

# Participative Case Planning:

## A model for empowering practice in statutory child welfare

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*This paper describes the technique of participative case planning a tool developed and used by the author for working with families who have had their children removed because of abuse and/or neglect. This technique seeks to assist families and practitioners to work together in an empowering way to return children home quickly and safely. The particular model draws on theoretical principles and perspectives of empowerment, case management, case planning, crisis intervention, task centred therapy and contracting.*

*The paper outlines the steps involved in participative case planning from preparation for the meeting to its end. It also addresses a number of issues, including the role of the chairperson, involvement of children and non-return of children.*



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**P**articipative case planning is a technique that can be used successfully with families when their children have been removed, through abuse or neglect, to facilitate quick and safe return home.

The technique is not new, and has been discussed in the literature (McGloin & Turnbull (1987); Horejski et al (1981); Blumenthal & Weinberg (1984); Parker (1971)) at some length. Few authors, however, detail how and when participative case planning can be used. This author has developed the particular approach described here in the course of her three years' work in child welfare practice in Townsville. It was further refined in conjunction with academic and consulting work over a further three years in the Northern Territory. Work is at present in progress with a view to adapting it for use in practice with offenders in the correctional system. This paper discusses the major questions addressed in a participative case planning meeting and the rationale behind them. It then explores the issues and dilemmas that may arise.

Participative case planning has been used successfully in cases where there has been statutory intervention as a result of physical and/or emotional child abuse or neglect. The technique can also be used with families before statutory intervention has taken place, although the format is a little different. This paper limits its discussion largely to those cases in which State intervention has occurred.

Participative case planning meetings are generally most successful when held as soon as possible after the initial Court appearance, preferably within a day or two. The benefits in beginning work quickly are: firstly, the family is in crisis and motivation and energy are high; secondly, there is a better chance of children returning home; thirdly,

children are likely to return sooner and without further intervention (Tilbury (1977); Sherman et al (1973); Packman et al (1986); Rowe & Lambert (1973)).

Some delay might be occasioned when the action is being contested by parents and it may be difficult to engage in this type of intervention until the Court has made a final decision, thus giving the parents a clear reason or a validation for State intervention.

The frequency of case planning meetings depends on the nature of each case, although, in the author's view, they should be held no less than every three months until an outcome is reached. For some families it may be more useful to hold meetings much more frequently. Permanency planning principles should guide this decision.

Participants are limited to those who have direct input into the case. Key participants would be parents and/or parental figures, children subject to the action, siblings, foster parents if appropriate, the case worker and the chairperson, who can be the professional supervisor of the workgroup. Other professional participants are limited to those who are actively involved - Aboriginal and Islander Child Care Agencies, for example, if the family is Aboriginal or Islander. The number of professional participants should be limited so as not to alienate parents, thus allowing for more open participation.

### How to do participative case planning

#### *Preparation*

The preparation required for the case planning meeting is necessarily limited. Parents may be anxious, distressed or angry but a meeting soon after removal and/or Court can allay many fears and

concerns. It is the caseworkers responsibility to arrange a meeting time, suitable to family, but soon after removal of the children has taken place.

It is useful to hold the meeting at the agency office. This has a number of advantages. Firstly, for clients who find Department action intrusive, an office can be less threatening because their private space is not being encroached upon. Secondly, for extremely angry, aggressive or resistant clients, the office can often diffuse hostility. The third reason, and one of the most practical, is easy access to a large whiteboard.

The use of a whiteboard is extremely important in this technique. It enables a direction to be maintained and an accurate recording of client's words, statements and decisions.

As each question is asked it is written across the board with space underneath for each participant's answer. Much information is gained by giving parents the first opportunity to respond, without them having heard or being influenced by workers' opinions. This also begins the process of empowering parents and allows them the scope to own the problems and develop solutions.

As parents give their responses they should be accepted and recorded on the board exactly as they are said, even if they conflict with the legal grounds of the action. To alter words or intent in the recording may cause the client to feel devalued and what they say, seem unimportant. Participative case planning attempts to empower clients to make changes and so their input should be accurately recorded and respected.

The chairperson, however, needs to be aware that some clients may not be literate in English and if this is likely the chairperson should take time to read aloud exactly what has been recorded. Often clients will be reluctant to admit illiteracy and the chairperson must be sensitive to this and act accordingly.

It is useful for the chairperson to limit his or her meeting preparation, aside from the practical details and basic information about the family. This enables the chairperson to remain objective and neutral, and provides some assurance that clients will be heard and few preconceived assumptions made.

### Beginning Stage

#### Why were your children removed from your care?

Like most interviews and therapeutic techniques, the beginning of a case planning meeting is a very important stage. Introductions are made in the waiting room, usually by the caseworker as often the chairperson is unknown to the families. Then participants are shown into an interview room. Seating should be comfortable and arranged to allow the chairperson easy access to the whiteboard.

The chairperson begins the meeting with a clear explanation of the reasons for the meeting and this is done in some detail in as simple language as possible. An example of this may be as follows,

*We usually have a meeting like this after an Application for Care and Protection has been taken. We do it so that everyone has a chance to talk about what happened and what is going to happen in the future, so that your children can be returned to you as soon as possible. It is important that we all understand what is going on so please ask as many questions as you want.*

*I will write down everything on the board as we go, and at the end the typist will type it up so everyone can have a copy. By the end of this meeting we will have a plan of what we will all do so the children can return home. Do you understand what has happened so far with the Court proceedings?*

There are a number of key things that should be made clear in the introduction.:

1. The aim is to return children home as soon as possible. This serves to provide a positive framework and usually encourages parents to involve themselves. It also assists in allaying the fear that most parents have that their children will never return home. This aim is fundamental to participative case planning. While children should not be returned home until safe conditions exist, and then always with monitoring in the beginning stages, the goal is return. Where safe conditions are not achieved within a determined time

period, a permanent alternative placement should be made, but this decision comes after a period of intensive work aimed at return to the natural family.

2. These meetings are held with other clients and are not peculiar to them. This makes the process seem more normal and therefore not so threatening.
3. Some decisions are going to be made in this meeting that will set a direction of what has to be done for children to return to them. The presence of a plan brings order to a perceived state of chaos.
4. Time will be given to discuss the recent events leading to their child's removal.

The purpose of the whiteboard often needs to be explained as its use in a meeting context may be new, and may bring back memories of the powerlessness felt by many as school children.



It is important for the chairperson and the worker to ascertain if parents understand the legal process in which they are involved and the relevance of the meeting to it. If there is any confusion the chairperson should explain it although the caseworker, and the family's legal advisor, should have already done this. However, in the heat of the crisis parents may not have remembered all the details.

Lastly, throughout the introduction process the chairperson must find ways to 'join with' (to use Minuchin's term, (1977)) the family and its various members so there is a degree of trust. This will enhance the participation and decrease clients' sense of alienation.

The first, and most important question to be addressed is 'Why were your children removed from your care?' This should

be asked first as it is the best way to ascertain what parents understand has having happened. Often their understanding of the reason for removal is different to that which the workers believe, or is only part of the problem. For example, parents may think intervention has occurred because their children ran away from home when, in fact, it occurred because of the physical abuse that led to the children running away.

There may be ventilation of anger by parents at this stage and it is useful to allow this process to occur. Parents do have a right to be angry and it is useful to provide them the opportunity to give their opinions without argument or debate from workers.

As parents state the reasons for intervention as they understand them, they should be recorded. Opportunity should be given to list as many things as they wish, regardless of the opinions of workers and chairperson. Brainstorming principles should be adhered to – everything is recorded without discussion or alteration by others.

After parents have spoken, other family members should be asked to speak, then anyone else who may be present, finishing with the caseworker. When it is the caseworker's turn to give the reasons for the children's removal, the actual grounds of the action, as given in Court, should be presented without adding any extra concerns or contributing factors.

After all participants have spoken, the chairperson should attempt to address the differences between opinions. If other issues arise, they should also be recorded, however parents should not necessarily be forced to accept all the worker's reasons at the expense of their own. There will be cases where there is denial of all problems, and in such cases it may be necessary to wait until the Court has given a decision.

It is important to try to develop some consensus between the parties as to the reasons for removal so that workers and family members can work together to develop goals and tasks.

In this beginning stage, the responses to the first question is often the lengthiest part of the meeting, and the most difficult, but it is also the most important stage of the process. Once all parties

have agreed upon some common ground the next stages follow with fewer difficulties.

### Middle Stage

#### 1. What has to happen for your child to return home?

The emphasis here is on what has to happen, not how is it going to happen and thus forms the goals of the plan. Subsequent tasks are then developed in the next stage.

Again, it is useful to let parents address this question first. If enough attention has been given to the first question then the answers to this question are logical. If parents have been able to define what the problems are, they can see what has to change. Some common examples are given in Table I.

Usually there are a number of different reasons why parents believe their children have been removed and they should be encouraged to address each problem.

When it is the caseworkers turn to speak they should state broad problem areas, as above. There might be a tendency at this stage for statutory agencies to revert to traditional child welfare practice and tell parents how to solve their problems. It is more beneficial to state broadly the minimum required to return children home, rather than to attempt to dictate to families how they should achieve this.

#### 2. How is this going to happen?

The answers to this question become the tasks necessary to achieve the goals as established in the previous question, that is 'What has to happen for your

child to be returned home?'. The 'hows' are most useful when they are as clearly defined and as specific as possible. Again parents should have the opportunity to speak first as they will know the appropriate ways for them to solve their problems. It is often surprising how solutions proposed by parents differ to those proposed by the caseworker. The following example from one case planning meeting demonstrates this.

Four children were removed from their mother because the family were homeless, destitute, in poor health and malnourished. The mother, Jenny, decided the problem was her drinking and that in order to have her children returned she needed to provide a house, food and a safe environment for her children. When the discussion came to 'how', Jenny's response was that she did not have to give up drinking but that she would only drink once all her bills and rent were paid, food bought and so on from her fortnightly cheque, and when she could get a good, reliable baby sitter for her children.

The caseworker's preferred option (unspoken) would have been for Jenny to stop drinking completely, but Jenny's alternative was adequate to ensure the children's safety when they returned. Jenny did all that was necessary for her children to be returned within one month and regular follow-up found care to be satisfactory.

It is perhaps at this stage that the caseworker has most to offer with their knowledge of agencies and resources. If, for example, parents say they want to stop or control their drinking the worker, at this stage, can provide information on different programmes and services.

**Table I**

	Why were the children removed from your care?	What has to happen for them to return
Parents:	We fight when we drink and the kids get upset. When I start to hit the kids I can't stop.	Stop drinking. Stop hitting the kids so hard.
Child:	Because we would cry when they yelled at us and each other. Because they belted us.	Stop drinking so we don't get frightened. Don't belt us so hard.
Worker:	There has been a lot of fighting, probably due to the drinking, and the kids are becoming extremely distressed. The physical punishment has caused injury to the kids.	Manage your drinking so there are no fights and the kids are not upset. Use of other types of discipline.

### 3. When is it going to happen? and Who will do what?

At this stage the meeting should be progressing well as parents make decisions. It is important to specify time frames and task responsibility. For example, the case worker is to provide transport to housing agencies in order to obtain accommodation; the caseworker is to see the parents twice weekly to discuss child rearing practices; the parents are to seek budget counselling from Lifeline.

#### **Ending Stage**

By this stage, if the meeting has been a success, family members will be actively involved and may provide positive feedback about the outcomes of the meeting. The aim of the meeting should also have been achieved. That is, a case plan of how the children will return home including time frames and responsibility for tasks. A date for the next meeting should be set before participants leave, while motivation and commitment is high.

#### **Issues**

##### **Role of the Chairperson**

The chairperson's role is a clearly defined one and should be adhered to in spite of the temptation to stray into more active involvement with substantive discussion.

The role is one of facilitator, advocate and, if necessary, mediator. The aim of the meeting is to arrive at a case plan, designed almost exclusively by the parents, to return children home, whilst addressing the concerns which led to the intervention. The chairperson needs to create an environment where parents feel free to state their concerns and desires. The first part of a participative case planning meeting is often characterised by tension and anger. If clients are angry they should be allowed to ventilate their feelings without fear of reproach from workers or the chairperson.

For clients who are reserved, shy or frightened, the chairperson must assist in giving them the confidence to speak and give their opinion. If clients leave a meeting feeling they have had little or

no input then their commitment will be low. If they can leave feeling they have actively participated, their sense of involvement will be high.

Often during a case planning meeting the situation arises where an issue could be taken up and addressed in a counselling or casework mode and it is sometimes difficult for the chairperson to avoid such intervention. This is particularly so if a client speaks directly to the chairperson on a matter, for example, marital problems, that needs further discussion. However, to indulge in such action is inappropriate, and to the detriment of the planning meeting. The meeting is for a specific purpose, with the role of chairperson specifically defined, and all counselling sessions should be kept for a different venue and with the caseworker. If the issue is vital, such as marital breakdown, then the meeting may need to be postponed. The issue would then be addressed by the caseworker outside the meeting, before the next one.

Another difficulty for the chairperson is retaining objectivity. If the chairperson is the team leader or another member of the workgroup, then a relationship already exists between the two workers. With particularly aggressive, angry or resistant clients, it is sometimes difficult to remain objective. This, however, must be achieved if the process is to be successful. The challenge is to find the balance between maintaining a working relationship with colleagues, while at the same time, empowering clients. The potential for this problem increases in subsequent planning meetings. At the initial case planning meeting, decisions are made for each participant to carry out tasks before the next meeting. If at the next meeting the caseworker has not completed his/her tasks, without adequate reason, the chairperson is in a dilemma.

One way to address the problem, particularly as the goal is to empower clients, is to seek an explanation as to why the tasks have not been done and a firm undertaking as to when the task will be carried out. As a team leader who has been caught in this trap, I ensure that workers, particularly new workers, understand the importance of adhering to the plan and carrying out their tasks. Clients have a right to expect high standards of

practice and the chairperson has some responsibility for ensuring they receive it.

Problems of objectivity may be solved by using a chairperson from outside the organisation. Potential problems with this could be the difficulty of anyone outside the system understanding it, confidentiality, and confusion created by involving too many different types of organisations and authority. If the chairperson is the team leader, there is more likely to be continuity of direction from meeting to meeting, particularly when caseworkers change through job mobility, for example.

##### **Role of the Caseworker**

The caseworker should come to the initial meeting with some knowledge of the case, perhaps some idea of what has to happen and, above all, a willingness to work with natural families. He or she may have been at the initial Court appearance, involved in arranging a placement for the child and have spent some time with the parents and child. They may also have arranged the meeting. Ideally, they will have been involved in investigating the case prior to Court and so have a relationship with the family.

Work with the family between the initial meeting and subsequent meetings is oriented towards the achievement of tasks as decided in the initial case planning meeting.

It is sometimes difficult for caseworkers to change to a participative case planning model. However, once having been involved, comments from workers are usually positive and planning meetings become an essential part of their case management. Perhaps the most common positive statement that is made is that the technique removes from workers the awesome responsibility of 'having to solve the case'.

##### **Involvement of Children**

Except when very young, it is useful to have children present and participate in case planning meetings as the decisions made at the meeting will be important to them. Often children will be reluctant to speak at first, however they listen avidly and may become upset.

One example of this was a case planning meeting with the agenda being that a decision be made as to the child's permanent placement. It was the Department's decision that the child, Mark, be permanently placed with his Aunt, with whom he had resided for a number of years. Mark was now nine years old. The natural mother had decided not to attend the meeting.

The meeting began by reviewing the case, including the unsuccessful attempt to return Mark home and the natural mother's behaviour when with him. Part way through the meeting Mark began to cry and an offer was made for another staff member to take him outside or for the meeting to break for a short while. The Aunt replied that she thought Mark needed to hear it all as he was often confused about his past and current situation. She held Mark on her lap and the meeting continued. Mark became calmer and was able to contribute to the meeting and at the end made the comment that no one had ever told him this before and he was happy to live with his Aunt. He asked if he could still see his Mum but with his Aunt with him.

For this child, as for many others, the things he had thought and believed about his situation were inaccurate and probably far more distressing than in reality. The meeting may be a symbol of a major re-direction in their lives and it is important they be allowed to understand the event and its relevance to their removal and return.

### **Child Not Returning Home**

It is inevitable that some children will never return to their families, due to parents inability or unwillingness to change in spite of intensive work. The process of participative case planning makes this decision relatively straightforward as time progresses, with a variety of plans and interventions and perhaps trial placements at home. It becomes evident to parents (and workers) that they are unable to adequately correct problems so their child can return, rather than the decision being made solely by workers without the benefit of recorded parental involvement and agreement.

For some families this decision comes as a relief. Parents may come to realise over time that they cannot, or do not wish to parent, but feel an obligation to continue to pursue the socially acceptable goal of having their children back. A decision for permanent placement outside the natural home may allow parents to resume their own lives and enjoy access with their children without feeling continuing stress about their inadequacy as full time parents.

If parents are not able to be involved in the case planning process, if for example they do not respond to requests for contact with the Department or their children, the decision of permanent placement could still be made at the end of the stipulated time frame and parents informed of the decision.

### ***Natural homes: The least detrimental place for children to be.***

Much debate has raged about the best (or least detrimental) place for children to be raised and this is well summarized in Morgan's work of 1975. The choices are natural homes or alternative care in the form of foster care, adoption, group living care situations or institutions. Problems exist with all these alternatives. This paper rests on the premise that a natural family providing 'base line' care is preferable to any other form of care, as the alternative care situations, so far, have not been able to provide children with their 'roots'.

Pringle (1975) states 'the child's removal from home, no matter how adverse it is, represents the collapse of the world known to the child and the most damaging effect is on the growth of self awareness and the development of a sense of identity.

(Harper & Hardy, 1985)

It is with the need for roots and identity in mind that participative case planning is used to strive to return children to their natural homes.

The need to keep parents involved with their children remains even if a decision is made for children to be permanently placed somewhere other than home, including adoption in some States where open adoption orders are possible.

## **Conclusion**

There is little doubt in the author's mind that this technique works, a successful outcome being the safe return of children home, often with no further Departmental contact. There may be a number of reasons for this.

1. Parents are empowered and encouraged to take responsibility for their children to return home.
2. The use of a plan gives a direction for parents to follow.
3. The technique is used at the time of the crisis so motivation is high.
4. The establishment of tasks allows monitoring and evaluation, as well as provision of small, achievable tasks.
5. If it includes tasks for the worker, the technique allows the worker and client to work together in a trusting relationship, rather than clients having to demonstrate their worthiness as parents to the worker. The aim is for workers and family to work to agreed goals, rather than the family achieving goals as established by a worker.
6. By using the technique in a positive way, that is, with the aim being to find a way for children to return home safely, both parents and workers maintain a positive outlook. This positive orientation of participative case planning is probably one of the key elements of the technique. ♦

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