

Child-led goal setting: From research to practice

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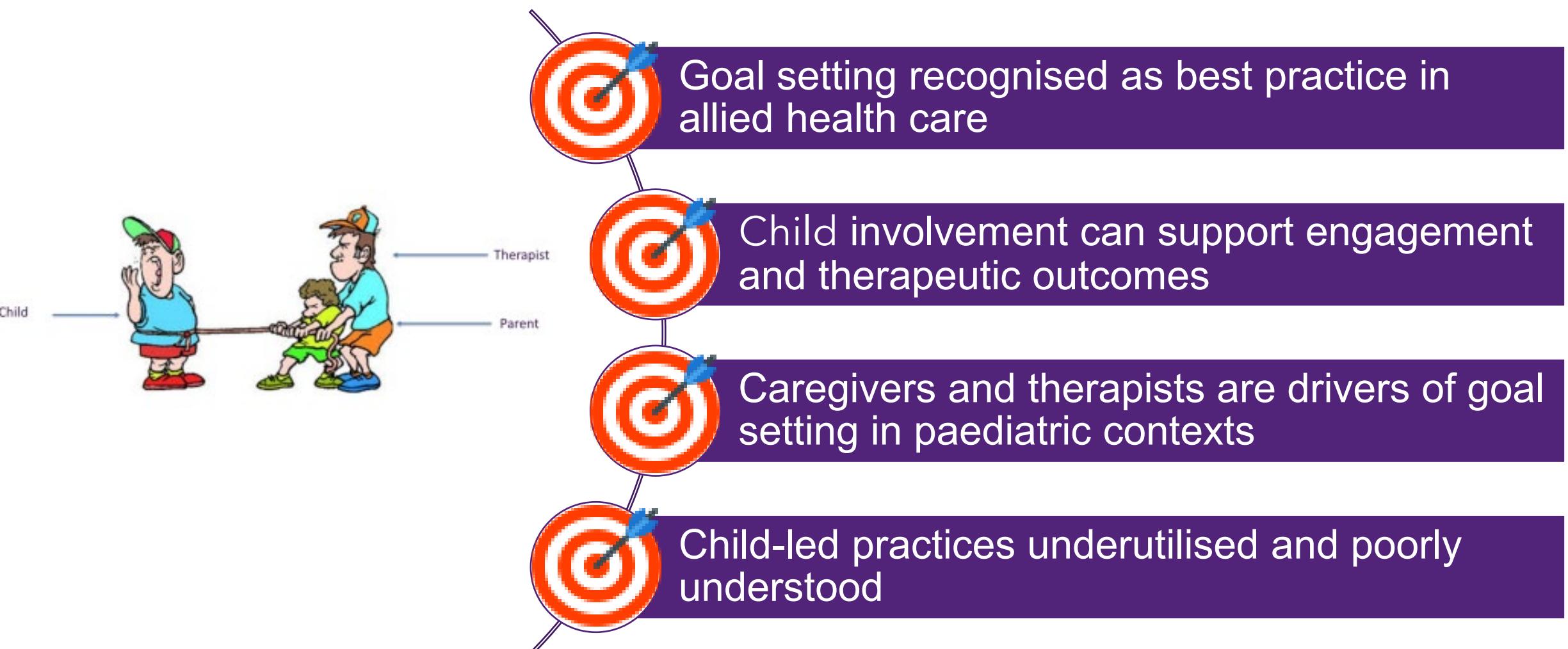
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Why child-led goal setting?

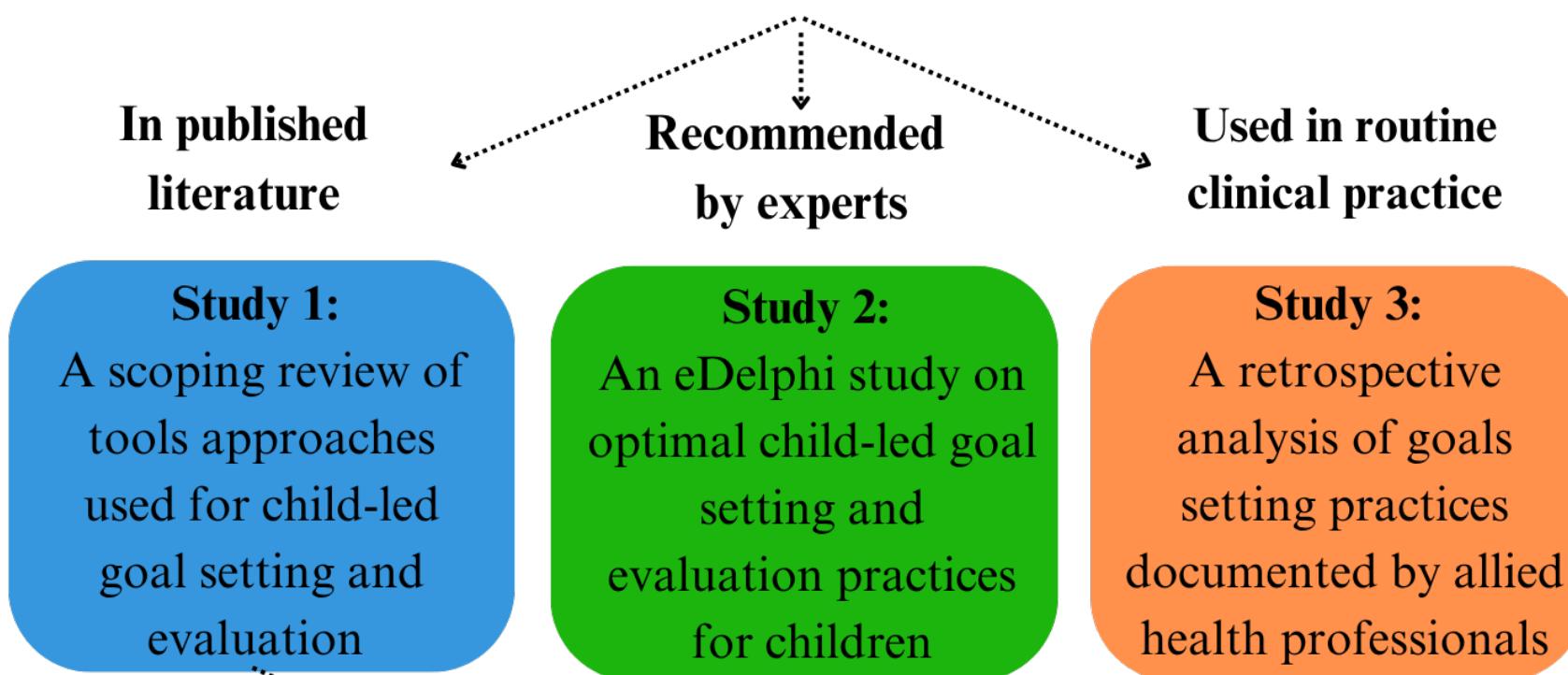


Thesis Aim

Examine and **advance** child-led goal setting
practices for children who have a disabilities or
developmental delays

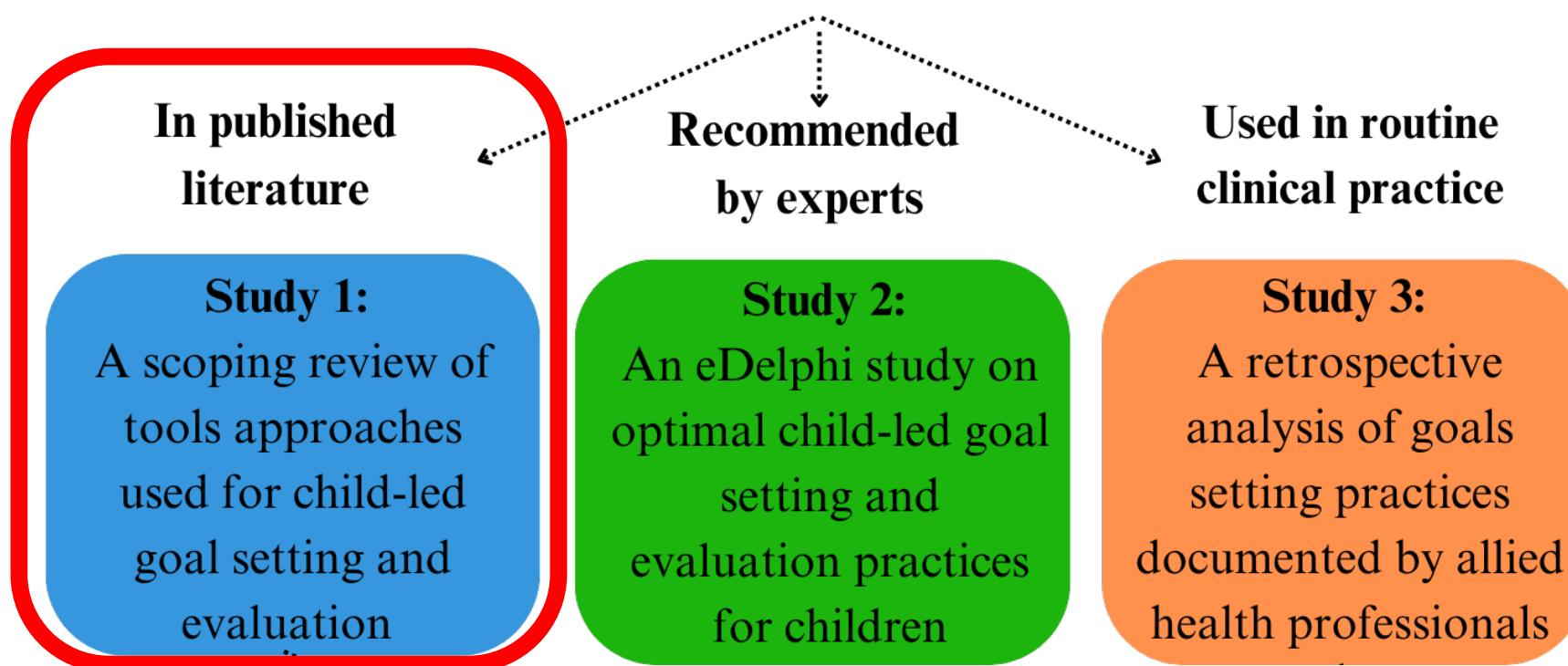
Research Studies

Examining child-led goal setting and evaluation practices



Research Studies

Examining child-led goal setting and evaluation practices



Study 1: Scoping Review



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SCOPING REVIEW

Child-led goal setting and evaluation tools for children with a disability: A scoping review

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Abstract

Aim: To examine child-led goal setting and evaluation tools and approaches for children with a disability or developmental delay.

Method: Six databases were searched for studies that included population (children aged less than 18 years with disability or developmental delay); construct (child-led goal setting tool or approach); and context (developmental therapy or rehabilitation). The utility of tools and approaches across the goal setting and evaluation process was investigated using abductive content analysis.

Study 1: Methods

Aim: Examine published literature to identify child-led goal setting and evaluation tools and approaches for children with a disability or delay

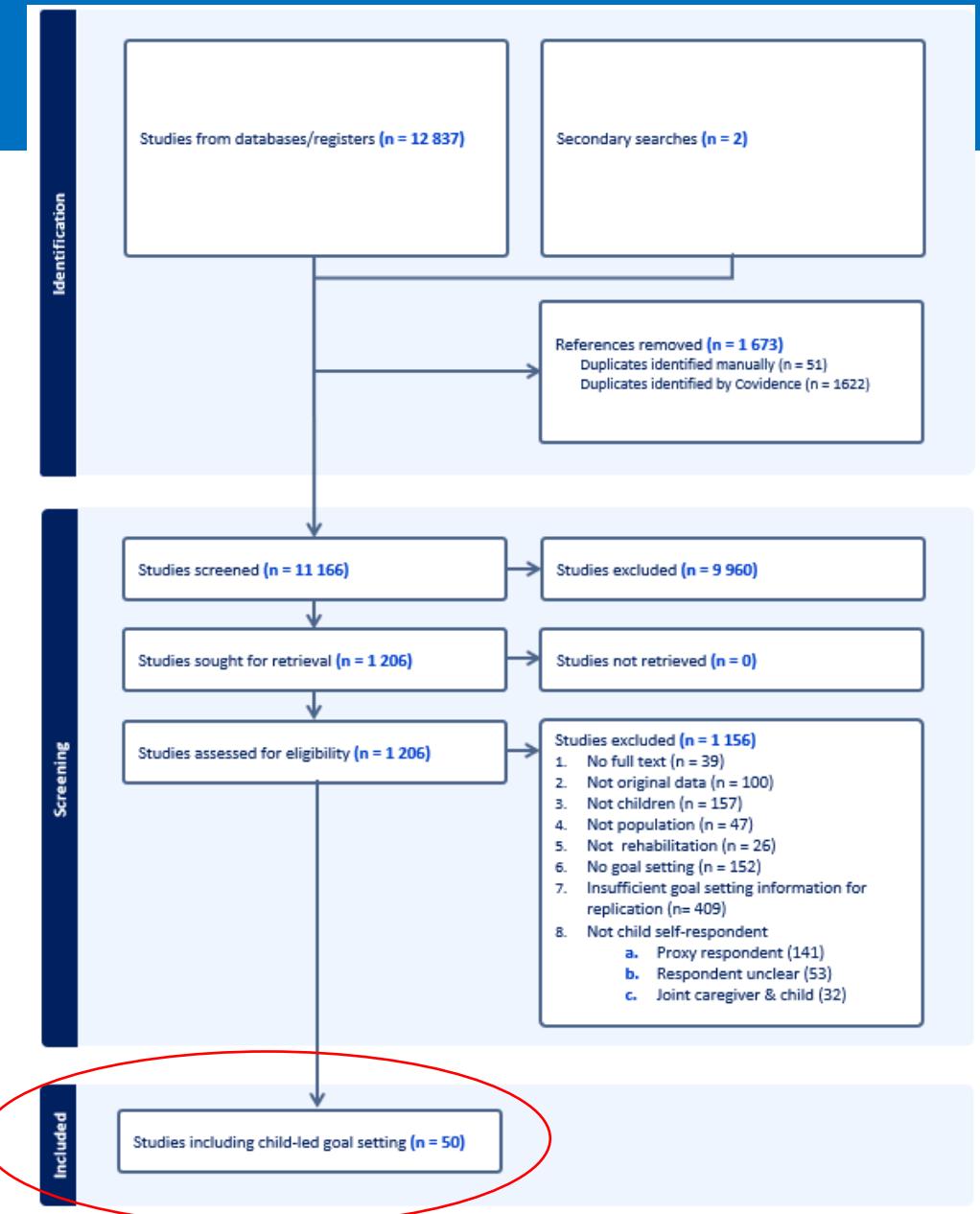
Method:

Scoping review (JBI)

Data extraction using CanChild Outcome

Measure rating form

Abductive content analysis



Study 1: Results



Child-led goal setting and evaluation framework

Study 1: Results

Child-led tools

- Canadian Occupation Performance Measure (COPM)
- Goal Attainment Scale (GAS)
- Kid-Em
- Perceived Efficacy and Goal Setting System (PEGS)

Child-led approaches

- ENGAGE approach to child-led goal setting
- ICF-inspired goal setting in developmental rehabilitation
- Personalised goals for positive behaviour support

Study 1: Results

Canadian occupation performance measure (COPM)

COPM
Canadian Occupational Performance Measure

PLACE INSTITUTIONAL STAMP HERE

The Canadian Occupational Performance Measure (COPM) is a high-quality, client-centered, occupation-based practice. The COPM is an individualized measure designed to detect change in a client's self-perception of occupational performance over time. The COPM is intended for use as an outcome measure. As such, it should be administered at the beginning of service to support the establishment of intervention goals, and again at an appropriate interval thereafter to determine progress and outcome.

The COPM is used to:

- identify problem areas in occupational performance;
- provide a rating of the client's priorities in occupational performance;
- evaluate performance and satisfaction relative to those problem areas;
- provide the basis for goal-setting; and,
- monitor changes in a client's perception of his/her performance and satisfaction over the course of intervention.

Scoring

Instructions for Scoring:
1. Identify problem areas in occupational performance. The definition of 'problem' is 'an occupation that causes distress to the client, reduces the client's quality of life, or interferes with the client's ability to function in his/her environment'.
2. List specific occupational performance areas that describe the client's role with respect to a range of the client's activities in his/her life. Examples include 'wash clothes in a tub' and 'wash clothes in a washing machine'.
3. Ask the client to choose up to five conditions that client needs to improve in order to be satisfied with his/her performance in this activity. These conditions are called 'improvement areas'.
4. Ask the client to rate his/her performance in each activity on a scale from 0 to 100. 0 = 'extremely important' and 100 = 'extremely important'.
5. Ask the client to rate his/her satisfaction with his/her performance in each activity on a scale from 0 to 100. 0 = 'extremely satisfied' and 100 = 'extremely satisfied'.
6. Calculate the mean for each improvement area.

Priority	Importance	Performance	Improvement	Progress	Change in Improvement
1.					
2.					
3.					
4.					
5.					

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Who was it used with:

Full: children aged 8 +
Modified: aged 4 +

Which goal phases does it support:



Study 1: Results

Goal attainment scale (GAS)

Level of Attainment
Much more than expected + 2
Somewhat more than expected + 1
Expected level of outcome 0
Somewhat less than expected - 1
Much less than expected - 2

Who was it used with:

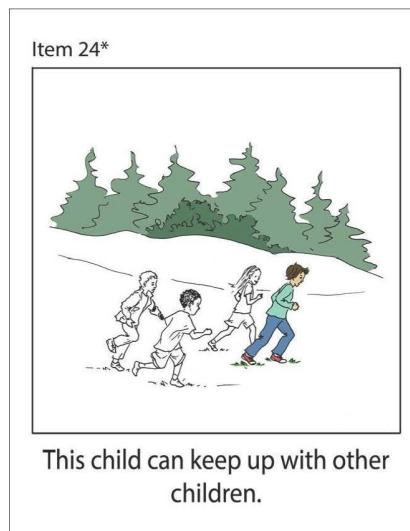
Adolescents aged 11 +

Which goal phases does it support:



Study 1: Results

Perceived efficacy and goal setting system (PEGS)



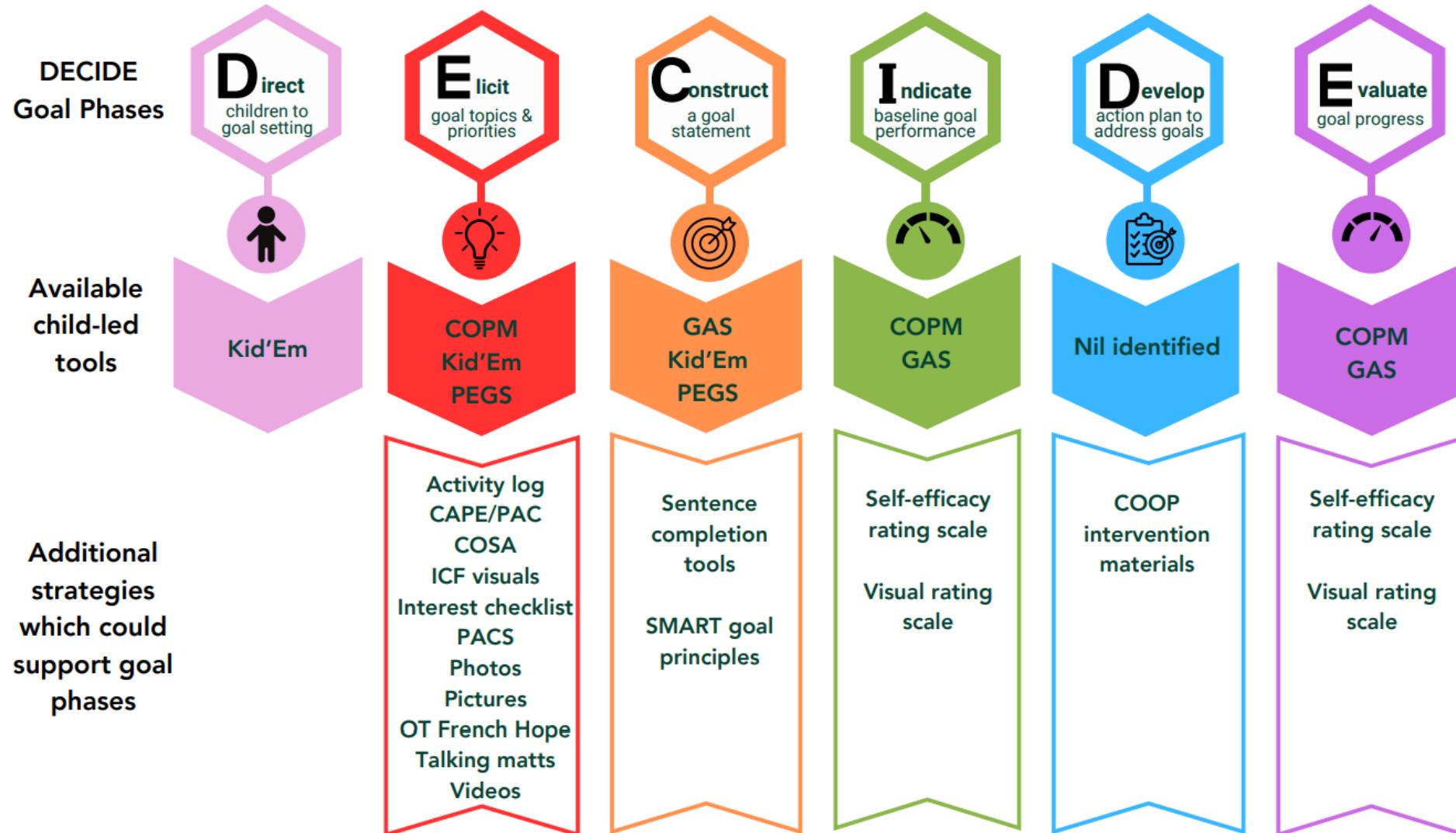
Who is used with:

Children aged 5-12 years

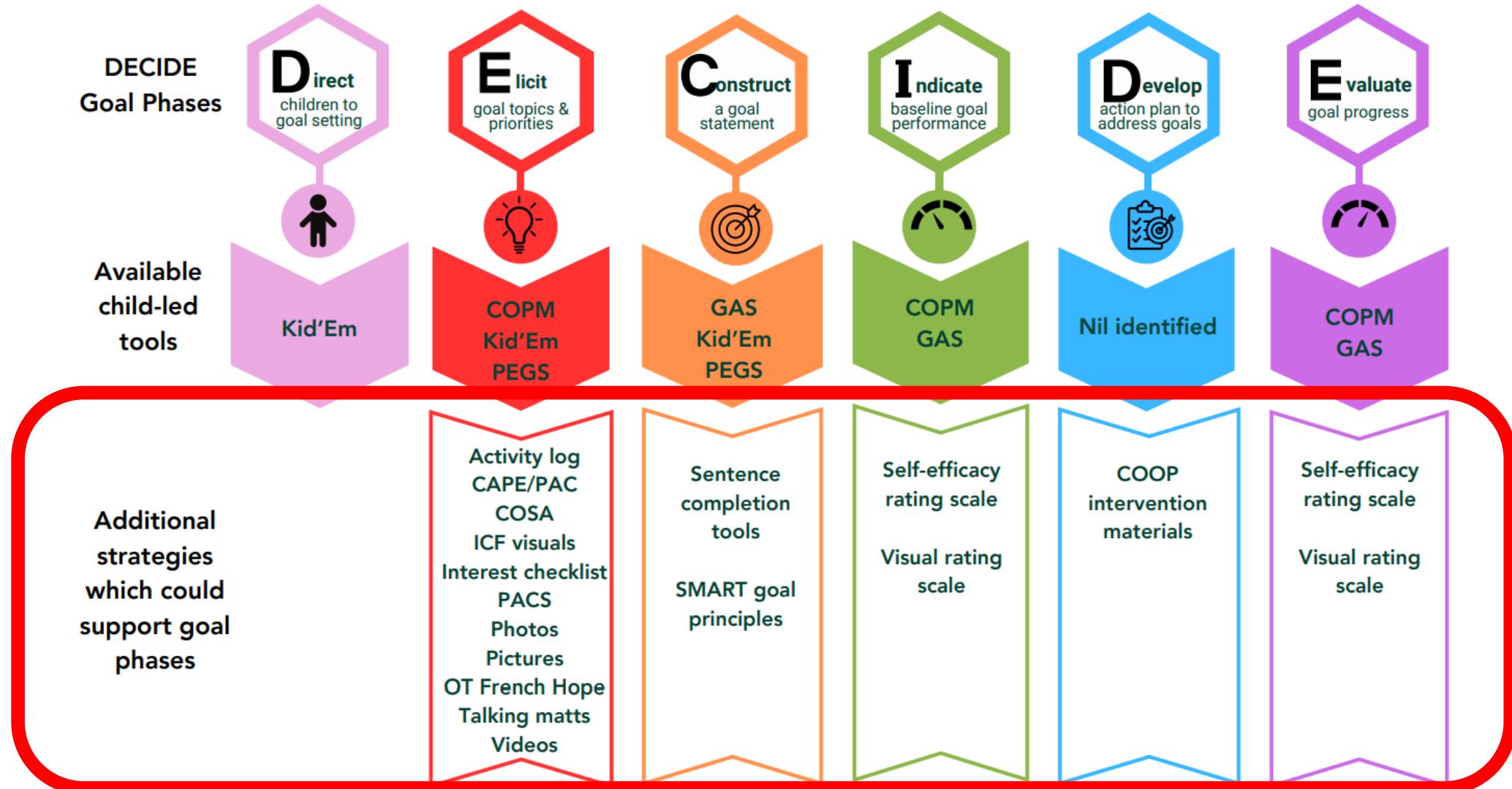
Which goal phases does it support:



Study 1: Results



Study 1: Results



Study 1: Results



Goal Setting and Evaluation Planning Form

Name of child		DOB		Date of goal setting	
Therapist/s		People present			

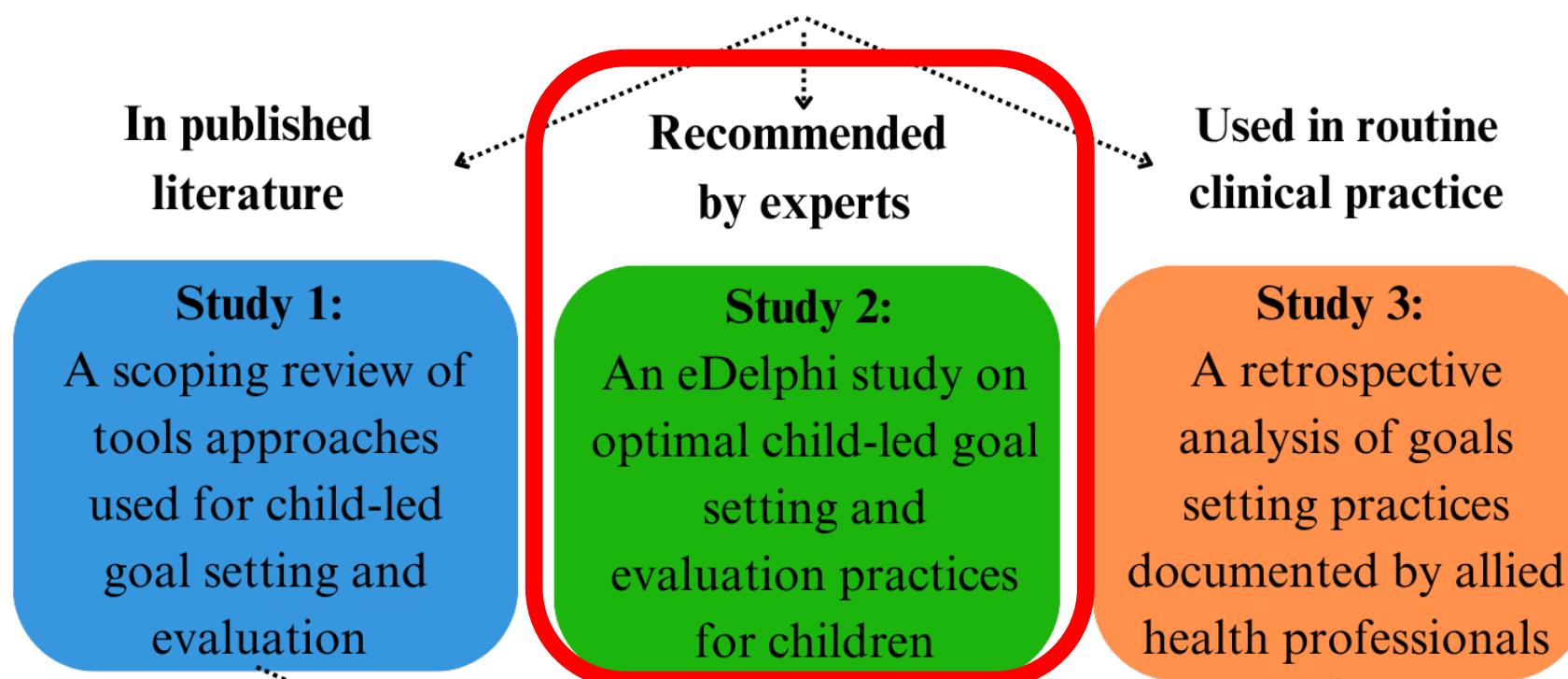
Goal phase		Definition	Respondent	Tools and strategies used	How will implementation be evaluated and when
D	Direct children to goal setting	Actions taken to direct children's attention to and engagement in goal setting, i.e., building rapport	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver <input type="checkbox"/> Child &Caregiver		
E	Elicit goal topics and priorities	Actions taken to support children to: 1) self-identify possible goal areas across the ICF as relevant and 2) prioritise the most important goal areas to be addressed through intervention from children's perspective.	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver <input type="checkbox"/> Child &Caregiver		
C	Construct a goal statement	Actions taken to support the child to construct a statement that represents the topic and desired outcome for each of their chosen goals.	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver <input type="checkbox"/> Child &Caregiver		
I	Indicate goal performance	Actions taken to support children to self-evaluate each goal for their current 1) competence in that goal 2) satisfaction with their competence and/or 3) confidence or readiness to address the goal (goal self-efficacy).	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver <input type="checkbox"/> Child &Caregiver		
D	Develop an action plan	Actions taken to identify with children 1) an action plan to address the goal and 2) possible facilitators and possible barriers to achieving the goal and 3) strategies and people to help to address barriers.	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver <input type="checkbox"/> Child &Caregiver		
E	Evaluate goal progress following	Actions taken to support children to self-evaluate progress or goals following intervention, including by repeating the	<input type="checkbox"/> Child <input type="checkbox"/> Caregiver		

Study 1: Key Findings

- ✓ Child-led goal setting can be considered multi-phase process
- ✓ DECIDE framework can guide clinicians
- ✓ Children as young as four included
- ? Limited research in multidisciplinary contexts
- ? Unclear what factors indicate child readiness
- ? No single child-led tool supports all goal phases

Research Studies

Examining child-led goal setting and evaluation practices



Study 2: Delphi study

DISABILITY AND REHABILITATION
2025, VOL. 47, NO. 12, 3173–3181
<https://doi.org/10.1080/09638288.2024.2419430>



RESEARCH ARTICLE

OPEN ACCESS



Optimal child-led goal setting practices for school-aged children with a disability or delay: an international Delphi consensus study

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^aSchool of Health and Rehabilitation Sciences, The University of Queensland, St Lucia, Queensland, Australia; ^bSchool of Allied Health, Australian Catholic University, Banyo, Queensland, Australia; ^cChildren's Health Queensland Hospital and Health Services, Brisbane, Queensland, Australia

ABSTRACT

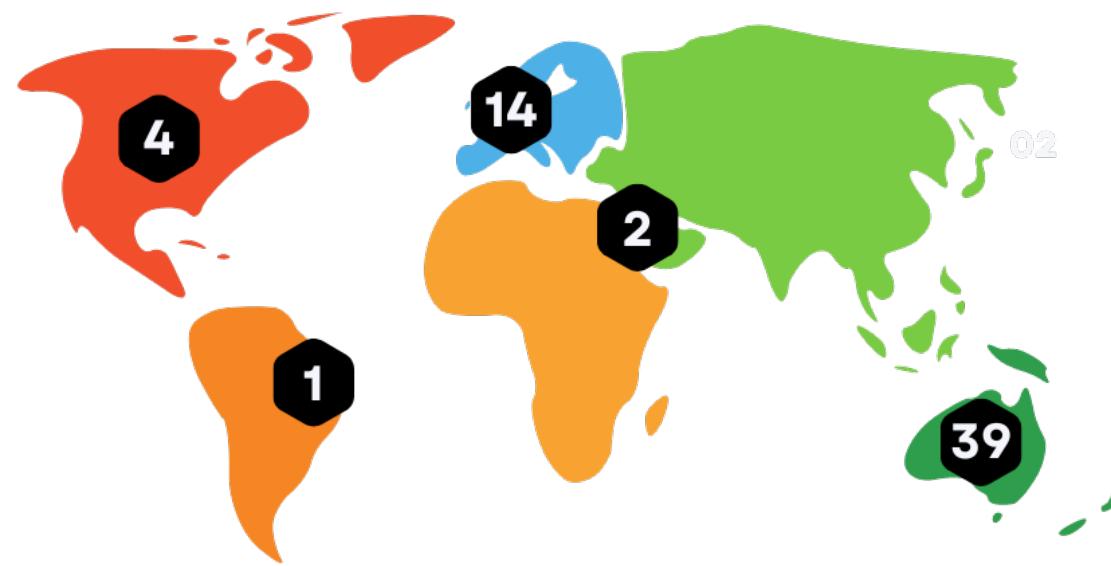
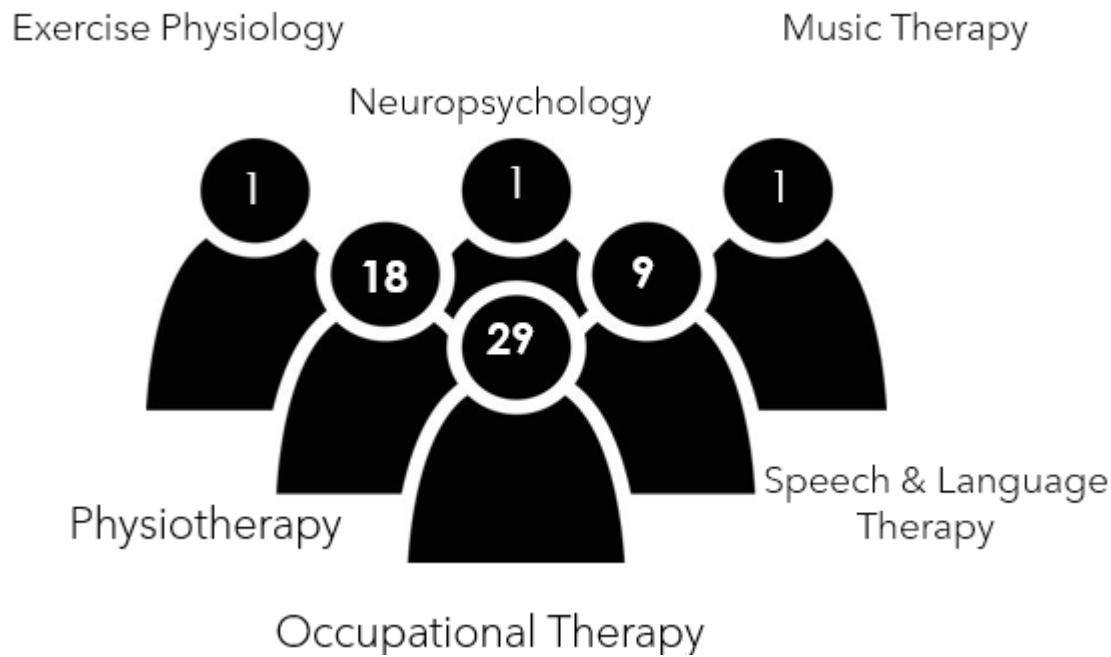
Aim: To achieve expert consensus on optimal child-led goal setting and evaluation practices for school-aged children (5≤17 years) who have a disability or delay.

ARTICLE HISTORY

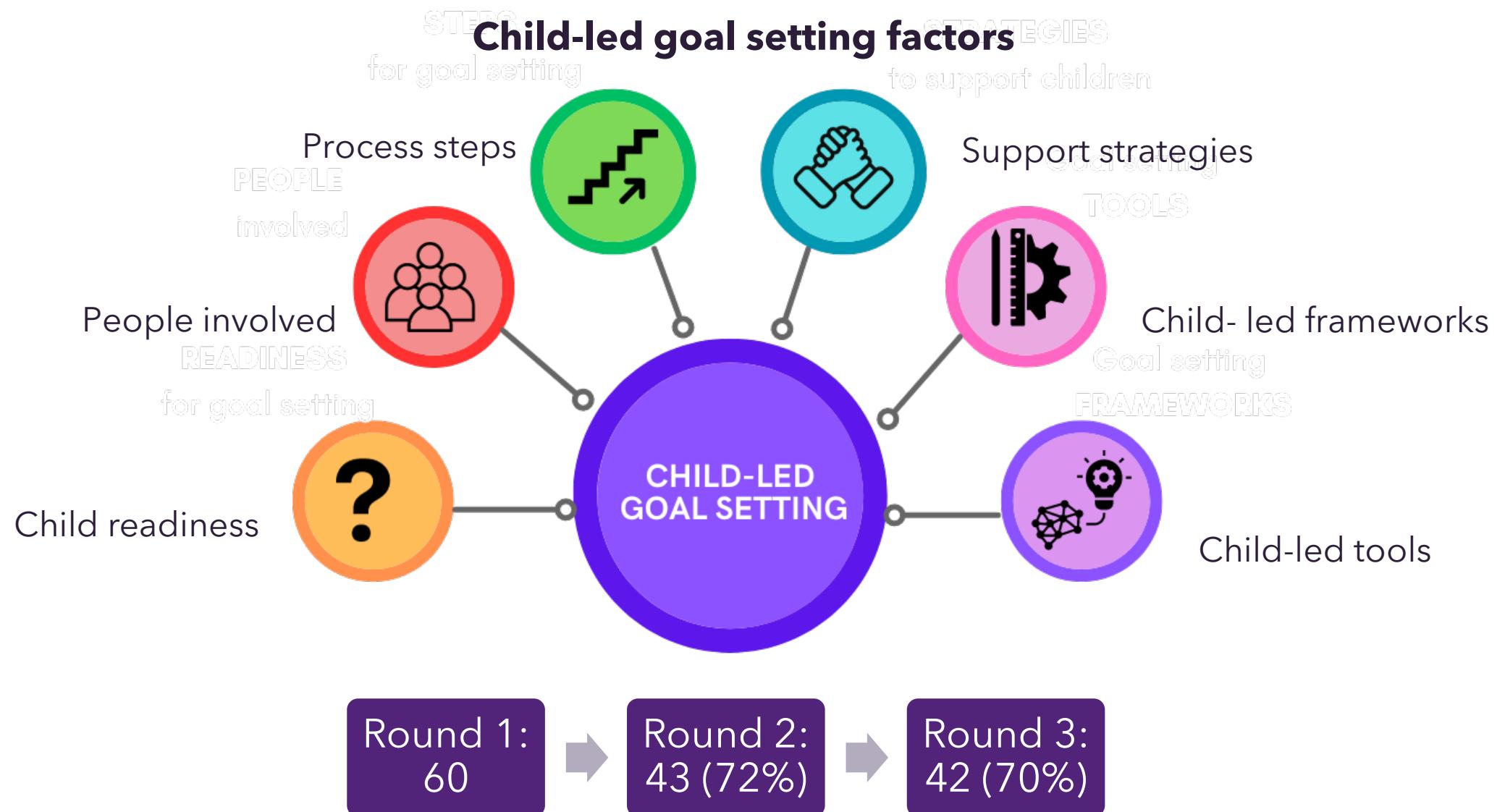
Received 24 June 2024
Revised 14 October 2024
Accepted 16 October 2024

Study 2: Methods

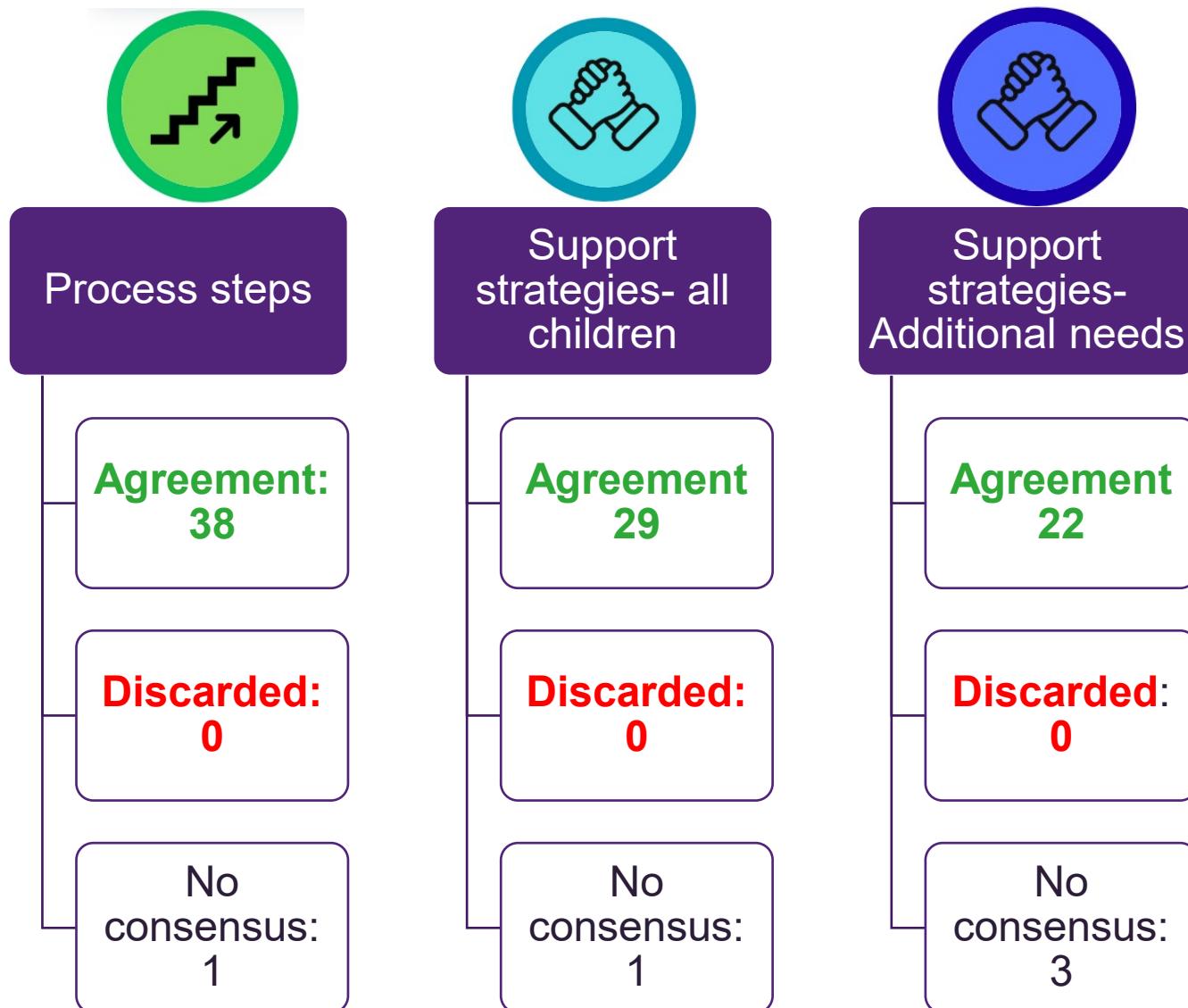
Aim: To seek consensus on child-led goal setting and evaluation practices recommended for use with school-aged children (aged 5≤17) who have a disability or developmental delay.



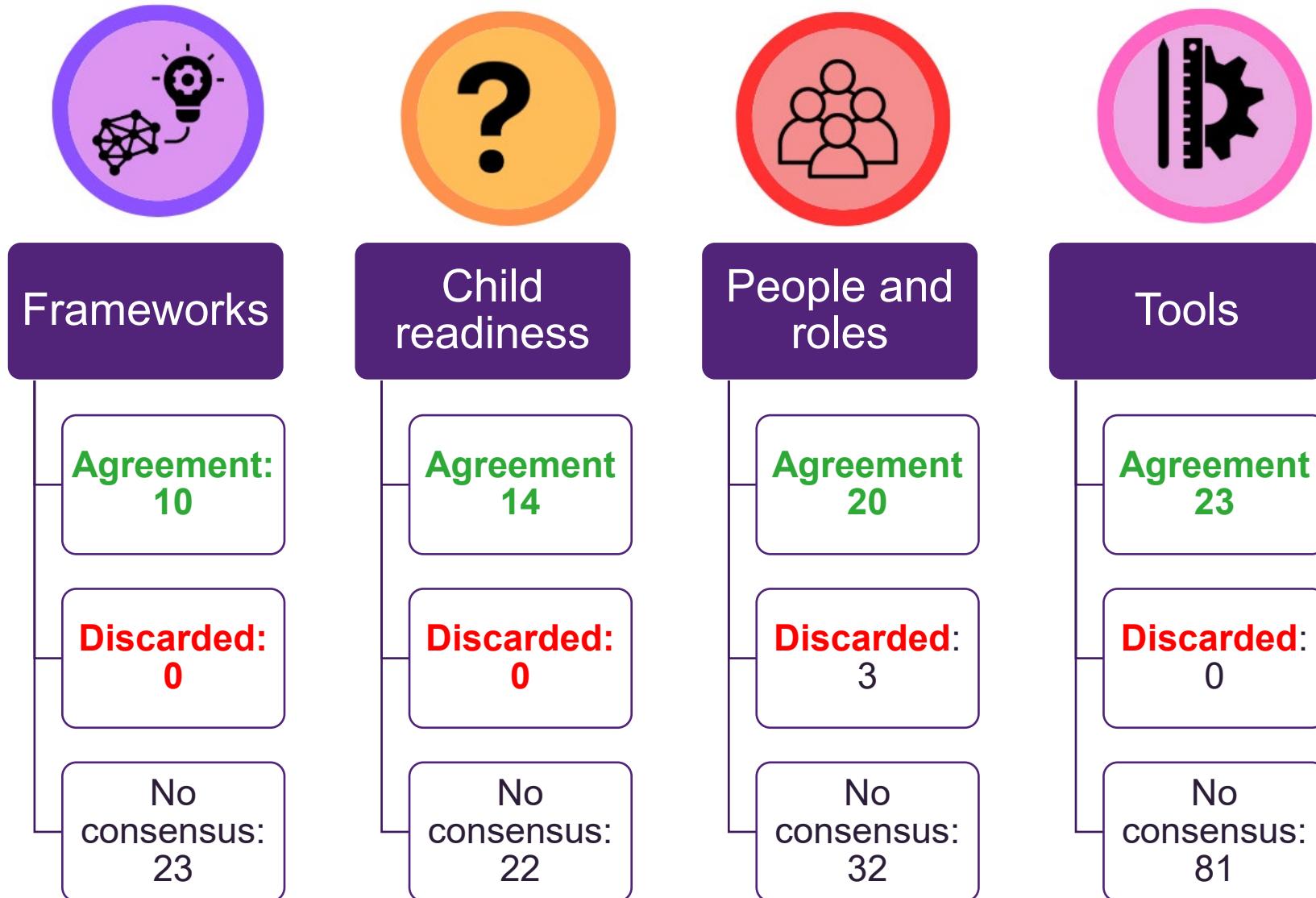
Study 2: Methods



Study 2: Results

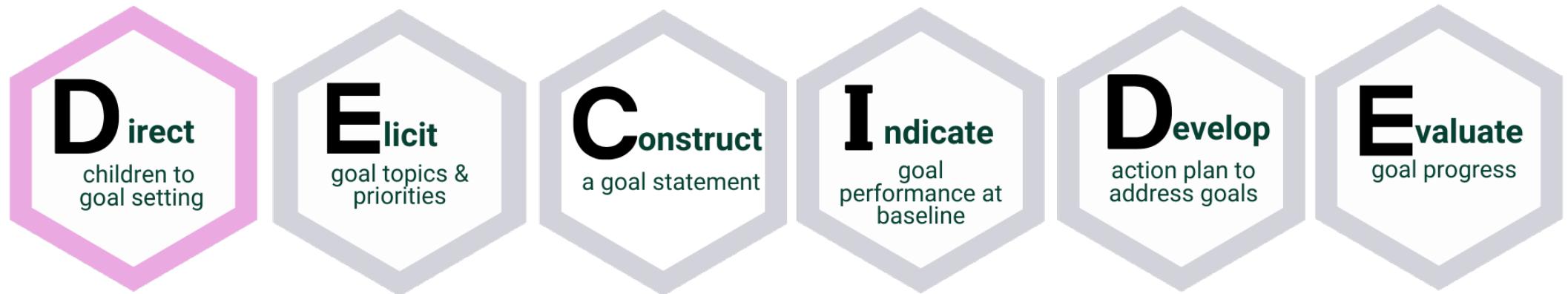


Study 2: Results



Study 2: Results

Process steps for child-led goal setting



Schedule sufficient time

Built rapport

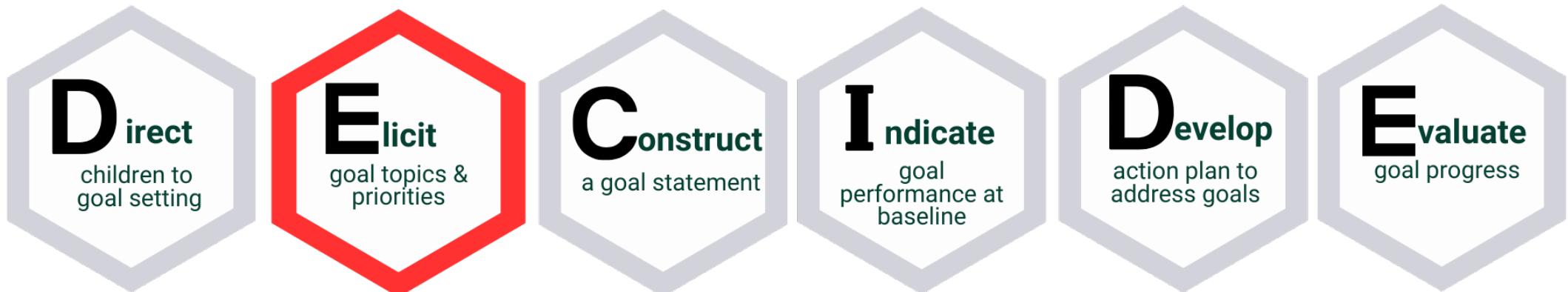
Explain purpose, process and roles in goal setting

Tailor communication to the child's abilities and preferences

Get to know the child! Preferences, hobbies and interests

Study 2: Results

Process steps for child-led goal setting



Identify what is important to the child in everyday life

Identify what they want to do better, more of, differently

Help the child to prioritise goals in order of importance

Respectfully negotiate between child and caregiver if goals are different

Study 2: Results

Process steps for child-led goal setting



Determine what success looks like to the child

Guide the child to break down goal and determine next step

Use clinical information to refine goal

Collaboratively construct a statement that represents the child's desired outcome

Study 2: Results

Process steps for child-led goal setting

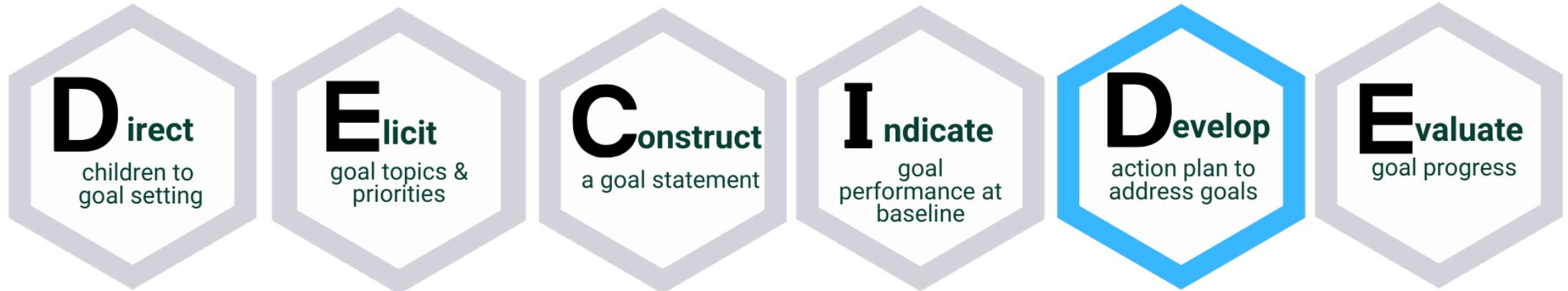


Discuss current performance

Use a goal-based outcome measure to help the child to self-evaluate goal at baseline

Study 2: Results

Process steps for child-led goal setting



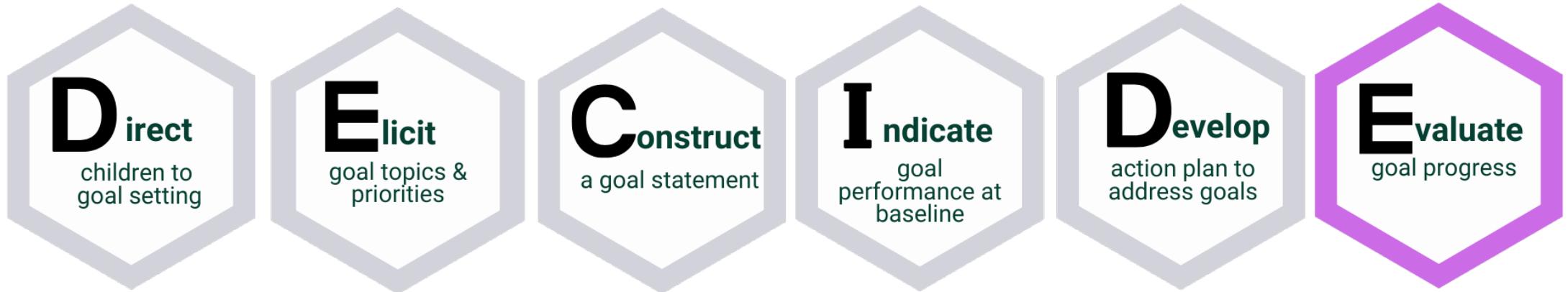
Link goal to the intervention

Identify who will support goal attainment

Specify timeframe goal will be reviewed

Study 2: Results

Process steps for child-led goal setting



Review goals at regular time points with child and family

Help child to self-evaluate goal, including repeating goal-based outcome measure

Study 2: Results

Support strategies for child-led goal setting

Place the child's perspective centrally

Goal setting should be personalised and accessible for children

Families should be supported during child-led goal setting

Goals are dynamic- be responsive to child and family needs

Study 2: Results

Child readiness for goal setting



Understanding
of process

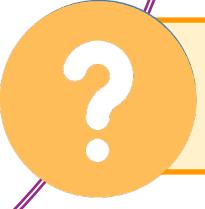
Concepts of
like/dislike,
easy/hard

Verbal or non-verbal
communication

Rapport with
therapist

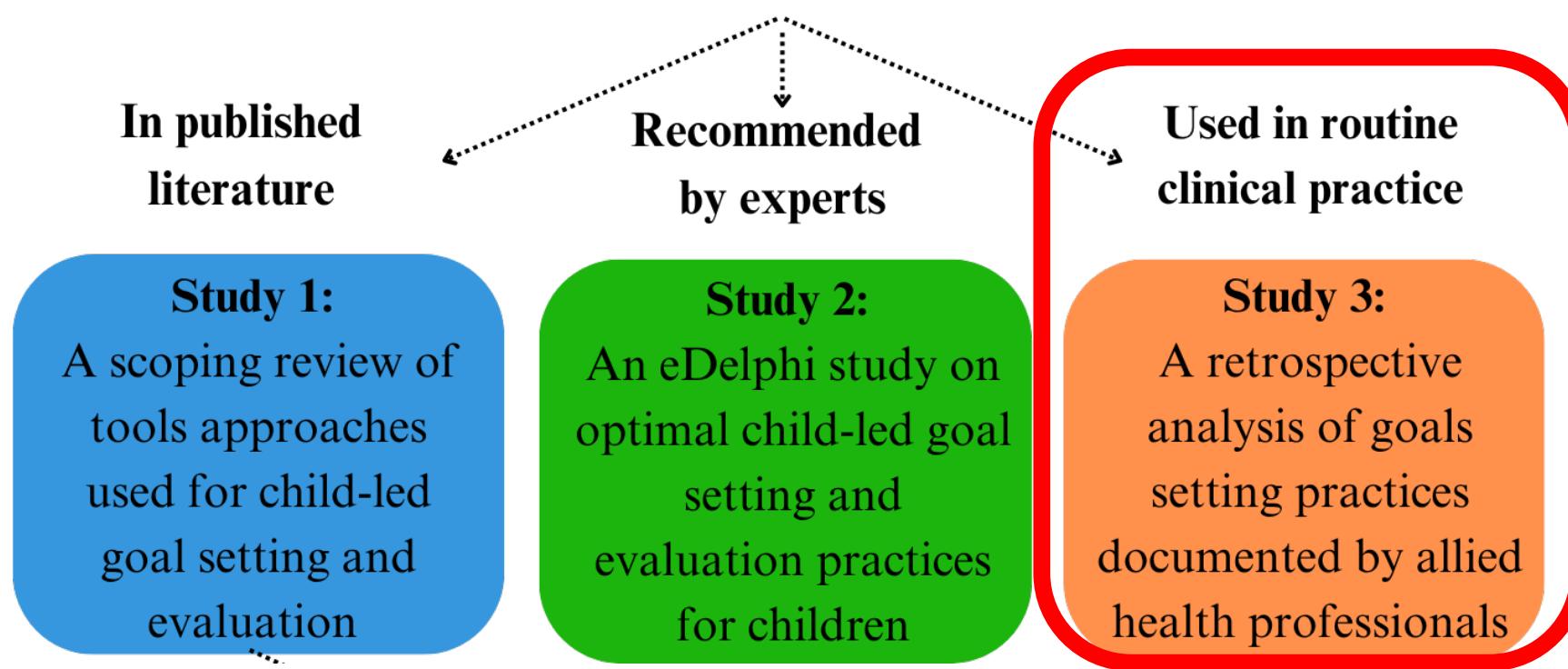
Interest in an activity or occupation

Study 2: Key Findings

-  Process steps build on DECIDE framework goal phases
-  Strategies suggested to support both child and caregiver perspectives in goal setting
-  Child readiness related to cognition, communication, motivation and therapeutic relationship
-  Unclear if and how child-led goal setting is implemented in current practice

Research Studies

Examining child-led goal setting and evaluation practices



Study 3: Retrospective analysis



DISABILITY AND REHABILITATION
<https://doi.org/10.1080/09638288.2025.2454974>



RESEARCH ARTICLE

OPEN ACCESS

 Check for updates

How do we capture child and family goals? Examining the goal setting practices used by community-based allied health professionals

Aisling K. Ryan^a, Laura Miller^b, Megan MacDonald^c and Leanne M. Johnston^{a,d}

^aSchool of Health and Rehabilitation Sciences, The University of Queensland, Brisbane, Queensland, Australia; ^bSchool of Allied Health, Australian Catholic University, Brisbane, Queensland, Australia; ^cBUSHkids, Queensland, Australia; ^dChildren's Health Queensland Hospital and Health Services, Queensland, Australia

ABSTRACT

Purpose: This study aimed to i) identify child and family goals reported in a community allied health service, ii) map goals to ICF domains, and iii) evaluate goal characteristics against child-centred and family-centred practice principles.

ARTICLE HISTORY

Received 19 July 2024
Revised 8 December 2024
Accepted 14 January 2025

Study 3: Methods

Aim: To examine the goal setting practices reported for use with children and families in routine clinical practice

Objectives

- i) Identify child and family goals reported in a community allied health service
- ii) Map goals to ICF domains
- iii) Evaluate goal characteristics against child and family-centred practice principles.



Study 3: Results

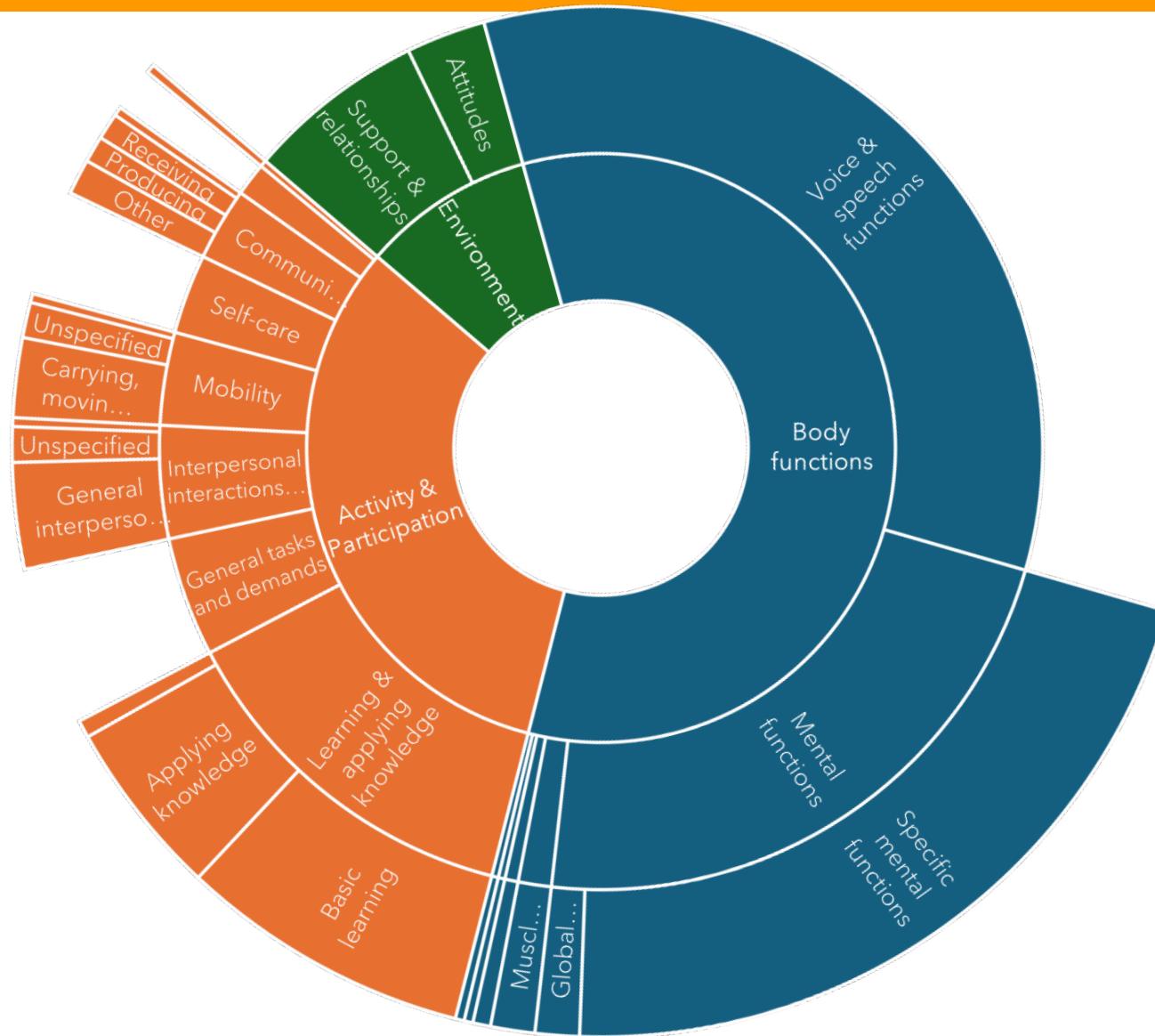
185 child files



355 goals



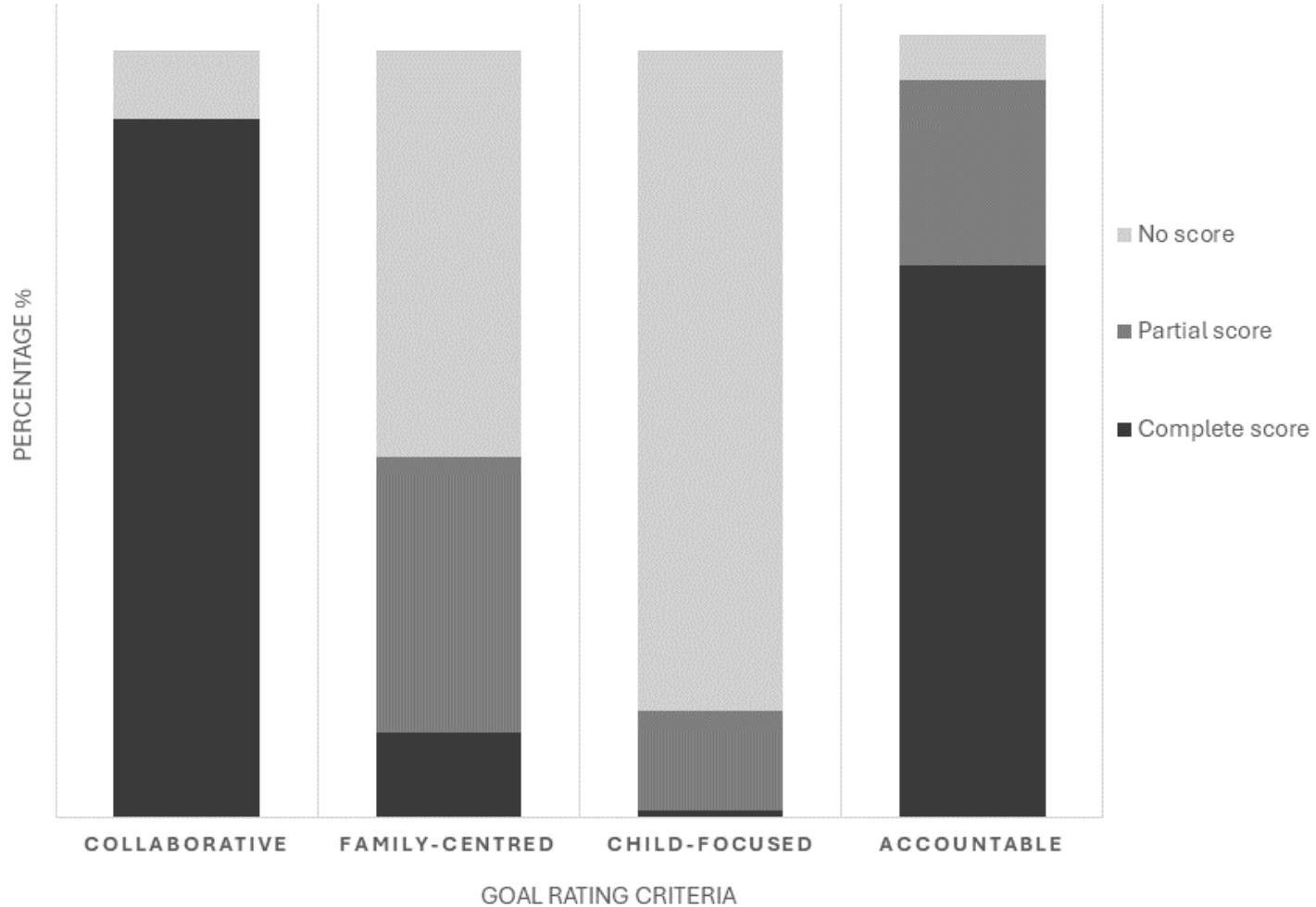
432 meaning units



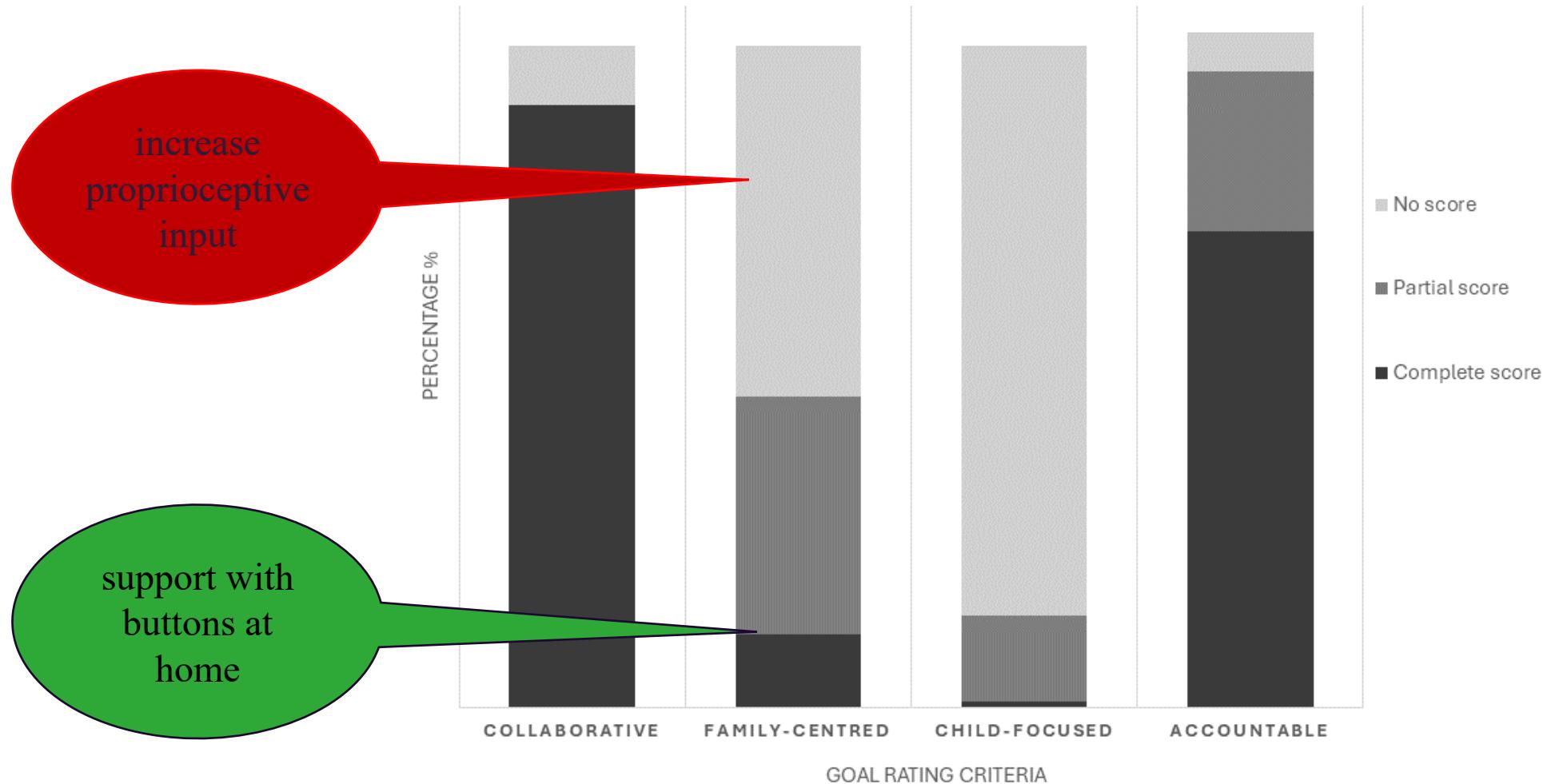
Study 3: Results

Collaborative	Family-centred	Child-focused	Accountable
<ul style="list-style-type: none">• There is evidence of collaboration with relevant stakeholders <p>Total: /2</p>	<ul style="list-style-type: none">• Worded in child/family friendly language /1• Embedded in the functional context for the child and family /1 <p>Total / 2</p>	<ul style="list-style-type: none">• Written in child-first or person-first language / 1• The child has had input into the goals / 1 <p>Total : / 2</p>	<ul style="list-style-type: none">• Goal outcomes were measured• Pre- intervention /1• Post intervention / 1 <p>Total : / 2</p>

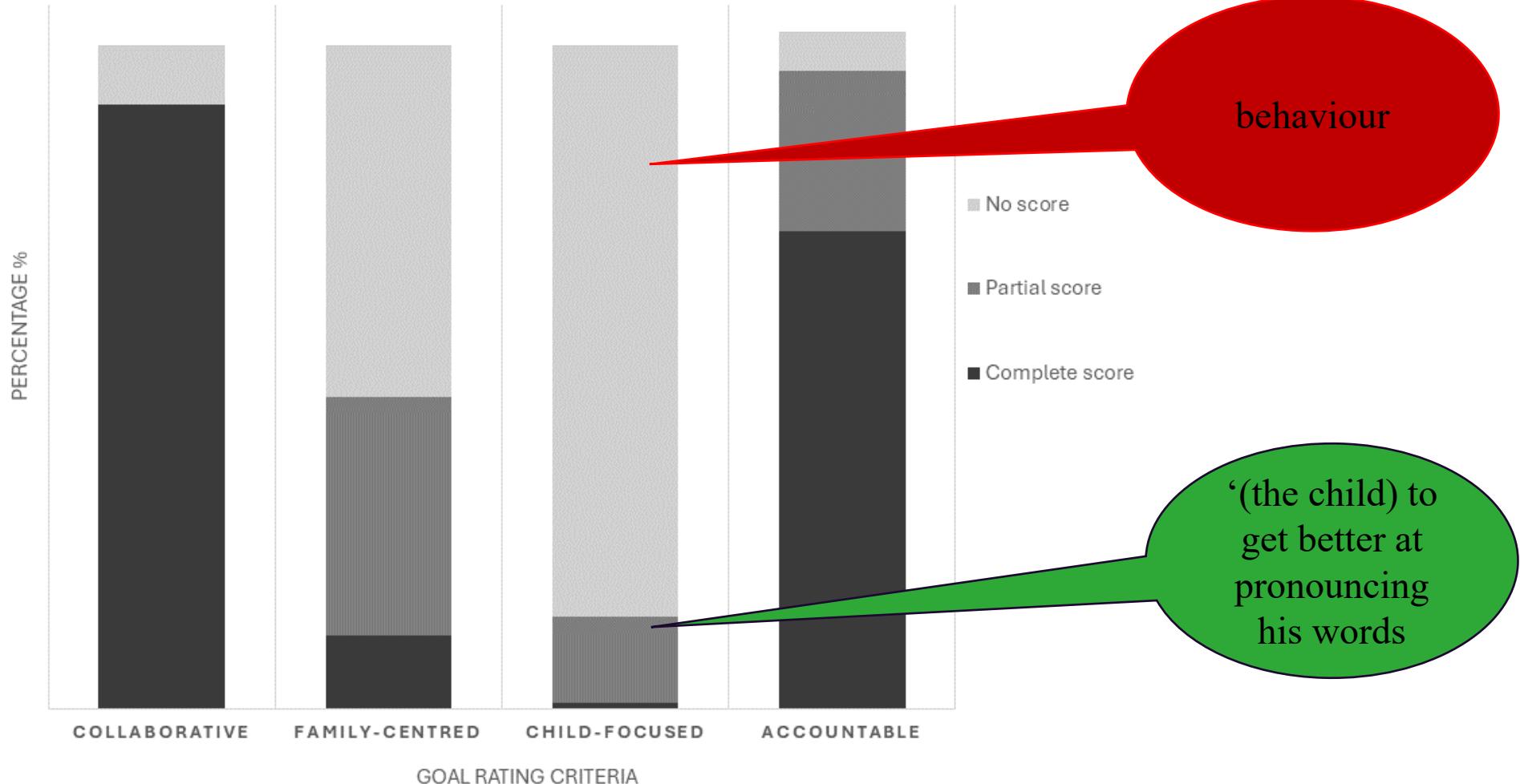
Study 3: Results



Study 3: Results



Study 3: Results



Study 3: Practical applications

How should we construct goals?

S.M.A.R.T



The (over)use of SMART goals for physical activity promotion: A narrative review and critique



Christian Swann, Patricia C. Jackman, Alex Lawrence, Rebecca M. Hawkins, Scott G. Goddard, Ollie Williamson, Matthew J. Schweickle, Stewart A. Vella, Simon Rosenbaum & Panteleimon Ekkekakis

- SMART goals not in line with best current evidence
- Risk of detrimental effect on individuals
- Results in a narrow focus

Study 3: Practical applications

S.M.A.R.T



- Use meaningful and child and family-friendly language
- Include the child and family's functional context
- Consider the ICF- participation is the ultimate aim.

Study 3: Key Findings

-  Service wide processes can facilitate consistent goal setting
-  Collaborative practices (with mothers) evident
-  COPM used to consistently evaluate goal-related outcomes
-  Clinicians can collaboratively construct goals with children/families to better capture/document meaningful goals



Case study

Case study



F-Words used to get to know Adam



Adam's F-words Profile



Birthday: 15 years

Town: Brisbane

Languages: English, Chinese

FUNCTIONING (My strengths or how I do 'stuff'...):

I can get ready for school, I help in the kitchen

FAMILY (My family is...):

Mum, dad, brother Joseph

FITNESS (I stay fit by...):

Table tennis

FUN (I like...):

Maths, transport, baking

FRIENDS (My friends are...):

Hayley at school

FUTURE (My goals are...):

Drive taxi

Case study



Visual card sort used to elicit goal topics and priorities

Adam's priority was to catch the bus



Case study



Visuals used to understand what was meaningful to Adam and construct goal statement

Adam:

I would like to
Catch the bus
to go to
Southbank.



Mum's goal: Adam will be able to take the bus to school independently.

Case study



Modified COPM rating scale used to indicate baseline performance



Goal	Child Performance T1	Child Satisfaction T1	Parent performance T1	Parent Satisfaction T1
Catch the bus to school	1	2	1	1
Catch the bus to Southbank	2	1	4	4

Case study



Team and family discussed action plan:

Adam needed:

- Communication skills to greet the bus driver and ask for help (SP)
- Physical endurance to walk 600m between bus stops and ability to navigate steps (PT)
- Community access skills to navigate bus timetables (OT)



Case study

Modified COPM rating scale used to evaluate goal progress following intervention



Goal	Child Performance T2	Child Satisfaction T2	Parent performance T2	Parent Satisfaction T2
Catch the bus to school	10	9	10	10
Catch the bus to Southbank	7	7	8	8

Overall learnings



Goal setting is a multi-phase process

Children are capable of contributing with appropriate scaffolding and support

Goal setting should use strengths-based, child friendly and meaningful language

Goal setting should take a child centred and family centred approach

Acknowledgments

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Associate Professor Laura Miller

Dr Peter Worthy

Dr Tanya Rose

BUSHkids

The University of Queensland

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