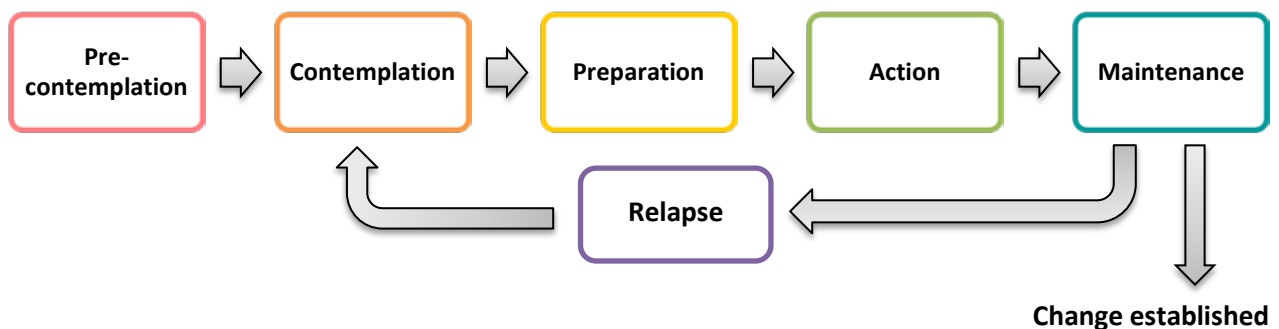


The Stages of Change Model and Talking With Patients

Many fall prevention strategies call for patients to change their behaviours e.g. by attending a fall prevention program, doing prescribed exercises at home, and changing their home environment. Behaviour change can be difficult – but you are well-placed as a GP to assist your patients to better manage change.

Health behaviour change models such as the ‘Stages of Change’ model are widely used to determine patient behaviour and readiness for change in many clinical settings. When talking with a patient, applying the model can help you match your advice about fall prevention to your patient’s stage of readiness.



The Stages of Change model: which stage is your patient in?

Key points to emphasise when talking to your patients

- Stress that **falls can be prevented** and are not just unpredictable. Counter the belief that nothing can be done for falls.
- Identify the many **life-enhancing aspects** of fall prevention, such as maintaining independence and control, and preventing functional decline.
- Focus on the **significant social benefits** associated with a fall prevention program, rather than social stigma attached to programs targeting ‘older people’.
- **Address patient barriers** and objections about fall prevention activities. These may include activity avoidance, fear of falling, fear of injury, lack of perceived ability and fear of exertion.
- Place the emphasis on **fall prevention** rather than fitness exercise.
- Pitch falls prevention programs at **an appropriate level** for the patient.
- Address one problem at a time for patients with multiple risk factors.
- Discuss **partnering the patient** with a peer who has successfully undertaken a fall prevention program, or obtain support from a partner or carer.