
Study of OCD Patients Shows that Motivation to Change is an Indicator in Treatment Outcome

February 6, 2015

A patient's level of motivation and preparedness to change significantly impacts the outcome of treatment, a study conducted at McLean Hospital's **Obsessive Compulsive Disorder Institute (OCDI)** has found.

Data from 424 patients who underwent treatment at the OCDI since 2009 show a direct correlation between their readiness to change and their outcomes in terms of modifying behaviors, according to Jason Elias, PhD, director of research for the Office of Clinical Assessment and Research (OCAR) at the OCDI, and Sadie Cole Monaghan, PhD, research fellow—co-authors of *Stages of Change and the Treatment of OCD*, published in the December 2014 issue of the *Journal of Obsessive-Compulsive and Related Disorders*.

“The project came about by looking at the data collected at the OCDI and looking at factors that might be impacting treatment outcomes,” said Cole Monaghan. “The scale that we used—the University of Rhode Island Change Assessment (URICA) (a self-report measure that represents the different stages of change including pre-contemplation, contemplation, action, and maintenance)—breaks down motivation into a number of components, including feelings, actions taken, and how much one is prepared to change.”

“Evidence from past research in looking at stages of change in anxiety disorders indicates that higher levels of motivation result in better outcomes, so if you're ready to take action in changing a particular behavior, you're going to do better in treatment,” she said, adding that OCD affects around 1% of the population, or 1 in every 100.

“We thought it would be important to look at motivation to change because while we find that many people who go through our program do very well, others who are

in treatment for two or three months do not,” said Cole Monaghan. “We wanted to know why and what was driving that lack of change.”

Researchers at McLean's OCD Institute find motivation to change is tied to treatment outcome

What researchers found, according to Elias, are data that now give clinicians a way to help gauge how patients are perceiving their current problem before entering the program. This is especially important because many times a patient is being admitted because of family pressure, at the urging of an outside therapist, or because they are unhappy with their life situation but not ready to take actionable steps to bring about change.

“Having a better idea of what the patient is experiencing may indicate it’s best to first work on increasing motivation prior to treatment,” he said, “or even suggesting that the patient wait until they feel they are more ready to begin a program. This also helps preserve valuable treatment resources for people who are more ready for change.”

For example, said Elias, “When patients are ready to incorporate changes into their lives, they really drive the therapy. Our role in these cases is to provide the structure and technical expertise to help them follow through on their treatment plans and the outcomes are amazing. The improvement extends way beyond just OCD and affects overall well-being and quality of life.”

“What’s interesting to note,” he said, “is that being in the pre-contemplation stage upon admission does not indicate how treatment will progress. In other words, everyone has a chance to benefit. We are encouraged by what we are learning about enhancing motivation and engagement in the treatment process.”

“The study helps us to identify who’s in what stage and how to better design a treatment plan,” said Elias. “This helps improve the overall success of the program because in addition to our clinical expertise, it now gives us actual data to work from.”

Translational Research

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