It’s All Connected:  
Reaching for Goals  
David Belford, LISW  
August 2012

NMAIMH competencies addressed

Theoretical Foundations
  • infant/very young child & family-centered practice
  • relationship-focused, therapeutic practice

Working with Others
  • building & maintaining relationships

Direct Services Skills
  • observation & listening

Thinking
  • planning and organizing

If you don’t know where you are going, you’ll end up someplace else.  
Yogi Berra

Developing goals in partnership with the family provides a common agenda that is a key component of any relationship. Having goals helps us come to an agreement about what we are doing together. Without a common agenda we may find ourselves working at cross-purposes, or even lacking purpose during our visits. When we forget our purpose, goals can also offer us a way to center our work; a touchstone to return to. They help us be mindful of how we spend our time with families and of what the family’s investment is in meeting with us.

On another level, when we tie goals to the outcomes of the Home Visiting Program through the database, we document the successes of families and the impact of home visiting.

During the initial visits with a family, the home visitor can document that the goal for the first few weeks is to form a relationship with that family while at the same time, gathering information through the intake and screening process that helps to develop ongoing family goals. We can measure our progress by whether we are able to engage that family (are we invited back?) and by our progress toward completing the intake and screenings.
Thinking about the development of goals as a process may be helpful. This process doesn’t begin when the intake and screenings are completed, but as the family is sharing their story. We pay attention to what they say that might offer hints about their hopes, dreams, and concerns. As we listen we also want to observe and notice the interactions that are taking place between the parent and the child. These will offer us clues to what is important to the family as well as ideas for strategies. This could be as simple as a parent commenting on the amount of money the family is spending on diapers, which could lead to a goal of potty training (assuming that is developmentally appropriate for the child’s age and functioning). If during visits you observe that the parent isn’t noticing their child’s cues that they are about to go in their diaper, one of the strategies might involve working together to figure out their child’s cues so the parent can get the child to the bathroom. The Home Visitor may offer to the parent that they observe this and wonder with them if this could be a goal to work on.

Many families, when asked about their goals, reply that they don’t know or aren’t sure what goals they want. In working with a parent around their goals, it might be helpful to make the process more tangible by identifying goals the parents have set in the past without even knowing it! If a family member has a green card, becoming employed was probably a goal at one time and securing a green card was one of the strategies they used to get a job. If they have a car, at one time obtaining a car was one of their goals and setting aside the money to purchase the car or investigating financing options was a strategy they used.

Goals that are specific, positive, measurable, and achievable within a relatively short time frame (3 to 6 months) will be the most useful.

Families often identify a goal that is very general. As an example, a family might say, “I want my child to be smart”. That is a wonderful goal, but is very broad. As we explore this goal with the family, a parent might offer they’d like to start reading books with their child because they’ve heard that helps children learn. We might be tempted to develop a goal such as, “mom and dad will read a book everyday with Bella”. Again, this is a great goal but it is similar to a close-ended question in that it limits where we can go with it. Instead, we could use this as an opportunity talk about child development and, depending on the child’s age, how we will know that Bella is learning.

A new goal based on the conversation above might be child-focused (as opposed to the above goal that is parent-focused) and read something like: “Bella will point to pictures in the book when her parents label them”. This type of goal also helps, in part, define the role of the home visitor and creates lots of possibilities for directions to explore. It opens up the possibility of discussing parent-child interactions and ways of engaging and responding to Bella so that she’ll be more interested in books, for example.

A goal such as “Bobby will stop throwing tantrums” places the focus on the negative behaviors. In the same way that we want to identify what’s working in a relationship and build on that, we also want to place the emphasis on the desired behavior. In this case, placing the emphasis on the positive behavior, we might come up with, “Bobby will have
alternative ways to let his parents know what he wants”. We could then measure this by noticing a decrease in the number of tantrums. Next month we’ll continue to talk about goals but will focus more on strategies and resources that the family can draw on to meet their goals.

Talking points for supervisors

- What does the home visitor pick up from the first couple of visits that might be useful when it comes time to develop goals with the family? What have they heard and what have they observed in terms of parent-child interactions?
- How comfortable is home visitor in partnering with families to develop goals?
- Is there a parallel process to how you and your home visitor develop the home visitor’s professional development goals and how the home visitor and parent develop child and family goals?