

## **Setting Goals in IMR**

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Helping clients set and achieve goals is an essential component of the Illness Management and Recovery Program. Being able to make progress towards personally meaningful goals is one of the key motivations for clients' participating in IMR and for taking steps to manage their illness more effectively. IMR goal-setting is person-centered and aimed at helping clients move forward in recovery.

### Steps in the Usual Change Process

- Thinking about different areas of one's life
- Identifying a specific area of life that one is dissatisfied with
- Articulating the change that one would like to see
- Identifying the necessary steps for making the change
- Steadily working on taking steps
- Celebrating successes and overcoming obstacles along the way

### How IMR Goal-Setting Reflects the Change Process

In IMR, clinicians begin by getting to know clients better. Some clinicians have found it helpful to use the Knowledge and Skills Inventory (IMR manual, Part 1, Appendix 1) to guide the discussion, including how people spend their time, what they enjoy doing now, and what they used to enjoy doing. Then clinicians use the Recovery Strategies module as a guide, beginning by talking about recovery and exploring what it means to people as individuals. Later in the Recovery Strategies module, clinicians help clients to systematically explore areas of their lives that they are satisfied with and areas they are not satisfied with. Clients use the "Satisfaction with Areas of My Life Worksheet" to record their personal responses, and select an area of their life in which they would like to make changes.

After clients select a specific area that they would like to change, clinicians help them use the IMR Goal-Tracking Sheet to identify a long-term meaningful goal and to break it down into three short-term goals. It is especially important to understand why the long-term goal is important to the person. For example, how would life be better if this goal was achieved? What might they be able to do differently if this goal was accomplished? Each short-term goal is broken down into three or four manageable steps that clients feel confident that they can do.

The following table summarizes the basic components of the IMR Goal-Tracking Sheet:

Long-term meaningful goal		
Short Term Goal	Short Term Goal	Short Term Goal

Steps: 1. 2. 3. 4.	Steps: 1. 2. 3. 4.	Steps: 1. 2. 3. 4.
Review: Fully, partially or not at all achieved?	Review: Fully, partially or not at all achieved?	Review: Fully, partially or not at all achieved?
Modified/Next Steps:	Modified/Next Steps:	Modified/Next Steps:

After clients establish goals, clinicians follow up regularly about progress being made and make modifications as needed. In individual IMR, clinicians follow up on goals every session (or almost every session), whereas in group work clinicians follow up on the goals of 2-3 members each session on a rotating basis. Clinicians will find more information about this process in the mini-training handout, "Following up on Goals in IMR."

#### Characteristics of Good IMR Goals

- Behaviorally specific (how will the client and clinician both know when the goal is achieved?)
- Something important and meaningful *to the client*
- Constructive, not "eliminative" (that is, it's easier to work on goals involving things that one is going to do, such as "do more fun activities" rather than goals involving things that one is *not* doing to do, such as "stop feeling depressed")
- Functionally oriented when possible (not just related to feelings)
- Not delusional
- Ambitious goals are okay, but so are rudimentary ones

#### Examples of a variety of goals set by clients participating in IMR

Long-term Goal	Short-term Goals Related to the Long-term Goal
Develop fun leisure activities	-Try out activities I used to enjoy in the past -Ask someone to do an activity together -Look into free activities that are available in the community
Go to college	-Attend GED classes -Talk to other people who have gone back to college -Develop strategies for coping with voices
Do more activities with my children	-Find out what games my kids like to play -Increase exercise (so that I can be fit enough for games that involve running around)

	-Plan a weekly activity with them
Get a job	-Talk to supported employment specialist -Identify the kinds of jobs I would enjoy -Learn strategies for managing stress on the job
Improve my health	-Learn strategies for managing my diabetes -Exercise 3 times a week -Keep track of what I eat
Get a driver's license	-Investigate my legal status -Get a driver's manual -Arrange to practice driving
Get a girlfriend	- Get involved with activities where I will meet people -Attend social skills group to learn conversation skills -Learn to do laundry so can always wear clean clothes

At times clients may have a hard time identifying goals. To begin exploring possible goals with clients, try the following strategies: exploring satisfaction with different areas of life, asking clients to think about what they would like their life to be like in a year or five years, exploring what they used to like to do, and talking about what their life would be like if they did not have a mental illness.

Sometimes clients identify goals that sound more like the goals of practitioners or the mental health agency than their own. For example, if a client says, "I want to be compliant with my medication," it is important to find out why this goal is important to him or her. The clinician can ask, "If you were taking your medication as prescribed, how would your life be different? What would you be able to do that you can't do now?" If the client says, "My symptoms would be stable and I might be able to get a job," the clinician can explore whether getting a job is the client's real goal.

It is important not to discourage ambitious goals. The key to working with a goal that may seem unattainable is to break it down into smaller achievable goals. For example, if a client says he or she wants to be a pediatrician, one of the first steps might be to begin working on a GED. Clinicians need to convey hope to clients that they can accomplish their goals and move on in their recovery. Positive reinforcement of "baby steps" will build a client's self-esteem and confidence.

The following table contains strategies for some common challenges in setting and achieving goals in IMR:

Challenge	Strategies
Client reluctant to explore change	--Keep in mind that the desire for change is not the same as wanting to <i>work on</i> change. --First focus on developing the desire for change. --Ask what change would look like, how life would be different. --Explore reasons for not wanting to change despite being dissatisfied. --When the person is preoccupied with troubles, ask how their life

	would be different if those troubles were gone.
Client expresses neither dissatisfaction nor desire to change	<ul style="list-style-type: none"> <li>--Take emphasis off "here and now."</li> <li>--Explore previous experiences in life, past desires.</li> <li>--Encourage fantasy, "what if. . ."</li> <li>--Take your time, don't rush it.</li> <li>--Find out if client's life is what he or she wants it to be, has always wanted it to be.</li> <li>--Don't work harder than the client.</li> <li>--Find out what the client used to enjoy, what he or she used to want to do with their life before some of their current problems developed.</li> </ul>
Client doesn't believe change is possible	<p>Support Self-Efficacy:</p> <ul style="list-style-type: none"> <li>--Explain how change can occur when working together in IMR.</li> <li>--Express optimism that change is possible.</li> <li>--Reframe prior "failures" as examples of client's personal strengths and resourcefulness to cope with problems.</li> <li>--Acknowledge past setbacks while remaining positive about possible change.</li> <li>--Review examples of client's achievements in the past or in other areas.</li> </ul>
Client doesn't want to invest effort	<ul style="list-style-type: none"> <li>--Explain gradual change process.</li> <li>--Talk about breaking down goals into very small steps.</li> <li>--Give option to work briefly on a goal, and then re-evaluate.</li> <li>--Explore the pros and cons of change vs. no change.</li> </ul>

#### Suggestions for Supervisors:

- Ask clinicians for examples of goals that clients have made progress on and those they have not made progress on. Use the information from this handout to explore the difference in these goals. For example, were some goals "agency goals" rather than client goals?
- Model how you might help a specific client explore areas of his or her life that he or she might like to change.
- Model helping a specific client to identify a long-term goal and break it down into short-term goals. Model helping a client break down short-term goals into manageable steps.
- Ask clinicians to break into dyads to role-play one or more of the skills you modeled.
- Ask clinicians to choose one of ~~one of~~ the strategies identified today and try it before the next supervision session. Ask them to report back on their experience.

#### Additional Resources:

- Practice Demonstration Video: Recovery Strategies vignette
- Goal Tracking Sheet (example and blank form)
- [Collaborative goal technology article-Clarke, S. P., Oades, L. G., Crowe, T. P., & Deane, F. P. \(2006\). Collaborative goal technology: theory and practice. \*Psychiatric Rehabilitation Journal\*, 30\(2\), 129-136.](#)

