



This session is designed to maximize patient engagement and talk time. The focus tasks, small-group sizes, collaborative objectives, and individual work assignments are included strategically to meet this purpose. The timing, number of sessions, and room makeup may be adjusted according to need.

Setting SMART Goals in Recovery

This is a continuation of the session on Breaking Down Goals.

Goals are a critical aspect of recovery, and well-defined, relevant, achievable goals support a patient's growth from one stage of healing to the next without them becoming complacent; setting SMART goals sets patients up for success because they have built-in, measurable accountability. SMART goal setting allows individuals to set a preferred destination and begin mapping the best course to reach it, considering potential challenges throughout the process.

Session Objective:

By the end of this session, participants will be able to create a goal that is specific, measurable, achievable, relevant, and time-bound.

Delivery Time: 60 Minutes

Materials: Notebook paper, writing materials, clipboards (if no desks/tables are available), SMART Goal Rubric PDF (1 copy per participant), My SMART Goal PDF (1 copy per participant)

Set-up:

1. If possible, set chairs and desks in a semicircle. If no desks are available, distribute clipboards, so participants have a sturdy, portable means of taking notes and completing tasks.
2. If a whiteboard or projector is available, write the session objective.

Procedure:

1. **Session Objective** – Read the session objective aloud.
2. **Introduction (10 Minutes)** **Introduction (10 Minutes)** - In the previous session, we discussed breaking down common goals into manageable chunks, an essential skill that helps keep individuals motivated and goals achievable, but developing a goal from scratch poses its own set of challenges. Selecting appropriate beginning and end points as well as considering barriers along the way is essential for a SMART Goal.

Pair discussion - With a partner, discuss and answer/complete the following:

- 1) List 2-3 goals that are central to successful recovery.
- 2) Discuss why the goals support recovery.
- 3) Discuss challenges one may face while completing the goal.

The therapist can monitor conversations and board well-formed/poor examples for comparison. After a few minutes, bring attention back and lead a group discussion.

- 1) Possible responses include attending recovery meetings, committing to practicing mindfulness daily, maintaining a healthy lifestyle, improving relationships, etc.
- 2) Answers may vary here but will likely tie to positive life outcomes. The clinician can follow up with elicitation questions related to SMART (should goals be measurable, time-bound, etc.).
- 3) Answers may include fear of failure or difficulty identifying a starting point. Goals may be unclear, unrealistic, or unmeasurable.

There are some common mistakes individuals in recovery make when setting goals, including creating goals that are too big (remind patients what they learned in the last session about the importance of small steps), not in line with their overall recovery, or not actionable. Take, for example, the following goals:

I want to get my degree.

I want to stop using.

I want to be able to drink like my friends.

I want to get my children back from CPS.

Have patients debate whether these examples fall into the category of appropriate or if they need to be modified in some way.

Select, or have the room select, one goal everyone agrees is central to recovery.

3. **SMART Setting Method** (20 Minutes) - Explain that not all goals are created equal. Distribute SMART Goal Rubric to each participant. Using the SMART goal-setting method, we can set ourselves up for success by avoiding many common challenges people face while tackling them. Take a moment to review each box.

Returning to the selected goal, read it as is and ask the room if it meets the criteria as a SMART goal. If not, why? Go through the rubric one line at a time, assessing if the goal meets the requirements of SMART or not; if it does not, how can it be modified?

Model modifying the first SMART goal.

For example -

I will find a sponsor.

Is this goal specific? Yes, it provides clear roles and outcomes.

Is it measurable? Yes, the sponsor can be counted.

Is it attainable? Yes, sponsors can be found at community recovery meetings and online.

Is it relevant? Yes, it connects to the larger goal of sustained recovery.

Is it time-bound? No, it is not.

What about the goal with this adjustment?

I will find a sponsor by the end of the day.

While this goal does solve the issue of a specific timeframe for the goal to be completed, it might make attainability an issue.

I will find a sponsor within 10 days is a much more reasonable goal.

Next, write another goal on the board: For example,

By the end of the week, I will identify a list of common triggers I can avoid in my daily life.

Have partners discuss if this goal meets the criteria of a SMART goal.

Why or why not?

Does it need to be modified?

If so, how?

Based on group ability, the clinician should decide if this activity should be repeated again with another example before moving to the small group work with support.

Next, participants will return to their same pairs. Assign groups other goals (one goal per group) from the original list for them to analyze and modify to meet the SMART criteria. Depending on group size, multiple pairs can later be assigned the same goal for breakdown and comparison.

Bring it back for group analysis and discussion. Have pairs come up to present the original goal and the modified SMART goal. As teams present, the audience members are instructed to check the goal against the SMART Goal Rubric and write down one thing the team did well and one piece of advance for improvement.

- 4. Small Group Practice (15 Minutes) - Stop the Bus** - Teams should remember this activity from the previous session. For additional skill practice, break participants up into groups of three to four. Each team will receive a series of task cards with goals requiring modifications. As the clinician reads goals randomly, teams will race to complete the goal by making it SMART. Once a team is finished, they yell, "Stop the bus!" so the clinician can check. Other groups should keep working in case the first team is incorrect. The winning team can share their final goal. Read the boarded goals at random.
- 5. Individual (5 Minutes) - Create a personal SMART goal.** Distribute a My SMART Goals document to everyone. Each group member should complete one original SMART goal tied to their recovery (Part 1).
- 6. Group Discussion and Feedback (10 Minutes)** - Each group member shares their goal for feedback and review.
- 7. Additional Practice** - Encourage participants to complete the My SMART Goals document's remaining sections before the next session.