The P.E.P. Report 1969-1973 focuses on the various findings and activities of the Program Evaluation Project. Reliability is considered a basic aspect of any measurement system. With Goal Attainment Scaling, at least two types of reliability are important: the reliability of the followup guide construction and the reliability of the followup guide scoring. This chapter discusses the theory underlying applications of conventional reliability concepts to Goal Attainment Scaling and reviews a range of studies relevant to the reliability of the methodology. This chapter is designed to give a general introduction to reliability and Goal Attainment Scaling.
CHAPTER THREE
AN INTRODUCTION TO RELIABILITY
AND THE GOAL ATTAINMENT SCALING
METHODOLOGY

A REPORT ON FOUR YEARS OF
STAFF EFFORT AT THE PROGRAM
EVALUATION PROJECT.
CHAPTER THREE

AN INTRODUCTION TO RELIABILITY AND THE GOAL ATTAINMENT SCALING METHODOLOGY
(A Review of the Program Evaluation Project Reliability Studies)

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Program Evaluation Project Staff Listing

For further information, please contact Ms. Joan Brintnall, Program Evaluation Project, 501 Park Avenue South, Minneapolis, Minnesota 55415.
The P.E.P. Report 1969-1973 focuses on the various findings and activities of the Program Evaluation Project. It is being published in pamphlet form with one pamphlet for each chapter.

As of January, 1974, the Program Evaluation Project is funded by a three year collaborative grant with the Mental Health Services Division of the National Institute of Mental Health. The purpose of the grant is to emphasize the coordination and dissemination of information on a variety of program evaluation methodologies. Currently, it is expected that the title of the organization will be changed to the Program Evaluation Resource Center during 1974.

Further information on the Goal Attainment Scaling methodology and program evaluation is available in other written and recorded materials from the Program Evaluation Project office. Chapter One, "Basic Goal Attainment Scaling Procedures"; Chapter Five, "A Construct Validity Overview of Goal Attainment Scaling"; and Chapter Nine, "Evaluation of the Adult Outpatient Program, Hennepin County Mental Health Service" of the P.E.P. Report 1969-1973 are now available. Additional chapters will be released this year as they are completed.
SYNOPSIS FOR CHAPTER THREE
AN INTRODUCTION TO RELIABILITY AND THE GOAL ATTAINMENT SCALING METHODOLOGY

PURPOSE: Reliability is considered to be a basic aspect of any measurement system. With Goal Attainment Scaling, at least two types of reliability are important: the reliability of the follow-up guide construction and the reliability of the follow-up guide scoring. This chapter discusses the theory underlying applications of conventional reliability concepts to Goal Attainment Scaling and reviews a range of studies relevant to the reliability of the methodology. This chapter is designed to give a general introduction to reliability and Goal Attainment Scaling. Another P.E.P. Report 1969-1973 chapter on reliability discusses one particular study in depth and will be released later.

MAJOR FINDINGS: In the examination of Goal Attainment Scaling reliability, it should be remembered that any outcome evaluation methodology is designed to vary from one point of measurement to another. Thus, because Goal Attainment Scaling is such an evaluation-oriented measurement, it should not be expected to produce identical results if the same client is scored at different times. As a result of this characteristic and of difficulties in applying other conventional reliability approaches to Goal Attainment Scaling, most of the available reliability studies concentrate on inter-rater agreement with a few others being concerned with alternate form reliability.

In the original reliability study, which is discussed in greater detail in another P.E.P. Report 1969-1973 chapter, for each of 44 clients at the outpatient unit, one follow-up guide was constructed by the intake interviewer and a second follow-up guide was made somewhat later by the therapist. These two follow-up guides were combined and then scored twice at two separate interviews by two different raters. For the follow-up guide prepared by the intake interviewer, the Goal Attainment scores from the two interviews were correlated .711 and for the follow-up guide prepared by the therapist, scores from the two interviews correlated .625. The other P.E.P. Report 1969-1973 chapter on reliability discusses this study more intensively (Sherman, Baxter, Audette, 1974).

A variety of other reliability studies are discussed in less detail. In the interdisciplinary reliability study, 60 clients were interviewed twice on the basis of follow-up guides constructed by intake interviewers, with the interviews being conducted either by nurses or social workers and either by telephone or in person. For this study, the Goal Attainment scores from the first and second interviews were correlated .65, and there were not significant differences in mean scores between the two types of interviewers or between the telephone and in-person interviews.

Other studies cover data from multiple raters scoring a videotape interview, multiple rater scorings of organizational goals, comparison of client and follow-up interview ratings (correlation of .71), and multiple ratings over time in the drug effectiveness study.
I. Theory and Background on Goal Attainment Scaling Reliability

Reliability is a basic property of an instrument or methodology designed for practical use. (Goal Attainment Scaling is generally referred to in this discussion as a "methodology" or "technique" rather than a "test", since tests are often interpreted as tasks done by an individual rather than tasks which are done for or to the individual. [Kelly, 1967]). Goal Attainment Scaling is a relatively unique methodology, and because of its nonstandardized, outcome-oriented nature, most of the classical concepts of reliability have to be interpreted loosely when applied to it. However, since reliability is of such central importance to many persons utilizing the methodology, the author in this chapter shows one way in which Goal Attainment Scaling reliability could be approached.

This section of the chapter discusses both the theory and data on reliability concepts as applied to Goal Attainment Scaling. The theoretical discussion which begins this section of the chapter is followed by a summary of several reliability investigations undertaken by the Program Evaluation Project staff. (As noted in the synopsis, a second chapter on reliability written by Sherman, Baxter, Audette, presents a more intensive analysis of the original Program Evaluation Project reliability study.)

In this chapter, the psychometric complexity of studying reliability in a new instrument is underscored. According to Cronbach, one of the major psychometric theorists, "any research based on measurement must be concerned with the accuracy or dependability or as we usually call it reliability of measurement. A reliability coefficient demonstrates whether the test designed was correct in expecting a certain collection of items to yield interpretable statements about individual differences." (1951) Although such a definition can at least conceptually be applied to the reliability of Goal Attainment Scaling, there are at least two immediate problems in such an application. These two problems are summarized in the pair of Cronbach's phrases:

- "...a certain collection of items..."
- "...statements about individual differences."

When Cronbach refers to "...a certain collection of items..., he is proceeding from the typical background of testing theory, which is based largely on fixed-item aptitude or information tests and inventories of opinions. However, Goal Attainment Scaling is not a "test" in many of its applications, as noted previously, but an indicator of outcomes. Thus, the Goal Attainment score is not basically a "...statement about individual differences". In fact, Goal Attainment Scaling is designed to minimize the impact of individual differences on the Goal Attainment score by orienting measurement to the "expected" or "best prediction" outcome. Goal Attainment Scaling is usually based on a flexible (as opposed to "certain") set of items since the scales are individually developed for each client.

A. Tests of Reliability Appropriate to Goal Attainment Scaling

An indicator of outcomes of treatment or other processes must be able to vary from one point of measurement to another point (usually these are points in "time" since most treatment proceeds through a time period) if there is to be any possibility of evaluating the treatment. One of the assumptions of current theories of treatment outcome is that most people do change (spontaneously or otherwise) during mental health treatment and that these changes occur at differing rates over time.

A similar situation exists with respect to the Minnesota Multiphasic Personality Inventory, and it is reported that: "The limitations in the methods of reliability estimation based upon re-test data can be readily discerned as they apply to instruments like the Minnesota Multiphasic Personality Inventory. The usual index of score stability is based upon the degree of correspondence between the ranking of subjects in a group on two different occasions, summarized in a correlation coefficient. To interpret such a correlation as a gauge of the dependability of the scores on some scales, it is necessary to assume that the rankings of the group from the first to the second testing should not change except through errors in the measurement of their positions. Since there is scarcely any scale on the Minnesota Multiphasic Personality Inventory for which this general assumption is tenable for any period longer than a day or two, the various estimates of scale stability published on the basic Minnesota Multiphasic Personality Inventory scales cannot be readily interpreted as indices of the inherent dependability of the scores from these scales obtained on any one occasion." (Dahstrom, 1969) A similar observation was made much earlier by Hathaway (1956), who argues that:

"It is always difficult to evaluate any of the usual reliability data on personality measures that are likely to show valid time-related variance in the individual subjects. All the Minnesota Multiphasic Personality Inventory scales are sensitive to therapeutic and other effects. Since both the motivation and the life situation of the subjects are likely to change almost momentarily, it is always possible that an observed change in score is valid variance instead of error variance." (1956) Like the MMPI theorists, the Rorschach expert Holzberg (1960) contends that "it cannot be assumed that the object of study, the personality of a subject, is unchanging. Significant aspects of the person-
The application to the
the test). Uses only one testing

As already emphasized, almost all applica-
tions of reliability theory to Goal Attainment
Scaling involve some extension or special modi-
fications of theory. The application to the
Goal Attainment score of each of these five
forms of reliability estimates is discussed below.

TYPE 1. TEST-RETEST RELIABILITY

Because the Goal Attainment score would be
expected to vary meaningfuly over time, reliability
measurements should be based on observations which
are essentially carried out at the same time. When
test-retest scores are used for reliability esti-
mates, any significant gap in time between test and
retest will deflate the reliability estimate. Thus,
the test-retest approach to reliability estimation is
probably not appropriate to Goal Attainment
Scaling.

TYPE 2. ALTERNATE FORM RELIABILITY

When one follow-up guide is constructed by
the client's intake interviewer and a second fol-
low-up guide is constructed by the client's ther-
pist, as in the original reliability study, it
could be said that two "alternate forms" have
been developed. Many other pairs of alternate
forms could be constructed, of course, such as
client-constructed follow-up guides versus ther-
apist-constructed follow-up guides, and so on.
Most investigations of Goal Attainment Follow-
up Guides' content reliability depend, in effect,
on the construction of "alternate forms" of a
Goal Attainment Follow-up Guide for a client.

However, the construction of two or more
follow-up guides for the same client might more
simply be conceptualized as a form of "inter-
rater agreement" reliability. If two or more
raters have a high degree of agreement in the
contents and outcomes as measured by the follow-
up guides they construct, the reliability estimate
is high. Of course, the usual concept of inter-
rater agreement does not involve the actual de-
velopment of the items by the raters, but in the
case of Goal Attainment Scaling, the construction
of the scales, especially the expected levels,
could be thought of as a form of predictive rating
of the client's expected outcome.

TYPE 3. SPLIT-HALF RELIABILITY

This reliability estimate is not appropriate
to Goal Attainment Scaling. It involves splitting
the test into comparable halves by some method
and is a form of internal consistency reliability.

This reliability estimate is based on the
concept that variance should be similar for both
halves of the instrument and that the scales
will have high inter-correlations. Such assump-
tions do not hold for Goal Attainment Scaling.

TYPE 4. INTERNAL CONSISTENCY RELIABILITY

The same reservations cited for the Split-
Half reliability estimate apply even more strongly
for the Kuder-Richardson method, which is an ex-
tension of the internal consistency concept. This
approach is probably not useful where the scores
or contents are expected to vary over time.

Nunnally (1967), after presenting the pos-
sibility of meaningful (i.e., valid) changes in
subjects over time argues that "Systematic dif-
fences in contents of tests of variations in
people from one occasion to another cannot be adequately handled by a model which is based on the random sampling of items. For adequately handling these factors, the model must be extended to consider the random sampling of whole tests, in which case the tests are thought of as being randomly sampled for particular occasions and correlations among tests are permitted to be somewhat lower than would be predicted from the correlations among items within tests. In that case, the average correlation among a number of alternative forms administered on different occasions, or the correlation between only two such forms, would be a better estimate than that provided by coefficient alpha or KR-20. Nunnally's arguments imply that for tests measuring variables expected to vary over time, such as Goal Attainment Scaling, internal consistency estimates of reliability are not necessarily appropriate.

The related alpha coefficient of Cronbach also demands inter-item homogeneity. As noted before, homogeneity is not necessarily assumed for the Goal Attainment Follow-up Guide of a client.

FIGURE I: Program Evaluation Project Studies of Goal Attainment Scaling Reliability

<table>
<thead>
<tr>
<th>STUDY</th>
<th>INTER-RATER AGREEMENT IN CONSTRUCTION OF GOAL ATTAINMENT FOLLOW-UP GUIDES (SCORER ACCURACY OR ALTERNATE FORM)</th>
<th>INTER-RATER AGREEMENT IN SCORING GOAL ATTAINMENT FOLLOW-UP GUIDES (SCORER ACCURACY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORIGINAL RELIABILITY STUDY</td>
<td>Intake Interviewer vs Therapist Goal Attainment Follow-up Guides</td>
<td>Rater 1 vs Rater 2 (Two sessions)</td>
</tr>
<tr>
<td>INTERDISCIPLINARY RELIABILITY STUDY</td>
<td>In-person vs Telephone Rater 1 vs Rater 2 (Two sessions)</td>
<td>Therapist vs Independent Interviewer (Two sessions)</td>
</tr>
<tr>
<td>RE-DESIGN VALIDITY/RELIABILITY STUDY</td>
<td>Client vs Intake Worker Goal Attainment Follow-up Guide Study</td>
<td>Client vs Independent Interviewer (One session)</td>
</tr>
<tr>
<td>GUIDE TO GOALS STUDY PHASE 2</td>
<td>Client vs Independent Interviewer (One session)</td>
<td>Multiple Scorers (One session)</td>
</tr>
<tr>
<td>VIDEOTAPE</td>
<td>Multiple Follow-up Guide Constructors</td>
<td></td>
</tr>
<tr>
<td>DRUG STUDY</td>
<td>Three Raters Time 1 vs Time 2 vs Time 3 (One session per time)</td>
<td></td>
</tr>
</tbody>
</table>
II. Summaries of Reliability Studies

In this section, the reliability studies will be presented roughly in chronological order, except for the inter-rater agreement reliability estimates of scorer reliability and follow-up guide constructor reliability. Each client was represented by two follow-up guides, one constructed by the client's intake interviewer and the second constructed by the client's therapist approximately three weeks later. Scales from the two follow-up guides were intermixed into a single composite guide. This composite follow-up guide was scored independently by two different scorers at sessions which averaged 25 days apart. The time elapsed between the two follow-up interviews was unintentional, as it was due to delays in scheduling the second interview. Table I presents the correlations.

TABLE I: Correlation Coefficients from the Original Reliability Study

<table>
<thead>
<tr>
<th>COMPARISON</th>
<th>N = 44</th>
<th>COEFFICIENT OF CORRELATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Interview versus Second Interview</td>
<td></td>
<td>.704</td>
</tr>
<tr>
<td>(Mean of scores from both Goal Attainment Follow-up Guides from the first interview compared to means of both scores from the second interview.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intake Interviewer Follow-up Guide, First Interview versus Second Interview</td>
<td></td>
<td>.711</td>
</tr>
<tr>
<td>Therapist Follow-up Guide, First Interview versus Second Interview</td>
<td></td>
<td>.625</td>
</tr>
</tbody>
</table>

When the results of this study are analyzed in terms of variance components, it is estimated that 18% of the variance is due to follow-up interviewer errors in scoring, 17% of the variance is due to the choice of material on the follow-up guide itself, 15% of the variance is due to the effects of time or circumstance difference between the two follow-up interviews, and the remaining 50% of the variance is due to client outcome.
B. The Interdisciplinary Reliability Study

This study of scorer accuracy is described more extensively elsewhere (see chapter on Follow-up in P.E.P. Report 1969-1973). The study's basic goals were to compare scoring of the Goal Attainment Follow-up Guide by two methods (telephone versus in-person interviewers) and by two different types of interviewers (M.S.W. versus R.N.). In ten months, 60 clients at the Hennepin County Mental Health Service were interviewed twice. The assignment of follow-up method and type of interviewer were random. There was a mean interval of 27 days between a client's first and second interview. Table II presents the correlations obtained for the various interviewer combinations. None of the differences in mean scores reached the p < .05 level of significance. (Data from this study is based on Audette's chapter on follow-up procedures in the P.E.P. Report 1969-1973.)

TABLE II: Inter-Scorer Correlation Coefficients for the Interdisciplinary Study

<table>
<thead>
<tr>
<th>COMPARISON</th>
<th>NUMBER OF CASES</th>
<th>CORRELATIONS</th>
<th>MEANS</th>
<th>STANDARD DEVIATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total, First vs Second Interview</td>
<td>60</td>
<td>0.65</td>
<td>50.7</td>
<td>11.7</td>
</tr>
<tr>
<td>Both Interviews by M.S.W.'s, First vs Second Interview</td>
<td>13</td>
<td>0.67</td>
<td>51.8</td>
<td>16.0</td>
</tr>
<tr>
<td>Both Interviews by R.N.'s, First vs Second Interview</td>
<td>10</td>
<td>0.70</td>
<td>50.3</td>
<td>13.7</td>
</tr>
<tr>
<td>First Interview by M.S.W., Second Interview by R.N.</td>
<td>18</td>
<td>0.70</td>
<td>50.0</td>
<td>10.0</td>
</tr>
<tr>
<td>First Interview by R.N., Second Interview by M.S.W.</td>
<td>19</td>
<td>0.57</td>
<td>48.0</td>
<td>12.4</td>
</tr>
</tbody>
</table>

In the original reliability study, all interviews were by experienced social workers. In the "interdisciplinary" study, even with variation of follow-up method and type of interviewers, the reliability coefficients are similar.

C. Internal Consistency Indicators

Internal consistency is not essential to an understanding of reliability of Goal Attainment Scaling, but the internal consistency measures illustrate interesting psychometric features of the Goal Attainment Scaling methodology. Two analyses illustrating features of the Goal Attainment Scaling internal consistency are presented in this sub-section.

1. Correlations Between the Individual Scale Scores and Total Follow-up Guide Scores

The item/total correlation which is often used to suggest the degree of internal consistency can be adapted to Goal Attainment Scaling. Since there are so few items on any one Goal Attainment Follow-up Guide, one hundred Goal Attainment Follow-up Guides were selected randomly from those follow-up guides which had been scored for the Program Evaluation Project "four mode study". For these 100 follow-up guides, a correlation was calculated between the scale-by-scale score (with a range of 1 to 3) for each of the 344 scales and the overall Kiresuk-Sherman Goal Attainment score for the Goal Attainment Follow-up Guide on which that scale was contained. For example, if a follow-up guide contained three scales, one scored four, one scored five and one scored six, the following pairs would be formed: (4, 50), (5, 50) and (6, 50).

Such a pairing was carried out for all 344 scales in the sample, and those 344 pairs were correlated to produce the single coefficient of .693. The mean scale score was 5.34 and the mean overall, Kiresuk-Sherman Goal Attainment Follow-up Guide score was 52.19 (Data from calculations by C. Jasperson and J. Baxter). This coefficient suggests a moderately high correlation on the average between any single scale score and the corresponding score on the Goal Attainment Follow-up Guide which contains it. Thus, to know the results of scoring one scale on the Goal Attainment Follow-up Guide, allowed a fairly good prediction of the total Kiresuk-Sherman score.

2. Correlations between the Individual Scale Scores and Total Follow-up Guide Scores, by Number of Scales

A second data analysis was performed on all 634 Goal Attainment Follow-up Guides scored for the main Program Evaluation Project study. These follow-up guides included a total of 2173 scales for a mean of 3.43 scales per Goal Attainment Follow-up Guide. In this analysis, the correlation described above, (between the score on the individual scale and the overall Kiresuk-Sherman Goal Attainment score for the follow-up guide of which the scale was part) was calculated separately for Goal Attainment Follow-up Guides with differing numbers of scales, so as to remove any confusing effect of varying numbers of scales per Goal Attainment Follow-up Guide. This precaution was not applied to the preliminary scale/total analysis described above.

All the correlation coefficients as shown on Table III are statistically significant at better than the p < .01 level (two-tailed).

TABLE III: Correlations Between Scale Scores and Overall Goal Attainment Scores for 644 Cases, Divided by the Number of Scales per Follow-up Guide

<table>
<thead>
<tr>
<th>Number of Scales per Follow-up Guide</th>
<th>Number of Follow-up Guides</th>
<th>Number of Mean Scale Scores</th>
<th>Mean Goal Attainment Score</th>
<th>r</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>12</td>
<td>12</td>
<td>5.50</td>
<td>57.5</td>
</tr>
<tr>
<td>2</td>
<td>170</td>
<td>85</td>
<td>5.34</td>
<td>52.0</td>
</tr>
<tr>
<td>3</td>
<td>262</td>
<td>262</td>
<td>5.35</td>
<td>52.4</td>
</tr>
<tr>
<td>4</td>
<td>180</td>
<td>180</td>
<td>5.10</td>
<td>50.9</td>
</tr>
<tr>
<td>5</td>
<td>88</td>
<td>88</td>
<td>5.06</td>
<td>50.7</td>
</tr>
</tbody>
</table>

* The correlations for the 4 Goal Attainment Follow-up Guides with 6 scales and the 3 Goal Attainment Follow-up Guides with 7 scales are not included because of the small size of the samples.
This analysis suggests that for follow-up guides with two to five scales, any one scale score will tend to have a moderately high correlation with the overall Goal Attainment score for that follow-up guide. Although this internal consistency indicator is applied in a modified manner, it does suggest that there is a meaningful degree of cohesion between scale scores and total follow-up guide scores.

D. Inter-rater Reliability as Measured by Rating of the Videotape Interviews

1. Six-Rater Study

Three graduate students in social work observed the videotape of an intake interview with a 22 year old female client as part of a Program Evaluation Project training program. After this observation, they each independently constructed a Goal Attainment Follow-up Guide for the client. These were the first follow-up guides constructed by them.

At a later training session, these three graduate students plus three others watched the video tape of a follow-up with that same client. Each of these six persons scored each follow-up guide.

Two of these student-constructed follow-up guides contained four scales and the third follow-up guide contained three scales, for a total of eleven scales. Thus, there were eleven scales scored six times each, except for two instances in which a scale was not scored by the raters for unknown reasons, so that there were 64 scale scores. Clearly, this is not a typical application of Goal Attainment Scaling. It suggests, however, the reliability possible with very inexperienced Goal Attainment Follow-up Guide constructors and follow-up raters.

Content agreement on the three follow-up guides is high, as Figure II illustrates. "Self-concept" appears on all three follow-up guides. Vocational problems appear in two follow-up guides, as do both marriage and sexuality problems.

FIGURE II: Scale Headings for Three Different Follow-up Guides for the Same Client

<table>
<thead>
<tr>
<th>Follow-up Guide 1</th>
<th>Scale 1</th>
<th>Scale 2</th>
<th>Scale 3</th>
<th>Scale 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sexual</td>
<td>Marital</td>
<td>Vocational</td>
<td>Self-Concept</td>
</tr>
<tr>
<td>Adjustments</td>
<td>Adjustment</td>
<td>Counseling</td>
<td>Interests</td>
<td></td>
</tr>
<tr>
<td>Follow-up Guide 2</td>
<td>Marital</td>
<td>Job</td>
<td>Capacity For</td>
<td>Self-Identity</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Close</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Relationships</td>
<td></td>
</tr>
<tr>
<td>Follow-up Guide 3</td>
<td>Self-Concept</td>
<td>Goal</td>
<td>Sexual</td>
<td>Relationship</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>with Husband</td>
</tr>
</tbody>
</table>

As Table IV reveals, the fifteen inter-rater percentages of complete agreement on the individual scale scores range from 36 percent to 73 percent, with a mean percentage of complete agreement of 56 percent. The percentages of scale scores on which the two raters' scores are within one goal attainment level of each other range from 60 percent to 100 percent, with a mean percentage of 83 percent.

TABLE IV: Inter-Rater Percentage of Agreement for Six Raters Agreement Expressed in Percentages of Scales*

<table>
<thead>
<tr>
<th>Rater One</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>B</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>C</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>D</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>E</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
</tbody>
</table>

*For each pair of raters there are two percentages: the first percentage shows the percentage of scales on which there was complete agreement, and the second percentage, which is in parentheses, shows the percentage of scales in which the two raters' scores were no more than one level apart.

2. Four-Rater Study

A set of six follow-up guides was constructed by six Hennepin County Mental Health Service clinicians, shortly after the video tape for the client mentioned previously was recorded. This study reports on a session on January 19, 1973 in which one experienced Goal Attainment Scaling rater (from the Program Evaluation Project staff) and three inexperienced Goal Attainment Scaling raters scored one set of the 29 scales included in these six follow-up guides, after observing the videotape of the follow-up interview with client P.R.

As Table V shows, the mean follow-up guide score per rater varies considerably. This variation suggests that there is a meaningful difference or bias among the raters in their overall level of scoring the follow-up guides despite the high percentage of agreement on any one scale.

As Table V reveals, the fifteen inter-rater percentages of complete agreement on the individual scale scores range from 36 percent to 73 percent, with a mean percentage of complete agreement of 56 percent. The percentages of scale scores on which the two raters' scores are within one goal attainment level of each other range from 60 percent to 100 percent, with a mean percentage of 83 percent.

TABLE IV: Inter-Rater Percentage of Agreement for Six Raters Agreement Expressed in Percentages of Scales*

<table>
<thead>
<tr>
<th>Rater One</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>B</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>C</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>D</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
<tr>
<td>E</td>
<td>60% (90%)</td>
<td>45% (62%)</td>
<td>50% (90%)</td>
<td>73% (91%)</td>
<td>64% (91%)</td>
</tr>
</tbody>
</table>

*For each pair of raters there are two percentages: the first percentage shows the percentage of scales on which there was complete agreement, and the second percentage, which is in parentheses, shows the percentage of scales in which the two raters' scores were no more than one level apart.
Table VI incorporates the data from Table V in the form of percentages of agreement, where the percentage is based on the number of raters agreeing on the most common response.

**TABLE VI: Percentages of Agreement for Twenty-nine Scales, Scored by Four Raters**

The mean of these twenty-nine percentages of agreement is 66.7. There was complete agreement on six scales, 75 percent agreement on ten scales, 50 percent agreement on ten scales and 0 agreement (i.e., all four ratings were different) on three scales.

However, even with this moderately high percentage of agreement, the sum of all the scale scores varied greatly among the four raters.

E. Inter-rater Reliability in Two Goal Attainment Follow-up Guides Constructed to Evaluate Organizational Goal Achievement

The idea of applying Goal Attainment Scaling to organizations is an addition to the original concept of evaluating individual clients. However, the concepts of organizational goal-setting and individual goal-setting are basically similar. The inter-rater reliability of two such organizational applications are presented below.

1. A Twenty-three Scale Goal Attainment Follow-Up Guide

A Goal Attainment Follow-up Guide was constructed for the Program Evaluation Project in 1971 by the supervisory staff. There were 23 scales utilized in follow-up scoring.

This twenty-three scale Goal Attainment Follow-up Guide was scored by eleven persons from all levels of the Program Evaluation Project staff. Not every scale was scored by all eleven because raters were given the option of not registering a rating if they considered the scale to be unscoreable.
The mean percentage of agreement for these scales is 66.9%, which is very similar to the earlier mean percentage of agreement 66.7% calculated for 29 scales in the four-rater study reported in section D-2.

2. A Sixty Scale Goal Attainment Follow-up Guide

A set of 60 scales was constructed by the Program Evaluation Project supervisory staff for a 1972 evaluation of the organization's goal attainment. The resulting Goal Attainment Follow-up Guide was scored by seven Program Evaluation Project staff members and, as in the earlier study, they were given the option of not rating a scale. For some scales, there was high agreement that the scales were unscorable, and where four or more staff members concurred in rating a scale "unscorable" the number of "unscoreable" ratings is used to calculate the percentage of agreement.

The mean percentage of agreement for these 60 scales was 68.1, which is similar to the other percentages of agreement reported above.

F. Reliability of Scores When Multiple Follow-up Guides are Constructed for the Same Client

The original reliability study was based on a design in which two Goal Attainment Follow-up Guides were made for each client. One follow-up guide was constructed by the therapist and one was constructed by the intake interviewer. There was a mean of 25 days between construction of the two follow-up guides. The two follow-up guides were developed in two different settings (i.e., intake versus therapy interviews). In the studies reported below, which are based on the videotape, several follow-up guides could be based on the single, recorded intake interview, thus minimizing or eliminating effects of different times and settings. However, since the follow-up guide constructors were inexperienced and the videotape interview is obviously a different situation than a live interview, the results are not directly comparable.

1. The Six-Rater Study

In this study, as presented below, (see section D-1) three Goal Attainment Follow-up Guides were constructed after the raters observed the videotape on client P.R. The follow-up guide constructors were inexperienced, both as constructors and clinicians. Similarly, the six persons who scored these three Goal Attainment Follow-up Guides had not previously rated any follow-up guides of this type. Thus, these results reflect the reliability of follow-up guide construction and of follow-up guide scoring without the benefits of experience except for minimal training in Goal Attainment Scaling (approximately one and one half hours training in follow-up guide scoring).

<table>
<thead>
<tr>
<th>Rater</th>
<th>Guide 1</th>
<th>Guide 2</th>
<th>Guide 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>-1.33</td>
<td>0</td>
<td>- .33</td>
</tr>
<tr>
<td>B</td>
<td>-.25</td>
<td>.75</td>
<td>0</td>
</tr>
<tr>
<td>C</td>
<td>-1.00</td>
<td>.25</td>
<td>- .67</td>
</tr>
<tr>
<td>D</td>
<td>-1.00</td>
<td>.75</td>
<td>- .67</td>
</tr>
<tr>
<td>E</td>
<td>.50</td>
<td>1.33</td>
<td>0</td>
</tr>
<tr>
<td>F</td>
<td>-1.00</td>
<td>.75</td>
<td>- .67</td>
</tr>
</tbody>
</table>

* Based on a -2 to +2 possible range for a single scale.

The correlations among the six ratings for each follow-up guide appear on Table VIII below. These are the intercorrelations (Pearson Product Moment) of the columns in Table VII.

<table>
<thead>
<tr>
<th>TABLE VIII: Correlations Among the Mean Per Scale Scores for Six Independent Scores on Three Follow-up Guides</th>
</tr>
</thead>
<tbody>
<tr>
<td>COLUMN CORRELATED</td>
</tr>
<tr>
<td>Follow-up Guide 1 and Follow-up Guide 2</td>
</tr>
<tr>
<td>Follow-up Guide 1 and Follow-up Guide 3</td>
</tr>
<tr>
<td>Follow-up Guide 2 and Follow-up Guide 3</td>
</tr>
<tr>
<td>Mean of the Absolute Value of the Three Correlations</td>
</tr>
</tbody>
</table>
The mean absolute value of the correlation coefficient is .586 which suggests the stability of the mean scale score per follow-up guide construction even for the very inexperienced constructors in this example involving a videotape case study of one client. The range of correlations among the pairs of raters, from -.234 to .765 suggests that individual differences in agreement among the follow-up guide constructors are quite high. The .760 correlation for follow-up guide constructor 1 versus follow-up guide constructor 2, and .765 correlation for follow-up guide constructor 1 versus follow-up guide constructor 3 are comparable to the correlation coefficients calculated for data of the original reliability study. (See Table I.)

G. Reliability of Different Follow-up Raters

1. Client Scoring versus Follow-Up Interviewer Scoring for Client-Constructed Follow-Up Guides (Guide to Goals Study)

The Guide to Goals, Format One, can be used to enable clients to construct their own follow-up guides. In the Day Treatment Center of the Hennepin County Mental Health Service, clients were asked to use the Guide to Goals.

These client-produced follow-up guides were scored independently by 1) the client and 2) by the follow-up interviewer at an interview scheduled four months after the date at which the follow-up guide was constructed. The interviewers were from the regular Program Evaluation Project follow-up staff. Goal Attainment scores, one from the client and the other from the therapist, were correlated. The Guide to Goals study was divided into two phases, and correlations from the cases first followed-up were published in the Program Evaluation Project Newsletter in Volume IV, issues 4 and 6 (Jones and Garwick).

In the report for phase one, scores from ten cases were available. The clients' ratings and the interviewers' ratings were correlated (Pearson Product Moment) with a coefficient of .71, which is statistically significant at the p < .01 level, two-tailed.

In phase two, only half of the clients were invited to construct their own follow-up guides. Interviewer and client-rated Goal Attainment scores for seven client-constructed follow-up guides were correlated at .732 which is statistically significant at the p < .03 level, two-tailed. The means were 71.6 for the client-rated Goal Attainment score and 69.9 for the interviewer-rated Goal Attainment score.

In these two studies, both ratings took place at the same session. The inter-rater reliability is comparable to the reliability coefficient obtained from other studies, even though the follow-up guides were prepared by persons so incapacitated that they sought assistance at the Mental Health Day Treatment Center, and who were constructing their first follow-up guide.

2. Therapist Scoring Versus Follow-Up Worker Scoring

This study involved the therapists' scoring of follow-up guides which had been constructed at the Hennepin County Mental Health Service by intake interviewers. (Baxter, 1973) After a follow-up interviewer had scored the follow-up guide and returned it to the Program Evaluation Project staff, the follow-up guide was given to the therapist for scoring, before the therapist saw the follow-up interviewer's scoring. The therapist did not interview the client when scoring the Goal Attainment Follow-up Guide. In practice, there was a sizable delay of at least one or two weeks between these two ratings, although the actual length of time is not specified in the original report. Under these conditions, the correlations between therapist and follow-up interviewer ratings tend to be quite modest for the Adult Outpatients and quite high for the Day Treatment clients. (See Table IX.)

TABLE IX: Pearson Correlation Between Goal Attainment Scores for Clients Based on Two Independent Interviews, One by Therapist and One by Follow-up Interviewer

<table>
<thead>
<tr>
<th>Type of Client</th>
<th>N</th>
<th>Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Outpatient Clients</td>
<td>N = 53</td>
<td>.507</td>
</tr>
<tr>
<td>Day Treatment Clients</td>
<td>N = 8</td>
<td>.848</td>
</tr>
</tbody>
</table>

H. Reliability Over Time (The Drug Effectiveness Study)

The Drug Study procedures are described in another chapter of the P.E.P. Report 1969-1973. However, the study involved three follow-up interviews per client. One interview was held three weeks after construction of the follow-up guide, the second was two months after construction, and the third was six months after construction. The follow-up guides were focused most directly on the two month follow-up interview. Follow-up interviews were conducted by experienced masters degree social workers on the Program Evaluation Project follow-up staff.

As the data in Table X on the following page suggest, there appears to be a trend for the mean Goal Attainment scores to rise as the time after follow-up increases. However, the rise in means would not necessarily be related to changes in reliability, if all cases increased proportionately. Table X shows the correlations of scores for the follow-up dates.
As the correlations in Table XI below reveal, there is a relatively low degree of correlation among the Goal Attainment scores from the three follow-up times. The mean correlation is only .46, which is lower than correlations typically obtained from multiple follow-ups at the same follow-up session or from two follow-ups by different follow-up workers. This somewhat lower correlation may imply that the degree of attainment of expectations does change considerably within a six month period, that is, that knowledge of goal attainment at one time is not always sufficient for prediction of goal attainment at other times. It appears that in addition to the rise in mean Goal Attainment scores over time, there is a fairly high amount of change in the relative degree of goal attainment over time among the clients.

TABLE XI: Correlations of Kiresuk-Sherman Goal Attainment Scores for Three Follow-up Interviews

<table>
<thead>
<tr>
<th>Follow-up Interview</th>
<th>Follow-up Two Months After Follow-up Guide Construction</th>
<th>Follow-up Six Months After Follow-up Guide Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two Months After Follow-up Guide Construction</td>
<td>.70 (p&lt;.01)</td>
<td>.20 (not statistically significant at the p&lt;.05 level)</td>
</tr>
<tr>
<td>Six Months After Follow-up Guide Construction</td>
<td>.47 (p&lt;.05)</td>
<td>.67 (p&lt;.05)</td>
</tr>
</tbody>
</table>

III. An Overview of Correlational Estimates of Goal Attainment Scaling Reliability

As emphasized in the introductory comments, the complexity of reliability estimation should now be clearer. Goal Attainment Scaling has many points at which the reliability of the technique can be altered. These points include, at least:

a. who constructs the follow-up guide? (client, therapist or intake interviewer, etc.)
b. how many scales appear on the follow-up guide?
c. when is the follow-up guide scored? (how long after follow-up guide construction?)
d. who scores the follow-up guide? (are they experienced in such scoring? what background do they have?)
e. how many raters are there?
f. in what circumstances are the follow-up guides scored? (in-person, by mail, by telephone)

Since Goal Attainment Scaling is a basic approach which encompasses an array of possible technical variants, a whole galaxy of possible reliability estimates could be helpful for different applications.

The reliability estimates discussed in this chapter were produced in a variety of situations but most suggest a usefully high degree of inter-rater agreement, and a usefully high degree of Goal Attainment score stability for clients when follow-up guides are made by more than one person.

References.


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