CASE MANAGEMENT IN ASSISTING CHILDREN VICTIMS OF VIOLENCE, NEGLECT, EXPLOITATION AND TRAFFICKING

GOAL
Strengthen participants’ knowledge on how to enforce case management in assisting children victims of violence, neglect, exploitation and trafficking.

OBJECTIVES
- familiarized with the case management method in assisting children victims of violence, neglect, exploitation and trafficking
- familiarized with the psychosocial approach and multidisciplinary assistance in the protection of children victims
- methods and techniques of working with children learned.

TIME
8 hours

MATERIALS
- flipchart sheets of paper, markers
- resource sheets A-C

STEPS

1. Group activity. Case management (120 min)
To start, ask the participants to exchange views on the case management method and its stages. Then, make 4 groups and give flipchart paper and markers.

Instructions
Each group will have to analyze two stages of case management:
Group I: identification and registration of case of the child victim of violence, neglect, exploitation and trafficking (primary evaluation)
Group II: general evaluation and elaboration of the individual assistance plan
Group III: the intervention and case monitoring
Group IV: follow-up and closure of the case.
Within the framework of the analysis, the following situations can serve for guiding you: the specifics of the stage; involved participants; applied modalities; available timeframe; place of interventions. This is done in 40 minutes.
At the end, the flipchart papers are posted on walls and participants exchange results of their team work (30 min). If needed, provide additional information. (Resource sheet A)

**Debriefing**

How do you feel? What difficulties did you face? Do you agree with the colleagues’ suggestions? What would you change?

2. **Discussions. Case management stages (60 min)**

Evaluate the case management stages based on what participants said in the preceding activity and feed in new information on:

- the principle of participation: beneficiary’s role as the object, subject and actor of assistance
- psychosocial approach in assisting children (see modules Child’s needs and Resilience and one’s personal resources)
- 3 stages of the intervention (see module Perception and action). (Resource sheet A, B)

3. **Discussions. Methods and techniques of working with children (60 min)**

Explain to the participants the scheme “Stages of case investigation” and engage them in constructive discussions on each method and technique used, filling in the new information provided by the participants.

Questions for the participants: What is this method? What is its goal? When does it apply? What must you avoid while it applies? etc. (Resource sheet B)

4. **Role play. Techniques of working with children (90 min)**

Explain to the participants the cards with the techniques of working with children, their goal and how to use them: my relationships; my activities; my aspirations; life line.

Form groups of 3 persons and give them a card.

**Instructions**

Roles in groups: one person will play the role of the child; one person – the professional; one person – the observer.

The person playing the child’s role will remember a case with which he worked before and will present general data about the child to his team (the professional, the observer): age, general situation in the family, problems he faces.

The person playing the professional’s role will learn more information from the child, based on the received card.

The person playing the observer’s role will record how the conversation between the professional and the child go: applied strategy, the subjects’ behavior, etc.

Time – 15 min.

**Debriefing**

- questions for the child: How did you feel? How were the questions asked? How difficult was it to answer? How would you like a conversation with a professional to be conducted? etc.
- questions for the professional: How did you feel? What difficulties did you have in approaching the child? What would you change? etc.
- questions for the observer: What did you record? How did the conversation go? What can you suggest the professional? etc.
5. Individual activity. *Instruments related to the case management method* (150 min)
To start, familiarize the participants with the working instruments: goal, intervention stage, specific information in cases of children victims, principles of interventions, etc.

**Instructions**
Fill in the working forms: social inquiry/primary evaluation; family’s general evaluation; individual assistance plan; agreement of collaboration.
Time – 60 min.

**Debriefing**
How did you feel? Was it difficult to fill in the forms? What difficulties did you encounter? Who wants to present the social inquiry? The others, please, listen and intervene should you have any questions. In such a way, all forms will be analyzed.
RESOURCE SHEETS

Resource Sheet A

Case management in assisting children victims of violence, neglect, exploitation and trafficking

Case management is the main working method used in the area of child protection, by means of which the social assistant evaluates the child’s and its family’s needs. In collaboration with the family, the professionals coordinate them, monitor, evaluate and support them in order to provide them with social services that would meet the child’s interests (order of the MLSPF no. 71 of 03.10.2008, Case management).

Stages of case management:
1. Identification and registration of cases of children victims of violence, neglect, exploitation and trafficking – revealing of a child victim of violence, neglect, exploitation and trafficking by the social assistant/other professionals via an active interaction with the community members. The goal is to prevent violence against children and to immediately intervene in solving such cases.

It is difficult to identify cases of violence because of their specific traits. For instance, often, violence is concealed by both the parents and the children; parents rarely recognize that they’ve neglected or abused their children; children try to conceal any trace of violence, etc.

Cases of violence against children can be identified by the social assistant based on a notification by the victim (the child), relatives, institutions, citizens, etc. and ex officio.

Upon the notification, the social assistant must:
- get informed on the person who filed the notification, reasons of the solicitation and as many data on the child as possible
- be careful on notifications that are anonymous and ambiguous in relation to the child’s situation
- be careful not to overreact or belittle the child’s situation.

Note: any signaled case must be analyzed; the intervention will be decided upon based on the results.

Identified cases are registered in a special registry, in which general information about the beneficiary and the problem imputed by the person or from what the social assistant identified, is noted

2. Primary evaluation – summary investigation of the child’s situation in order to make a decision on whether: the reported information matches the definition of violence; how urgent the case is (defining the risk level, see the module the Phenomenon of violence, neglect, exploitation and trafficking”). In fact, 3 essential steps are followed:
- gathering of sufficient information on making a decision on the case
- evaluation of information for confirming the situation of violence
- verification of obtained information to have the guarantee of the existence of a case of violence.

Primary evaluation is conducted by the social assistant, engaging the members of the multidisciplinary team, depending on the specificities of the case. At this stage it is necessary to answer the following questions: was the child subject to an abuse punishable by the law? Was there a crime? Is the parent or
the legal representative guilty for the abuse? Who is the aggressor? Are there any other sources of information or witnesses? Are there any other victims? Is it possible that the abuse happens again? Is the child safe? If not, which is the measure to be taken to provide the child with a secure environment? (first undertaken measure) Are there urgent needs in the family? Was any other institution notified too?

In severe cases, in order to protect the victim, one must report on the case according to the Law no.45, “on preventing and combatting domestic violence” to the following:
- District Police Commissariat and/or District prosecutor/court
- District department of social assistance and family protection/Child Protection Department
- Local public administration

The opening of the case takes place at the same time the case manager (community social assistant) decides upon the actions to gather information and conduct activities to solve the case.

3. **General evaluation**, starts the moment when the existence of a case of violence, neglect, exploitation and trafficking was established and urgent measures to protection the child were undertaken and one proceeds to the stage of detailed evaluation of the child’s and family’s situation. The goal of this stage is to identify the reasons which led to violence, existing risk factors and immediate and long term measures which can be realized within the individual assistance plan. The effectiveness of the evaluation depends on the following factors: establishing a trustworthy relationship with the child/family; frequency of the meetings and recording of information; low level of analysis of the obtained data; the extent of the assistant’s emotional engagement; personal skills: relationships, communication, empathy, etc.

The detailed situation evaluation is summed up once the family’s general evaluation inquiry is filled out, based on which one will take the decision on establishing the form of child protection, which requires evidence for self-justification.

Principles of detailed evaluation:
- meets child’s interests
- meets the child’s and family’s level of development
- implies complex and comprehensive approach of the child’s wellbeing indicators (family, safety, health, education, engagement) and psychosocial aspects
- must be multidimensional, by determining the present level of development in order to make forecasts and recommendations on the evolution of the child and the family
- implies team work by active participation and accountability on behalf of all professionals involved (psychologists, doctors, teachers, educators, police officers, social assistants, speech therapists, etc.)
- bases on a partnership with direct beneficiaries.

The important elements of an evaluation include, but are not limited to the following:

**social evaluation of the family situation:**
The goal of social evaluation of the family is to find dominating attitudes which can lead to hurting the child, to determine how the family functions in present and relate it to its past. The family’s social evaluation is oriented at establishing:
- the family’s social status in the community (organized family, reconstituted family, etc.)
- individual parents’ profile
- social factors which generate changes in the normal functioning of the family (poverty, unemployment, education, etc.)
- psychological factors of the family’s dysfunction (communication problems, addiction to harmful substances, etc.)
- the family’s social network

Family competences are evaluated in conformity with the following:
- realization of basic tasks (supply of food, housing, education)
- verbal and non-verbal communication
- roles of each family member
- expression of affection among family members and emotional engagement in relation with the needs, interests of each one in part
- management of behavior
- ways of settling conflicts and critical situations.

- **Child’s needs evaluation:**
The purpose of needs’ evaluation is to determine the extent to which the child’s development and growth needs are respected in the family.

To establish relations with the ill-treated child, it is necessary to know him from emotional perspective, to satisfy his curiosity to know about us and to show concern for parents, encouraging him towards communication.

Issues requiring attention are the following:
- interaction between the child and the parents (passive, active, neutral)
- interaction of the child with other children (ways of settling conflicts)
- relation of the child with adults (trusting, hostile, tensed)
- child’s capacity to play and concentrate
- child’s physical condition

- **Evaluation of parents’ functions**
The goal of the parents’ functions’ evaluation is to determine their abilities to be good and capable of solving critical situations within the family. For this evaluation, it is necessary to take into account the specific peculiarities some parents have: lack of empathy, emotional immaturity, mental disorders, abusive experiences of their own childhood, etc.

- **Evaluation of the family’s social network**
The goal of the family’s social evaluation is:
- to identify the social network (extended family, colleagues, neighbors)
- to identify resources within the network by means of which the family can be adjusted
- to identify gaps of the family’s social network and the needs which could be introduced in the individual plan of assistance
- to identify possibilities to expand the family’s social network.

4. **The elaboration of the individual plan of assistance** (IPA) implies a set of measures and actions to meet the child’s needs, with his and his family’s direct participation. The plan bases on information recorded by the case officer and answers the following questions:
- Which are the objectives?
- Which are the violence factors which need to be cleared?
- What can be changed about the family’s dynamic?
- Which are the priorities?
- What strategy or type of intervention will be used?
- What are the steps to attain the objectives?
- What is the enforcement timeframe?
- Who are the actors and what are their roles?
- What are the ways of conducting an intermediary evaluation?
- What institutions will collaborate to attain the objectives?

Objectives form the basis of the stakeholders’ accountability and are subject to negotiations with the child/family. The objectives must be: specific, measurable, realistic, flexible, time-bound. The social assistant speaks to the family, including the child, analyses possible alternatives, as well as issues that refer to advantages, disadvantages and risks which they imply. IPA is attached to the beneficiary’s file, being the official document with activities and results attained in the investigation of the case. This instrument, used in planning, organizing and evaluating interventions, bases on principles of individual and personal approaches, as well as on the involvement of the beneficiary (child, parents, other persons who are close to the child).

5. **The intervention** is the enforcement of the individual plan of assistance by attaining the set out and measurable results. At this stage, the activities are conducted and intervention techniques set out in the IPA are applied, such as: counseling, participation in support groups, financial/material support, legal consultation, home visits, discussions with the family (extended network), facilitation and mediation, healthcare, recovery, formal/informal education, etc. Supply of services and other interventions included in the IPA is made based on an agreement with the family/child’s legal representative, which is concluded with the social assistance (verbally or in writing).

6. **Monitoring** determines progresses made by the family and the child or the extension of services that are provided to them; it is an essential element of this stage of the case management. Decisions taken by the case manager at this level are based on collected information on the progress of the case.

7. **The reevaluation of the case and review of the individual plan of assistance** imply the evaluation of the beneficiary’s progresses, as well as the improvement of the individual plan of assistance. The information obtained as a result of reevaluation must be analyzed in order to be able to determine progress and decide upon the following steps. The evaluation of the child’s and family’s progresses focuses on the following:
   - Is the child safe?
   - What are the changes which occurred in the abuse risk factors?
   - What were the progresses in attaining objectives and results set out in the IPA?
   - How efficient were the applied services in achieving results and proposed objectives?
   - What is the current risk level in the family?
   - The risk factors were sufficiently reduced so that the family can protect its child and respond to his development needs as appropriate
   - Is reintegration into the family possible in an estimated timeframe or is it necessary to plan special protection for the long term?

After evaluating the progress made by the family and the child, the case officer consults the members of the multidisciplinary team in relation both to the decisions which he/she intends to take, as well as on the next steps in solving the case.
8. The case is closed when the process of assisting and/or protecting the child is no longer necessary and the family recovers its optimal functional capacity.

In general, the case closure occurs in 3 ways:

- **Closure** – all objectives set out in the IPA were achieved and the expected results were realized or the family does not feel capable or willing to continue the intervention for achieving them and there are sufficient reasons to believe that the child is safe;

- **Referral** – the child needs other services or another type of intervention. These can include referral to other services or identification of an informal support (other family members, friends, neighbors, etc.) which would continue to encourage and guide the family;

- **The family gives up** – the family requested support and at a certain moment takes the decision to give up its relationship with the social services, which is directly or indirectly communicated by means of the family’s behavior. The social assistant will consult both with the multidisciplinary team, as well as with the local authority to decide upon the subsequent actions in such a situation. The interruption by the family of the assistance process is the least desired type of a case closure. However, the family cannot legally stop the services’ provision as long as their provision was ruled by a court.

The case closure report serves as the basis for the decisions taken by competent authorities to stop any intervention in the respective case; the decision is taken based on the recommendations of the social assistant. Once the decision is taken, the notification on the closure of the case of the family is also the responsibility of the social assistant.
Resource Sheet B

Methods of working with children

I. My activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Where?</th>
<th>When? How many times?</th>
<th>How do I feel?</th>
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MY ACTIVITIES IN THE WEEK-END

<table>
<thead>
<tr>
<th>Activities</th>
<th>Where?</th>
<th>When? How many times?</th>
<th>How do I feel?</th>
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How do I feel?  
Content  Sad  Normal  I like it  I do not like it  I am scared

Mark with activities which you consider to be the most important.
II. My various relationships

<table>
<thead>
<tr>
<th>Regular relationships</th>
<th>Distant relationships</th>
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<tr>
<td>Affectionate relationships</td>
<td>Reference relationships / model of behavior</td>
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<tr>
<td>Conflict relationships</td>
<td>Relationships of fear</td>
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</tbody>
</table>
III. Which are the steps it takes to achieve my objective (what do I want to happen)

My objective

- **Opportunities**
- **My Resources**
- **Obstacles: Difficulties which I must overcome**

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IV. The book Life story

From among the qualitative research methods, the life story helps us better understand the psychosocial trajectory of the interviewed person (Atkinson Robert, Life story. Interview, Ed. Polirom, 2006). Often, the process of creating a life story, working together with the child, is more important than the output. We all have a story. Stories are hidden in apparently trivial life activities. Stories are hidden in the great achievements of life. Stories are hidden ... but not for good.

In life story books it is important to mention the child’s biological parents (even in the cases when one can mention that there is no information). Life story takes place together with the child, its purpose being to help the child establish his identity. The process must be creative and tailor-made. There are no rules on how to conduct the activity. The activity implies that painful feelings would be rummaged through, which could cause strong emotions in the child, as well as the social assistant.
## Resource Sheet C

### Case investigation

#### CASE INVESTIGATION STAGES

1. **Notification**

   **Methods and techniques**
   - Documentation
   - Observation
   - Meeting
   - Telephone conversation

   **Instruments**
   - Initial evaluation
   - Social inquiry/primary evaluation
   - Observation guide

2. **Case opening**

   **Methods and techniques**
   - Documentation
   - Observation
   - Telephone conversation
   - Interview
   - Meeting
   - Genogram
   - Eco-map

   **Instruments**
   - Family’s general evaluation
   - Social history
   - Interview guide
   - Genogram
   - Eco-map

3. **Intervention plan**

   **Methods and techniques**
   - Telephone conversation
   - Observation
   - Interview
   - Positive field analysis
   - Counseling

   **Instruments**
   - Intervention
   - Individual plan of assistance,
     reevaluation/review of the
     individual plan of assistance or
     case closure
   - Agreement with the beneficiary
     Interview guide
   - Activity supervision form
   - The form of case referral to
     specialized social services

4. **Case presentation at the Local child protection committee/Multidisciplinary team**

   **Methods and techniques**
   - Observation
   - Interview
   - Meeting
   - Telephone conversation

   **Instruments**
   - Monitoring
   - Interview guide
   - Report on the meeting
   - Activity supervision form
   - Case closure form

5. **Case closure**