The Extraordinary Role of Case Management in Daily Care

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Abstract

The Child Reintegration Centre (CRC) in Sierra Leone fully transitioned its residential programme to family-based care in 2018. The reintegration of all the children from the residential programme into families necessitated the inclusion of a robust case management system to ensure permanence for every child. Case Management is critical to provide support and ensure success. Good case management includes gatekeeping, discreet record-keeping, inclusion of the child and of the caregivers in the development of care plans, clear exit strategies and family support plans to ensure the health and safety of the child and to strengthen and empower parents. The CRC Case Team conducts traditional assessments and home visits, but also teaches parents and caregivers how to parent well, build financial independence, and become empowered to care for their own children. Families are encouraged to attend workshops, social and sports events at the CRC to strengthen parenting and relationship skills, and engage with other families on the programme, building strong community relationships as well. By creating a community of care consisting of assigned case workers, the CRC case team, and other families in the programme, families are learning to care for their own children, each other, and their community.

Keywords

Vulnerable children, family-based care, case management, Sierra Leone

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Global movements to deinstitutionalise must lead to robust case management systems

Decades of research have shown that children develop best in families, compared to institutions. Additionally, an estimated 80% of children living in institutional care have a living parent who could care for them if they had the means and support to do so, and those who do not almost always have a living relative who could.

In October of 2019, on the 30th anniversary of the United Nations Convention on the Rights of the Child, a Resolution on the Rights of the Child was presented, adopted and ratified. For the first time, it urges governments to transition away from orphanages and invest in family strengthening efforts to keep families intact and ensure permanence for children. Focused on the child's right to a family, it underscores a global movement to transition from residential to family care, and to close orphanages and children's homes all over the world.

The movement to close these homes came in response to the boom in the unnecessary institutionalisation of children, accounts of abuse and neglect at orphanages, and the growing research on the effects of institutionalisation on children. The evidence is clear; most children in orphanages have living families, who have placed their children in these homes due to poverty or by coercion from corrupt actors. This, paired with the well-meaning support of Westerners to build more homes, has led to more orphans or vulnerable children placed in homes. While pressure is mounting to transition from orphanage to family care, it is important to note that it is not a simple matter of just closing orphanages. Without appropriate case management support, children's homes that simply place children into families without providing transition support and ongoing case care are ironically at even higher risk of separation. 'The deinstitutionalization movement['s] (closing down orphanages) desire is to place kids from orphanages into family settings, through reunification, foster care, adoption, or into smaller group homes, but often does not have an exit plan for the children in the homes they close' (McGinley & Runyon, 2020).

When children are cared for in an institutional setting, the primary driver of programming is more often the needs of the institution than the needs of an individual child. Conversely, a systems approach such as case management, requires a conceptual shift from the traditional, stand-alone programming focus on children in groups, to the achievement of more sustainable, comprehensive and long-term responses geared to the needs of each child. According to World Vision (2012), such an approach encompasses addressing a case holistically, strengthening critical roles and key actors responsible for the wellbeing of a child. Additionally, child welfare programmes can help establish linkages between children and families, government and community systems in ways that ensure that children thrive.

Vulnerable children and families are entitled to efficient, comprehensive and respectful assistance on multiple fronts set out in national and global policies, but are often faced with piecemeal, inadequate and intrusive services, or are neglected altogether. Services designed to protect children's rights often function on their own, disconnected from other services that may also be needed if these rights are to be protected and their needs met holistically. The results are often overlaps and gaps in services, negatively impacting those in need of services. From the child and family view, and from the perspective of those at the grassroots level involved in assisting them, the service structure can often seem an unnavigable maze full of unknown challenges, and many give up (Integrating Case Management, 2017).

A growing movement to pursue more sustainable, empowering responses to children in crisis focuses on family strengthening.

> Family strengthening is building on the capacity of biological parents, relatives, or local families to keep, adopt or foster children in their own communities. It seeks to strengthen local communities, systems and individuals to ensure children have the resources needed to thrive within families in their home countries (Oswald, 2020).

New approaches in development practices are also shifting the model from providing handout support such as cash transfers, to more relationship models that utilize social work and case management that 'focuses on client needs

through strength-based lens, and involves regular meetings with social workers for activities such as counseling and life skills training' (Jindra & Jindra, 2015). Shifting from a transactional to a transformational model focuses interventions on moving people out of poverty to self-empowerment long-term, but requires a trusting and ongoing relationship.

Case management

Case management can be a critical factor in ensuring that closing an orphanage and reintegration of children does not result in greater numbers of children winding up separated from family and living on the streets. The use of quality case management practices has been demonstrated to improve decision-making and service delivery in child welfare practice that reduces family separation and improves family permanence.

Within the context of programmes for orphans and vulnerable children (OVC),

> case management can be understood as the process of identifying vulnerable children and families, assessing their needs and resources, working together to achieve objectives and goals, implementing plans through specific actions and receiving service, monitoring both the completion of actions and progress toward achievement of objectives and goals (USAID, PEPFAR, 4Children, 2017).

However, it is important to bear in mind that 'case management is a principle, not an event', cautions Mick Pease, co-author of *Children Belong in Families: A Remarkable Journey Towards Global Change*. It is not just about taking a child home: 'It encompasses a series of processes that covers everything in that child's life whilst they are living away from their family' (Pease, personal interview, 2019). When done well, it is also a collaborative effort. 'Case management involves significant collaboration with the client unit - generally a family or household, including a child or children and their caregiver(s) - and utilizes problem-solving and empowering approaches aimed at increasing resilience of the child and family' (USAID, PEPFAR, 4Children, 2017).

Pease points out that a parent knows his child's needs, his strengths, her potential, their particular weaknesses and challenges, and carries all of that knowledge in their heads, barely conscious that it is there, but intuitively stepping in to guide and intervene to make things happen for the best interest of the child (2020). Children who grow up in family settings benefit not just from the obvious love and support of caregivers, siblings and connections to extended family, but also benefit from knowing their own and their family's stories. Research from The Family Narratives Lab shows that 'children and adolescents who know more of their family stories show higher wellbeing on multiple measures, including higher self-esteem, higher academic competence, and fewer behavioral problems' (Fivush, 2016). Case management systems must stand in that gap and provide this to children as surrogate parents, while children live separated from their families in alternative care. As children are reintegrated back into families, case management has to help transfer all of that to the parent or caregiver. The relationship that the case manager builds with the entire family is critical to the handing over of this responsibility. This relationship is a partnership, where the caregiver leads and the case manager provides support.

The Child Reintegration Centre

The Child Reintegration Centre (CRC) in Bo, Sierra Leone, completed its transition from residential to family-based care over a period of two years, from 2016 to 2018. In addition to providing family and individual counselling designed to help children institutionalised for years to re-establish healthy bonds with their parents or caregivers and the other members of their 'forever families,' staff were retrained and prepared for a different role - as case managers serving these children and their families to build capacity and ensure permanence.

Across the developing world, case management often 'includes a range of providers and actors, paid and unpaid, both informal and traditional such as family and kinship networks, community volunteers as well as formal, employed professional and paraprofessional workers' (Strengthening Child Protection Systems in Sub-Saharan Africa, 2012). The case management team of 10 is comprised of five staff with social work degrees, and five paraprofessionals.

Two of these paraprofessionals are former house mothers who lived in the CRC residential programme, providing 24-hour care for 10 children each living family style in the programme. As the CRC transitioned its model and reintegrated children into their forever families, the staff were able to build on trust already established in their relationships with these children before, during and after reintegration, and to deepen relationships with the caregivers of these children as well to ensure a successful and smooth transition for the entire family. In a similar fashion, the other members of the case team establish and maintain strong connections not only with the children on their caseloads, but with their parents and caregivers as well. Caregivers of children in the CRC programme observe that case managers spend time not only checking on the welfare of the children assigned to them but have ample opportunity to build up the skills of those who care for them daily in order to ensure that children thrive. This relational practice represents a shift 'from services *for* the poor, to services *with* the poor' (Jindra & Jindra, 2015), and is critical to ensure that the entire family not only survives but thrives.

'A family is a system', explains Beth Ratchford, licensed clinical social worker (personal interview, 2020). If you hit one toy on a baby mobile, all the others swing and bounce as well. Families work the same way - a shock to one aspect of a child's life can set off a chain reaction in all other aspects of that child's life. When a family is vulnerable because of poverty or other crisis, even minor shocks can become catastrophic. Case managers do not focus solely on the child whose name is on the top of the case file, because they understand that they are a part of the family system. In this way, the case manager guides a family through reintegration to permanence, 'walk[s] with [the family]... hearing how they want to change their lives, and helping them to do that' (Jindra & Jindra, 2015).

Management of case information also plays a critical role. Case managers do not make unilateral decisions regarding interventions in cases, but work closely in partnership with caregivers, pulling in children as well, in age appropriate ways. Case managers, caregivers and children work together to develop case plans, beginning with initial assessments of a family's stability using the Child Status Index (CSI). The CSI measures attainment of goals in six domains of care: food

and nutrition; shelter and care; protection; health; psychosocial; and education and skills. The index includes a four-point scale for each goal so that the child's wellbeing can be assessed as good, fair, bad, or very bad. Using the CSI as a starting point, case managers work with families to identify goals and interventions that will help families to raise scores in specific domains, set benchmarks along the path forward, and help the families move toward graduation from case care and independence. CSI measurements are taken at regular intervals to chart progress toward achievement of goals (USAID Assist Project, 2009). Through the case management process, case workers - working on partnership with families - record progress and determine when the child and household have met their case management objectives.

> Ideally, case management should work closely with the [family] and build on existing resources and strengths to help inform decisions about what the [family] can complete independently as well as what additional interventions may be required (USAID, PEPFAR and 4Children, 2017).

A trusting relationship between family members and case manager is critical to empowering a family to learn to care for their own, on their own.

Site visits are another essential component of casework. CRC case managers conduct monthly site visits, alternating between home and school. Site visits at home allow case managers to observe the home environment, spend time with caregivers reviewing progress, addressing any areas of concern, and collecting photos and data to continue to build the case file. These visits may provide the opportunity for private conversations with the caregiver, or with the child, as well as the chance to observe interactions between the child and caregivers, siblings or other family members, and often members of the community. School visits allow case managers to observe the child with peers at school, and to check in with the headmaster and teachers to see how the child is faring at school. The CRC has also identified school liaisons at the school where CRC programme children attend. These volunteer personnel keep an eye out for issues or concerns, and reach back to the case manager to alert them to any issues that need to be addressed.

It can be difficult to conduct case management in such a way as to empower parents and caregivers rather than make them feel as if they are being spied upon or 'checked up on'. It is critical that caregivers perceive case managers as allies and members of a team designed to help a child and family to thrive, and not as a 'cop' looking for flaws in a caregiver's parenting. By focusing on the entire family versus an individual child, a CRC case manager's goal is to strengthen and empower the entire system. Building a relationship with the family as a member of 'the team' is a large part of the case manager's job.

CRC family strengthening and community building activities

Recognising the need to observe family interactions through a variety of means, the CRC facility is also utilized to bring families on-site for family strengthening training. The training curriculum includes courses especially designed for the predominately non-literate parents and caregivers whose children are supported in the CRC programme. Culturally relevant workshops on positive discipline, trauma-informed attachment, basic economic and microfinance training are provided on a regular basis. Cohorts of approximately 25 caregivers participate in workshops while their children are engaged using the CRC's library, playground, computer lab, and other activities. Parents engage not only with CRC staff providing training, but with each other as well, sharing joys and challenges of parenting with one another and often learning from each other. CRC staff can observe parents' interactions with one another, and build relational bonds with their own 'clients' in a more relaxed atmosphere. This deepens trust within the team of case managers and families.

Family fun days are another opportunity for families to engage with the CRC staff and the community in much less formal ways. With 600 cases currently on the CRC's case load, it is impossible to bring all of the families together at once, so family fun days are offered frequently to a different group of families each time. Families enjoy a meal together, and then engage in games, football and volleyball matches with each other and with the children. Families and children are able to interact with one another informally and socially, building relationships with each other, with other families in the community and with the

staff, who provide support and are able to observe these families in a relaxed setting.

An African proverb states that 'it takes a village to raise a child'. Case management teams can play an important role as a part of that village, supporting and building capacity that helps to bridge child to caregiver, family to family, and families to community. As the world shifts to ensure that every child grows up in family and not in institutions, relational case management plays a critical role in becoming a part of a child's 'village' by allowing case managers to develop and build on relationships with the entire family that ultimately strengthen and empower parents to care for well for their children.

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About the author

Dr. Laura Horvath is the Director of Program Development and Community Engagement at Helping Children Worldwide. She works collaboratively with staff of the Child Reintegration Centre, a child welfare organization in Sierra Leone dedicated to reintegrating children from the streets or institutions into family care, strengthening families to ensure permanence, and coaching orphanages to transition to family care. Laura has an Ed.D. in Curriculum and Instruction from George Washington University and a deep passion for global child welfare, public health, ethical missions and sustainable community-led development. She lives in Virginia with her husband and three children.