Specifying Problems, Specifying Goals

SPECIFYING PROBLEMS

WHAT IS A PROBLEM?
A problem is anything that is of concern to a client, worker, or significant other. A problem is not necessarily something bad. It may be a strength of the client’s to be accessed and/or strengthened. It is probably best to think of a problem as an area of concern.

A properly specified problem has two components: a Definition and a Measurement Plan.

DEFINITION
A problem definition should allow, at a minimum, for a determination of when a problem is present and when it is not. Try to write it in a form approximating that of a dictionary definition. It should look something like this

"[problem name] occurs when [description of behavior] occurs."

A well-defined problem should have the following characteristics:

1. **Observability**. The problem must be defined in such a way that an independent observer can tell when it is occurring. This is fairly easy for overt behaviors. For covert behaviors, however, some form of systematic self-report measure must be utilized (e.g., client counts of thoughts/feelings, self-ratings of intensity of feelings, scores on self-report questionnaires).

2. **Clarity**. Often an initial description of a problem will be vague. A specific and accurate description of a problem can be arrived at by utilizing the following.
   a. Obtain concrete examples of the problem from the client and/or relevant others. For example, "disruptiveness" is a vague problem. By obtaining concrete examples, we can clarify what "disruptiveness" means, e.g., talking out of turn, leaving seat without permission, picking fights with other children, sleeping in class.
   b. Identify the situation or circumstances where the problem occurs, e.g., when, where, and after what does the problem occur. It is important to consider the person in the situation. Certain behaviors may be adaptive in certain situations, but not in others. Certain situations may be so noxious that they may be the appropriate targets for change (i.e., the situation may be the problem).
3. **Increasing.** It is *usually* preferable to define a problem in terms of a desirable behavior to be increased or a desirable situation to be attained. This will make it easier to avoid the *dead man's goal* (discussed subsequently). However, if the problem is the presence of a behavior *and* simply the absence of the behavior would be desirable (e.g., bedwetting), one may define the problem in terms of a behavior to be decreased (e.g., voiding urine in bed) since there would be two positive goal behaviors (i.e., not urinating at all after bedtime or urinating only in the toilet after bedtime).

**MEASUREMENT PLAN**

The measurement plan sets up how one will determine the magnitude (frequency, intensity) of a problem. It involves two elements:

1. **Countability.** This involves specifying the data collection procedure. If something happens, it happens with some frequency. This means that (at least) the frequency of its occurrence can be counted. Additionally, it is often possible to enumerate the duration of a single occurrence of a problem. Over a specified time period, it may be possible to assign a numerical value to the intensity of a problem.

2. **Verifying Sources.** This involves establishing who will determine when, where, and how often (and/or how intensely) the problem occurs. In other words, one must specify who will be responsible for each of the aspects of the data collection procedure.

**EXAMPLE**

Jake's problem is truancy. Over the past six weeks, he has skipped the entire school day six times and cut individual classes nine times. We could say that Jake has a problem with unexcused absences from school. However, it might be better to say that there is a *school attendance* problem. More specifically, he has a problem with *class attendance*. We would then go on to define *appropriate class attendance* as follows:

*Appropriate class attendance occurs when an individual arrives on time for a class period at school and remains in the class until dismissed by the teacher. Class period times are as follows:*

<table>
<thead>
<tr>
<th>Time</th>
<th>Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:25 A.M. to 8:40 A.M.</td>
<td>Home Room</td>
</tr>
<tr>
<td>8:45 A.M. to 9:40 A.M.</td>
<td>1st Period</td>
</tr>
<tr>
<td>9:45 A.M. to 10:40 A.M.</td>
<td>2nd Period</td>
</tr>
<tr>
<td>10:45 A.M. to 11:40 A.M.</td>
<td>3rd Period</td>
</tr>
<tr>
<td>11:45 A.M. to 12:40 P.M.</td>
<td>4th Period</td>
</tr>
<tr>
<td>Lunch - Free Period</td>
<td></td>
</tr>
<tr>
<td>1:20 P.M. to 2:15 P.M.</td>
<td>5th Period</td>
</tr>
<tr>
<td>2:20 P.M. to 3:15 P.M.</td>
<td>6th Period</td>
</tr>
</tbody>
</table>


Note that the definition involves activities that can be observed, that it is specific as to what makes up class attendance, and that it involves a desirable behavior to be increased.

Now, let's try the measurement plan. In this case, we have an extremely detailed plan.

*Each morning Jake will stop at the main office before home room period and pick up an attendance card from the school receptionist. He will present this card to each of his teachers (including home room) at the end of the class period. The teacher will sign the card only if Jake arrived in class on time and stayed throughout the class. At the end of the school day, Jake will hand in his card to the school social worker. The social worker will count and chart the number of periods Jake attended for each school day. If Jake has an excused absence as defined by the school board, this will be counted as if he attended and be so charted by the school social worker. Jake will provide the social worker with a copy of the excused absence form whenever he has an excused absence. The social worker will compare Jake's count with the school attendance records.*

Note that we are counting class periods attended and specifying who will do what.
Prioritizing Problems

1. **Ethical acceptability** of outcome for problem, viz., you may **not** work toward an outcome which is unethical.

2. **Acceptability of problem to client**, viz., the client must agree to work on the problem.

3. **Accessibility** of the concern, viz., if you cannot get at the problem, you cannot work on it.

4. **Danger value** of the current situation, viz., a greater danger to the client and/or others implies a higher priority.

5. **Specificity of problem**, viz., well-defined, concrete problems have higher priority.

6. **Benefit-risk Ratio**. Balance of possible positive to possible negative consequences if problem is resolved, viz., a higher benefit-risk ratio implies a higher priority.

7. **Attainability**. Likelihood that an outcome/goal for the problem can be attained, viz., more attainable outcomes/goals have a higher priority.

8. **Interference value of the current situation** in the client's life, viz., higher interference values imply higher priority.

9. **Likelihood of early visible progress**, viz., to enhance motivation, problems which are likely to show early, rapid improvement should be among the first chosen for intervention.

10. **Prerequisite problem**. Centrality of the concern in a complex of problems, viz., problem must be resolved in order to work on other problems.

11. **Annoyance value of the current situation**, viz., greater annoyance value implies higher probability.

12. **Probable cost of intervention** (time, energy, money, other resources), viz., lower cost implies higher priority.

13. **Relative frequency, duration, and/or magnitude of the problem**, viz., higher frequency, duration, and/or magnitude implies higher priority.

14. **Maintenance of gains**. Likelihood that new behaviors/situation will be maintained after end of intervention, viz., higher likelihood implies higher priority.
SPECIFYING GOALS

A properly-stated goal should consist of a statement encompassing four components:

1. **WHO:** This should be the client;
2. **WILL DO WHAT:** This is the target behavior;
3. **TO WHAT EXTENT:** This is the criterion level for the target behavior;
4. **UNDER WHAT CIRCUMSTANCES/SITUATIONS:** This describes when and where the target behavior is to be carried out.

**Examples:**

**GOAL:** Elwood will call and implement a time out whenever he or Betty Sue calls the other a name.

1. **WHO:** Elwood;
2. **WILL DO WHAT:** Will call and implement a time out (make time out sign, leave room quietly, return after 15 minutes to resume discussion);
3. **TO WHAT EXTENT:** On each occurrence of name calling;
4. **UNDER WHAT CIRCUMSTANCES/SITUATIONS:** When Elwood and Betty Sue are together.

**GOAL:** Betty Sue will reside in a house or an apartment with indoor plumbing within a week.

1. **WHO:** Betty Sue;
2. **WILL DO WHAT:** Reside in a house or apartment with indoor plumbing;
3. **TO WHAT EXTENT:** Within a week;
4. **UNDER WHAT CIRCUMSTANCES/SITUATIONS:** All.

**GOAL:** Jake will take out the garbage when asked by his mother. He will begin the task within 15 seconds of being asked and complete it within four minutes of being asked.

1. **WHO:** Jake;
2. **WILL DO WHAT:** Will take out the garbage;
3. **TO WHAT EXTENT:** Begin within 15 second of request and complete within four minutes of request;
4. **UNDER WHAT CIRCUMSTANCES/SITUATIONS:** When asked by his mother.
CHECKLIST FOR REVIEWING ADEQUACY OF GOALS/OBJECTIVES

1. Goals/Objectives are clearly stated.

2. Whenever possible, goals/objectives should be stated in positive terms, identifying what client should do more of. Try to avoid the dead man's goal (a goal that could be accomplished by a dead person), e.g., "Jake will not leave his seat without permission.").

3. Goals/Objectives are attainable.

4. Goals/Objectives address client concerns; they are meaningful.

5. Goals/Objectives offer both immediate and long-term benefits to clients and significant others.

6. Goals/Objectives will modify circumstances related to presenting concerns.

7. If possible, goals/objectives are identified in the initial interview.

8. Goals/Objectives focus on behavioral/environmental changes rather than indirect effects of change, e.g., improving the quality of a relationship is not a goal, but rather the consequence of specific changes in the behavior of certain individuals.

9. Objectives are identified and their relevance to goals are discussed.

10. Confusion between outcome and process is avoided. A goal/objective is what is to be achieved; it is not how to reach it.

11. Goals/Objectives are defined in such a way that progress is easy to assess.

12. An explicit agreement has been made with client and significant others to pursue goals/objectives.

13. Objectives are personalized; they offer the client control in achieving desired changes.


15. Goals/Objectives are likely to be supported in real-life settings.

16. Achieving goals/objectives will not lead to undesirable consequences for clients or others.

17. Goals/Objectives provide the most effective way of resolving presenting concerns.