoped, and I'm here to prevent a relapse of the problem.	1	2	3	4	5
17. Even though I'm not always successful in changing, I am at least working on my problem.	1	2	3	4	5
18. I thought once I had resolved the problem I would be free of it, but sometimes I still find myself struggling with it.	1	2	3	4	5
19. I wish I had more ideas on how to solve my problem.	1	2	3	4	5
20. I have started working on my problem, but I would like help.	1	2	3	4	5
21. Maybe this place will be able to help me.	1	2	3	4	5
22. I may need a boost right now to help me maintain the changes I've already made.	1	2	3	4	5
23. I may be part of the problem, but I don't really think I am.	1	2	3	4	5
24. I hope that someone here will have some good advice for me.	1	2	3	4	5
25. Anyone can talk about changing; I'm actually doing something about it.	1	2	3	4	5
26. All this talk about psychology is boring. Why can't people just forget about their problems?	1	2	3	4	5
27. I'm here to prevent myself from having a relapse of my problem.	1	2	3	4	5
28. It is frustrating, but I feel I might be having a recurrence of a problem I thought I had resolved.	1	2	3	4	5
29. I have worries, but so does the next person. Why spend time thinking about them?	1	2	3	4	5
30. I am actively working on my problem.	1	2	3	4	5
31. I would rather cope with my faults than try to change them.	1	2	3	4	5
32. After all I had done to try to change my problem, every now and then it comes back to haunt me.	1	2	3	4	5