

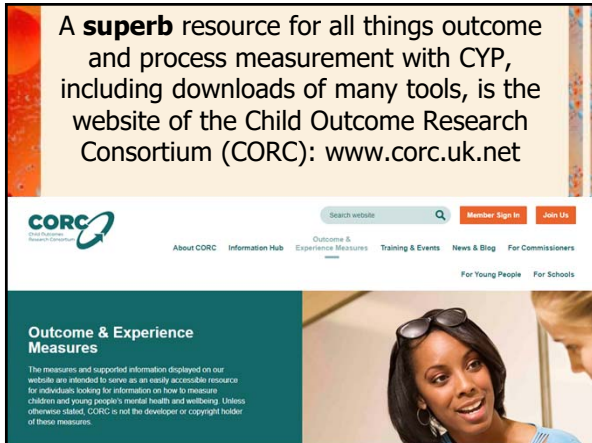
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Using Measures in Therapeutic Work with Children and Young People

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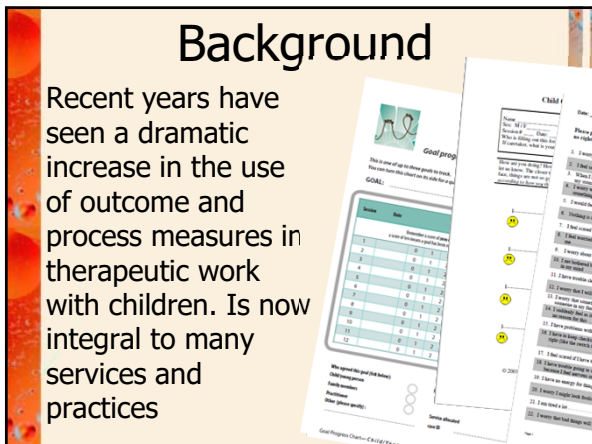
A **superb** resource for all things outcome and process measurement with CYP, including downloads of many tools, is the website of the Child Outcome Research Consortium (CORC): www.corc.uk.net



The screenshot shows the CORC website interface. At the top, there is a search bar and buttons for 'Member Sign In' and 'Join Us'. Below this is a navigation menu with links for 'About CORC', 'Information Hub', 'Outcome & Experience Measures', 'Training & Events', 'News & Blog', and 'For Commissioners'. There are also links for 'For Young People' and 'For Schools'. The main content area features a section titled 'Outcome & Experience Measures' with a sub-header and a photograph of a woman smiling.

Background

Recent years have seen a dramatic increase in the use of outcome and process measures in therapeutic work with children. Is now integral to many services and practices



The screenshot displays two forms. The first is a 'Goal Progress' form with a table for tracking progress over time. The second is a 'Child 1' assessment form with a list of items and checkboxes for evaluation.

Item	Start	End
1	0	1
2	0	1
3	0	1
4	0	1
5	0	1
6	0	1
7	0	1
8	0	1
9	0	1
10	0	1
11	0	1
12	0	1

Aims of Workshop

Introduction to the use of process and outcome measures in counselling with children and young people



Learning Outcomes of Workshop

- Comprehend the advantages, and disadvantages, of using process and outcome measures in counselling with children and young people (CYP)
- Identify the principal outcome and process measures used in the UK
- Recognise the basic principles of using outcome and process measures
- Recognise the basic principles of analysing and interpreting data from CYP measures
- Identify sources of further information and support



Why we're wary





Concerns that...

1. Meaningless – only articulates most superficial, symptom-level experiencing
2. Takes time away from 'deeper' therapeutic work
3. Clients will experience it as de-humanising -- complex pain and life circumstances turned into numbers: Buber's I-It relationship rather than I-Thou
4. Sets external, normative expectations for the therapeutic work and change
5. Focus of therapy becomes 'doing' rather than 'being'



So why use systematic feedback?

1. Can help clients to express how they feel about therapy



Image: Kyrill Pool

**3. Clients
more
likely to
like it
than not**



Image: Kyrill Pool

**4. Can help
clients focus
on what
they want
to change...**



Image: Kyrill Pool

**...and how
much change
they are
making**



Image: Kyrill Pool

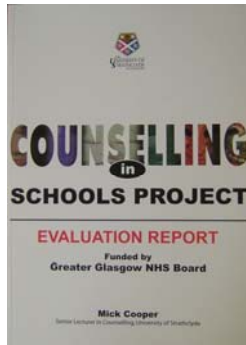
5. Can help clients to articulate how they feel



Image: Kyrill Pool

Accessing feelings

- *'The counsellor gave me a questionnaire of how I was feeling today...and that just made me think about what I was actually, like, feeling.'*
- May also be easier to write down feelings than say them to someone
- Cf. creative/projective methods: a 'third space'



6. Helps therapists adjust and improve their approach



Image: Kyrill Pool

7. Provides evidence for an approach or service



Image: Kyrill Pool

The need for evidence



Image: Kyrill Pool

If therapists do not gather evidence on the effectiveness of their work, these approaches may not be commissioned or available in years to come

Dimensions

- Self-completed vs. Parent-/carer or teacher-completed
- Age range: Children vs. Young people
- Timescale for rating: 2 weeks, 6 months, etc
- Long vs. Short vs. Ultra brief
- Good psychometric evidence vs. Poor psychometric evidence
- Digital capture vs. Hard copy
- Free vs. Paid for

Two main families of measures

- *Outcome measures:* feedback on changes in mental distress/ wellbeing
- *Process measures:* feedback on clients' experiences in therapy



Outcome Measures

Outcome Measures

1. General distress measures (e.g., YP-CORE, SDQ, CORS/ORS)
2. Disorder-specific measures (e.g., RCADS)
3. Wellbeing measures (e.g., WEMWBS)
4. Idiographic measures (e.g., Goal Based Outcome tools)
5. Satisfaction measures (e.g., ESQ)

What are the most popular measures in the UK (that are free, relatively easy to use, and have acceptable psychometric properties)?



Image: Kyrill Pool

Strengths and Difficulties Questionnaire (SDQ)


- Assesses general difficulties
- Most widely used measure in UK for CYP
- Very well respected in clinical/CAMHS settings as well as counselling
- Covers all CYP age range
- Parent and teacher versions
- Numerous translations

Young Person's CORE (YP-CORE)

- Assesses general distress
- 11+ and self-report only
- Less 'clinical' language than SDQ
- Liked by CYP
- More 'grown up' language than SDQ
- More suited to weekly monitoring than SDQ

Training Video: Using Goals in psychological therapy with a teenage girl with eating difficulties

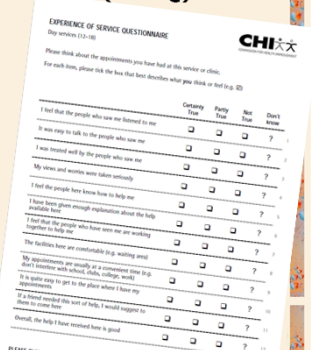
Search
Search...



<https://goals-in-therapy.com/2018/03/06/training-video-using-goals-in-psychological-therapy-with-a-teenage-girl-with-eating-difficulties/>

Experience of Service Questionnaire (ESQ)

- Satisfaction with service measure
- Combines numerical and open-ended responses
- Generally for use at end of therapy



'Scoring' Individual Clients

- Scoring procedures generally available on internet
- Usually fairly intuitive: add up numbers and look at change
- 'Benchmark' scores for clinical/non-clinical populations may be available
- 'Reliable change indexes' may be available: how much change is needed to indicate improvement is not just due to measurement error

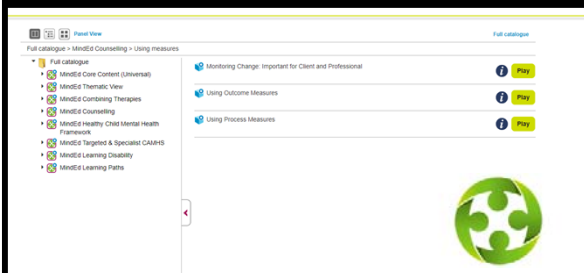
Evaluating Services

- Calculations can generally be done with Excel, though specialised software available (for a price)
- Compare averages ('means') at start against averages at end
 - Is it 'significant'? (i.e., not just random)
 - How 'big' is it? ('effect size')
- What proportion of clients show reliable and clinical change (and deterioration?)
- Can compare against benchmarks, e.g., CAMHS: https://www.corc.uk.net/media/1543/05052017_corc-report.pdf

Principles of Good Practice

- Use measures with evidence of reliability and validity; i.e., *established* measures
- Use measures at start of session
- Integrate measure completion into therapy – discuss transparently with CYP
- Use measures to inform supervision, esp. discussing clients who seem to be getting worse
- Use on weekly basis so no missing/biased data
- From 11+, self-report generally sufficient; parent-/teacher-report also for younger than 11
- For service evaluation: Work out how you are going to analyse the data before you collect it

Counselling MindEd Sessions on Using Outcome Measures



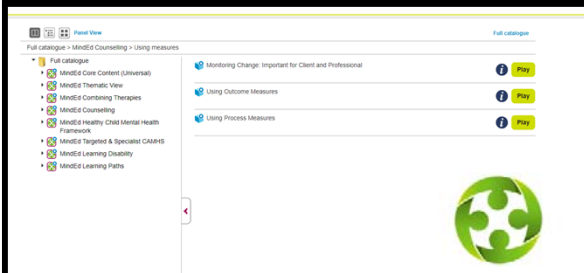
www.minded.org.uk Go to catalogue > Counselling MindEd

<https://www.minded.org.uk/LearningContent/LaunchForGuestAccess/447343> (see Slides 8-9 for video demo)

Principles of Good Practice

- Encourage clients to feel that they can give 'negative' feedback
- Integrate measure completion into therapy – discuss with your clients
- Use measures in supervision, esp. clients who are rating low levels of alliance (and also recognising where clients are positive about the work)

Counselling MindEd Sessions on Using Process Measures



www.minded.org.uk Go to catalogue > Counselling Minded

<https://www.minded.org.uk/LearningContent/LaunchForGuestAccess/447343> (see Slides 8-9 for video demo)

Also...

Current View

Standardised demographic/assessment measure

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Thank you
