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# Problems in using social work records in assessing change

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PROBLEMS IN USING SOCIAL WORK RECORDS  
IN ASSESSING CHANGE

A thesis

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CHAPTER I  
INTRODUCTION

History

The profession of social work deals with effecting positive change in society, be it through the individual, the group or the community. Presented with a social problem, it applies social work techniques and skills to assist the client in achieving his highest level of functioning. However, the task of assessing the influence that social work has on the client in relationship to his problem and apart from other forces in his life has presented the profession with a basic challenge--that of interpreting its contribution both to itself and to society. While recognizing the need for such evaluative research, little work has actually been done in social work. Rather, we have relied on such research done in related fields. Problems involved in even trying to make a beginning seem overwhelming and vague. It is felt that a beginning can and should be made in looking at the problems involved in assessing change brought about by the social work process itself, and that from this effort a beginning for more refined evaluative research effort may be made.

Need for Research

The importance of such research in social work is well recognized in the field.

Whether or not treatment is a success and in what respect it succeeds or fails is far from understood. There seems to be a need for ways of evaluating treatment both globally and microscopically...globally to see if it works at

all, and microscopically to determine the areas where treatment is effective and the patterns and sequences associated with change.<sup>1</sup>

Thus involved in such research is proof as to why the profession exists and the discovery of new ways to develop new skills and techniques as well as ways of improving existing ones. The need is further described by David Levy who states:

Studies of the results of therapy are an integral part of scientific and clinical investigation. They satisfy a basic criteria of science...the criteria of prediction in the field of clinical studies and determine our values as investigators and therapists.<sup>2</sup>

#### Appropriateness of the Study

We feel that it is appropriate for us--four case work and two group work students--to consider the problems in assessing change. We believe this to be so, both because it is a valid and worthwhile research project for contribution to the field of social work and, because we see the challenge and the problems applicable to the three methods of social work--case work, group work and community organization. Each has the ultimate goal of achieving the physical and social well-being of society, each employs social work skills and techniques to achieve these goals and shares equally in the need of the social work profession to assess its contribution

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Lucile R. Meyer, "A Methodological Approach to the Evaluation of Treatment in Young Nonverbal Children," American Journal of Orthopsychiatry, vol. 31, (October, 1961), p.548.

2

David M. Levy, "Discussion of Failures in Psychotherapy of Children," Failures in Psychiatric Treatment, p.103.

to society and to improve its competence. However, the description of the client varies with the method as do the problems appropriate to the method and the particular tools and techniques required to achieve the ultimate goals of the profession. Therefore, we feel it is necessary to look at case work and group work both separately and together to determine the elements common to both and the different elements involved in the problems in assessing change in the two methods. Although the method of community organization is not to be considered here because there are no students representing that method in this particular group, we feel that it would have been appropriate for that method to have been considered in this study.

#### Literature

Evaluative research in the field of social work has been seen as a need for many years. One who clearly stated this need was Charlotte Towle in an article written fifteen years ago. She said:

As a safeguard against stereotype thinking there is a recognition of the importance of more research. Recent social case-work literature indicates a substantial trend in this direction, but a weakness still awaiting correction is the dearth of sound research and the continued dependence in related fields to guide social case workers in their thinking and practice.<sup>3</sup>

Despite this recognition, little has been done to counteract this need over the intervening years, either in case work or in the

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<sup>3</sup>Charlotte Towle, "Social Casework," Social Work Yearbook, 1947, p. 483.

other methods of social work. Reliance is still placed on work of related fields, as that of psychiatry. However, a few studies in evaluative research in social work have been done and several are mentioned here. They were chosen because of their similarity to this topic, their evaluative approach to research and because of their focus on social work or one of its methods.

The first reasonably objective study of outcomes of psychotherapy in which it was felt that adequate controls were utilized was done by the Counselling Center of the University of Chicago. In this study, clients were given an extensive battery of tests before and after therapy and again after a follow-up period. The client group was compared with a control group. This group also consisted of clients, but they had not as yet received therapy. Those conducting the study encountered extreme difficulty however, in maintaining contact with both groups over a period of one to four years, the time period deemed necessary for valid evaluation. Many of the skilled therapists seeing the clients felt that the aims of the research sometimes interfered with the emotional well-being of the client. There was also a problem in achieving controls. For example, it was questionable whether certain personality variables and the elusive but important phenomenon of 'therapeutic readiness' or motivation could be controlled in any adequate sense. Time alone proved costly in this study.<sup>4</sup>

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<sup>4</sup>Carl R. Rogers and Rosalind F. Dymond, Psychotherapy and Personality Change: Coordinated Research Studies in the Client-Centered Approach, pp. 30-31.

Perhaps the most extensive evaluative program undertaken in recent years was the series carried out in the Family Service in St. Paul, Minnesota. During the years 1946 and 1947 some 2000 cases, given continued service at this agency, entered into a testing of the effectiveness of service. The worker on the case was provided with a problem and service check list. The evaluation of service was based on the worker's checking each individual and major problem area as well as the over-all results in terms of no improvement, partial improvement, definite improvement and no treatment attempted. Several criteria of improvement were furnished to the workers, but the main investigator of the study pointed out that making judgments was actually a subjective process. He further stated that their staff was composed of professionally trained people and that it was felt that a reasonable assumption could be made that professional workers could exercise responsible judgment. However, they were not satisfied with this assumption and continued to make other tests until satisfied that such a subjective process was either sound or entirely unreliable. They felt that they were able to prove their assumption to be a correct one.<sup>5</sup>

In 1952, the Department of Neighborhood Clubs of the Children's Aid Association of Boston decided that a rigorous self-study for the purpose of sharpening up the department's work was called for. They were concerned with answering the question,

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<sup>5</sup>Leonard S. Kagan, "Evaluative Techniques in Social Casework," Social Service Review, vol. 26, (September, 1952), pp. 305-309.

"Who can be best helped by the type of service the department offered?" As part of their exploratory work, the research consultant and the workers turned again to the question of 'criteria for success.' Workers were asked to select a group and its experiences in which the workers had been most successful in terms of improvement shown by the referred child and those in which they had been least successful. The workers were then requested to describe in narrative form the reason for their choices. The objective was to obtain some idea of those areas in which workers' standards for assessing positive or negative change in the referred child were at variance. By looking back at their own work, workers were enabled to make their goals more concrete and to set them down in more specific fashion. Careful consideration of the goals of practice has led to the more precise thinking about departmental function. The importance of recording was noticed. This involved the expansion and supplementation of record material as workers were helped to see some of the steps which needed to be taken if these gaps were to be filled in the future.<sup>6</sup>

In the Hunt-Kogan study on Measuring Results in Social Work, the main purpose stated was to provide the case work method with a standard procedure for measuring change in clients and situations which are associated with treatment aspects of case work. The instrument derived is known as the movement scale. In developing this scale, the criteria of movement were induced empirically from

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<sup>6</sup>Ralph L. Kolodny, "The Research Process - An Aid in Daily Practice," The Group, vol. 16, (October, 1953), pp. 17-20; 23-25.

the reason given by a group of professional case workers for their judgment of movement on a sample of real cases. The study's major contribution lies in the fact that it enables case workers trained in the use of the scale to report uniformly and qualitatively the over-all changes in the functioning and the situation of individuals which is associated with the case workers' efforts to help clients live more effectively and comfortably. High correlation in the judgment of the workers was found.<sup>7</sup>

The decision to use the movement concept for measuring the results of case work began with a preconception that the workers' judgment was probably very undependable as far as the results of case work were concerned. The empirical data of several studies, however, led unerringly to the conviction that case worker judgment itself, even without the instrumentation of a methodically developed scaling device, is a fairly reliable measuring tool. The aim of the subsequent effort in this area was to refine even further this promising use of case workers as judges of the results by the application of suitable scaling techniques to their judgmental procedures.<sup>8</sup>

Thus, from the literature we see some of the problems and benefits of previous studies in evaluative research in social work. Attempting to gain data directly from clients may involve problems in establishing criteria for control groups, loss of data

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<sup>7</sup>J. McV. Hunt and Leonard S. Kogan, Measuring Results in Social Casework: a Manual on Judging Movement, pp. 5-79. |

<sup>8</sup>Ibid., p. 6.

by lapse of time and the possible interference with the welfare of the client. However, such studies have also had positive results. The workers' attention to and the use of goals in the social work process can be sharpened. A meaningful and practical scale for rating change in clients has been found. Noted in all these studies was the validity of the use of social workers' subjective judgment as a tool for assessing movement in case work.

### Objective

The general problems involved in evaluative research appear to fall into categories; psychological, socio-economic and methodological. Margaret Bleckner describes these for us. She states that the psychological problems result from the ambivalent nature of the social worker's reaction to evaluative research. This is based on the premise that perhaps by their professional nature there is a lack of concern and enthusiasm for the scientific and the objective. Socio-economic problems seem to stem from the fear that any confession of failure or exposure of weakness may result in lowered appropriations or contributions. The social workers' economic relation to the public is a major source of their anxiety and blocking over evaluative research. The third category of problems is that concerned with the lack of proper tools for evaluation.<sup>9</sup>

It is with this third and most important category that we will deal in this research project. With the assurance and

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<sup>9</sup>Margaret Bleckner, "Obstacles to Evaluative Research in Casework," Social Casework, vol. 31, (February, 1950), pp. 54-60.

confidence that our tools are valid and realistic, the problems of the first two categories might be greatly diminished. We feel that the proper tools are available within the skills and techniques of the professional framework of social work and that they are basically the same in case work, group work and community organization. The type of research with which we are dealing in this paper is referred to by Elizabeth Herzog as 'pre-evaluative,' referring to the kind of study that will be necessary to answer the questions that must be met before fully satisfactory studies can be made. It must answer the questions about what change is to be produced, in whom, by what and for what purpose.<sup>10</sup>

Ideally, to approach this project we would like to look at the social work process as it is going on. Because of the administrative policies and the welfare of the client, there is no opportunity to observe the actual practice of social work as it is directly employed. For practical reasons, obtaining the data by interviews with the social workers in the process of effecting movement is also impossible due to the time and demands upon the social worker. Therefore, we have decided upon the use of records as valid tools---tools to tell us both what is presently going on in a case and what has gone on in the past. As Frings states:

There is a predominate feeling that records are, in the main, produced for someone else to use...that is they are regarded aside from their immediate value and use in the teaching-learning aspect of supervision as a burdensome and mechanical obligation required by the agency. It is rare that a worker

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<sup>10</sup> Elizabeth Herzog, Some Guide Lines for Evaluative Research, p. 56.

feels that recording as such has a direct and primary value to him in assisting him to clarify his own thinking about a case or client.<sup>11</sup>

We see the record as a most vital tool to the worker and to any other social worker who might be called upon to work with or evaluate movement in any particular case as proof of the value and contribution of the profession. There are of course limitations in the use of records. One who tries to assess change from case records is faced with many obstacles. The records at the present time have been developed to serve other purposes than research. There are no known means of recording a counselling interview to convey into it the elusive and vital intangibles of a relationship between human beings.<sup>12</sup> However, while the record may not be able to give us all the elements necessary for the finer and more subtle aspects of change, we feel that it contains the basic, if not perhaps perfect, tool for the broader and more basic assessment of change through the social work process.

Thus, having hypothesized that assessing change in social work is possible and that the problems in doing this can be studied in the records, we have determined basic information that we believe social work records must include for assessment of change. There must first be a person or persons seeking help. There must be a statement or diagnosis of the problem. There must then be decisions as to what can be achieved in eliminating or diminishing the

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<sup>11</sup>John Frings, "Experimental System in Recording," Journal of Social Casework, vol. 38, (February, 1957), p. 56.

<sup>12</sup>Malcolm G. Preston, et al., "Factors Affecting Movement in Casework," Journal of Social Casework, vol. 34, (March, 1953), p. 110.

problem. Time is an essential element, allowing the social worker's skills and techniques to be employed. These skills and techniques must be used by a person trained to use them. Finally, there must be information as to the 'success' or 'failure' in resolving or minimizing the presenting problem.

#### Definitions

For the purposes of this study, the person or persons seeking help will be referred to as the client. The problem will be the needs of the client as determined by the social worker. These needs may or may not agree with the needs as seen by the client or may agree only in part. Goals are the expectations for the client as a result of social work services. These goals will be considered to be both desirable and achievable. Time will be that interval designated as T1 and T2. T1 will be that point at which the problem is diagnosed. This time therefore, will not be determined by hours, days or weeks, but by the time it requires to determine the problem, establish goals and make a decision on treatment plan. This time period will also be referred to as the intake period. T2 will be that point at which goals have been achieved or at which point it is possible and appropriate to the problem to evaluate movement toward goals. The social worker will be that person who holds a masters degree in social work or who was a student who, when working with the client, was in training in a graduate school of social work. Change may be positive or negative. Change can also be positive, but not toward a particular goal. For the purpose of this study, positive change toward a specific goal will be referred to as movement.

## CHAPTER II

### METHODS CHAPTER

. In this chapter the following information will be covered;

a) the generic problems in the assessment of change and it's relation to this thesis, b) criteria in the selection of cases, c) criteria upon which cases were evaluated, d) analysis of data and techniques of coding.

The belief that there are generic problems in the assessment of change familiar to both case workers and group workers led to the selection of students from both fields for this thesis. They are representatives of a (1) Jewish community center, (2) two family service agencies, (3) a child psychiatric clinic, (4) a group work unit of a multi-function agency, (5) a department of public health. This last agency is the only one that initiates service to the clients, in contrast to the other agencies where the client initiates the service. However, this is not considered to make a difference for the purpose of this thesis.

#### Criteria in the Selection of Cases

Cases were selected in an attempt to test the basic ideas set forth in this thesis. They were selected on the basis of:

Age and sex of the client: Cases were studied in which there was a problem centered around an adolescent. In some cases the adolescents were the clients interviewed. In other cases the parents were interviewed in relation to the adolescent's problem. This age group was chosen because it was the only group for which records were available in all agencies.

Worker: All of the cases selected were written by professional workers or students in a graduate school of social work. We limited cases to this group as we wanted to study records which most closely reflected the basic principals of social work.

Time interval: Records were selected on the basis of factors necessary to determine movement. The time interval chosen was from five months to two years. This time range was based on certain characteristics; (1) a period which was long enough for change to be observable, (2) the time limit of the thesis made a maximum of two years necessary. In addition, we felt that if change had not occurred within this period of time it would not occur.

#### Criteria Upon Which Cases Were Evaluated

Each record was studied for the following information:

- 1) Family or group composition and time interval
- 2) Clients reason for seeking social work services
- 3) Explicit and implicit goals as stated by worker
  - a) explicit goals defined as goals clearly stated
  - b) implicit goals defined as goals obvious though not stated by worker as a goal. Evidenced by action of the worker
- 4) Outcome of explicit and implicit goals as stated by worker
  - a) did the worker see and indicate movement toward or away from goal
- 5) Problems in the assessment of change from our point of view
  - a) the elements which were present or lacking in the record that affected our attempt to assess change
- 6) Our impression of the record

#### Analysis of Data and Techniques of Coding

Records were analyzed on the basis of movement between time one and two. At time one we were concerned with the intake procedure. In group work and case work this is defined as the period of time when the major problem is assessed and goals are established.

The following items were studied at time one.<sup>1</sup>

- 1) Explicitness of the problem statement. An analysis of whether the worker clearly stated what was the basic problem. We used four categories, explicit statement through no statement.
- 2) Adequacy of problem statement. Three categories were used, completely adequate through inadequate. An analysis of the dynamics of the problem and the basis upon which it was called a problem.
- 3) Explicitness of goal.<sup>2</sup> Six categories were used, explicit through on indication of goal. Analysis of whether the goal was clearly stated and implied or not stated.
- 4) Adequacy of goal statement. Three categories were used, completely adequate through inadequate. Analysis of whether the goals were clear and complete. Whether they were appropriate to the problem.
- 5) Reality of goals. Five categories were used, realistic through unrealistic. Analysis of whether the goals were obtainable in relation to the problem statement.
- 6) Flexibility of goals. Three categories were used, no change through complete change. Analysis of whether the worker changed his goals during the period of study. (The word change does not connote a negative aspect of practice, as worker may have changed goals when he gained new information.)

The period between time one and time two varied both within and between agencies. Three cases were assessed over an interval of 5-6 months, seven cases over an interval of 7-12 months, two cases over an interval of 13-18 months, two cases over an interval of 19-23 months, and two cases over an interval of more than two years.

At time two we were concerned with the extent to which goals were achieved. The following items were studied at time two.

- 1) Pattern of change. Eight categories were used, continuous movement (+3) through no movement (-3). The progress of goals at arbitrary intervals were analyzed. (It was decided that continuous movement toward achievement of goals was more desirable than fluxuating movement and hence important to analyze.) To determine this movement a graph was used.
- 2) Outcome of goals at the end of record. Eight categories were used. They were scaled on the basis of a great deal of change in client through no change in client. A table was used to determine outcome.

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<sup>1</sup>In analyzing the following items, the number of categories selected was determined by our ability to make meaningful judgments that were reliable.

<sup>2</sup>The reader may recall that a goal was earlier defined as the expectations for the client as a result of social work services.

Each member of the group analyzed four records from his agency. To check reliability the case workers cross-checked their analysis as did the group workers. The four case workers then analyzed their total data to determine similarities and differences in the problems of assessing change across agencies. The two group workers did the same thing. The last step in data analysis was a comparison between group work and case work. We looked for common and unique problems in the assessment of change. The results of this analysis will be presented in the following chapter.

### CHAPTER III

#### RESULTS CHAPTER

This chapter is divided into three sections. The first section contains the data from the four case work agencies and the summary of the findings for these four agencies. In the second section the data from the two group work agencies is presented, followed by the summary of findings from the group work agencies. The final section is a summary of the findings from both case work and group work agencies.

The following data is presented for each of the four case work agencies and the two group work agencies. The agency is identified according to function and recording methods. The clients are identified as to sex, age, and problems. This is followed by a detailed analysis of each of the four cases from each agency, as follows:

A) Identifying information on client and statement of problem. B) Rating of categories on which assessment of change was made. C) A movement graph showing the pattern of change at time intervals during treatment. D) The listing of goals as explicit through implicit and their priority rating. E) Outcome of goals are shown on a table indicating positive or negative change. Goals are scored according to whether they are primary, secondary or minor. The degree of achievement is indicated by a percentage figure. F) Interpretation is made of the ratings given in each of the categories and graphs. G) Problems found in assessing change are discussed.

## SECTION I

The Analysis of Four Cases from the Child Psychiatric  
Clinic of the Massachusetts General HospitalDescription of the Agency

For the purpose of this study, the Child Psychiatric Clinic of the Massachusetts General Hospital was one of the four agencies from which the case workers' data was collected. This clinic is one of the many clinics at the Massachusetts General Hospital, but the main difference between this clinic and most of the other clinics is that this has a closed door policy, that is this clinic sees only those children below the age of eighteen who are referred by some other clinic or doctor within the hospital. It does not take patients coming directly on their own.

The clinic has full time psychiatrists, psychologists and case workers on its staff, it also has students belonging to all these professions. Usually the child referred to this clinic is seen by the psychiatrists and is given psychotherapy, and the parents are given case work treatment.

The data was collected from the social service records of the mothers of four adolescent boys. These boys were seen in psychotherapy and the mothers were seen in case work treatment. The reason for choosing the parents records was mainly because it was felt that for this study it would be more appropriate to collect data from the social service records, which also contained elaborate material about the boys.

The sample from this agency consisted of two fourteen year old

boys and two sixteen year old boys. Their problems ranged from two ulcerative colitis cases, one duodenal ulcer and one case of severe depression and difficulties at school.

Method of recording - usually if the case worker happened to be a student process recording was used in the beginning and later on summaries of two or three interviews were used. The regular case worker summaries from the beginning.

As mentioned earlier this clinic has a closed door policy and sees only those children who are referred from within the hospital. Once the child is referred, the parents are seen by the case worker in the intake interview, if the child is very disturbed the doctor on call sees the child. The case is usually presented in the intake conference to one of the senior psychiatrists by the case worker and the case is then evaluated. When the treatment starts usually the child is seen by the psychiatrist and one or both parents are seen in case work treatment. The child, however, is not taken into treatment alone.

#### CASE ONE

##### IDENTIFYING INFORMATION

1. Age of adolescent - 14.
2. Statement of problem - History of duodenal ulcer and behavior problem. The patient's mother was concerned with his feelings of inferiority, his fierce temper at home and also his foul language.
3. Treatment - Both the adolescent as well as the mother were under treatment. The boy was seen by a psychiatrist and the mother was seen by a case worker.
4. Time interval - The treatment was carried for a period of one year and ten months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit and implicit
Adequacy of Problem Statement	Partially adequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Partially adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial change
Pattern of Change	Generally positive

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment (months)							
	3	6	9	12	15	18	21	22
Continuously Positive +3								
Generally Positive +2								
Slightly Positive +1								
No Change 0								
Not assessable -0								
Slightly Negative -1								
Generally Negative -2								
Continuously Negative -3								

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Helping mother to set limits for the patient, who had a very severe temper	3
B) Helping mother to adjust to adolescent's behavior	3

Implicit

- C) Helping mother to understand realistically that 2  
it would be better for the patient if he was  
sent to a boarding school

OUTCOME OF GOALS<sup>1</sup>

Goals	Degree of Achieved Progress							
	+3	+2	+1	0	-0	-1	-2	-3
A : 3								3
B : 3							3	
C : 2		2						
	6	6	3					

Proportion of Desired Movement Achieved  $15/24 = 62.5\%$

## INTERPRETATION

The problem statement was not very adequate. The worker in the recording had only mentioned what the patient's mother saw as the problem and there was very little with regard to the worker's opinion.

<sup>1</sup>The outcome of goals was arrived at by rating the importance or priority of each goal at time I and by assessing the movement toward goal achieved at time II. The figure opposite the goal shows its rating. Number 1, 2, 3, indicates minor, major, and primary goals respectively. The percentage was taken by multiplying the priority attached to the goals by the level of achievement achieved and summing this over all the goals. This was then compared to the weighted sum, that would have been obtained had maximum progress been attained in all goals. All of the following cases have used the same method in arriving at the outcome of goals.

The goals were very realistic, however they were only partially adequate and thus were not always stable.

There was no mention at all of the progress towards the goals, in fact there was no mention about what happened to the patient's illness, i.e. whether the ulcer improved or not.

After the case was under treatment for about seven or eight months, there seemed to be a regression, however from the record it was not clear why this happened.

#### PROBLEMS IN ASSESSING CHANGE

One of the main obstacles or problems in this regard was that the recording was of short summary type and was quite poor. As mentioned above, the problem statement and the goal statement were quite inadequate. There was not complete stability with regard to goals.

#### CASE TWO

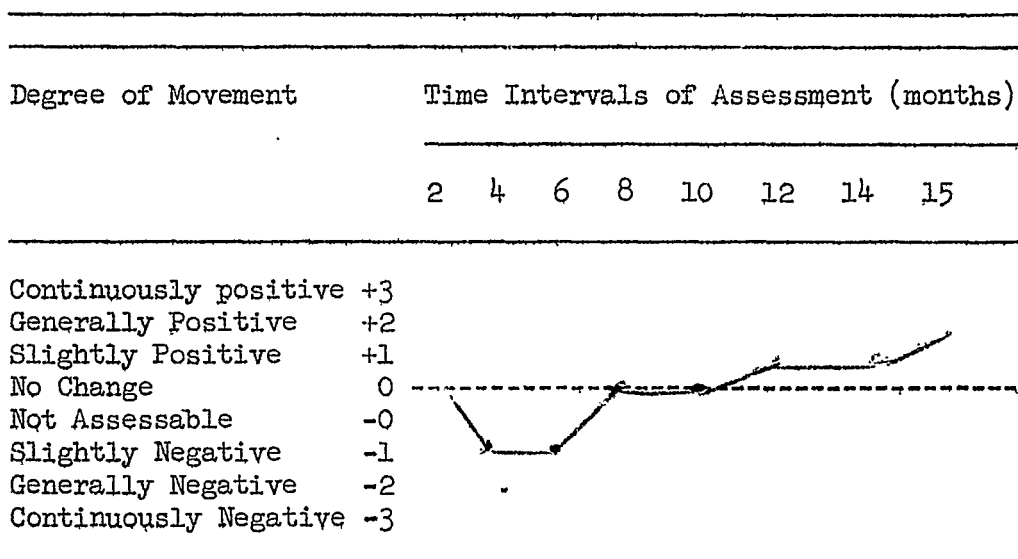
##### IDENTIFYING INFORMATION

1. Age of adolescent - 16.
2. Statement of problem - The boy was hospitalized for five weeks with ulcerative colitis. He did not want to stay in the hospital. Mother was unable to understand son's attitude toward illness. She had tremendous guilt and was very concerned about his missing school. She was very interfering in his activities.
3. Treatment - Both mother and the adolescent were under treatment.
4. Time interval - The treatment was carried for a period of fifteen months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Partially adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial change
Pattern of Change	Slightly positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Intervening in the close mother-son relationship	3

Implicit

B) Helping mother to overcome guilt	2
C) Helping mother to see things positively and help her to get a job	1

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## OUTCOME OF GOALS

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Goals	Degree of Achieved Progress							
	+3	+2	+1	0	0	-1	-2	-3
A : 3			3					
B : 2			2					
C : 1			1					
			6					

---

Proportion of Desired Movement Achieved  $6/18 = 33.3\%$

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## INTERPRETATION

The problem statement was quite explicit and also quite adequate.

The goals stated were not adequate and there was a shift in them from time to time.

Progress towards the goal was slow. There was regression in the beginning and slow progress after that.

There were a number of reasons for regression. The mother was very threatened in the beginning by the case worker, her inadequacy as a mother and guilt increased, but through constant support and clarification, the mother started making very slow but some positive progress. This progress helped the boy.

## PROBLEMS IN ASSESSING CHANGE

It was difficult to assess change because of the inadequate and poor statement of goals and the poor recording.

### CASE THREE

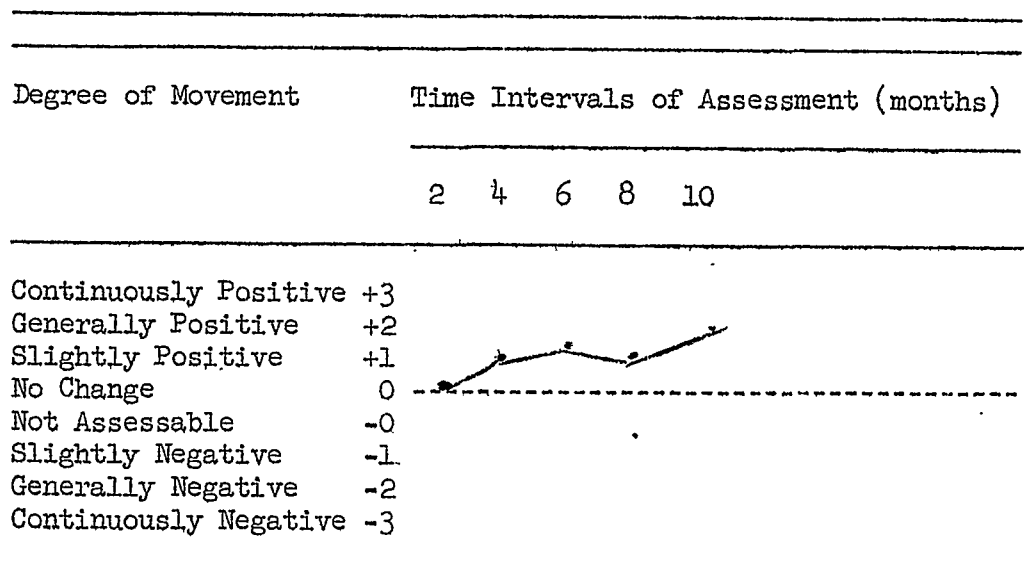
#### IDENTIFYING INFORMATION

1. Age of adolescent - 16.
2. Statement of problem - Difficulty at school and severe depression following father's sudden death. Mother was also quite depressed and the son's behavior aggravated her and there was great tension in the home.
3. Treatment - Both mother and son were under treatment.
4. Time interval - Both mother and the adolescent were under treatment for ten months.

#### RATINGS

Dimensions	Ratings
Problem Statement	Explicit and implicit
Adequacy of Problem Statement	Partially adequate
Statement of Goals	Mostly explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Realistic
Flexibility of Goals	No change
Pattern of change	Generally positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Helping with adolescent's depression and school problem	3
B) Helping mother to overcome her depression	3
C) Helping mother to understand adolescent's behavior	2
<u>Implicit</u>	
D) Helping mother to understand the patient in relation to his older brothers who were very good at college	1

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	0	0	-1	-2	-3
A : 3								3
B : 3								3
C : 2								2
D : 1								1
								18

Proportion of Desired Movement Achieved 18/27 - 66.6%

INTERPRETATION

The problem statement was not completely adequate. The goals were quite adequate and were well stated, they were quite realistic and there was no change in them. The progress toward goals was quite satisfactory.

PROBLEMS IN ASSESSING CHANGE

The problems in assessing change were that the problem statement was not very adequate. Though the goals were stated clearly to a great extent, the relationship between the treatment and the goals were not very clear. The recording was very good, however there was not a single summary or evaluation from the worker's point of view.

## CASE FOUR

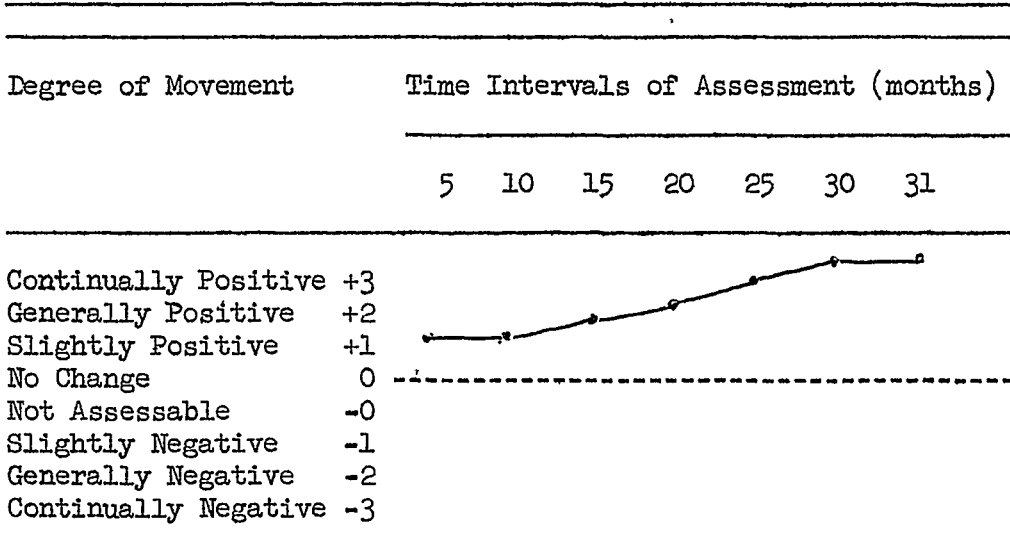
## IDENTIFYING INFORMATION

1. Age of adolescent - 14
2. Statement of problem - The patient was hospitalized for ulcerative colitis. Mother was extremely shocked because of this and was quite concerned whether she was the cause of her son's illness. She was very sensitive to losses. She was extremely over-protective of the patient, giving him what she missed in life. It was thought that the home situation aggravated the patient's illness.
3. Treatment - Both the adolescent and the mother were under treatment.
4. Time interval - Both of them were under treatment for a period of two years and seven months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit and implicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Mostly explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern of Change	Continually positive

MOVEMENT SCALE



RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) The adolescent needed a sustained relationship with one person	3
B) To see that in the mother's anxiety undue pressure was not placed on the son	3
<u>Implicit</u>	
C) Easing mother's anxiety	2

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3	3							
B : 3	3							
C : 2		2						
	18	4						

Proportion of Desired Movement Achieved  $22/24 = 91.66\%$

INTERPRETATION

The problem statement was very adequately, clearly and explicitly stated. The goals were adequate, stated well and were realistic and stable. After the patient and the mother were under treatment for almost three years, most of the goals were achieved to a great extent. The patient formed a very positive relationship with the therapist, his ulcer subsided and the mother-son relationship improved.

PROBLEMS IN ASSESSING CHANGE

There were no problems in assessing change. Though the recording was in an extremely condensed form, the assessment of movement was quite easy because of the clarity in recording.

The Analysis of Four Cases from the  
Massachusetts Department of Public Health

Description of the Agency

The following cases have been taken from the records of male adolescents attending the Crippled Children's Clinics of a state department of public health. All of the adolescents discussed here were seen in an orthopedic clinic, although not necessarily the same one. The social worker who sees the child at the clinic will usually be the one to assume casework responsibility. The setup of the state public health agency necessitates that intensive casework interviewing be carried on in the home of the client. Parents of the child are seen by the social worker when it is deemed advisable in the best interest of the child.

In the cases used here, casework treatment was with both the parents and the adolescents. Often, however, the adolescent was seen only occasionally, or only because he happened to be present in the home during the interview.

Since more is recorded about the parents, usually the mother, the following evaluations are focused on movement with the parents, as well as the adolescent, rather than the adolescent alone.

The age range of the adolescents is from fifteen to seventeen years. Problems as seen by the social workers are primarily those involved in following medical recommendations and the improvement of parent-child relationships.

In all of the cases, casework treatment was initiated entirely by the social workers; none of the clients seen had directly requested

this service. This seems of especial importance in considering their motivation in treatment in regard to the problems seen by the social workers. In all four cases the social worker treating the family was a graduate student in a school of social work.

Although all of the process recording available for these cases was utilized for this study, most of the recording of these cases was done in a summary form. These summaries are prepared by the social workers to be entered in the medical record which may have some bearing on their content.

#### CASE ONE

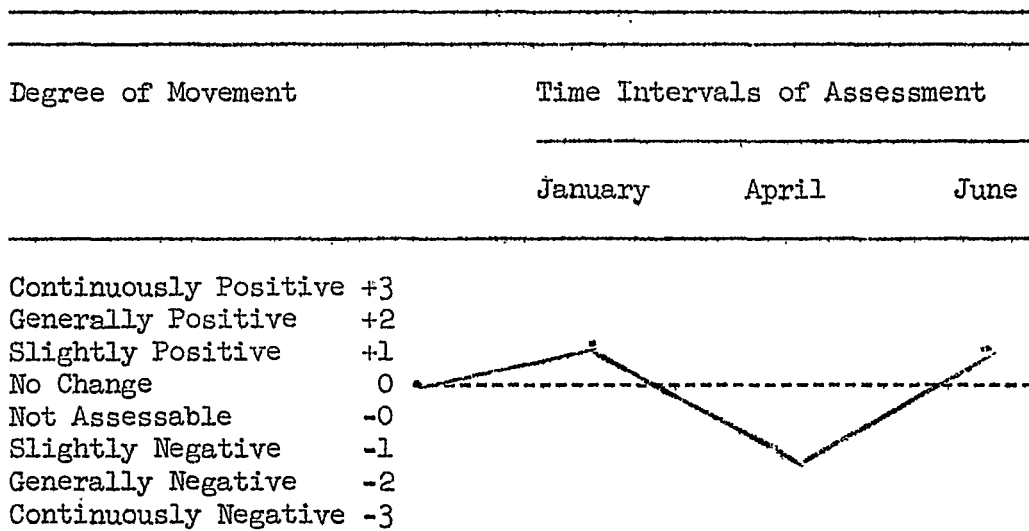
##### IDENTIFYING INFORMATION

This case involves casework treatment with a fifteen-year-old, white adolescent, with a diagnosis of mild cerebral palsy, and his mother. Since the mother saw the Worker as a competitor for her son, the Worker decided to focus primarily on seeing the mother and, through her, to help the boy follow medical recommendations. To do this involved help with various other factors, such as the parent-child relationship and other problems within the family which are hinted at in the goals. The time interval of treatment was five to six months.

## RATINGS

Dimensions	Ratings
Problem Statement	Implicit
Adequacy of Problem Statement	Inadequate
Statement of Goals	Mostly Explicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern of Change	Slightly Positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit:</u>	
A) Restore her feeling of adequacy as a mother	2

B) Reduce her guilt	2
C) Maintain the clinic's continuing interest in the family	3
D) Improve the self-image of the adolescent	3
E) Give him an opportunity to verbalize fears	2

Implicit

F) Assure mother of her right to set limits for adolescent	3
G) Improvement in marital relationship	1
H) Improvement in mother-child relationship	3
I) Have adolescent understand true medical situation	2
J) Help with his problems of identity with father	1

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 2					2			
B : 2			2					
C : 3		3						
D : 3			3					
E : 2		2						
F : 3					3			
G : 1					1			
H : 3					3			
I : 2		2						
J : 1			1					
		14	6		0			

Proportion of Desired Movement Achieved 20/66 - 33%

INTERPRETATION

Although on the surface goals seem realistic with the mother, it is difficult to be certain since the problem statement is so

lacking. It was also difficult to give a valence to the goals because of the absence of a diagnostic statement from the Worker. The goals, however, do imply the problem and are in general more adequately stated than the category of "partially adequate" suggests.

It is explained in the record that since the mother saw the Worker as a competitor for her son that this interfered with the movement. Progress toward that goal was essentially positive but this did not seem to have any strong influence on movement toward the other goals. It is interesting that the more short term goals with the boy and his mother, such as goals C, E, and I are the ones responsible for the movement in this case. The fact that they are short term seems to raise the question as to whether or not progress toward them can be considered true movement. It could be, however, that this family was unable to reach the other goals due to the relatively short treatment span.

#### PROBLEMS IN ASSESSING CHANGE

There was only slight progress toward the goals in this case. The reason or reasons for this are not clearly stated in the Worker's recording. A more adequate problem statement and more periodic recorded evaluations of progress toward goals would have made assessing movement easier. Recording is generally poor.

#### CASE TWO

##### IDENTIFYING INFORMATION

This case involves casework treatment with a seventeen-year-old white, male adolescent with a diagnosis of Leg Perthes, and his mother.

The father was also seen, although only on occasion. The family situation was quite an involved one. There were many reality problems facing the family outside of the fact that the adolescent was missing clinic appointments and not following medical recommendations. The time interval of treatment was seven months.

#### RATINGS

Dimensions	Ratings
Problem Statement	Implicit
Adequacy of Problem Statement	Inadequate
Statement of Goals	Mostly Implicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Mostly Non-Realistic
Flexibility of Goals	No Change
Pattern of Change	No Change

#### MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment		
	November	January	May
Continuously Positive +3			
Generally Positive +2			
Slightly Positive +1			
No Change 0			
Not Assessable -0			
Slightly Negative -1			
Generally Negative -2			
Continuously Negative -3			

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Have mother see importance of following medical recommendations	3
B) Reach out to other members of the family through the mother	3
C) Establish the relationship with the mother, who is the only member of the family seemingly able to accept help	3
D) Ease anxiety and tension in the home created by immediate problems	2
<u>Implicit</u>	
E) Present the medical facts to the adolescent	3
F) Support mother's ability to carry out medical recommendations as previously done	3
G) Offer mother the agency so she can call when she feels it necessary	2
H) Support father's role as a husband and provider	2
I) Help with negative masculine identification with father	1

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 3			3						
B : 3					3				
C : 3			3						
D : 2					2				
E : 3			3						
F : 3					3				
G : 2					2				
H : 2					2				
I : 1					1				
			9		0				

Proportion of Desired Movement Achieved 9/66 = 14%

### INTERPRETATION

The problem statement was most inadequately recorded. The problem is not even implied in the goals. The goals seem to be vague and were not related to some of the major difficulties in the family at the time, resulting from the father's severe heart condition. The Worker does state the upset in the family equilibrium because of this illness. However, in spite of this she continued to focus mostly on goals related to enabling the adolescent to follow medical recommendations. These goals are given the most valence since this is the direction treatment took.

The only goals even barely reached were those related to establishing a relationship with the mother and the opportunity to present the medical facts to the adolescent.

The Worker states in the record that there was no change, explaining that the mother was "not motivated for treatment - felt she was managing the situation successfully."

### PROBLEMS IN ASSESSING CHANGE

The greatest problem in evaluating this case is due to the lack of a psycho-social diagnosis, or some sort of appropriate diagnostic statement which would hopefully include the ability of these people to use casework help. Treatment was undoubtedly a failure, but little is recorded as to the reasons for this. One has difficulty in accepting, without further clarification, the Worker's statement that the mother was "not motivated." The recording in this case is quite poor.

## CASE THREE

## IDENTIFYING INFORMATION

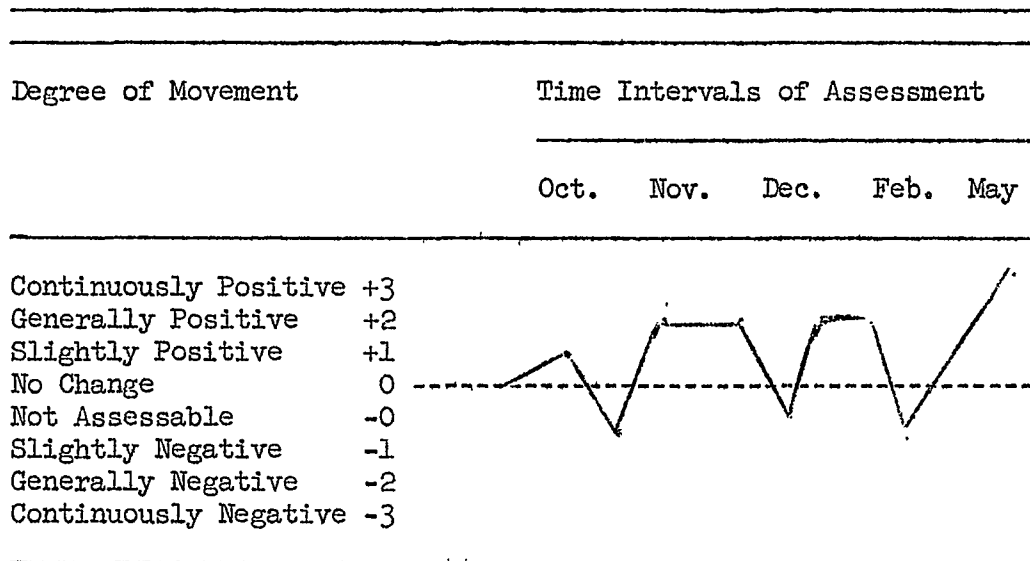
This case involves casework treatment with a fifteen-year-old adopted male adolescent with a diagnosis of muscular dystrophy, and his mother. At the time of referral, the adolescent was severely disabled, requiring the constant assistance of the mother. It was felt that the mother needed considerable help in accepting the fact that the progressive illness of her son would ultimately be a fatal one, as well as encouragement to carry out the medical recommendations that would hopefully make caring for the adolescent easier for her. She was unable to separate herself emotionally from the patient, had become socially isolated and was anxious about her own mental state, experiencing occasional acute anxiety states.

The time interval of treatment was eight months.

## RATINGS

Dimensions	Ratings
Problem Statement	Implicit
Adequacy of Problem Statement	Inadequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial Change
Pattern of Change	Continuously Positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Help mother in accepting adolescent's illness (and possible death)	3
B) Encourage her to carry out medical recommendations	3
C) Encourage her to socialize more	2
D) Allow her to extend herself to others	1
E) Lessen anxiety attacks	3
F) Give her the opportunity to express hostility in a healthier way	3
<u>Implicit</u>	
G) Improvement in marital relationship	2
H) End regressive states	2
I) Work out termination	2
J) Allow her to trust	2
K) Improvement in mother-child relationship	1
L) Encourage adolescent to assert himself	3
M) Help her separate emotionally from the patient	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3					3			
B : 3		3						
C : 2	2							
D : 1	1							
E : 3		3						
F : 3	3							
G : 2		2						
H : 2		2						
I : 2	2							
J : 2	2							
K : 1					1			
L : 3	3							
M : 2	2							
	45	20			0			

Proportion of Desired Movement Achieved  $65/76 = 75\%$

## INTERPRETATION

The problem statement was rated as implicit and inadequate because the problem is not described in detail in the reason for referral. This rating is questionable, however, since the problem is more explicitly mentioned at a later point. The problem, however, was also very much implied in the goals which were more adequately stated than seen in the rating of partially adequate, which, because of the lack of another category, had to be used.

Regression periods stated by the Worker were due to vacation periods and the cancellation of appointments by the Worker. That these regression periods were short-lived and related to the Worker's

absences was the feeling of the psychiatric consultant also. The nature of this woman's personality, the extreme transference to the Worker and the very difficult reality situation explains the unavailability of the regressions. For this reason, it has been given a rating of continuous movement.

#### PROBLEMS IN ASSESSING CHANGE

In reviewing the process recording of this case, it would seem there was even more movement toward goals than is stated by the Worker in her summaries. The fact that many goals were implied made assessment of movement more difficult than if they were more explicitly stated. In general, however, recording was adequate and definite change was mentioned in the summaries.

#### CASE FOUR

##### IDENTIFYING INFORMATION

This case involves casework treatment with a sixteen-year-old male adolescent with a diagnosis of structural scoliosis, and his parents. This case was referred because it was felt the parents had a considerable amount of anxiety regarding the adolescent's performance at school, and were concerned about his potential for future vocational opportunities. It was also felt that the adolescent had problems in establishing some independence from his parents. The time interval of treatment was seventeen months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit and Implicit
Adequacy of Problem Statement	Partially Adequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern Of Change	Generally Positive

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment
	Jan. May 1959 Dec. March June '60
Continuously Positive +3	
Generally Positive +2	
Slightly Positive +1	
No Change 0	
Not Assessable -0	
Slightly Negative -1	
Generally Negative -2	
Continuously Negative -3	

## RATING OF GOALS

Goals	Priority
-------	----------

Explicit

- A) Reduce some of the pressures placed by parents and the school, allowing adolescent to decide what his own interests were

- B) Enable the school and his family to accept the fact that, aside from his physical handicap, he is no different from other boys his own age, and that his needs are the same 3

Implicit

- C) Clarify roles of physiotherapist and social worker to help the father use these to more advantage 2  
 D) Improve the father-child relationship 3  
 E) Help the parents to better understand the medical implications of their son's condition 2  
 F) Encourage them to accept help from community resources 1  
 G) Encourage the adolescent's strive for independence 3  
 H) Help the adolescent to express his feelings about his handicap 2

OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 3	3								
B : 3		3							
C : 2		2							
D : 3			3						
E : 2			2						
F : 1		1							
G : 3		3							
H : 2		2							
	15	18	5						

Proportion of Desired Movement Achieved  $38/67 = 57\%$

## INTERPRETATION

Definite movement in relation to the goals was stated in the record. This family was seen on an intensive casework basis from November, 1958 to May, 1959 by a student worker who left the agency in May. This is the reason no change was observed from that period until they were again seen on a weekly basis by another Worker in the Fall of 1959. The recording indicates that this did not have any negative effect on treatment. This seems valid in that there was real similarity in thinking about the problem situation between the two workers as indicated by both problem statement as well as goals. Goals were rated as mixed though there were many implicit ones because the major ones were explicitly stated.

## PROBLEMS IN ASSESSING CHANGE

The fact that many goals were implicit made assessment somewhat difficult. There was, however, adequate periodic evaluation regarding progress toward the goals in the recording, which was most helpful in assessing change.

The Analysis of Four Cases from the  
Brookline Family Service Association

Description of the Agency

The following cases were taken from the records of Family Service of Brookline. This is a casework agency, providing services for the many problems involved in personal and inter-personal relationships. In the following cases presented for the purpose of this thesis, all are adolescent boys receiving direct casework treatment. In all cases one or both parents were also receiving direct treatment. However, these cases were analyzed on the basis of the adolescent boy. Evaluation of outcome was also based on the boy's record. Goals in the parents' records were used for analysis where it was felt that such goals were established primarily for the welfare of the boy and had direct bearing on his movement between Time 1 and Time 2. The boys range in age from twelve years to fifteen years and include problems of family, peer and community adjustment.

In all four cases the social worker treating the boy was a graduate student in a school of social work. Recording is both process and summary with the majority being of the summary method. Referrals came from both parents and schools. Treatment is voluntary and, therefore, requires at least the basic motivation for treatment.

## CASE ONE

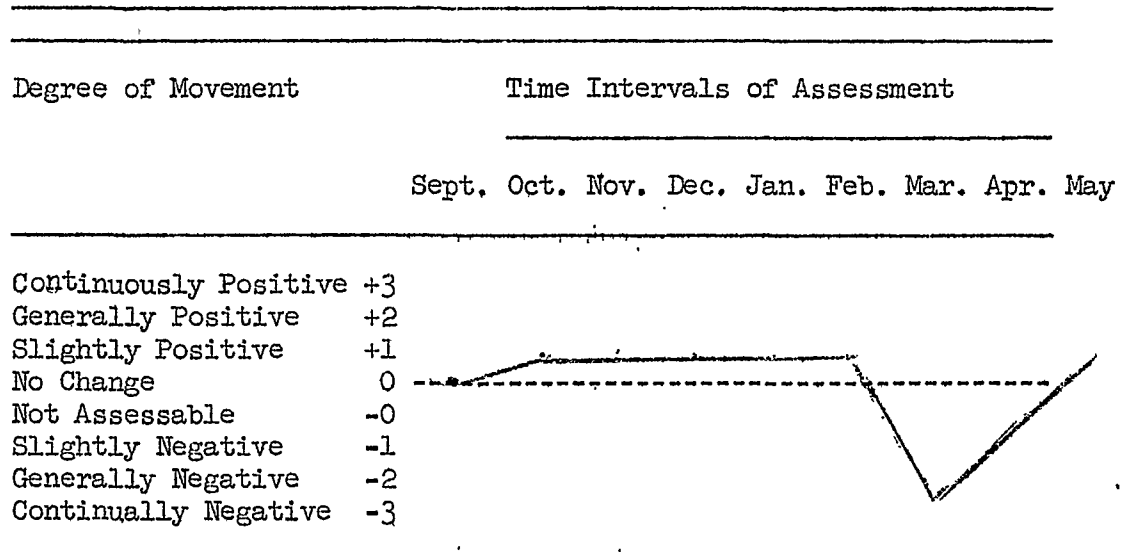
## IDENTIFYING INFORMATION

This is the case of a fifteen year old boy with problems in family relationships, particularly with his mother. He has demonstrated this with hostility toward authority in the home, in the school and in the community. Scholastic achievement was below his ability, according to school authorities. The boy remained in treatment for nine months, his mother for fifteen months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit
Adequacy of Problem Statement	Completely Adequate
Statement of Goals	Mostly Implicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern of Change	Slightly Positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Help boy form a better picture of himself	3
B) Clarify some conflicts regarding his brother	2
<u>Implicit</u>	
C) Improve academic functioning	2
D) Decrease hostility toward school and community	2
E) Build better relationship with mother	3
F) Provide a corrective experience in adult male relationship.	3

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3		3						
B : 2			2					
C : 2					2			
D : 2					2			
E : 3			3					
F : 3		3						
		12	5		0			

Proportion of Desired Movement Achieved  $23/45 = 49\%$

## INTERPRETATION

The problem statement was both explicit and adequate. However, the goal statement was mostly explicit and partially adequate. Several goals were implied in the problem statement. Slight improvement was made toward strengthening his self-image and in bettering the relationship in the home. Problems of acting-out in the community and the school remained primarily unchanged as did his scholastic functioning. His relationship with his brother improved slightly, while there was slightly positive gains made in his relationship to his mother. The boy's relationship to the worker, as an adult male figure, was generally positive. Change was primarily negative in the seventh month of treatment when the boy ran away to another state, was put in jail there and suspended from school. By Time 2 the slight positive change was restored. The boy decided against further treatment when the worker

left the agency, although he was advised to continue. The mother's continuation in treatment for four more months gives evidence that the boy's slight improvement was maintained, aided considerably by the mother's gains in reaching intellectual understanding of his behavior.

#### PROBLEMS IN ASSESSING CHANGE

The chief problem in assessing change in this record was the lack of clarity in goals. The adequacy of the problem statement, periodic summary recording and the closing summary, however, made assessment of change easily possible.

#### CASE TWO

##### IDENTIFYING INFORMATION

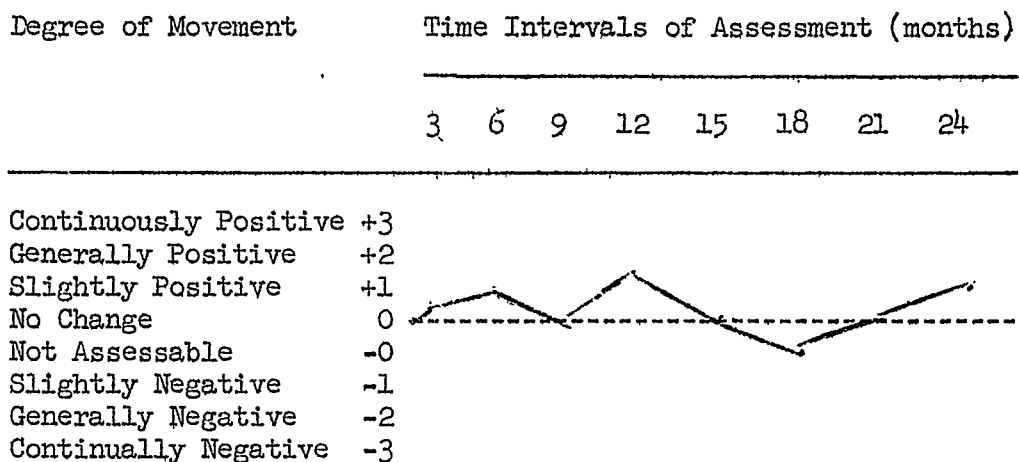
This is a case of a boy who began treatment at the age of twelve and was in treatment for two years when this case was assessed. During the two years both parents received treatment for short periods of time. The boy's problems were diagnosed as poor parental relationships, poor school achievement and acting-out in the community.

##### RATINGS

Dimensions	Ratings
Problem Statement	Explicit
Adequacy of Problem Statement	Completely Adequate
Statement of Goals	Mostly Explicit
Adequacy of Goal Statement	Partially Adequate

Reality of Goals	Mostly Realistic
Flexibility of Goals	Partial Change
Pattern of Change	Slightly Positive

### MOVEMENT SCALE



### RATING OF GOALS

Goals	Priority
-------	----------

#### Explicit

- |   |   |
|---|---|
| A) Build a good relationship with the boy by accepting and understanding his feelings   | 2 |
| B) Help him to see that his parents are concerned about him and do love him. This goal was later changed to help him accept parents lack of concern | 3 |
| C) Support his strengths--he is a bright boy and wants to do well in school   | 3 |

#### Implicit

- |  |   |
|--|---|
| D) Help him to reduce the need to act-out in the community | 2 |
|--|---|

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 2		2						
B : 3					3			
C : 3		3						
D : 2		2						
		14			0			

Proportion of Desired Movement Achieved  $14/30$  - about 50%

INTERPRETATION

Problem statement was explicit and completely adequate. Goals were recorded in a manner that was mostly explicit and partially adequate. Goals were mostly realistic, but there was partial change as a result of changes in the home and in parental relationships and parents' relationship to the boy. During the time of treatment the boy was able to relate to the worker and to improve school functioning, although there were regressions at time of crisis. Acting-out in the community diminished somewhat except for an arrest and probation for telephoning a bomb threat to the school. Relationships with the parents became more of a problem when the parents were divorced and the mother remarried. Both parents, although receiving some treatment, failed to show concern for or achieve any real understanding of their son's problems. Goals in the child-parent relationship had to be reduced to helping the boy accept the inability of the parents to help and to increase his strengths to achieve a level of

independence from them.

#### PROBLEMS IN ASSESSING CHANGE

Clarity in statements of problem and goals greatly enhanced assessment of movement. Lack of parental concern and involvement in helping the boy appears to account for lack of more positive change up to the point of assessment of this record.

#### CASE THREE

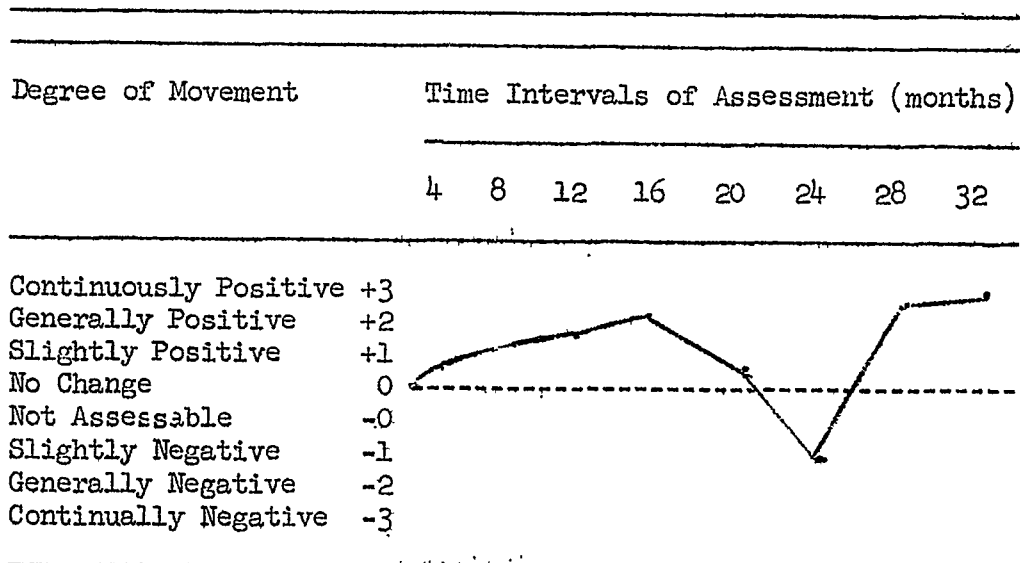
#### IDENTIFYING INFORMATION

This is a twelve year old mentally retarded boy. The mother came to the agency seeking help with school and family problems involved with the child. The boy received casework treatment from October to May of one year and November through January of the next. However, some goals for the boy were decided and treatment for the mother was begun ten months before the boy actually received direct treatment himself. The mother continued to receive treatment eight months after his contact was terminated.

#### RATINGS

Dimensions	Ratings
Problem Statement	Implicit
Adequacy of Problem Statement	Partially Adequate
Statement of Goals	Mostly Explicit
Adequacy of Goal Statement	Completely Adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial Change
Pattern of Change	Generally Positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Help mother to accept realities of boy's retardation	3
B) Obtain diagnostic material from collateral agencies	2
C) Support boy's ego strengths	3
D) Help mother to place him in special class	2
E) Give him help with sexual fears	2
F) Help mother assume a more constructive role with boy	2
<u>Implicit</u>	
G) Foster better relationship with father	3

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3		3						
B : 2	2							
C : 3			3					
D : 2	2							
E : 2					2			
F : 2		2						
G : 3		3						
	12	16	3		0			

Proportion of Desired Movement Achieved  $31/51 = \text{about } 61\%$

INTERPRETATION

The problem statement was implicit and found in the goals which were mostly explicit and completely adequate and realistic. At intake when just the mother was interviewed, the goals were to help the mother to accept the realities of the boy's retardation, release her feelings of anger and obtain collateral information and diagnostic evaluation of the boy. These goals were partially accomplished by six months. Additional goals of giving treatment to the boy, getting the mother to place him in a special class and supporting his ego strengths were set at that time. Treatment began with the boy four months later. After four months of treatment and following psychiatric consultation, goals were further clarified and expanded to give the boy some sex education, to free his castration fears and to work through his negative feelings about women. With the mother help was

given to assist her to assume a more guiding role with the boy. At the end of six months treatment with the boy he had a better relationship with his teacher, marks improved, he was accepted for Little League and had a more positive relationship with his father. No progress was made in helping the boy to discuss his fears and anxieties regarding sex. At the end of eight months the worker left the agency and the boy was assigned to a new worker six months later. He then returned to treatment. It was stated in the record at that time that the boy was not attending school regularly and had no particular friends. He then remained in treatment three months until the second worker also left the agency. No new goals were indicated at the time of the second treatment period. There was no further discussion of the problem or any assessment of change. The mother continued five months longer, working on the boy's problems and her own regarding him. At the end of this time it was recorded that she had been helped to accept the boy's limitations, had entered him in a special class, was able to help and guide him. The boy continued to have problems, but was receiving sufficient help from his parents to cope with them to the best of his abilities.

#### PROBLEMS IN ASSESSING CHANGE

The lack of an explicit problem statement posed a problem in assessing movement in this case. However, the clarity of the goal statement which implied the problems involved did much to off-set this lack in the first eight months of treatment. The record indicates regression in the boy following termination with the first worker, but does not define this clearly. In the second treatment period there is

little information as to present problem, evaluation of goals, or results of treatment at termination. Final outcome had to be judged from the mother's record.

#### CASE FOUR

#### IDENTIFYING INFORMATION

This is the case of a fifteen year old boy who came to the agency because of a skin condition that his family doctor believed was caused by emotional difficulties. Both the mother and boy accepted this referral as each felt that he or she had benefited by prior treatment for similar difficulties. Treatment was for eight months.

#### RATINGS

Dimensions	Ratings
Problem Statement	Implicit
Adequacy of Problem Statement	Inadequate
Statement of Goals	Explicit and Implicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern of Change	Generally Positive

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment								
	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May
Continuously Positive	+3								
Generally Positive	+2								
Slightly Positive	+1								
No Change	0								
Not Assessable	-0								
Slightly Negative	-1								
Generally Negative	-2								
Continuously Negative	-3								

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Increase boy's independence	3
B) Build up self-esteem	3
C) Help him verbalize hostility toward parents	2
<u>Implicit</u>	
D) Alleviate dermatitis	1
E) Improve peer relationship	2
F) Develop better relationship between boy and father	3

OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3		3						
B : 3		3						
C : 2			2					
D : 1		1						
E : 2		2						
F : 3		3						
		24	2					

Proportion of Desired Movement Achieved  $26/42 = 46\%$

INTERPRETATION

The problem statement was implied and inadequate. Goal statement was both explicit and implicit and partially adequate. They were, however, realistic. The goals became more explicit as a result of psychiatric consultation after the boy had been in treatment for six months. The pattern of change was evaluated mainly from the closing summary which states that progress was made toward increasing the boy's independence, dermatitis disappeared, peer relationships increased with support of his self image of being bright and musically talented. He developed a better relationship with his father and was able to verbalize hostile feelings toward his parents. Relationship with the mother improved somewhat, but further problems were anticipated here partially because treatment had to be terminated and partly because of the nature of the mother's own problems.

#### PROBLEMS IN ASSESSING CHANGE

The problems in assessing change in this record were the lack of an explicit problem statement, statement of goals (both in Time 1) and of periodic dictation. The psychiatric consultation after six months of treatment and the closing summary, however, clarified the goals partially, in retrospect.

The Analysis of Four Cases from the  
Boston Family Service Association

Description of the Agency

Boston Family Service Association, a case work agency, offers family counselling services in the Greater Boston area. The clients in this sample were all male adolescents ranging in ages from thirteen to twenty years. The term, adolescent, is used by the Boston Family Service Association to include persons between the ages of thirteen and twenty. In three cases the client was the adolescent and his mother. In two cases the parent or parent substitute were also in treatment, but their record was not used in this study.

The problems being treated were school adjustment, peer relationships, work adjustment, and parent-child relationships.

The workers in two of the cases were social work students in training, and in the other two cases were experienced social work practitioners.

The recording in the two student records was process recording of each interview. The records kept by the social work practitioners were written at the end of treatment and in summary form.

Three of the cases were referred to Boston Family Service by child guidance clinics. The fourth case was referred by a former social worker from a children's agency.

The intake process was, in one case, a part of the record. It consisted of one interview with the intake worker. In the other

three cases the material from the referring agency was attached to the record in the form of a letter or summary statement, or included in a summary prepared for psychiatric consultation.

Motivation for treatment was positive in three cases; and in three cases fees for services were paid.

### CASE ONE

#### IDENTIFYING INFORMATION

The client was a thirteen year old boy with a problem of acting-out at school and home, of under achievement, and of difficulty in peer relationships. He and his parents were referred from a psychiatric clinic. He has a seven year old sister. The father was a slight, anxious man who withdrew emotionally in conflicts. The mother was an aggressive, rigid, compulsive person who turned to her father for support and advice. The mother described a very hostile interaction between herself and client which began when he was two and has continued until the present. The period of treatment with adolescent was seven months. The parents were in treatment with Family Service with another case worker and have a separate record which was not included in this study.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit-Implicit
Adequacy of Problem Statement	Partially adequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Partially adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial change
Pattern of Change	Generally positive

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment
	Nov. Dec. Jan. Feb. Mar. Apr. May
Continuously Positive +3	
Generally Positive +2	
Slightly Positive +1	
No Change 0	
Not Assessable -0	
Slightly Negative -1	
Generally Negative -2	
Continuously Negative -3	

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Support and accept client to help him form relationship with worker	3

Implicit

- B) Help client control acting-out 1  
 C) Help client with ambivalent feelings of  
 dependency and independency 2
- 

## OUTCOME OF GOALS

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Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 1			1					
B : 2		2						
C : 3	3							
	9	4	1					

---

Proportion of Desired Movement Achieved  $14/18 = 77\%$

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## INTERPRETATION

The problem statement was rated implicit-explicit on the basis of the time of statement. Those stated at the beginning of treatment were rated explicit, those at the end of treatment, implicit. The goals were rated mixed in that different goals were stated at the beginning and at the end of treatment. They were rated partially adequate in that they were partially implied. They were rated realistic in that they were arrived at through psycho-social diagnosis and the implied goals were the basis of treatment, though not stated as goals until the end of treatment. Flexibility of goals was rated partial change in that the social worker was unable to achieve the first goal. Goal A was

rated slight change as the client became anxious when the worker sought to control him. Goal B was rated moderate change as client gained some understanding of his behavior in the worker relationship. Goal C was rated great change as the client began to accept worker and identify with him. Progress toward goals was indicated by worker's statement that by end of treatment client's over all functioning had improved. Regression in the beginning relationship was interpreted by worker as increased anxiety when worker tried to control client.

#### PROBLEMS IN ASSESSING CHANGE

Problems were related to the fact that this was a student's record of process recording. The problem, diagnostic impression, and goal are not indicated in the record itself, but is attached in a psychiatric summary. The closing summary includes a statement of the problem and an assessment of the treatment goals.

#### CASE TWO

##### IDENTIFYING INFORMATION

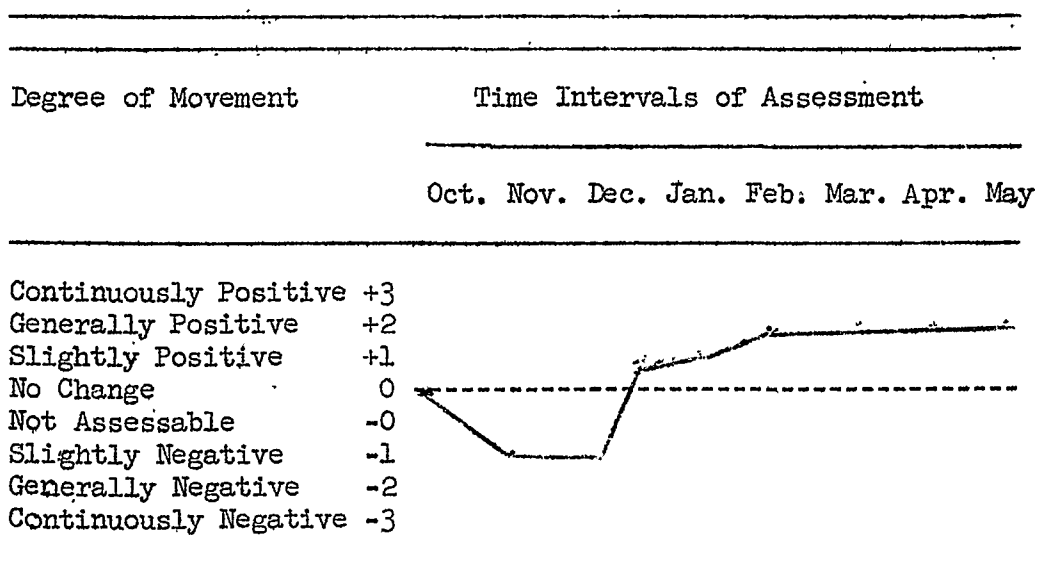
Client was a fourteen year old boy, the youngest of four children, with a severe learning problem felt to be emotional in character. He attended a private school for children with learning problems. When he was four years old his mother became an invalid and was not able to talk. His father deserted. His mother died when he was nine. The three older children lived with the maternal grandmother, and the client lived with his maternal aunt and her husband, who had no children. Treatment was continued with the boy for eight months. His aunt

was seen less frequently by the same worker, but she was not included in his record or this research.

### RATINGS

Dimensions	Ratings
Problem Statement	Explicit-Implicit
Adequacy of Problem Statement	Inadequate
Statement of Goals	Implicit
Adequacy of Goal Statement	Inadequate
Reality of Goals	Realistic
Flexibility of Goals	Partial change
Pattern of Change	Moderate change

### MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Implicit</u>	
A) Help in school adjustment	3
B) Help client control aggressive impulses in order to achieve in school	1
C) Help client accept and talk to adult	3

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3			3					
B : 1					1			
C : 3	3							
	9	6			0			
Proportion of Desired Movement Achieved $15/21 = 71\%$								

## INTERPRETATION

The problem was rated explicit-implicit because there were two different problem statements, one at the beginning of treatment, and the other, a redefinition of the problem, at the end of treatment. The statement was rated inadequate since it was not stated at the beginning of the record. The statement of goals was rated implicit

because the goals were implied from the problem, the worker's treatment and his assessment at termination. The goal statement was rated inadequate since it was not stated. The goals, though they were implied, were rated realistic since diagnostic formulation and treatment were centered around forming a relationship with an adult. Flexibility of goals was rated partial change. After the worker had involved the client in a relationship he focused on client's school achievements. The outcome of goals was scored 15/21 or 75 percent of the goals achieved. Goal A was rated moderate change, being based on the worker's statement that the client's school achievement was satisfactory but still below grade level. Goal B was rated no change as the worker attempted this goal near end of treatment by exploring client's feelings about his family, but client became too anxious. Goal C was rated great improvement as client said he had learned to talk to an adult. Progress toward goals was indicated by worker's assessment of change in client during treatment. A drop in positive movement toward goals came in the first two months of treatment as a result of resistance to forming a close relationship with the worker. After the relationship was established there was positive achievement.

#### PROBLEMS IN ASSESSING CHANGE

The problem was related to method of recording, that is, interviews were process recorded by a student worker. The problem and goals were implied and defined at the conclusion of treatment.

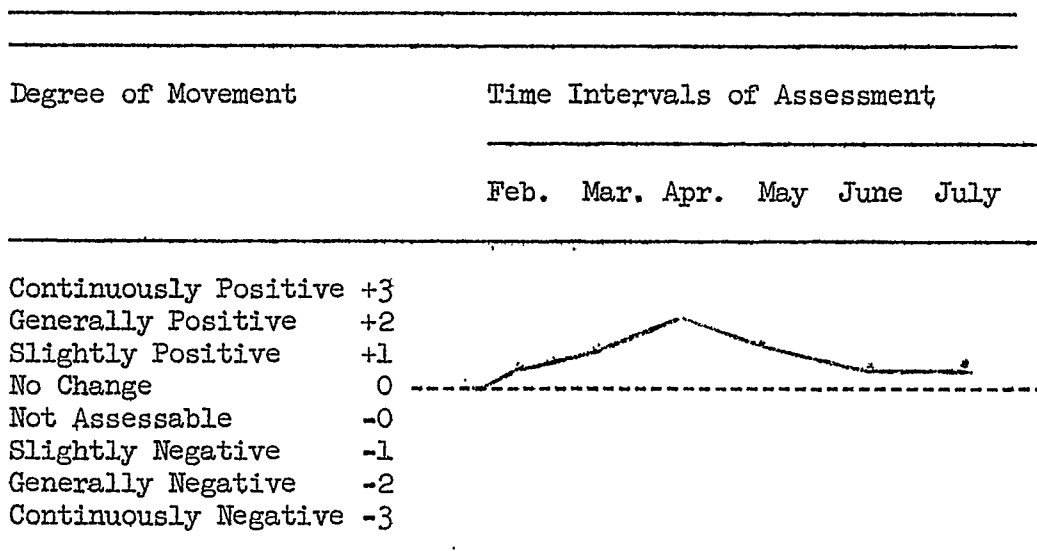
CASE THREE  
IDENTIFYING INFORMATION

Client was a fifteen year old boy. He was a truancy problem and about to be expelled from ninth grade when referred to Family Service by a psychiatrist in a children's clinic where his two older sisters had been in therapy. The family consisted of an intellectually limited mother who is closely identified with the two daughters, aged eighteen and twenty, and a father who isolated himself from the family by spending most of his time in his business, and had never been close to the client. The client spent his week-end and summer vacations with a couple who have helped care for him since his birth, and he felt very much attached to them and identified with them. The worker defined the problem as lack of family communication and the client's lack of purpose and direction. Treatment continued for six months and included the client and his mother.

RATINGS

Dimensions	Ratings
Problem Statement	Explicit-implicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Mixed
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial change
Pattern of Change	Slight change

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) Client must by law attend school	3
B) Focused with client on poor school adjustment and performance	2
C) Helped mother understand client's need for control	2
<u>Implicit</u>	
D) Encouraged client to get job	1
E) Encouraged client in sports	1
F) Discussed trade-school placement with client	1

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 3	3								
B : 2					2				
C : 2					2				
D : 1	1								
E : 1	1								
F : 1					1				
	15				0				

Proportion of Desired Movement Achieved  $15/30 = 50\%$

## INTERPRETATION

The problem statement was rated explicit-implicit because the presenting problem was defined at the beginning of treatment. At the end of treatment the worker stated the problem on which treatment had been focused. The statement was rated completely adequate. The statement of the goals was rated mixed. Although the goals were stated explicitly in the record they were not recorded until the end of treatment. The adequacy of the goal statement was rated completely adequate, and was rated as realistic because the goals were formulated from diagnostic evaluation. Goal A was rated as great positive change as client remained in school through the term. Goals B and C were rated no change. Goals D and E were rated great change as the client was able to get a job, and did play baseball. Progress toward goals was rated slight improvement. In the beginning of treatment the client

responded by coming to the agency regularly and by attending school. When he began being a truant again the school allowed him to complete the year without being expelled. He was intellectually limited and had no motivation to learn. The mother was able to understand the problem but felt helpless to do anything. Neither returned to the agency after school ended. The worker accounted for the regression as being due to the client's limited intellect and lack of motivation, and the mother's basic rejection of her son.

#### PROBLEMS IN ASSESSING CHANGE

Since, apart from one intake interview, this record was recorded at the end of treatment, it was impossible to apply the criteria established for this study. To be able to assess change in behavior, the problem must be defined at one period of time and an evaluation has to be made relative to the defined goals at a later period. In this case such a procedure could not be followed.

#### CASE FOUR

##### IDENTIFYING INFORMATION

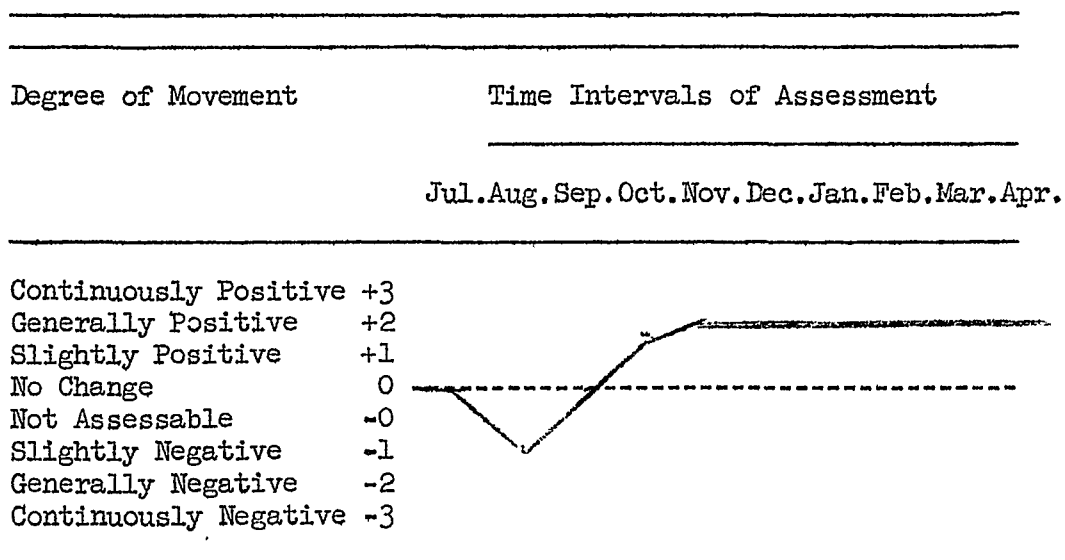
The client was a twenty year old male whose parents deserted him when he was four years old, leaving him to be cared for by his paternal grandparents. He was a delinquent teen-ager who responded to group-work treatment. He had been married and separated following his medical discharge, after a psychotic break, from the U. S. Navy. He came to Family Service for help with his marital problem. The case worker defined the problem as acute separation trauma which

reflected on his adequacy as a male, and concern over his ability to function in a job. Clinical diagnosis by the consulting psychiatrist described the client as an anal character disorder with borderline tendencies. Treatment continued for ten months with the adolescent client.

### RATINGS

Dimensions	Ratings
Problem Statement	Explicit-implicit
Adequacy of Problem Statement	Partially adequate
Statement of Goals	Inadequate
Adequacy of Goal Statement	Implicit
Reality of Goals	Mostly realistic
Flexibility of Goals	No change
Pattern of Change	Generally positive

### MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Implicit</u>	
A) Help client with problem of male identity through identification with worker	3
B) Help client with separation trauma	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 3									3
B : 2									2
									15
Proportion of Desired Movement Achieved $15/15 = 100\%$									

## INTERPRETATION

The problem statement was rated implicit-explicit as only one problem was stated at the beginning. At termination the worker defined additional problems which are therefore listed as implied problems. Since some of the problems were implied the rating partially adequate was given to the adequacy of the problem statement. The statement of goals was rated implicit because they were listed by the worker at termination. The adequacy of goal statement was rated

inadequate because the goals were not explicitly stated at the beginning of treatment. The reality of the goals was rated mostly realistic. Although at termination of treatment the goals had been met, the score of 100% could be questioned because goals were so limited in relation to the psycho-social diagnosis of a character disorder. Movement during treatment was rated generally positive which is not the highest rating. In the beginning of treatment the client regressed, but this was followed by steady progress toward goals. The reason for regression at the beginning of treatment was interpreted by the worker as the client's reaction to worker's absence. The worker had been ill and had taken his vacation. Because treatment was short and the problem one of serious pathology, the high score achieved by goals is misleading.

#### PROBLEMS IN ASSESSING CHANGE

One problem arose from the fact that recording was done at the time of termination. The actual record did not contain a problem statement, history, or treatment goals. This information was contained in the psychiatrist's summary. Another problem of recording was the lack of defined change in the client's behavior by concrete example. The worker's statement that the client had been helped in treatment was sustained by a statement that the client was functioning well in reality situations, was doing well on the job, and was planning to marry again. Because of the short period of treatment and the serious pathology of client, as indicated by the diagnosis as a character disorder, the permanency of the change must be questioned.

## SUMMARY OF FINDINGS IN CASEWORK AGENCIES

### Statement of Problem

Statement of problem was the first category which was taken into consideration while trying to determine the problems in assessing change. From the caseworkers' sample of sixteen cases it was found that in three cases (18.75 per cent of the sample) the problem was stated explicitly, in eight cases (50 per cent of the sample) the problem statement contained both explicit and implicit statements and in five cases (31.25 per cent of the sample) the problem statement was implicit.

Agency-wise it was found that in none of the four cases from the Massachusetts Department of Public Health, was the problem statement entirely explicit. In all four cases from the Boston Family Service the problem was stated partially explicitly and partially implicitly. In three cases from the Child Psychiatric Clinic of the Massachusetts General Hospital, the problem was stated partially explicitly and partially implicitly and in the fourth case it was stated explicitly. Family Service of Brookline had two cases in which the problem was stated implicitly and two cases in which it was stated explicitly.

### Adequacy of Problem Statement

In five cases (31.25 per cent of the sample) the problem statement was rated as completely adequate, in six cases (37.5 per cent of the sample) it was rated as partially adequate and in the rest of the five cases (31.25 per cent of the sample) it was rated as inadequate.

Agency-wise it was found that in two cases from the Massachusetts General Hospital the problem was adequately stated and in the other two cases it was partially adequate, and in three cases from the Department of Public Health it was inadequately stated and in one case it was partially adequately stated. In the cases from Boston Family Service and Family Service of Brookline, the problem statement was rated as completely adequate, partially adequate and inadequate.

#### Statement of Goals

In three cases (18.75 per cent) the goals' statement was rated as mostly explicit, in eight cases (50 per cent of the sample) it was rated as explicit and implicit, in three cases (18.75 per cent of the sample) it was rated as mostly implicit and in two cases (12.5 per cent of the sample) the goal statement was implicit.

In none of the cases was the goal statement rated as explicit, which was the highest category in the scale and also none was rated in the lowest category of the scale, that is where there was no indication of the goal statement.

Agency-wise it was noted that in two cases, which were from the Boston Family Service, the statement of the goals was rated as implicit, the other agency samples fell in all the above mentioned categories of the scale.

#### Adequacy of Goal Statement

In four cases (25 per cent of the sample) the goals were rated as completely adequate, in ten cases (62.5 per cent of the sample) they were rated as partially adequate and in the other two cases of the sample (12.5 per cent) they were rated as inadequate.

In all four cases from the Department of Public Health, the goal statement was rated as partially adequate and under the same category three cases from the Family Service of Brookline, two cases from the Massachusetts General Hospital and one case from the Boston Family Service were rated. In two cases from the Massachusetts General Hospital, and in one case from the two Family Service agencies, the goal statements were rated as adequate. Boston Family Service was the only agency in the sample, which had two cases in which the goal statement was rated as inadequate.

#### Reality of Goals

In thirteen cases of the sample (81.25 per cent) the goals were rated as realistic, in two cases (12.5 per cent of the sample) they were rated as mostly realistic and only in one case (6.25 per cent) the goals were rated as mostly unrealistic. No case in the sample was rated either as mixed or unrealistic.

All four cases from the Massachusetts General Hospital had realistic goals, the other three agencies had three cases each in this category. The only case in the sample with mostly unrealistic goals was from the Department of Public Health.

#### Flexibility of Goals

In eight cases (50 per cent of the sample) the goals were rated as being stable. In the other eight cases the goals were rated as being partially changed. None of the case were rated in the third category of the scale, that is where the goals were completely changed.

Agency-wise it was noted that in the sample from Boston Family Service, three cases had partial change in their goals where as three cases from the Department of Public Health had completely stable goals. The other two agencies had two cases each rated in these two categories.

#### Pattern of Change

In the sample, three cases (18.75 per cent of the sample) were rated as having had a great deal of change, eight cases (50 per cent of the sample) had moderate change, four cases (25 per cent of the sample) showed slight change. There was only one case in the sample which showed no change. There was no case in the sample where it was not possible to assess the change.

Family Service of Brookline was the only agency which did not have any case where there was a great deal of change. The only case in the sample in which there was no change was from the Massachusetts Department of Public Health.

From the rating score of the sixteen cases of the caseworkers' sample, it could be said that the seven categories in the rating scale are equally important in the adequate assessment of change in a case. For instance, if the problem statement was not explicitly stated, then it was hard to determine whether it was adequate or not. This was illustrated in the sample from the Department of Public Health. In three out of four cases the problem statement was rated as implicit and in the other case it was rated as partially explicit and partially implicit. When these statements were rated with regard to their adequacy, it was

found that the problem statements in three cases were rated as inadequate and the fourth one was rated as partially adequate. A similar pattern was also evident in the cases from the other agencies.

This close dependence of categories on one another could be seen again with regard to the goal statement and their adequacy. The more explicit they are the easier it is to determine their adequacy. The sample from Boston Family Service contained two cases in which the goal statement was implicit and in the other two cases it was partially explicit and partially implicit. When their adequacy was determined, two of them were rated as inadequate, one as partially adequate and the remaining one was the only one which was rated as completely adequate.

In the category which rated the reality of goals, thirteen cases (81.25 per cent of the sample) were rated with the highest scores as having realistic goals. The explanation for this could be that it was easier to determine the reality of goals even when the goal statement was stated implicitly.

Finally, it could be said that the nature of the agency did not seem to be important, because no differences were found from the data collected in four different agencies. Two of these agencies were family service agencies and the other two were medical settings. One family agency and one medical agency showed higher ratings than the other two agencies.

In conclusion, it appears that the assessment of change in a social case record is greatly enhanced when it contains all of the above mentioned categories and in the recording, careful and equal attention is given to each one of them.

The Analysis of Four Cases from the Department of  
Neighborhood Clubs of the Boston Children's Service Association

Description of the Agency

The four cases to be studied are taken from the Department of Neighborhood Clubs of the Boston Children's Service Association. The Department is composed of six full time group workers. All of the workers are involved in direct service to groups. The basic idea of the service is to reach out to children who, for reasons of either physical or emotional handicap, or both, have been isolated from their own peer group and acutely hampered in their social functioning, and to form a neighborhood peer group around a particular child with the goal of restoring both personal and social growth and satisfaction.

The program serves both boys and girls and developmental level ranges from latency to older adolescent children. All of the four cases presented here concern boys from the ages of twelve to fourteen years.

The recording is done by the process method, i.e. the actual events and interaction of each meeting are recorded. An interpretation section is usually attached at the end of the process record. Referrals come from many sources; schools, clinics, hospitals and private psychiatrists are frequent sources of referral.

The idea of a club is first presented to the parents of the referred child and with their permission to the parents of neighborhood children. The fact that the club will be treatment oriented is brought out by the worker and mutually explored by both parents and

worker. Much of this explanation of what the club is and what its purposes are is in turn spelled out to the referred boy and the other boys chosen to make up the group. As often as possible the referred boy is encouraged to choose his own friends as club members. The agency believes in furnishing adequate resources in order to insure that the program is up to date, attractive, and therapeutic. This approach has been found to stimulate interest and motivation.

Two of these boys are physically handicapped with accompanying emotional problems. The other two boys are cases of peer isolation and school adjustment difficulties. One of the physically handicapped boys also had great difficulties in school as a behavior problem and was involved in an authority struggle at home.

#### CASE ONE

##### IDENTIFYING INFORMATION

This is a case involving a twelve year old boy with a cleft palate and harelip. This youngster, called Jim here, was seen in therapy for two years prior to our contact with him. A mutual decision was reached by psychiatrist and client to terminate therapy with the general feeling that little had been accomplished. It was at this time that Jim was recommended to the Department of Neighborhood Clubs and the following study was conducted over a one year period of time.

Jim has three siblings; two sisters and a brother. His is a low income family. The conditions as first presented to this agency were that Jim had no friends or playmates; he had been acting-out in school by direct defiance towards authority, exhibitionism and fire-setting;

and was generally dishonest and could not be trusted at home. A group worker formed the treatment group and listed both the problem statement and the goals but the group was actually conducted for the first four months by a caseworker in his first attempt at working with groups. This same group worker returned to take over leadership of the group after these four months and remained with the group throughout this case.

#### RATINGS

Dimensions	Ratings
Problem Statement	Explicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Mostly explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Mostly realistic
Flexibility of Goals	Partial change
Pattern of Change	Slightly negative

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment			
	Oct.	Jan.	Apr.	Sept.
Continuously Positive +3				
Generally Positive +2				
Slightly Positive +1				
No Change 0	-----			
Not Assessable -0				
Slightly Negative -1				
Generally Negative -2				
Continuously Negative -3				

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) To establish peer relationships for J. in order that he more easily accept his handicap and identify with his peer group.	3
B) To give him status in connecting and relating to male leader	2
C) To help J. employ more sociably acceptable behavior.	3
D) To provide a protective situation within which J. can test out ego controls in areas yet undeveloped.	3
<u>Implicit</u>	
E) To help J. establish a self image in line with his peer group	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3			3					
B : 2						2		
C : 3			3					
D : 3			3					
E : 2					2			
			9		0	-2		

Proportion of Desired Movement Achieved  $7/41 = 22\%$

## INTERPRETATION

Although both the statements of the problem and the goals are explicit and adequate, the outcome shows only slight movement while remaining in the generally negative category of behavior. The group itself was conducted by a caseworker in his first attempt at leading a group and he experienced a great deal of difficulty in setting the proper limitations needed in order to enable J. and the other members to function as a group. After a four month period of time the group was again taken over by a trained group worker who was able to rescue the situation and begin to move towards the original goals.

## PROBLEMS IN ASSESSING CHANGE

One of the things that is often somewhat overlooked as a change agent because of its amorphous quality is the worker-client relationship. The first worker in this case had so much difficulty trying to

control this group that he really was not able to begin forming a meaningful relationship with the members. His records reflect a knowledgeable and meticulous approach to human behavior but his lack of experience in working with groups made it impossible for him to move towards the goals which he knew to be the desired ones. The group worker concerned himself with supplying a structure to the group meetings and with working out some of the more obvious authority problems and by the time these things were started, the first year was completed and there was very little concrete evidence of a real change having taken place with J.

Here we see the obvious difficulty of having not only more than one worker but also more than one discipline involved in the handling of a case.

## CASE TWO

### IDENTIFYING INFORMATION

This is a case of a twelve year old boy who has one sibling, a brother, two years younger than him. He is from a middle class family living in a suburban area. He was referred to the Department of Neighborhood Clubs through a private psychiatrist because he was seen as being passive and fearful in responding to peers. Except for school, his peer contacts were very limited. A group worker was assigned to the case and formed a club of six boys; all of whom shared this fearfulness in relating to peers. The time period studied in this case was one year.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit and implicit
Adequacy of Problem Statement	Partially adequate
Statement of Goals	Completely explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Completely realistic
Flexibility of Goals	Partial change
Pattern of Change	Continuous movement

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment				
	Nov.	Jan.	Apr.	July	October
Continuously Positive +3					
Generally Positive +2					
Slightly Positive +1					
No Change 0					
Not Assessable -0					
Slightly Negative -1					
Generally Negative -2					
Continuously Negative -3					

## RATING OF GOALS

Goals	Priority
-------	----------

Explicit

- A) To help B. develop the ability to participate in new experiences, and overcome his tendency to give up when immediate success does not follow 3

- |  |   |
|--|---|
| B) Introduce B. and the group to community resources more in line with the interests of their particular age level                               | 3 |
| C) To increase physical skills and afford opportunities for acquiring mastery in "more run of the mill boy type of activities."                  | 3 |
| D) To provide protective setting for boys to experiment with the release of normal aggression.   | 2 |
| E) To interpret to parents the need on their part of permitting the boys to feel comfortable instead of guilty about their aggressive tendencies | 2 |
- 

#### OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3	3							
B : 3	3							
C : 1	1							
D : 2		2						
E : 3	3							
	30	4						

Proportion of Desired Movement Achieved  $34/36 = 94\%$

---

#### INTERPRETATION

In the statement of problem too much is omitted or implied, thereby resulting in an incomplete picture of the case as it was first seen by the worker. Evidently the fault was in the recording itself because the goal statements were completely explicit and adequate showing that the worker had both studied and diagnosed the case thoroughly. The outcome rating was very high in this case because

the goals were strictly adhered to by means of program activities and B. and the group responded most positively to this new type of experience. The parents of the club members were both surprised and delighted to learn that their youngsters could ride a horse, roller-skate or bowl; and that they were able to go into town by themselves and enjoy an afternoon of fun. Once the idea of the club was accepted by the parents it seemed that half of the goals were achieved. The reason for the partial change in goals was the fact that the progress was so rapid that the worker had to locate new areas of challenge for this group.

#### PROBLEMS IN ASSESSING CHANGE

Aside from the obvious weakness of the problem statement it was easy to assess the change in this group. The recording was very clear and there was considerable evidence of objective testimony by the worker and the parents of the progress that had been made by the club members in this short period of time. The only factor which was found to differ from most cases studied was that there was no evidence of actual negative behavior in the beginning of the case and thus the movement graph shows a positive trend from beginning to end.

#### CASE THREE

##### IDENTIFYING INFORMATION

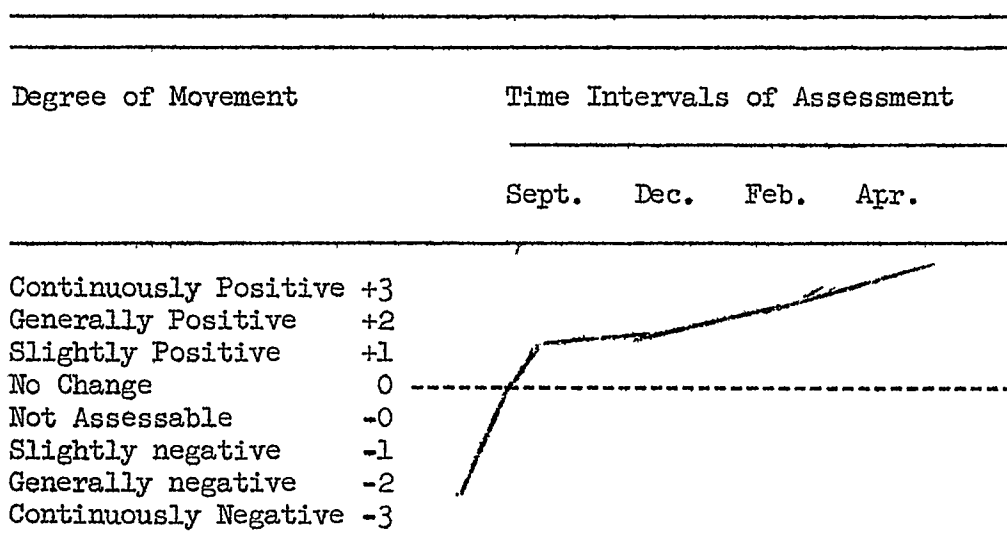
This case is concerned with a twelve year old boy. He has one sister, three years younger than him. His father is an alcoholic and his mother is described as a very nervous person who has always been quite punitive of the boy but not the younger sister. This youngster,

C., was never able to adjust satisfactorily in school; he has acted out by displays of temper and has refused to conform to the regular demands of the school situation. He has also been enuretic in school and has never learned to read. He is classified as a social isolate. His peer relationships had been scarce and marked by much evidence of fighting and rivalry. The time period covered in this case was eight months.

#### RATINGS

Dimensions	Ratings
Problem Statement	Explicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Completely explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Completely realistic
Flexibility of Goals	No change in goals
Pattern of Change	Continuous movement

#### MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) To help C. find ways of relating to peers in other than a hostile manner within the club that he may later extend these mechanisms to community peer groups.	3
B) To help C. overcome, through control of ego impulses, the hostile impulse action he is presently engaging in within the community	3
C) To help C. move on in school to the next grade as he is able to decrease classroom pandemonium impulses through the D. N. C. program so that he may be able to give up some of the masochistic mechanisms he secures at present to get peer attention.	2
D) Possibly to move C. into more intensive psychiatric treatment if this can be done in conjunction with the family.	3
E) To help C. reality test in a protective club situation.	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 3	3								
B : 3	3								
C : 2			2						
D : 3	3								
E : 2			2						
	27	8							

Proportion of Desired Movement Achieved  $35/39 = 89\%$

## INTERPRETATIONS

At the end of the club year it was recommended that C. be placed in an institution where he could be given more intensive care. At this point the worker discussed the termination with C. C. wondered if the club would go on without him and commented, "gee, this was my own club". He expressed a great deal of feeling about the club going on without him but thought it would be good for the other boys. He also ventured that he might be able to visit when he was home on vacation if the club could continue.

The type of program and C.'s reaction to it showed that C. had progressed considerably with ability to master his impulses and to relate to both adults and peers. He was able to participate week after week in this program with the result that he developed physical skills and with these felt more adequate. He also learned to share both in the activities with peers and in his need to get all the attention from the adult.

C.'s school work did not improve as much as the worker had hoped it would but the fact that the worker was able to get C. into placement where he could get psychiatric help showed that a sense of trust had begun between worker and C. and between worker and C.'s parents.

## PROBLEMS IN ASSESSING CHANGE

The statements of the problems and the goals were clear and very well formed as was seen in the outcome rating. The only problem in assessing change stemmed from the fact that this boy was deeply disturbed and it became increasingly evident that residential treatment would be the preferred method, and one would wonder if the changes

that were could be counted as being of a permanent nature. The recording and the method of treatment were most adequate.

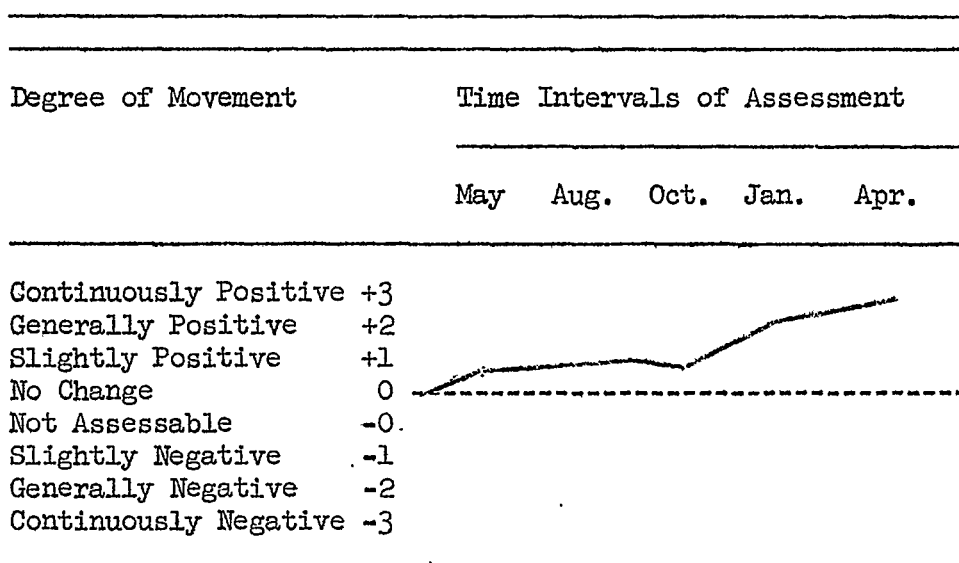
#### CASE FOUR IDENTIFYING INFORMATION

This is a classic case of an adolescent boy who was almost completely isolated from his peer group. "S." was born with web hands and feet. He has had several operations and at the time of the start of the club he was able to get around without the aid of a wheel chair although his feet were crooked and his hands were separated but thick and awkward. This boy saw himself as an unattractive handicapped individual and had many doubts about his own personal worth. It was discovered at the onset of the club program that S. spent almost all of his time at home in his room, and as a result was quite suspicious of the group worker for the first few months. Time period was one year.

#### RATINGS

Dimensions	Ratings
Problem Statement	Completely Explicit
Adequacy of Problem Statement	Completely adequate
Statement of Goals	Explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Completely realistic
Flexibility of Goals	Partial change in goals
Pattern of Change	Generally positive

## MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
A) To help S. acquire a sense of his own worth	3
B) To assist S. in acquiring social and play skills which will enhance his status among his peers.	3
C) Create opportunities for S. to be able to sublimate aggressions and hostility.	3
D) Give S. support in breaking away from his parents	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3	3							
B : 3		3						
C : 3		3						
D : 2	2							
	15	12						
Proportion of Desired Movement Achieved $27/33 = 81\%$								

## INTERPRETATION

There were two club leaders in this case and both were professional group workers---it is interesting to note that the statements of the problem and goals were felt to be completely explicit and adequate as formulated by the first worker and the successful outcome reflected the work of both workers. This seemed to prove that one worker can replace another when the study and diagnostic processes have been well done. There was a moderate movement towards the accomplishment of goals and a generally positive outcome at the end of a year. There was no evidence of any new negative change. The goals changed after the first six months because the client gained new strengths and developed new needs.

## PROBLEMS IN ASSESSING CHANGE

This is another example of a case which starts from a complete standstill making it relatively easy to be able to assess the change. The recording was very clearly done and before each meeting the goals were listed and their accomplishment appraised in the impression section of the record. In all of these cases the skill of the various workers has been a definite factor. This is proven by the fact that the outcome is most often quite consistent with the statement of goals.

The Analysis of Four Cases from the  
Brookline, Brighton, Newton Jewish Community Center

Description of the Agency

The Brookline, Brighton, Newton Jewish Community Center is an agency which serves clients of all ages. Its major focus is on helping individuals accomplish the tasks of their age level in an attempt to help them have a happy and well adjusted life. The groups served are; children in grammar school and high school, single young adults, married couples, married people who have lost their partners, and senior adults.

The records analyzed were written by workers who led the following groups; (1) a group of eight adolescent boys, (2) a group of ten adolescent boys, (3) a group of ten adolescent girls, (4) an A. Z. A. Chapter and its executive board. All of the groups except for the last one were friendship groups, the latter one being a Chapter of a National Service Organization.

Process recording is used by all of the professional workers in the agency. The individuals in the groups are briefly interviewed when they first come to the agency by a member of the staff to determine which group best serves his needs.

CASE ONE

IDENTIFYING INFORMATION

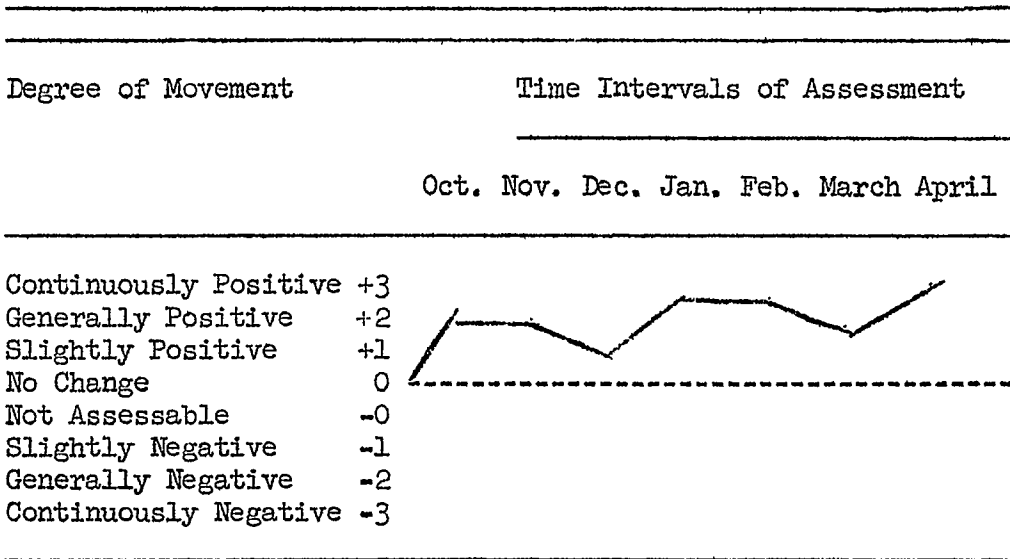
The group studied consisted of eight adolescent boys. The group had been in existence for a number of years. In the previous year the group had gained a negative reputation because of their acting out

behavior. The time interval was six months.

RATINGS

Dimensions	Ratings
Problem Statement	Explicit and Implicit
Adequacy of Problem Statement	Partially Adequate
Statement of Goals	Mostly Explicit
Adequacy of Goal Statement	Completely Adequate
Reality of Goals	Realistic
Flexibility of Goals	Partial Change
Pattern of Change	Generally Positive

MOVEMENT SCALE



## RATING OF GOALS

Goals	Priority
<u>Explicit</u> <sup>2</sup>	
A) Help group undertake an activity outside of the center without the leader present	1
*B) Develop growth and friendship within the group and among the members	3
C) Work with E. as to motives for joining Armed Forces	1
*D) Help group accept the club name used last year and identify with the name in a positive way	3
E) Help boys explore possible feelings of prejudice	2
F) Prepare group for possible failures which they may encounter so they will be able to accept them	2
<u>Implicit</u>	
G) Help group develop heterosexual relationships	2

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 1					1			
B : 3		3						
C : 1					1			
D : 3		3						
E : 2		2						
F : 2			2					
G : 2			2					
	24	8		0				

Proportion of Desired Movement Achieved  $32/42 = 76\%$

<sup>2</sup>On the movement scale in all of the following cases those goals which have been studied for movement have been indicated by an asterisk.

## INTERPRETATION

Although the worker did not clearly state what was the major problem he implied it through his clear statement of goals for the group, (e.g. develop growth and friendship within the group and among the members. Help the group accept the club name used last year and identify positively with it.) The goals which he stated were clear and concise. There was definite movement toward most of his goals. The group was definitely more cohesive at the end of the year and decided to continue to use the same club name the next year. This movement can be noted in the pattern of change for his two primary goals which has been stated above. By April he seems to have achieved maximum movement with three of his goals and moderate movement toward fulfillment of two of his goals.

## PROBLEMS IN ASSESSING CHANGE

It was not difficult to assess the movement in the record as at all times the type of movement that he was attempting to achieve was noticeable. Because of the excellent recording and statement of goals which were clear, concise and complete, no difficulty was found in assessing movement toward the fulfillment of his goals.

## CASE TWO

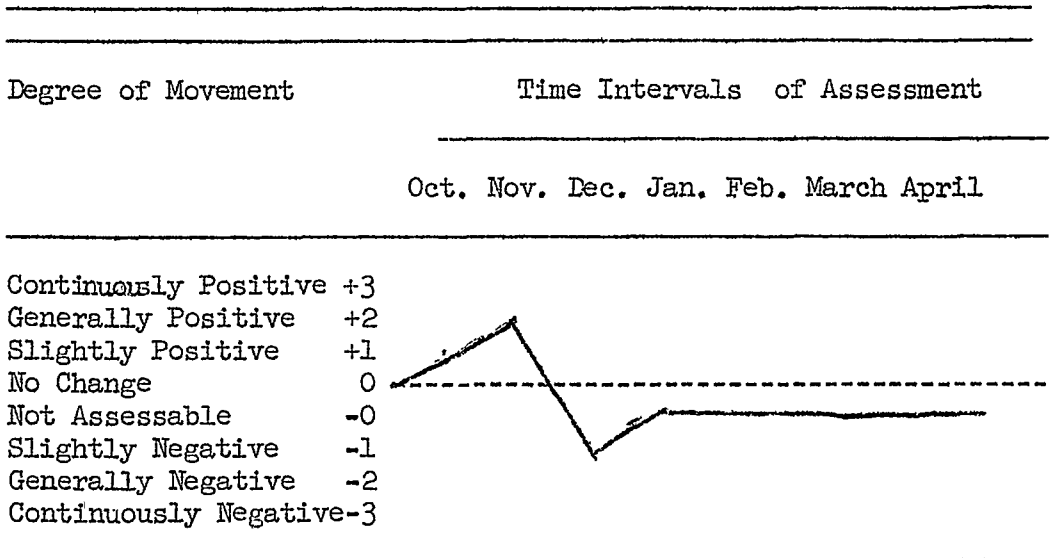
### IDENTIFYING INFORMATION

The group studied consisted of ten adolescent boys between the ages of sixteen and seventeen. This was a friendship group which had been in existence for four or five years. The time interval was six months.

RATINGS

Dimensions	Ratings
Problem Statement	Not Stated
Adequacy of Problem Statement	Inadequate
Statement of Goals	Implicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Felxibility of Goals	Partial Change
Pattern of Change	Not Assessable

MOVEMENT SCALE



### RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
None stated	
<u>Implicit</u>	
*A) Help president develop leadership techniques	2
*B) Help boys develop heterosexual relationships	2
*C) Develop responsibility among members	3
*D) Help boys work through feelings of 'Jewishness'	2

### OUTCOME OF GOALS

Goals	Degree of Achieved Progress								
	+3	+2	+1	-0	0	-1	-2	-3	
A : 2	2								
B : 2		2							
C : 3	3								
D : 2			2						
	15	4	2						

Proportion of Desired Movement Achieved  $21/27 = 78\%$

### INTERPRETATION

At no time during this record was there a statement of the major problem of this group. Since there were no explicit goals stated, it was impossible to determine what was the major problem of this group. Because the worker's records were very incomplete and unclear, very

little movement was noted throughout the record. This made it impossible to note the pattern of change from January through April. However, it must be noted that the worker wrote a very complete summary at the end of his record which made it possible to determine the outcome of his goals.

#### PROBLEMS IN ASSESSING CHANGE

It was very difficult to assess movement in this record because there was no problem statement and no explicit goals stated. The worker was not clear as to what he was trying to accomplish, and hence it was difficult to assess the movement toward his goals. If the recording had been more complete it would have been more possible to assess movement throughout the record.

#### CASE THREE

##### IDENTIFYING INFORMATION

There were two groups included in this worker's records. A large group of thirty adolescent boys and a smaller group of six adolescent boys who served as an executive board for the larger group. The larger group served as a service group. The time interval was five months.

## RATINGS

Dimensions	Ratings
Problem Statement	Not Stated
Adequacy of Problem Statement	Inadequate
Statement of Goals	Explicit
Adequacy of Goal Statement	Partially Adequate
Reality of Goals	Realistic
Flexibility of Goals	No Change
Pattern of Change	Not Assessable

## MOVEMENT SCALE

Degree of Movement	Time Intervals of Assessment					
	Nov.	Dec.	Jan.	Feb.	March	April
Continuously Positive	+3					
Generally Positive	+2					
Slightly Positive	+1					
No Change	0					
Not Assessable	-0					
Slightly Negative	-1					
Generally Negative	-2					
Continuously Negative	-3					

## RATING OF GOALS

Goals	Priority
<u>Explicit</u>	
*A) Get the members of the executive board to report back to the main group decisions made in their executive meetings	3
*B) Work with members of the executive board, give them help and advice	2
C) Have the executive board accomplish a lot for the benefit of the chapter	1
D) Worker wants to develop relationship with X	1
*E) Help Y adjust to new role of not being an officer	2
<u>Implicit</u>	
None	

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3					3			
B : 2					2			
C : 1					1			
D : 1		1						
E : 2					2			
		2			0			
Proportion of Desired Movement Achieved 2/25 - 8%								

### INTERPRETATION

As in case two, at no time during this record was there a statement of the major problem of this group. Although all of this worker's goals were explicit, it was impossible to determine the major problem. This was because all of the goals were related to segments of the group rather than to the group as a whole. (e.g. get the members of the executive board to report back to the main group decisions made in their meetings. Help Y. adjust to new role of not being an officer.) It can be noted from the above graph that there was no pattern of change assessable for the worker's one primary and two major goals. In the graph showing outcome of goals, one finds that there was no indication of movement toward the above three goals, however, there was movement toward one of the worker's minor goals.

### PROBLEMS IN ASSESSING CHANGE

Although the goals were explicit, it was impossible to assess movement toward the fulfillment of these goals. In most cases this was because the recording was general and did not deal with specific incidents which showed movement.

### CASE FOUR

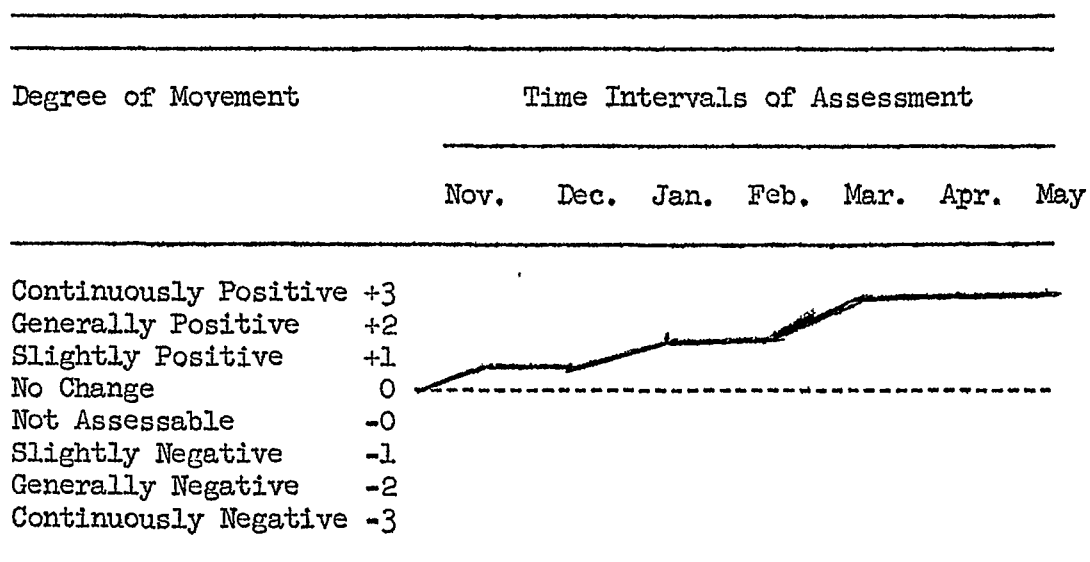
#### IDENTIFYING INFORMATION

The group studied consisted of ten adolescent girls in the tenth grade. This was a friendship group. The time interval was six months.

## RATINGS

Dimensions	Ratings
Problem Statement	Explicit and Implicit
Adequacy of Statement	Partially adequate
Statement of Goals	Mostly explicit
Adequacy of Goal Statement	Completely adequate
Reality of Goals	Mostly realistic
Flexibility of Goals	Partial change
Pattern of Change	Continually positive

## MOVEMENT SCALE



## RATING OF GOALS

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Goals	Priority
<u>Explicit</u>	
*A) Help girls form healthy heterosexual relationships	3
B) With X, help her face problem of being afraid of challenges, help her realize she is an acceptable person	1
C) Establish a relationship with Y	1
D) Discuss dating behavior with girls	2
E) Explore group's feelings around college and careers	2
F) Change tone of meeting from one of strictly business to a more informal atmosphere	1
G) Spend more time with club and participate in their programs	1
H) Make interesting discussions a regular part of club meetings	1
I) Clear up feelings between Z and X	1
J) Help A relax and be herself	1
K) Help B develop wider interests, think about others	1
L) Help C feel more needed in club by giving her responsibility	1
M) Have D take over a meeting	1
N) Talk with F about herself	1
<u>Implicit</u>	
*O) Develop friendship within group and among members	3

---

## OUTCOME OF GOALS

Goals	Degree of Achieved Progress							
	+3	+2	+1	-0	0	-1	-2	-3
A : 3	3							
B : 1	1							
C : 1		1						
D : 2	2							
E : 2		2						
F : 1	1							
G : 1		1						
H : 1	1							
I : 1				1				
J : 1				1				
K : 1				1				
L : 1				1				
M : 1	1							
N : 1		1						
O : 3	3							
	36	10		0				

Proportion of Desired Movement Achieved  $46/58 = 79\%$

## INTERPRETATION

Although the worker did not clearly state what were the major problems of her group, she implied it through her clear statement of goals. (e.g. help the girls form healthy heterosexual relationships and, develop friendships within the group and among the members.) Although the goals stated were clear and concise, she had too many goals to be able to achieve movement toward all of them. Hence, her goals were mostly realistic. It is significant to note that there was a definite positive pattern of change toward her two major goals. (e.g. by April, the girls had developed close bonds among themselves and had formed healthy heterosexual relationships.)

## PROBLEMS IN ASSESSING CHANGE

All of this worker's goals were clear and concise. Because of this, it was not difficult to assess movement in the record as the type of movement that she was attempting to achieve was at all times clear.

## SUMMARY OF FINDINGS IN GROUP WORK AGENCIES

The two group work agencies involved in this study are the Jewish Community Center in Brighton (J.C.C.) and the Department of Neighborhood Clubs of the Boston Children's Service Association (D.N.C.). Here are the statistical results of the four cases studied in each of the two agencies.

### Recording in General

All four D.N.C. cases were recorded clearly and concisely. While two of the J.C.C. cases were clear and concise, the other two were judged as vague and incomplete.

### Statement of Problem

Again the D.N.C. cases contained a very complete and adequate problem statement which were mostly explicit. On the other hand, two of the J.C.C. cases proved to be inadequate while the other two proved to be partially adequate. In two cases there was no problem statement and in two cases the problem statement was explicit and implicit.

### Adequacy of Goals

It was decided that an adequate goal was one which would allow for any other trained worker to be able to substitute for the original worker and implement the goal. The D.N.C. goals were adequate in all cases. The J.C.C. goals were adequate in two cases and partially adequate in the other two cases.

### Explicitness of Goals

The goals of the D.N.C. cases were either explicit or mostly explicit in all cases. The J.C.C. had one case that had completely explicit goals; two that had mostly explicit goals and one that had implicit goals.

### Reality of Goals

Three of the D.N.C.'s goal statements were completely realistic and the other was mostly realistic. The same was true for the J.C.C.'s goal statements.

### Movement of Client

One case at D.N.C. showed a pattern of change from continuous negative behavior to slight negative behavior. Another case showed a generally positive pattern of movement while the other two cases were ones of continuous movement. In the J.C.C.'s cases, one was generally positive, one was continuously positive and two cases showed a non-assessable movement.

### Outcome

The outcome is figured in terms of the number of goals and the degree of attainment of each goal at the time the study was terminated. According to this formula D.N.C.'s case I received a score of 9/41, i.e. nine of the possible forty one points of desired movement was achieved. The other D.N.C. scores were; case II 34/36, case III 35/39 and case IV 27/33.

The scores for the J.C.C. cases were; case I 32/42, case II 21/27, case III 2/25 and case IV 46/58. The outcome statistics of both agencies have one rather glaring inconsistency about them. This is in the cases in which only 9/41 and 2/25 of the desired proportion of movement was

achieved. It is interesting to note that both of these groups were led by trained case workers. This seems to indicate that even though the statement of problem and goals may be adequate, it is necessary to have the trained group worker using his techniques and skills in order to produce the desired outcome.

Fortunately, due to the policy concerning the recording of all club meetings at D.N.C., the incidence of problems in assessing change was minimized. In the records studied at the J.C.C., the recording was sometimes vague and incomplete thereby making it more difficult to assess the change. The time-involved in working with the groups is another factor effecting the assessment of change. The J.C.C. conducts an accelerated group service program aimed primarily at socialization. These groups are together for one year and sometimes less due to the rapidly changing clientele. Often the size of the friendship groups are larger than that size in which the group worker can use himself most effectively. This together with the fluxuation of group members requires that the worker spend most of his time in preparation for the groups, leaving only enough time for summary recording at best.

The D.N.C. records present an entirely different problem. Many of these records are used for teaching purposes within the agency and at professional seminars, hence they are meticulously recorded and very informative. Most of the clubs are carried on over a four year time period. The problem is in deciding which time period to select for study because the pace of movement may vary considerably, in fact it is expected to vary. The group worker may be concerned with forming a

relationship with his club members during the first phase of the club life. While this is a realistic goal, it may not be directly connected with the specific goals for the individual members. Another example of this can be seen if one would choose only the last club year for study. One would expect to be able to trace a more pronounced pattern of movement within the client. This study allowed sufficient time for the worker to form a working relationship with the club members but at best this could only be an estimation.

It might be speculated that in a program like the one at the J.C.C. it is more difficult to assess change when the long range goal is socialization, than in the case of the D.N.C. which concerns itself with treatment using socialization as a means to an end.

Groups do generally lend themselves to being assessed. When one looks at such group properties as cohesiveness, leadership and program planning it is easy to see some definite movement of one kind or another. This same situation is present with individuals whose roles may change markedly as group life progresses.

### SECTION III

#### Summary and Conclusions Based on Both Case Work and Group Work Findings

One of the most significant findings in this study was a relatively high degree of interrelatedness between the ratings of most of the categories throughout the case work and group work summaries. Some category findings seemed to have a direct bearing on the outcome of others. An illustration of this can be seen in the categories dealing with explicitness and adequacy of the problem statement, particularly in the group work findings. Invariably, when the problem statement was rated as explicit, it was also rated as adequate. Conversely, the more implicit the problem statement was judged to be, the more inadequate it was felt to be. In the case work material there was somewhat less correlation in the categories concerned with problem statement. This might have been decreased by the use of another rating between adequate and partially adequate. The group workers seemed to be more definite in rating these categories concerned with problem statement and adequacy of problem statement. They rated the problem statement as explicit or implicit, adequate or inadequate with less use of the middle ratings which was so often chosen by the case workers. This may mean that the group workers were more certain of exactly what information should be in the problem statement.

There was a generally high degree of interrelatedness in the two categories dealing with explicitness and adequacy of the goal statement in both case work and group work summaries. As in the problem statement,

the more explicitly the goal was stated, the more adequate it was judged to be. Conversely, the more implicit it was, the more the rating of inadequate was selected. This seems to indicate quite conclusively that where goals as well as problems are stated implicitly there is not an adequate outline of the problems and goals of a particular case.

For the most part, there was considerably fewer cases in which the statement of goals was entirely implicit. This is in contrast with the statement of problem which was more frequently rated as implicit. There were no cases in which the goal statement was assessed to be entirely inadequate, or in which there was no goal statement. This held to be true even if the problem statement was inadequate. One can question why social workers who are trained to think in terms of a psycho-social evaluation so often did not state the problem explicitly and adequately. This is particularly difficult to understand since the statement of goals was explicit in so many cases.

In the category entitled "reality of goals", the case workers and group workers rated over ninety percent of their cases as completely realistic. On the whole, goals were mostly stable or partially changed throughout treatment. It is felt that where partial change in goals occurred, this change was based on sound social work reasoning. The ratings of complete change in goals and non-realistic goals were never used.

The relatively high rating of the four categories concerned with goals seems to suggest that social workers are concerned with and do adequately state realistic goals.

The group workers in contrast to the case workers felt that the significant differences in the findings of the two group work agencies had some relationship to the different agency structures. They felt that the agencies' policies of recording and the types of groups served by each made a difference in their findings.

For the most part, both the case workers and group workers were able to assess change by using the categories established in this research study. There appeared to be a correlation between the outcome of goals in each case and the worker's statement of problem and goals. One can speculate from this that good recording is associated with, and perhaps leads to, success in treatment. It is possible that the problems in assessing change might be related only to the function of recording rather than performance itself. However, one would wonder why, if social workers are confident in what they are doing, they often fail to communicate this in their recording.

In conclusion, it was felt that there were generic problems in the assessment of change. It is hoped that at sometime in the future social work will have devised a systematic assessment procedure on the order of the one used in this study to reduce or entirely eliminate the problems in assessing change.

## CHAPTER IV

### DISCUSSION CHAPTER

This chapter will discuss the interpretation of the results and the inherent limitations of this study. As we saw earlier, our research task was to evaluate problems in assessing change through the use of agency records. The results indicate that there is a generic process common to both group work and case work.

The importance of these findings stems from a basic objective in social work which is to effect change. Change does not exist in isolation, but is a chain of interrelated activities. The social work process defines the point where treatment starts and charts the direction in which it is to go. It is the responsibility of the social work practitioner not only to mirror what has happened in treatment, but also to focus the problem, diagnose and plan treatment which will effect change through the social work relationship and finally to assess the results. This study has shown that in half of the records analyzed, the above process was not implemented.

In this research study we have assumed that the agencies use of a record, beyond the legal sanction, is an indication of what is happening in the social work process. Change which has been effected by the social work relationship should be assessable from the record. Basic to the problem of assessing change in social work treatment is the worker's ability to interpret activity. When a worker writes a record it should be based on organized thinking in a disciplined manner. The failure of this organized thinking to be reflected in the record may be

an indication of a number of things, e.g., lack of confidence necessary to use records properly, an inadequate evaluation, or inadequate performance. It may be that the worker uses his skills to maximum advantage in the social work situation, but has neglected to use the record as a means of recording his activity. The reason for by-passing the record as a useful tool when it occurs, ought to be a focus of concern for all social workers. Underlying this may be the belief that the record no longer serves a useful purpose. If so, the place of the record in social work should be reevaluated and made more pertinent or eliminated in its present form from practice.

However, in spite of the problems which have been encountered in using records, they do offer a unique potential for research, as they are a means by which one can examine the incidence of social change within social work. If a suitable form of recording were adopted by all client-serving agencies there would be a starting point for reliable research. The form might include such information as a statement of the problem and goals, an indication of the worker's and client's involvement in bringing about change, and an objective appraisal of the outcome. Perhaps a standardized recording technique could be tested in the agencies of one city or area. The results could then be examined after a determined period of time.

Against the background of the above presented material, let us look at some of the limitations of this study. One of the limitations was related to the collection and interpretation of the data. Although the sample was small, the results were sufficiently consistent across

different agencies to suggest that the cases sampled were likely to be representative of social work practice. Another limitation was the fact that the assessment of data was made by six different students. In an effort to minimize this limitation and insure reliability, the material from the data was coded by at least two different individuals.

Two additional limitations were the time and problem factors which differed in each case. The time varied from five months to thirty-one months. The problems treated by the social workers varied from early personality disorders to difficulties in peer relationships. Although we were aware of these limitations, we did not feel that they were significant enough to seriously affect the outcome of this study. One further limitation which we noted but were not able to control was centered around the interpretation which we were required to make of the practitioners concepts of goal, problem statement, movement, etc. This difficulty in control derives from the ambiguity which is present in the conceptual framework of social work.

Finally, the implementation that an agency makes of social work records is somewhat different for each agency. The use of data records which had been written for a purpose other than research limited the interpretation which could be made. This made the task of analysis more difficult, but was not considered to be of such major importance that it would seriously hamper the results of our study.

In overview, the results of our research have shown that there are common problems in the assessment of change both within and between case work and group work agencies. We have found that appropriately recorded

records can be used as an effective instrument to measure the outcome of social work practice. As a result of this study, we feel that social work records would benefit from containing a set of basic information regarding the statement of problem, the social work goals and the outcome of goals. Added to this basic set of criteria could be information pertinent to unique agency functions. This problem of both recording and social work practice could be dynamically improved if the field developed greater conceptual clarity. This we feel must be present before more adequate assessment instruments can be accomplished.

## CHAPTER V

### SUMMARY CHAPTER

In recent years, the field of social work has become increasingly concerned with the need to assess movement in clients and groups. This concern has grown out of social work's desire to better evaluate the effectiveness of its services. A number of attempts have been made to develop instruments which can effectively assess this desired change. The purpose of this research study is to explore the use of records as an instrument in assessing movement.

Four case workers and two group workers have analyzed records from each of their agencies in an attempt to determine those elements which must be present in order to assess change. A scale with seven dimensions was developed to assist in this assessment. Each student rated his four records on this scale and then evaluated the adequacy of the record as an indicator of movement. Following this, there was a comparison of data between the group work and case work agencies. This was to determine if agency policy and focus affected the movement in clients and the method of recording. The final step was a comparison between group work and case work findings to determine if there were common problems in the assessment of change.

We have found that there are common problems in the assessment of change in both group work and case work. These problems are centered around the ambiguity of a conceptual framework in the field. This ambiguity is found in the lack of pertinent information which should be present in records, e.g., adequacy of problem statement, goal

statement and outcome. Two major conclusions were drawn from this study. Firstly, the field needs to develop greater conceptual clarity before an adequate assessment instrument can be accomplished. Secondly, an attempt must be made to determine for what purpose records are written. At the present time it appears that social workers are not always using records to their fullest advantage, in that they do not always reflect change which is taking place in a client or group. Since social work is aimed at bringing about change, we feel that records should reflect this change. If they do not, they should be reevaluated as to their purpose and either made more pertinent or eliminated in their present form from practice.

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