

Michelle and Joshua

Mother: Michelle, age 18, African American

Father: Reginald, age 21, African American (mom refuses contact)

Children: Joshua, age 3

Mom currently 6 months pregnant (different father-presently no contact with family)

Presenting Situation

Michelle has been receiving on-going protective services for approximately 6 months. She is currently receiving daycare services for Joshua. The on-going protective services worker receives a call from the daycare director, Mrs. Williams. She expresses several concerns about Michelle. According to Mrs. Williams, Michelle has been late bringing Joshua to daycare and is late picking him up. Joshua and Michelle appear to be wearing soiled clothes. Joshua often appears to need a bath. Michelle has excessive body odor. Joshua also appears to be lethargic when coming to school. Mrs. Williams further related that Michelle's behavior has changed dramatically over the last two weeks. She has been irritable, withdrawn and disrespectful to staff. Mrs. Williams expressed that this behavior is unusual for Michelle, as she has been very responsible and nurturing to Joshua. Mrs. Williams advised the social worker that she suspects that Michelle is using marijuana regularly. Several of the staff members have reported smelling marijuana on her when she picks up Joshua.

The social worker makes a telephone call to Michelle's residence and gets no answer. After leaving a message, the social worker telephones Michelle's mother, Susan. Susan reports that she has not seen Michelle in several weeks. She states that she has tried to contact her, but Michelle has not responded. Upon learning of this information, the social worker travels to the childcare center to observe Joshua. The worker notices that Joshua's clothing is wrinkled and in disarray. It is cool outside, and Joshua does not have on socks. The worker briefly interacts with Joshua and assesses him for any bruises. The worker does not observe any signs of physical abuse. Joshua interacts with the worker but is more withdrawn than usual. When the worker asked Joshua about his mother, Joshua responded that "mommy is sleeping".

After leaving the childcare center, the worker travels to Michelle's residence. The worker notices Michelle's car in the yard and spends several minutes waiting on Michelle to answer the door. A neighbor hears the knocking and walks over to their house. He states that he has tried to get Michelle to answer the door for days, and she refuses. The worker persists, and Michelle eventually opens the door. When she comes to the door, her hair and clothing are in disarray. Michelle opens the door and walks away. She proceeds to lie down on the couch. When the worker enters the home, she notices there are many pieces of clothing thrown over the furniture and on the floor, dirty dishes piled in the sink and on the living room tables and floor, sour milk on the counter, several sour smelling towels and dozens of dirty diapers on the bathroom floor. The worker immediately asks Michelle what is going on, as Michelle normally keeps a clean house. Michelle does not respond. Finally, after the worker persists, Michelle

hands her a pamphlet entitled, "HIV and Your Baby". Michelle immediately begins to cry uncontrollably. When Michelle calms down, she explains that she was diagnosed with HIV approximately two weeks ago. She states she had a routine test due to her pregnancy, and the results were positive. Michelle expresses anxiety and disbelief. She relates to the worker that she has not been able to function, as she fears that she is dying. She frequently asks, "What will happen to my children?" After talking with the worker, Michelle decides she needs sometime to herself to sort through all that has happened. Michelle states she will take Joshua to her parents' home, and will only tell them that she is not feeling well due to the pregnancy.

Current Situation

The social worker returns to Michelle's home approximately two days later.

Background Summary

Michelle was born into an affluent family. Her father is a family physician. Her grandfather and several other relatives were also physicians. Michelle's mother holds a teaching degree, but currently manages her father's doctor's office. Michelle's parents have been married for over 30 years. They live in the same city as Michelle. Michelle has three siblings. She is the youngest child. Michelle's oldest sister is 27 years old and is an attorney. She is single and lives out of state. Michelle has another sister, who is 23 and is currently in graduate school studying marriage and family counseling.

Michelle has described her childhood as privileged. She had a good upbringing by both parents, although she is always felt that their relationship was strained. Michelle and her sisters have had typical sibling rivalry, but were always close as children. As the youngest of the family, Michelle has expressed that she felt pressured to measure up to her sisters. This eventually led to a strained relationship among them and with her parents.

Michelle was active in high school. She was an average student who would rather play basketball than study. Michelle had no major problems in school until she began dating Reginald, who was 18 years old at the time. During this time, Michelle became very defiant to school personnel and her family. Michelle's parents disagreed with the relationship due to their ages. Reginald graduated from the same high school the previous year and attended a local junior college. He was reared in an upper middle class family and had many things in common with Michelle. Shortly after they began dating, Michelle became pregnant. Both Michelle and Reginald's parents requested that they terminate the pregnancy. While Reginald was willing to comply, Michelle was not in agreement. Michelle eventually dropped out of school to have the baby and decided not to return. Michelle and Reginald's relationship was strained during the first two years of Joshua's life. Reginald eventually left to attend a four-year college and Michelle refused to allow him or his family to have contact with Joshua. Reginald and his parents have not sought any contact with Joshua since this time.

Michelle's parents express great disappointment in the choices Michelle made. Despite their issues with her lifestyle, they allowed her and Joshua to remain in their home. Michelle has had odd jobs and had plans of attending college. She received her GED approximately seven months ago. It was important to Michelle that Joshua grow up in a very nurturing and protective environment.

As Michelle was preparing to enter a local junior college, she learned that she was pregnant. The father of the child, Nick, is someone Michelle dated a few months. He was 25 years old and worked odd jobs doing mechanical work. Michelle knew that her family would frown upon this pregnancy. To avoid conflict with her parents, Michelle decided to move in with Nick. Initially, Michelle's parents expressed disagreement with her decision to move. When they learned of her pregnancy, they refused to support her any longer.

Michelle moved into Nick's apartment. Their relationship ended approximately two months afterwards and Nick left the home. Michelle did not have any means of support other than money that she was sporadically receiving from her oldest sister. She refused to ask her parents for help. Michelle eventually faced eviction and her utilities were disconnected. The landlord of the apartment complex contacted the child welfare office upon learning that Michelle had no utilities, as he was concerned about her ability to care for Joshua.

An investigation was completed by child protective services. Due to Michelle's financial situation and lack of support system, it was determined that Michelle was in need of on-going services. Michelle's case has been open for approximately six months. The social worker has assisted Michelle with paying rent and utilities. Joshua was placed in childcare so that Michelle could look for work. Michelle has been very cooperative. She resumed communication with her parents, although she refused to allow them to support her. The social worker initially had weekly contact with Michelle. Due to Michelle's success, they were only talking every other week. The worker visited Michelle's home last month. Michelle appeared to be doing fine. She was actively looking for work and had enrolled in school part-time. She was seeing her doctor regularly and adequately providing for Joshua. Her case remained open due to the need for childcare and concerns about her financial stability.

It has now been two days since the social worker was contacted regarding Michelle's behavior. Joshua is presently living with his grandparents. Michelle is minimally responsive to the worker and is now requesting that her son return home, stating her parents are "asking too many questions". Michelle is refusing their support and is unwilling to see a therapist or resume her prenatal care. Michelle has continued to use marijuana daily. Michelle is showing signs of depression and denial of her HIV status.

Safety Issues

- Inadequate supervision of Joshua
- Michelle's mental and physical health

Strengths

- Michelle has a history of adequately caring for Joshua.
- Michelle has been resilient in the past.
- Michelle has family support.
- Michelle disclosed her HIV status to the social worker.
- Michelle has been cooperative with the agency.

Needs

- Michelle needs medical attention.

- Michelle needs crisis intervention to deal with her HIV positive diagnosis.
- Michelle's family needs to understand what has prompted her setback.
- Joshua needs his mother to be attentive to his basic care.
- Michelle needs financial stability.

Available Resources

Michelle and Joshua live in a metropolitan area of 400,000 people. The community has a regional medical center, and has extensive health care resources and social service resources. Michelle lives in a low-income community adjacent to the major city.

Child Welfare Competency One Knowledge of Human Development

Case Scenarios

- A. In talking with Joshua and his child care providers, the worker discovers that Joshua rarely uses more than one or two words when he speaks and that he is difficult to understand.
- B. The child care center indicates that Joshua is still wearing diapers and that he has frequent "accidents" requiring a change of diapers.
- C. During her assessment meetings with Joshua, the worker finds that he rarely mentions either his father or his grandparents.

Teaching Tools

- Use Case Scenarios A & B to discuss appropriate development for a 3 year old and how Joshua's behavior fits with human behavior for a child of his age. Suggested resource: Department of Health and Human Services Centers for Disease Control and Prevention - www.cdc.gov. (CWCD 1.1, 1.2)
- Based on Case Scenarios B & C identify the implications of Joshua's behavior at this point and over the next year. Explore and discuss ideas for addressing the behavioral issues presented in these scenarios. (CWCD 1.2)
- Based on Case Scenario C, outline the points you would use in discussing these issues with Michelle. (CWCD 1.1, 1.2)

Child Welfare Competency Two Knowledge of Abuse and Neglect

Case Scenarios

- A. While the worker is examining Joshua at the childcare center, it becomes clear that he has not been bathing or brushing his teeth regularly. When Michelle is interviewed about this, she indicates that she has not been motivated to help Joshua with these activities.
- B. The childcare center reveals that three months ago Joshua came to school with head lice. He was not the only child that had lice, and all of the mothers were asked to treat the problem with medicated shampoo. The problem has not reoccurred.
- C. Child care workers tell the social worker that Joshua is tired and frequently falls asleep during the day. They also indicate that on more than one occasion recently, he has had a rash in his groin area.

Teaching Tools

- Discuss the type(s) of possible child maltreatment with which the agency is concerned in this case and their relative importance. Rank the conditions in Case Scenarios A, B, & C in terms of the level of severity from "not maltreatment" to "serious maltreatment". (CWCD 2.1)
- Identify the factors that appear most likely to be producing the levels of possible maltreatment in Case Scenarios A & B. (CWCD 2.2)
- What are the potential effects if each of the behaviors in Case Scenarios A, B, & C continue? (CWCD 2.3)

Suggested Resources

- Alabama Code§ 26-15-1 through 26-15-4
- Kathryn M. Wells and Andrew Sirontnak, "Chapter 9: Medical Evaluation of Abuse and Neglect" in Charmaine Brittain and Deborah Esquibel Hunt, Helping in Child Protection: A Competency Based Casework Handbook, v. Oxford University Press, 2004
- Judith Rycus and Ronald Hughes, "Chapter IIA: A Family Centered Approach to Child Protection: Identifying Abuse and Neglect: Physical and Behavioral Indicators", Field Guide to Child Welfare: Volume 1, CWLA Press, 1998
- Huward Dubovitz and Diane DePanfilis, Handbook for Child Protection Practice, Sage, 2000 (four chapters on identifying child maltreatment)
- User Manual on Neglect: www.childwelfare.gov/pubs/usermanual.cfm

Child Welfare Competency Three Knowledge of Services

Case Scenario

- A. Michelle is acutely depressed since learning that she is HIV positive. She has not sought professional help for this.
- B. There has been no assessment of Michelle's drug use and no one has discussed this issue with her.
- C. In talking with Michelle, the worker discovers that both she and Joshua may be at risk for Sickle Cell Anemia

Teaching Tools

- Read about acute depression. Identify the kinds of interventions that appear to be most effective with acute depression brought on by a traumatic event. Identify formal and informal services in your area that might help Michelle. Suggested resources: www.nimh.nih.gov; www.aidsinfo.nih.gov; www.nhlbi.nih.gov. (CWCD 3.1)
- Discuss potential barriers that this family might face in accessing the services needed for Case Scenarios A & B. (CWCD 3.1, 3.2)
- Assume that the agencies and services that this client needs have long waiting lists for services identified in Case Scenarios A, B, & C. Discuss how you would prioritize which services were most urgent and how you would approach the services about getting Michelle help. (CWCD 3.1, 3.2)

Child Welfare Competency Four Knowledge of Policy

Case Scenario

- A. This case has been transferred to you from a worker who has left the agency. As you read the case, you find that the ISP has not been updated from the original plan.
- B. Assume that Michelle goes into a deep depression and her care of Joshua deteriorates so that you must consider placing him out of the home.
- C. In this case, the mother is using drugs extensively.

Teaching Tools

- Access and discuss the policy on developing and maintaining the Individualized Service Plan (ISP) in Case Scenario A and why this type of policy is in place. (CWCD 4.1)
- Assume in Case Scenario B that you are considering an out of home placement. Host a panel of DHR workers/supervisors to discuss the relevant policy on prioritizing potential out-of-home placements and the policy related to what must be done to remove Joshua from the home. (CWCD 4.1)
- In Case Scenario C, what is your responsibility related to reporting the mother's illegal drug use? (CWCD 4.1)

Child Welfare Competency Five Knowledge of Systems Theory

Case Scenario

- A. Michelle and Joshua are having difficulty in securing health care because of their income. Many of the public clinics have long waits for appointments, and Joshua may not be eligible for some of the recommended vaccinations.
- B. The community in which Michelle and Joshua live is low-income. Michelle's transportation is unreliable, and she is having difficulty using the public transportation that is available.
- C. Michelle acknowledges that her decisions regarding denying access of Joshua to Reginald and his family is driven, in part, by her anger towards them, as well as, feelings of shame about being HIV positive.

Teaching Tools

- Based on Case Scenario A, assess the resources that this family may have available to meet their health care needs. Be sure to include individual, family, group, organization, and community resources. (CWCD 5.1)
- Discuss the client systems that may be used to address the family's transportation issues. (CWCD 5.1)
- Collect and read three articles on Family Systems Theory that include discussion on anger and shame. After reading the articles, describe the possible family dynamics that are preventing Michelle from seeking help from her family and Reginald's family. Identify what kinds of interventions might help to disrupt this family pattern. (CWCD 5.1)

Child Welfare Competency Six Knowledge of Strengths Based Perspective

Case Scenario

- A. To secure treatment for her HIV, Michelle must travel at least 45 minutes each way to a clinic in the University hospital.
- B. Michelle acknowledges that she has been smoking marijuana daily for the past few weeks. The worker has found a Narcotics Anonymous group located about eight miles from her home that has space for Michelle. This is the only drug intervention program within a one-hour drive.
- C. Michelle wants the placement of Joshua with her parents to be temporary and would like him home as soon as possible.

Teaching Tools

- Using Case Scenario A, identify the individual and family strengths that should be discussed with Michelle in helping her seek treatment for HIV. (CWCD 6.1, 6.2)
- Based on an assessment of client strengths in Case Scenario B, discuss whether Narcotics Anonymous is likely to be effective with Michelle. Suggested resource: NA White Booklet, Narcotics Anonymous, www.na.org. (CWCD 6.1, 6.2)
- Assessing the client system in Case Scenario C, what strengths does this family have to build on in order to facilitate the return of Joshua to his mother? How could those strengths be utilized in practical ways to help Michelle be motivated and focused in her efforts toward reunification? (CWCD 6.1, 6.2)

Child Welfare Competency Seven Knowledge of Role of Social Work

Case Scenario

- A. The social worker makes a referral to a private agency that delivers parent training and homemaker services. Michelle tells the worker that it will be three months before they can help her. The grandparents do not want Joshua returning home to his mother.
- B. Joshua keeps asking about his father and makes up stories about him. The staff at the childcare center express concern that this may be a consequence of his situation at home.
- C. Nick, the father of Michelle's unborn child, has started showing up and verbally threatening Michelle. The noise has made the manager of the apartment upset. The childcare center is upset with Michelle about the possibility she may be bringing marijuana with her when she comes to pick up Joshua.

Teaching Tool

- In Case Scenario C there are risks that either Michelle or Joshua may be harmed, they may be evicted from their apartment, and/or that Joshua may no longer be able to attend this childcare center. Role play a discussion with Michelle regarding how the family situation can be improved. (CWCD 7.2)
- Based on Case Scenario A, if services are delayed for three months, it is likely that the family situation will deteriorate significantly. How would you revise your case plan and how would you approach this with the homemaker agency? What other avenues might be explored to find services from another source? When a service is not available in a timely manner, what action can be taken with your own agency to advocate for increased availability of these services? (CWCD 7.1)
- Based on Case Scenario B, Michelle has concerns that Joshua is acting inappropriately by making stories up about his father. It upsets her to think that Joshua may want a relationship with his father. Role play a discussion between the social worker and Michelle with the goal of helping Michelle acknowledge the importance of Reginald's and Joshua's relationship. (CWCD 7.1, 7.2)

Child Welfare Competency Eight Knowledge and Application of Evidence Based Practice

Case Scenarios

- A. Michelle requests help from the social worker to improve her parenting and housekeeping skills.
- B. The worker has now been working with this family for six months and an ISP is developed for the next three months.

Teaching Tools

- Research parenting programs. Given Michelle's request assess the services that are most likely to help her demonstrate improvement in her care for Joshua.
- Develop two measurable goals with objectives and activities that will be used to evaluate Michelle's behavior over a three month period. Discuss the levels of achievement in those measures that would constitute lack of progress, improvement, and successful outcome.

Child Welfare Competency Nine Understanding of Cultural Competence

Case Scenario

- A. Joshua's father is Caucasian and Joshua appears to have mostly Caucasian features.
- B. Following her poor past relationships with men, Michelle has been intimate with a 24 year old woman. One of her solutions to the problems that are facing her is to move in with this woman.
- C. The maternal grandparents want to adopt Joshua.

Teaching Tools

- Considering Case Scenario A In developing the ISP for this family what are the ethnic/cultural issues that can be identified as either strengths or barriers to achieving service goals? Suggested resource: Juliet C. Rothman, Cultural Competence in Process and Practice. (CWCD 9.2)
- Using Case Scenario A & C, discuss what kinds of cultural issues need to be identified and addressed with members of the extended family system. (CWCD 9.1, 9.3)
- Based on Case Scenario B, identify the strengths and needs that may arise if Michelle moves in with her lover. What would be the best way in which this alternative might be approached? (CWCD 9.2, 9.3)

Child Welfare Competency Ten Understanding of Crisis Intervention

Case Scenario

- A. Michelle has received a notice of eviction from her current apartment. She has called the worker because she is threatening suicide.
- B. The maternal grandparents call the social worker to report that Michelle has showed up at their house acting irrationally and trying to remove Joshua.
- C. The social worker has been unable to contact Michelle for over a week, although frequent attempts have been made. Joshua has become very ill requiring hospitalization. One of the grandparents has contracted the same illness preventing them from visiting Joshua in the hospital.

Teaching Tools

- Using Case Scenarios A and B, discuss the elements of the crises presented and strategies for addressing them. (CWCD 10.1)
- Based on Case Scenario C, discuss how you would prioritize the situations presented and how you would develop a response plan to diffuse the crises. (CWCD 10.2)
- Suggested resource: Albert R. Roberts, Crisis Intervention and Time-Limited Cognitive Treatment, Sage Publications, 1995.

Child Welfare Competency Eleven Knowledge of Social Work Values and Ethics

Case Scenario

- A. Michelle's parents, who are now caring for Joshua, express concern about both Joshua and Michelle's health. They say that she is acting differently than during her first pregnancy when she was very upbeat. As trained health care professionals, they want to know some details about her health, especially since this may affect Joshua and their ability to care for him.
- B. Joshua has been spending more time with his father. He recently told his mother that he "likes staying with his Daddy" and crying when it is time to leave.
- C. In preparing the ISP for this family, it has become clear that Michelle has complicated health, mental health, and chemical dependency issues. The social worker has only recently begun work with this agency and is in training.

Teaching Tools

- Based on Case Scenario, discuss the appropriate steps to take in addressing Michelle's parents concerns in an ethical manner. (CWCD 11.1)
- Explain to what degree both Joshua and Michelle (case scenario B) are entitled to self-determination about the plan of service and the best means for achieving appropriate self-determination for each one. Suggested resource: NASW Code of Ethics. (CWCD 11.1)
- In Case Scenario C, despite the worker's experience with the agency she/he is responsible for this case. Discuss the ethical course of action here. Suggested resource: Charmaine Brittain and Deborah Esquibel Hunt, Helping in Child Protection: A Competency Based Casework Handbook, v. Oxford University Press, 2004 (CWCD 11.1)

Child Welfare Competency Twelve Communication Skills

Case Scenario

- A. You want to interview Joshua and discuss with him the reasons why he will be living with his grandparents for a while.
- B. The family has discussed and planned the objectives, actions, and measures for the Individualized Service Plan (ISP). The worker has written them up. Now the worker needs to discuss the written ISP with Michelle, Joshua, Reginald and the grandparents.
- C. Interviewing Michelle and Joshua is difficult. Joshua talks softly and has limited language skills and Michelle slurs her words and loses her train of thought frequently. Michelle's home either has the TV and/or music playing loudly much of the time.

Teaching Tools

- Based on Case Scenario A, discuss ways in which you may best facilitate communication with Joshua. Suggested resource: Donna Pence and Charles Wilson, *Team Investigation of Child Sexual Abuse: The Uneasy Alliance*, Sage Publications, Inc., 1994. (CWCD 12.2)
- Based on Case Scenario B, what are the most effective means to communicate the ISP to each party? Discuss both the method and the level of language. (CWCD 12.1, 12.4)
- In Case Scenario C, discuss the most effective ways to communicate and collect information from Michelle and Joshua. (CWCD 12.3)

Child Welfare Competency Thirteen Assessment Skills

Case Scenario

- A. You are at a point in time in which the family's service plan needs to be reviewed and revised.
- B. Your case service plan must include a plan of action based on the assessment including selected interventions.

Teaching Tools

- Contact a social worker from the Department of Human Resources and get a blank Individualized Service Plan and have students write an actual ISP. (CWCD 13.1)
- Develop a Comprehensive Family Assessment (CFA) for Michelle and Joshua. Based on Case Scenario B, develop a case plan using the case assessment that identifies intervention strategies. (CWCD 13.1, 13.3)
- Use the CFA and the case plan to develop measures of change in the family system, timelines for their use, and criteria for assessing family change based on these measures. (CWCD 13.4)

Child Welfare Competency Fourteen Organizational and Technology Skills

Case Scenario

- A. You have home visits with Michelle and Joshua set up for next week but you have just received a memorandum indicating that the agency has set mandatory meetings for the days you planned to see Michelle and Joshua. One meeting is to learn a new service plan reporting system and the second is for crisis intervention training.
- B. The agency requires that you update your service plans for each case every 90 days and document involvement of community and family partners in the plans. These meetings are time consuming and cut into the time you have to work directly with clients.
- C. Most of your case information must be entered into a computerized data information system.

Teaching Tools

- Based on Case Scenario A, role play a situation in which the worker and supervisor discuss the appropriate way to prioritize time and manage these time conflicts. (CWCD 14.1, 14.2)
- Based on Case Scenario B, these agency policy requirements will be difficult to meet in this case for the next 90 days. Discuss the purpose of these requirements and how they either support or detract from the services Michelle and Joshua receive. Have panel of DHR workers discuss how they manage their time. (CWCD 14.1, 14.2)
- Using Case Scenario C, discuss how the computer information system may make your work with the family easier or more difficult. What effects might this system have on the confidentiality of the family information you record? (CWCD 14.3)

CASE DEVELOPED BY:
MICHAEL R. DALEY, PH.D., LCSW PIP, ACSW
UNIVERSITY OF SOUTH ALABAMA
KIMBERLY PETTWAY, MSW
MOBILE COUNTY DEPARTMENT OF HUMAN RESOURCES