

# 5.1

## GOAL TAXONOMIES

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Supplementary material for Integrating counselling and psychotherapy: Directionality, synergy, and social change (Sage, 2019).

Within the adult psychological literature, several different taxonomies of goals have been proposed. Winell (1987), for instance, suggested six domains: career, family, leisure, social-community, personal growth, and materials; while Little (1983) identifies 12 categories of personal projects: academic, interpersonal, intrapersonal, recreational/hobbies, reading/cultural, gifts/holidays, travel, environmental adaptation, vocational, home activities, spiritual, and health/body. Pohlmann (2001), adopting a more conceptual approach, proposed six life goal domains: intimacy, affiliation, altruism, achievement, power, and variation. Perhaps the most comprehensive taxonomy of goals, with 24 categories, was developed by Ford and Nichols (1987), based on several years of research and clinical work. This breaks goals down into two main types: those that are *within* the individual, and those that are *between* the individual and their environment. Within-person goals are then broken down into *affective goals* (entertainment, tranquillity, happiness, bodily sensation, physical well-being), *cognitive goals* (exploration, understanding, intellectual creativity, positive self-evaluations), and *subjective organisational goals* (unity, transcendence). Individual–environment goals are broken down into *self-assertive social relationship goals* (individuality, self-determination, superiority, resource acquisition), *integrative social relationship goals* (belongingness, social responsibility, equity, resource provision), and *task goals* (mastery, task creativity, management, material gain and safety). Research by Grouzet and colleagues (2005), however, suggests that categories such as these, across cultures, break down into two main orthogonal dimensions: *self-transcendence–physical self*, and *extrinsic–intrinsic* (see below). This gives four main domains of goals: self-transcendent and intrinsic (e.g., community-oriented goals), physical and intrinsic (e.g., physical health), physical and extrinsic (e.g., financial self), and self-transcendent and extrinsic (e.g., popularity).

In relation to therapy, Holtforth and Grawe (2002) found that clients had five main categories of goals: interpersonal goals, coping with specific problems and symptoms, personal growth, well-being and functioning, and existential issues. Research indicated that, through therapy, clients were most likely to achieve wellbeing goals, followed by interpersonal goals and personal growth goals, with existential goals least likely to be attained (Berking, Grosse Holtforth, Jacobi, & Kröner-Herwig, 2005). These goals correspond relatively well to what counsellors and psychotherapists believe is most important for clients to realise in therapy (in descending order): (a) have a strong sense of self-worth and identity, (b) improve the quality of their relationships, (c) understand their feelings, motives and/or behaviours, (d) integrate excluded or segregated aspects of experience, and (e) experience a decrease in their symptoms.

Drawing on the Holtforth and Grawe (2002) taxonomy, Rupani et al. (2014) identified four categories of goals for young clients: specific issues, personal growth, emotional issues, and interpersonal issues. However, they did not find any differences in the extent to which these goals were achieved through therapy. Jacob et al. (2016), in a separate study of the goals of children and young people in therapy, also identi-

fied specific difficulties and personal growth goals, along with independence goals. Parents' and carers' goals for their children differed somewhat, with a greater emphasis on managing specific difficulties, parent-specified goals, and improving self or life.

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