Case Study: Advanced Standing Applicants

Please choose one of the practice examples below and summarize an assessment and hypothetical intervention plan for the primary client. Your summary should include the following elements:

**Introduction** - A brief summary of the agency and setting.

**Assessment** – A summary of the essential case data, including age, ethnicity, race, presenting problem, history of the problem, coping abilities. (If the assessment is based on a group or organization, describe the type of group/organization, membership makeup, and purpose.) Be sure to highlight any information that is missing that you may want to know more about.

**Case Plan** – Describe a hypothetical case plan and how it relates to the assessment evaluation.

**Interventions** – Describe and analyze some hypothetical practice interventions and how they are related to the case plan or assessment formulation. This section should include a summary of potential micro-level interventions as well as any agency, institutional, or governmental level policies that may need to be addressed.

**Evaluation** – Critically analyze the strength and limitations of your proposed interventions. Are there potential barriers or obstacles that you might face if you were to engage with this client system in real life? Are there any ethical issues that you may need to address?

*Your case study should be typed, double-spaced, in 12-point font and between 500-750 words. Be sure to cite any outside sources in APA format.*

**Case Situations**

1.) You are working at a high school as a school social worker in a small town located in a very rural part of West Virginia. The area is extremely poor, there are few job opportunities, and, because it is a small town, “everyone is in everyone else’s business.” One of the students, Julie, comes to meet with you one day during school. Julie is 15, slightly overweight, wears glasses, has short hair, and often gets made fun of because the other kids call her “butch” and a “lesbo.” While meeting with Julie, she tells you that she has always felt more like a boy than a girl, and she wants to come out as transgender. She states that she has told her mother already, and that while her mother was somewhat supportive, she does not want her to tell anyone else, especially her father. Julie says this is because her father is very conservative and thinks that people who are transgender are all “deviants” and “sinners.” He frequently states “all gay people are going to hell” and has told Julie he’d “disown” her if she decided she wanted to be gay. Julie states that her entire family (except her mother) also hold similar views. According to Julie, this whole situation is making her extremely depressed because she constantly feels like she has to “act like someone she’s not.” At times, she has even had thoughts of suicide (though she states she would never act on these thoughts). She says she
would feel much better about herself if she could come out to everyone, but she’s scared about her family’s reaction. She is also afraid about what this will mean at school. Julie already gets teased and bullied frequently and she has very few friends. At times, the bullying has even escalated to physical assault. Generally, teachers at the school are reticent to intervene in cases of bullying—they prefer to “let the kids work things out.” The school also does not currently have gender neutral bathrooms and Julie is also afraid about getting changed for gym and sports in gender-specific locker rooms. You are unsure whether the current principal would accommodate her request to get changed in a private room for such things. While you did not know the details of what was going on with Julie, you have been worried about her for a while, as her teachers have noted that her grades are slipping, she frequently appears sad and distracted in class, and she spends much of her time during lunch alone. You ask Julie if she has ever asked her parents about going to counseling, and she says her mother would be willing to take her. However, her mother is often overwhelmed with taking care of Julie’s younger sister and brother (who are 3 and 5 years old, respectively) and is often worried about money, as Julie’s dad recently lost his job. Julie states her mother has been meaning to apply for Medicaid for all the family members, but just hasn’t had the time to complete the application.

2.) You are a hospital social worker whose primary task is discharge planning. You are assigned the following case:

Frank and Ida Rogers live in a small home that Frank built in a quiet “hollow” in Kentucky. Frank is 85 years old and was a “lifer” in the US Army. He worked in the coalmines for ten years after leaving the Army to support his loving wife Ida. Ida is 84 years old and served her country as a member of the Women’s Army Corps (WAC) during WWII. Although their marriage has lasted for over 67 years, Frank and Ida were never able to have children.

Like many veterans coping with combat, Frank used alcohol to dull the nightmares and the images of war in his head. Frank’s alcoholism led to many physical complications including cirrhosis of the liver and pulmonary fibrosis. Ida has been his primary caregiver up to this point, but there has been a recent change in her as well. She experiences chronic arthritis in her knees and hands, has recently developed hypertension, and has been complaining of frequent fatigue requiring long naps each afternoon. Neighbors and friends have also reported short-term memory loss, forgetting church meetings, and mistakes in job as treasurer at the church.

Frank and Ida both require trips to a physician—the closest of which is over 60 miles away. Frank and Ida still drive but neither he nor Ida is comfortable enough to make the long trip alone. Frank and Ida live mainly on Social Security and a small pension from his years in the mines.

An episode of fainting at a church luncheon has landed Ida in the closest critical access hospital for a forty-eight hour period of observation. Frank was unable to travel to the hospital to be with her and has remained at home alone. After one day a fellow church member checked in on Frank and provided him a hot meal. Ida is going to be discharged home soon with a prescription to treat her newly discovered angina. While at the hospital, she has also received
treatment for a wide gash on her leg resulting from the fall. After completing ADL/IADL and cognitive impairment screenings the hospital has recognized that Ida was at a high risk for readmission to the hospital.

*Adapted with permission from K.M. Hash:


3.) 莫愁 Mo Chou is a 19 year old junior at West Virginia University who presents at your mental health clinic. She is from Central China. Her name in Chinese literally means, “free of sadness”, which is the opposite of how she presents.

In China her father, 李强 Dr. Li Qiang was an accomplished physician and her mother 望舒 Ms. Wang Shu was a controversial “civil rights” lawyer. Mo Chou went to an elite middle school and high school where she was at the top of her class. She started taking calculus in the 7th grade and she is quite fluent in English with just a slight international accent that gives away that she is not from the U.S. Her mother ran into trouble while defending some journalists who were uncovering a corruption scandal in the government that got the journalists sent to jail. Ms. Wang Shu had to leave the country abruptly before being arrested and the family followed as political refugees.

Since being in the United States Dr. Li Qiang has not been able to practice as a physician. Passing the medical boards is difficult. While he has a functional knowledge of English it is not good enough for taking medical boards. He is working double shifts as a nursing aide in a local hospital which brings in a modest income for their family. He is angry about his loss of status and blames much of this on his wife for what he sees as her missteps that resulted in her being at risk for arrest. He sees Ms. Wang Shu as being the cause for the family being uprooted from their comfortable life. Dr. Li Qiang and Ms. Wang Shu’s relationship is strained and the couple argue frequently. Mo Chou tries to avoid taking sides in these arguments but harbors some resentment toward her mother. Ms. Wang Shu, is sliding into depression. She holds herself responsible for the suffering of her family and misses being a lawyer. Presently she is a stay at home wife and her husband resents that she has not taken it upon herself to get work and help him with the financial burdens. She feels too depressed to even look for work. This is the situation that Mo Chou lives with at home.

As the only child in her family, China has a one child policy, she is held responsible for the future wellbeing of her family. While maintain a B- in her engineering courses she absolutely hates the subject. Engineering was chosen for her to study by her parents because she can
earn a good living and support her family. At times she finds herself crying while she studies because she hates what she is doing and her future life as an engineer. She feels anxious about her future but sees no escape. She must be a filial pious daughter and follow her parents’ wishes. Mo Chou is multitalented and is an exceptional artist, the sketches she shows you while dark with depressive themes are exquisitely drawn. What she would like to do is become a graphic designer and complete a degree in art but her parents do not see this as a good source of revenue. She is the “life insurance” for the future wellbeing of the family as her parents age.

Added to her stress is their current visa status. With Vietnamese people being sent back who were political refugees she and her parents wonder when Chinese political refugees will be sent back? Her boyfriend is more serious about her than she is about him. Marriage would open the door for a secure green card for her and her parents but she does not want marriage, she is only 19 years old. More pressure, more to be depressed and anxious about. She feels squeezed in so many different directions. She cries as she talks to you.