The goal and the alliance

Goal-based measures function as both outcome tools and valuable support for the therapeutic alliance throughout the intervention. A research project at Xenzone – awarded seed corn funding by BACP – has proved the benefits of their interactive CoGS tool. Aaron Sefi reports

Using goals in counselling is nothing new, but using a systematic method for recording those goals – and the achievement of them – can offer invaluable insights, both about our clients and the way we operate as practitioners. CoGS (counselling goals system) is an interactive tool that allows young people to feel in charge of their goals and progress, allowing them to input specific, measurable, attainable, realistic and timed (in other words, SMART) personalised goals and track them week by week.

The wide range of both levels of distress and complex issues presented by CYP online often means that support needs are equally complex. A pilot study evaluating the effectiveness of using existing measures in online services' made it clear that a new Goal Based Outcome (GBO) measure tailored specifically to online counselling was needed.

Inspired by the Goal Based Outcome Measure introduced by Duncan Law for use in Child and Adolescent Mental Health (CAMH) services, Xenzone developed CoGS for its CYP online counselling platform KOOTH.com (which provides counselling and support for young people aged 11 to 25 years old across 19 areas of the UK) and its face-to-face services.

Xenzone is not alone in advocating the need for goal-based outcomes: it is an approved measure on the CYP-IAPT agenda. A GBO was also used in the recent randomised controlled trials on school-based counselling.

Why set goals?

From a young person’s perspective, goal setting as part of the therapeutic process holds a number of benefits.

- The ability to articulate a goal can be a significant contributor to change for young people’s emotional and mental health.
- Setting goals with CYP helps them take responsibility for their progress, which is more self-driven and promotes independent action.
- Developing a goal along with a therapist is an important part of forging a strong therapeutic alliance.
- CoGS shows both immediate life goals as well as longer-term therapeutic goals, allowing CYP to work in more manageable, bite-sized chunks. In one young person’s words: ‘The counsellors give you some ideas of the goals you could work on, and when you have a giant problem and turn it into little ones and work on them one by one, the big problem doesn’t seem so bad.’

As practitioners, we can also see the value in setting user-defined goals as a way of telling the world about the benefits of counselling. We gain insight into the client’s perception of therapy and are privy to feedback that offers clarity on the type of issues most frequently presented online.

Our Counselling Goals System allows us to look at how we can improve our service, based on the achievement of goals through our interventions.
CoGS in action

During the counselling process, the counsellor helps the young person set and articulate their goals. The tasks that need to be undertaken to attain their goals are then discussed and the young person can mark their CoG on a scale of 1–10 with regard to how close they are to reaching their goal. This process is en route for one young person in the following diagram, where they can click on the plus sign to indicate progress and eventually register a star for a score of 10.

The following goals are adapted from real goals that young people have set and achieved on KOOTH.

‘I want to work towards being able to write on my friend’s RIP page on Facebook’

‘To tell my teacher about the bullies’

‘To keep tending the wounds’

CoGS is a dynamic tool, designed to sit ‘ever present’ in therapy. Articulating goals through a collaborative discussion, we can enable a meta-narrative to begin to work in therapy. Importantly, the young client has a space to reflect on how the process is going – for instance, whether the goals are still relevant and the tasks are helpful and appreciated. All this can feed in to strengthening the bond, and can enhance the therapeutic alliance as a whole, which in turn can improve outcomes.

Insights from data collection

BACP seed corn research funding has enabled data collection for a research project to better understand the impact of CoGS. During the data collection period, 1,137 goals were collected from 505 young people online by our research partners at the University of Manchester. Meaningful trends and themes have been analysed, and key findings have given invaluable insight.
into the type of CYP profile and presentation that’s most prevalent online and the level of progress that can be made for CYP via online interventions. See figure 1.

It’s worth noting that the category ‘Intrapersonal goals’ accounts for 61 per cent of CYP presentations on KOOTH (see figure 2). This relates to their internal world: their emotional and psychological states, with objectives such as ‘to explore why I feel people don’t like me’. This finding may reflect the introspective young people on KOOTH, who often struggle with face-to-face interactions and prefer communicating online. The prevalence of intrapersonal goals reveals a clear primary focus around personal growth, and specifically around the two key themes of Owning the problem and Exploring thoughts and feelings.

Owning the problem can also be seen as a life goal – taking responsibility for decisions and actions in life that will help achieve the goal set in therapy. Exploring thoughts and feelings is more of a therapy goal – setting a goal around using the counselling to explore thoughts and feelings, primarily in order to understand oneself better (see Cooper and McLeod\(^6\) for more on these distinctions).

‘Goals on self relating to others’ is the second most common category on KOOTH, accounting for 32 per cent of goals. Interestingly, ‘Asking for help (and getting help)’ accounts for 44 per cent of goals in this category ie self-help goals – again to do with ‘owning the problem’. This is possibly reflected in how young people seek out and use KOOTH – in an autonomous and independent way. One young person commented: ‘Setting goals for myself means I can help myself and not rely on anyone else! I think it’s really good so everyone can help other people and they can set their own goals!’

It’s striking how few ‘Interpersonal goals’ are articulated. These goals are about family relationships and friendships ‘out there’ in the world, which the data suggest as less of a focus for young people on KOOTH. It is also a result of our embodied codifying, which pointed to a more meaningful category in ‘self relating to others’. This idea often focused on goals around a client’s expression and activity ‘in the world’ rather than specific relationships.

Feedback from the CYP users of the CoGS system on KOOTH has been positive about how helpful the goals-based outcome system is:
Goal-based measures

Feedback from practitioners confirms this approach:

‘Sometimes a client may want to set a goal that is big and ambitious. We think it is OK to establish that goal, but even better to develop ‘lower order’ goals that can be achieved more quickly, which can lead eventually to the achievement of the big goal.’

Overcoming the challenges of building and operating CoGS

Using outcome measures effectively has long been a challenge for practitioners. So introducing a relatively new way of working – and ensuring it becomes part of the fabric of a practitioner’s work – was always going to be quite an undertaking. Through ongoing discussion and training sessions with practitioners, we also discovered a lot of challenge in how goals in counselling were perceived, with one practitioner asserting:

‘If not handled sensitively, the goal itself may even come across as a barrier to the therapy, as the client may feel that the issue is the “goal” and not the “individual”.’

Another practitioner commented: ‘Sometimes they really find it hard to trust in the change and so are reluctant to move the CoG scores along. When this happens, my ego finds this quite hard to deal with!’

Overarching feedback from the team has been positive: ‘I think that the need and importance of a goal is necessary for all concerned really. I think that online is no different from face to face in that aspect.’

Practitioners have also offered practical advice for making CoGS work for CYP: ‘I think that, for some clients, a goal can be agreed without them needing to see it as being a “goal” as such (ie to speak to their mum etc). We (as a service) need to have it identified as a goal and that it has been achieved as part of the evidence-based practice ethos.’

Xenzone advocates the idea of our practitioners being ‘FIT’, that is to say, operating ‘Feedback Informed Therapy’ (inspired by the work of Scott Miller in psychotherapy research).

CoGS also enables participation on an organisational level, as feedback certainly shapes service delivery. As a service, we routinely collect a range of feedback, including satisfaction questionnaires and end-of-session feedback forms, which can directly inform how young people want their next session to be. Our Counselling Goals System adds to these data and allows us to look at how we can improve our service, based on the achievement of goals through our interventions.

As a practitioner commented: ‘As for the organisation, having an evidence base is key to any approach or business and allows people to clearly see what works and what doesn’t and, of course, why it works.’ And another: ‘Therapy that is all about exploration (only) can feel pointless to some types of people.’

Future plans

At Xenzone, we are keen to share our learning and training on how to effectively use goal-based outcome measures – as a therapeutic tool and basis for service design as well as a hardworking means of measurement.

By continuing to harness and analyse CoGS data on an ongoing basis, to feed into service delivery and design, we’re going to drive genuine user generation of the service model. And there’s an exciting KOOTH CoGS app in the pipeline, which will make it easier for young people to use the CoGS out of session and in face-to-face counselling.
The young client has a space to reflect on how the process is going—for instance, whether the goals are still relevant and the tasks are helpful and appreciated. All this can feed in to strengthening the bond, and can enhance the therapeutic alliance as a whole.

References
2 www.cyapipt.org
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7 For example, see Miller SD, Duncan BL, Sorrell R et al. Using outcome to inform therapy practice. Journal of Brief Therapy 2006; 5(1): 5–22.