Lōkahi Service Log Definitions

SERVICE FOCUS AREAS
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- Autism Spectrum Behavior
- Depression Behavior
- Disruptive Behavior
- Eating Problems
- Elimination Problems
- Mania Problems
- Traumatic Stress Problems
- Other Focus Area
- Not Identified

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- Adjustment to Life Transition
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- Anxious Mood
- Avoidance
- Depressed Mood
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- Grief
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- Self-Reward/Self-Praise
- Self-Verbalization
- Session/Appointment Reminders
- Skill Building
- Social Skills Training
- Strengthening Informal Supports
- Support Networking
- Supportive Listening
- Time Out
- Understanding Identities, Beliefs, and Values
- Other

The following definitions are from the *Child and Adolescent Mental Health Division (CAMHD), Hawaiʻi Department of Health. (2019). Instructions and codebook: Treatment targets, progress ratings and practice elements* and PracticeWise's PWEBS or Practice Guides (2024).

SERVICE FOCUS AREAS *(Return)*

Focus areas are what the counseling service to the student will be focused on. The current list is based on the PWEBS searchable problem types. These areas are broad and do not require a diagnosis to be the area used to guide evidence-based treatment services searches.

Anxiety Behaivor *(Return)*
A general uneasiness that can be characterized by irrational fears, panic, tension, physical symptoms (e.g., stomach aches, difficulty breathing, accelerated heartbeat, muscle tension, sweatiness, dizziness), and/or excessive anxiety, worry, fear, or shyness.

Attention Problems *(Return)*
Described by short attention span, difficulty sustaining attention on a consistent basis, and susceptibility to distraction by extraneous stimuli.

Autism Spectrum Behavior *(Return)*
Behavior characterized by markedly impaired social interactions and verbal or nonverbal communication; narrow interests; and repetitive behavior. May include a lack of awareness of the feelings of others, impaired ability to imitate, absence of social play, abnormal speech, abnormal nonverbal communication, and a preference for maintaining environmental sameness.

Depression Behavior *(Return)*
Behaviors that can be described as persistent sadness or "empty" mood, feelings of hopelessness, guilt, worthlessness, helplessness, grief, decreased energy, fatigue, etc.

Disruptive Behavior *(Return)*
Behavior that chronically threatens and intimidates others or violates social norms, can include willful misconduct, aggression, anger, delinquency, runaway, sexual misconduct, oppositional, and/or non-compliant behavior.

Eating Problems *(Return)*
Knowledge or behaviors involved with the ingestion or consumption of food. May include nutritional awareness, food choice, feeding mechanics (e.g., swallowing, gagging, etc.), and social factors relating to eating situations.

Elimination Problems *(Return)*
Enuresis refers to the repeated pattern of voluntarily or involuntarily passing urine into inappropriate places (e.g., bed, clothes) during the day or at night. Encopresis refers to a repeated pattern of voluntarily or involuntarily passing feces into inappropriate places (e.g., bed, clothes) during the day or at night.

Mania Problems *(Return)*
An inflated self-perception that can be manifested by a loud, overly friendly social style that oversteps social boundaries, high energy and restlessness, and a reduced need for sleep.

Traumatic Stress Problems *(Return)*
Issues related to the experience or witnessing of life events involving actual or threatened death or serious injury to which the youth responded with intense fear, helplessness, or horror.

Other Focus Area *(Return)*
This option is reserved for a Focus Area not listed above but for which is appropriate to be addressed in the school setting. This does NOT include meetings, assessments, or other non-treatment activities.

Not Identified *(Return)*
This option is reserved for non-caseload cases that may not have a specific Focus Area identified yet.

TARGETED CONCERNS *(Return)*

Targeted Concern(s) is the specific behavior(s) and/or need(s) being addressed under the Focus Area as part of the mental health services for youth.

Activity Involvement *(Return)*
Issues related to general engagement and participation in activities. Including activities such as school involvement or community involvement. Peer involvement is a separate targeted concern area.

Adjustment to Life Transition *(Return)*
Issues related to a youth's global response to a life transition or specific challenge (e.g., change of school, change of living situation, treatment transition or discharge, etc.).

Aggression *(Return)*
Verbal and/or physical aggression, or threat thereof, that results in intimidation, physical harm, or property destruction.

Anger *(Return)*
Emotional experience or expression of agitation or destructiveness directed at a particular object or individual. Common physical feelings include accelerated heartbeat, muscle tension, quicker breathing, and feeling hot.

Anxious Mood *(Return)*
A general uneasiness that can be characterized by irrational fears, panic, tension, physical symptoms (e.g., stomach aches, difficulty breathing, accelerated heartbeat, muscle tension, sweatiness, dizziness), and/or excessive anxiety, worry, or fear.

Avoidance *(Return)*
Behaviors aimed at escaping or preventing exposure to a particular situation or stimulus.

Depressed Mood *(Return)*
Behaviors that can be described as persistent sadness, anxiety, or "empty" mood, feelings of hopelessness, guilt, worthlessness, helplessness, decreased energy, fatigue, irritability, etc.

Disaster Response *(Return)*
Addressing issues related to student social, emotional, or behavioral response to a disaster, such as wildfires.

Grief *(Return)*
Feelings associated with a loss of contact with a significant person in the youth's environment (e.g., parent, guardian, friend, etc.).

Hyperactivity *(Return)*
Can be described by fidgeting, squirming in seat, inability to remain seated, talking excessively, difficulty engaging in leisure activities quietly, etc.

Impulsivity *(Return)*
Behavior characterized by little or no forethought, reflection, or consideration of the consequences of an action that impairs functioning. This can include behaviors that put a youth at risk, including emotional dysregulation. Behaviors that are purely physical or motoric (e.g., shaking legs) should be coded as hyperactivity. Impulsivity related to self-injurious behavior and mania should be coded under those behaviors respectively.

Inattention
Behavior characterized by short attention span, difficulty sustaining attention on a consistent basis, and susceptibility to distraction by extraneous stimuli

Oppositional/Non-Compliant Behavior *(Return)*
Behaviors that can be described as refusal to follow adult requests or demands or established rules and procedures (e.g., classroom rules, school rules, etc.).

Peer Involvement *(Return)*
A greater involvement in activities with peers. Activities could range from academic tasks to recreational activities while involvement could range from working next to a peer to initiating an activity with a peer. This differs from positive peer interaction in that peer involvement targets actual engagement in activities with peers regardless of interactional processes, while positive peer interaction focuses on interactional behavior, styles, and intentions.

Peer/Sibling Conflict *(Return)*
Peer and/or sibling relationships that are characterized by fighting, bullying, defiance, revenge, taunting, incessant teasing, and other inappropriate behaviors.

Phobia/Fears *(Return)*
Irrational dread, fear, and avoidance of an object, situation, or activity.

Runaway/Elopement *(Return)*
Running away from home or current residential placement for a day or more.

School Refusal/Truancy *(Return)*
Reluctance or refusal to attend school without adult permission for the absence. May be associated with school phobia or fear manifested by frequent somatic complaints associated with attending school or in anticipation of school attendance, or willful avoidance of school in the interest of pursuing other activities.

Self-Injurious Behavior *(Return)*
Acts of harm, violence, or aggression directed at oneself.

Sleep Disturbance/ Sleep Hygiene *(Return)*
Difficulty getting to or maintaining sleep.

Suicidality *(Return)*
Issues related to recurrent thoughts, gestures, or attempts to end one's life.

Willful Misconduct/Delinquency *(Return)*
Persistent failure to comply with rules or expectations in the home, school, or community. Excessive fighting, intimidation of others, cruelty or violence toward people or animals, and/or destruction of property.

Other *(Return)*
Any written response to an open-ended question that could not be categorized into another treatment target sub-category and did not necessitate the addition of a new category.

PRACTICE ELEMENTS *(Return)*

Practice elements are the discrete clinical intervention strategies (e.g., "problem solving," "goal setting") applied by the therapist or treating provider within a treatment session.

Accessibility Promotion *(Return)*
Any efforts to make treatment services more convenient and accessible (e.g., on-site youth care, taxi vouchers, bus tokens, rides).

Activity Scheduling *(Return)*
The assignment or request that a youth participate in specific activities outside of therapy time, with the goal of promoting or maintaining involvement in satisfying and enriching experiences. AKA: Activity Scheduling

Addressing Barriers to Treatment *(Return)*
Eliciting factors that might interfere with treatment (e.g., transportation, scheduling, previous experiences with services, stigma, etc.)

Antecedent/Stimulus Control *(Return)*
Strategies to identify specific triggers for problem behaviors and to alter or eliminate those triggers in order to reduce or eliminate the behavior. AKA: Stimulus/Antecedent Control

Assertiveness Training *(Return)*
Exercises or techniques designed to promote the youth's ability to be assertive with others, usually involving rehearsal of assertive interactions.

Assessment **(Return)**
A service provider learning more about the youth and family through informal interviews, screening, or observation (that would not qualify as parent- or self-monitoring).

Attending *(Return)*
Exercises involving the youth and caregiver playing together in a specific manner to facilitate their improved verbal communication and nonverbal interaction. This can involve the caregiver's imitation and participation in the youth's activity, as well as parent-directed activities (previously called directed play).

Behavior Alert *(Return)*
Providing clients, parents, or others with salient visual, auditory, or otherwise "alerting" stimuli contingent on a specific behavior. Behavior alerts provide feedback for discrete, temporally-specific behaviors of the client such as bedwetting, as opposed to feedback for long-term performance such as Performance Feedback about task mastery. Behavior Alerts are also stimuli that are delivered contingent upon the occurrence of individual-specific undesired behaviors, such as a residential client stepping in an off-limit area of a facility, as opposed to in relation to behavioral markers defined by a reference group such as Performance Feedback about substance use relative to peers.

Behavioral Contracting *(Return)*
The development of a formal agreement to specify rules, consequences, and a commitment by the youth and relevant others to honor the content of the agreement. Includes contracting that is not better characterized by goal setting.

Caregiver Coping *(Return)*
Exercises or strategies designed to enhance caregivers' ability to deal with stressful situations, inclusive of formal interventions targeting one or more caregivers. AKA: Parent Coping

Case Management *(Return)*
Coordinating among the service providers to ensure effective communication, receipt of appropriate services, etc. AKA: Care Coordination

Cognitive: Anxiety *(Return)*
Techniques to address thoughts that maintain or intensify anxiety and avoidance, including introducing the idea of thoughts and how they are related to anxiety, as well as introducing cognitive restructuring as a technique for correcting negative thinking. AKA: Cognitive/Coping

Cognitive: Anxiety (STOP) *(Return)*
Techniques to teach how thoughts can influence anxiety, especially when such thoughts interfere with treatment. This includes introducing the idea of thoughts, how they are related to anxiety, how to modify anxious self-talk into coping self-talk, and providing a 4-step plan to use when feeling anxious. AKA: Cognitive/Coping

Cognitive: Depression *(Return)*
Techniques to counter negative thoughts that interfere with mood or motivation, such as teaching the youth that their thoughts and behaviors influence the way they feel, identifying types of negative thoughts and developing the ability to generate positive, realistic alternative thoughts; discouraging rumination, which is repeatedly thinking about negative experiences; and encouraging perspective change through seeking out social support. AKA: Cognitive/Coping

Cognitive: Disruptive Behavior *(Return)*
Techniques to identify and challenge thoughts that contribute to aggressive and oppositional behavior. This includes helping them understand how thoughts influence behaviors, how to identify and challenge cognitive errors, and how to evaluate alternative perspectives. AKA: Cognitive/Coping

Cognitive: Trauma *(Return)*
Techniques to address thoughts that maintain or intensify trauma-related stress. This includes understanding how thoughts related to a trauma influence feelings and behavior, identifying unhelpful thoughts and beliefs associated with trauma, and generating alternative, helpful thoughts. AKA: Cognitive/Coping

Commands or Effective Instruction *(Return)*
Training for caregivers in how to give directions and commands in such a manner as to increase the likelihood of youth compliance. AKA: Commands/Limit Setting

Communication Skills: Advanced *(Return)*
Training for youth or caregivers to help facilitate more positive caregiver-youth communication. This includes organizing discussions of difficult topics using a "communication hierarchy" and teaching and practicing communication skills to members of the family to improve positive relations among family members. This may also be used in other adult relationships the youth has (e.g., teacher, administrator, etc.). AKA: Communication Skills

Communication Skills: Early Development *(Return)*
Training to teach the youth, as well as their caregiver or teacher to help the youth, develop a repertoire of functional language. This includes teaching the adult how to gradually shape and reinforce youth's receptive, expressive, and functional communication, as well as promoting generalization of the youth's communication skills. AKA: Communication Skills

Crisis Management *(Return)*
Immediate problem-solving approaches to handle urgent or dangerous events. This might involve defusing an escalating pattern of behavior and emotions either in person or by telephone and is typically accompanied by debriefing and follow-up planning.

DRO/Activity Ignoring *(Return)*
The training of parents or others involved in the social ecology of the youth to selectively ignore mild target behaviors and selectively attend to alternative behaviors. AKA: Ignoring/DRO (Differential Reinforcement of Other Behavior)

Educational Support *(Return)*
Exercises designed to assist the youth with specific academic problems, such as homework or study skills. This includes tutoring.

Engagement w/CG or Teacher *(Return)*
The use of skills and strategies to facilitate the caregiver's positive interest in participation in an intervention. The caregiver will understand and address barriers to treatment to improve participation, elicit the caregiver's perspective regarding the youth's main challenges and goals for improvement; identify and reduce practical and psychological barriers to participation; and help the caregiver understand basic information about the treatment. This is distinct from relationship/rapport building, which aims to increase the quality of the relationship between the youth and the therapist. AKA: Family Engagement

Engagement w/Child *(Return)*
The use of skills and strategies to facilitate the youth's active participation in therapy. This includes developing the youth's power and efficacy with regard to treatment decisions and outcomes, building strong collaborative relationships with the youth and others in the youth's support network to support the youth's progress, and enhancing the youth's understanding of therapy services and the roles of those involved
to reduce barriers to active participation in services.

Exposure *(Return)*
Techniques or exercises that involve direct or imagined experience with a target stimulus, whether performed gradually or suddenly, and with or without the therapist's elaboration or intensification of the meaning of the stimulus.

Facilitating Skill Mastery *(Return)*
Within-session exercises (e.g., role plays) to build/reinforce competence in a skill area as well as therapeutic tasks given to a client to complete outside of the session.

Goal Setting *(Return)*
The clarification of specific goals and developing commitment from youth or family to attempt to achieve those goals (e.g., academic, career, etc.), that is not better characterized by behavioral contracting.

Guided Imagery *(Return)*
Visualization or guided imaginal techniques for the purpose of mental rehearsal of successful performance. Guided imagery for the purpose of physical relaxation (e.g., picturing calm scenery) is not coded here, but rather is coded under relaxation.

Insight Building: Emotional ID (Identification) *(Return)*
Activity designed to help youth achieve greater self-understanding by reflecting on a range of emotions. This includes assisting the youth with identifying and labeling their emotions, guiding the youth to identify the emotions of others, and promoting the youth's deeper understanding of emotions by becoming more aware of internal experiences and external contexts. AKA: Insight Building

Line of Sight Supervision *(Return)*
Direct observation of a youth for the purpose of assuring safe and appropriate behavior.

Maintenance/Relapse Prevention *(Return)*
Exercises and training designed to consolidate skills already developed and to anticipate future challenges, with the overall goal to minimize the chance that gains will be lost in the future.

Mentoring *(Return)*
Pairing with a more senior and experienced individual who serves as a positive role model for the identified youth.

Mindfulness *(Return)*
Exercises designed to facilitate present-focused, non-evaluative observation of experiences as they occur, with a strong emphasis of being "in the moment." This can involve the youth's conscious observation of feelings, thoughts, or situations.

Modeling *(Return)*
Demonstration of a desired behavior by a therapist, confederates, peers, or other actors to promote the imitation and subsequent performance of that behavior by the identified youth.

Monitoring
The repeated measurement of some target index by the caregiver or teacher to illuminate areas of concern and provide important information about treatment progress. AKA: Parent or Teaching Monitoring

Motivational Enhancement*(Return)*
Exercises designed to increase readiness to participate in additional therapeutic activity or programs. These can involve cost-benefit analysis, persuasion, or a variety of other approaches. AKA: Motivational Interviewing

Narrative *(Return)*
Exercises designed to assist the youth in developing and sharing a verbal, written, or artistic narrative or story about the youth's life events (typically traumas) and the cognitive and affective processing of those events.

Natural and Logical Consequences *(Return)*
Training for parents or teachers in (a) allowing youth to experience the negative consequences of poor decisions or unwanted behaviors, or (b) delivering consequences in a manner that is appropriate for the behavior performed by the youth.

Peer Pairing/Peer Modeling *(Return)*
Pairing with another youth of same or similar age to allow for reciprocal learning or skills practice.

Performance Feedback
Providing information about one's own or another's performance to the youth, parent, or others based on assessment or observation. This includes such things as information about changes in treatment, comparison of quality or rate of performance relative to norms, benchmarks, or risks, review of recorded interactions, etc.

Personal Safety Skills *(Return)*
Training for the youth in how to maintain personal safety of one's physical self. This can include education about attending to one's sense of danger, body ownership issues (e.g., "good touch-bad touch"), risks involved with keeping secrets, how to ask for help when feeling unsafe, and identification of other high-risk situations for abuse.

Positive Expectation Setting *(Return)*
Establishing expectations that treatment will be helpful and that the client will be successful.

Praise *(Return)*
The training of parents, teachers, or others involved in the social ecology of the youth in the administration of social rewards to promote desired behaviors. This can involve praise, encouragement, affection, or physical proximity.

Praise/Rewards: Therapist *(Return)*
The administration of tangible (i.e., rewards) or social (e.g., praise) reinforcers by the therapist. AKA Therapist Praise/Rewards

Problem Solving *(Return)*
Techniques, discussions, or activities designed to bring about solutions to targeted problems, usually with the intention of imparting a skill for how to approach and solve future problems in a similar manner.

Psychoed About Problem (w/CG or Teacher) *(Return)*
Providing information about the nature of the problem to the caregiver or teacher and how treatment will address that problem. AKA: Psychoed w/Parent or Teacher

Psychoed About Problem (w/Child) *(Return)*
Providing information about the nature of the problem and how treatment will address that problem. AKA: Psychoed w/Child

Psychoed About Services (w/CG or Teacher) *(Return)*
Providing information about services (e.g., session frequency/content, roles of therapist and client, etc.) to the caregiver. AKA: Psychoed w/Parent or Teacher

Psychoed About Services (w/Child) *(Return)*
Providing information about services (e.g., session frequency/content, roles of therapist and client, etc.) to youth. AKA: Psychoed w/Child

Relationship/Rapport Building *(Return)*
Strategies in which the immediate aim is to increase the quality of the relationship between the youth and the therapist. Can include play, talking, games, or other activities. This is distinct from family engagement, which focuses on the use of skills and strategies to facilitate family or youth's positive interest in participation in an intervention.

Relaxation *(Return)*
Techniques or exercises designed to induce physiological calming, including muscle relaxation, breathing exercises, meditation, and similar activities. Guided imagery exclusively for the purpose of physical relaxation is also coded here.

Response Cost *(Return)*
Training parents or teachers how to use a point or token system in which negative behaviors result in the loss of points or tokens for the youth.

Response Prevention *(Return)*
Explicit prevention of maladaptive behavior that typically occurs habitually or in response to emotional or physical discomfort.

Rewards *(Return)*
The training of parents or others involved in the social ecology of the youth in the administration of tangible rewards to promote desired behaviors. This can involve tokens, charts, or record keeping, in addition to first-order reinforcers. AKA: Tangible Rewards

Self-Monitoring *(Return)*
The repeated measurement of some target index/behavior by the youth.

Self-Reward/Self-Praise *(Return)*
Techniques designed to encourage the youth to self-administer positive consequences contingent on the performance of target behaviors.

Self-Verbalization *(Return)*
Training and rehearsal for the youth in how to generate verbal prompts to guide the youth's own behavior. Often this practice is used in the context of rehearsing the steps faced in a task or problem. Self-verbalization can be covert, aloud, or both.

Session/Appointment Reminders *(Return)*
Providing information about the day, time, and location of the next therapeutic contact via mail, text, phone, email, etc. to caregiver, teacher, or youth.

Skill Building *(Return)*
The practice or assignment to practice or participate in activities with the intention of building and promoting talents and competencies. AKA: Talent or Skill Building

Social Skills Training *(Return)*
Providing information and feedback to improve interpersonal verbal and non-verbal functioning, which may include direct rehearsal of the skills. If this is paired with peer pairing/peer modeling that should be coded as well.

Strengthening Informal Supports *(Return)*
Working with youth or families to make use of informal supports in their homes and communities (e.g., cultural or faith-based groups, neighbors and friends, etc.).

Support Networking *(Return)*
Strategies to explicitly identify, engage, develop, or otherwise increase the involvement or effectiveness of individuals in the client's social ecology to provide instrumental or emotional support for the client or assist in the performance of therapeutic tasks or activities (e.g., homework). This may include building the individual or collaborative skills of the client and/or the support persons. Support networking is more specific and active than just working together or receiving treatment in a group or social environment.

Supportive Listening *(Return)*
Reflective discussion with the youth designed to demonstrate warmth, empathy, and positive regard, without suggesting solutions or alternative interpretations.

Time Out *(Return)*
The training of or the direct use of a technique involving removing the youth from all reinforcement for a specified period of time following the performance of an identified, unwanted behavior.

Understanding Identities, Beliefs, and Values *(Return)*
Strategies designed to explore the family's identities, beliefs, and values.

Other *(Return)*
Any written response to an open-ended question that could not be categorized into another intervention strategy sub-category and did not necessitate the addition of a new category.