Case Study

Lee is a social worker at a local child welfare agency. Lee has been a social worker in this small, rural Wisconsin community for years. Lee grew up in a larger city, but Lee’s spouse is from this community and Lee moved to the community after they married. Lee is active in the local faith community and routinely attends church. Lee is also a part of a local tavern’s summer softball and volleyball leagues. Lee’s children attend the public school in a neighboring community. Lee’s spouse is in management at a local farm credit bureau.

Despite the community’s small size, substance use disorders are a real concern. As Lee has witnessed the increased need for treatment for people with substance use disorders, Lee negotiated an agreement with a substance use treatment facility 45 miles away. The treatment facility has agreed to give Lee “one bed” a month in the inpatient program and “two openings” a month in the intensive outpatient program. Lee could really use at least three beds in the inpatient program and five openings in the intensive outpatient program. The needs far surpass what Lee has available.

Lee is hard at work on a Monday when a call comes in on the intake line. It is the school social worker from the local school district (where Lee’s children attend). The school social worker stated a family has come to the attention of the school for concerns of neglect due to substance abuse issues. The school social worker explains the concerns for the children and provides Lee with the required identifying information. Lee takes the report and enters it as “neglect.” Lee’s supervisor has reviewed the case and assigned it as an “emergency” and Lee must go out on the case immediately.

As Lee is preparing to begin the case, Lee thinks about the family. Lee knows this family from church and the summer softball league. Lee played on the same team as the mother and knows the children from various school functions and fieldtrips. Lee wonders if there are photos on the bar’s Facebook and Instagram from the July 4th tournament. Lee also believes the paternal grandfather in this case is an influential client of the farm bureau and is deeply respected in the community. Lee also knows that the family has a reputation around town for using services to exhaustion and not benefiting from change. Lee’s friend (whose husband is a sheriff’s deputy) operates their church’s food pantry has recently expressed concern the family is getting food from the pantry and trading it for money to purchase drugs. Lee knows the mother became belligerent recently at the church’s food pantry for not adhering to pantry rules.

It is early in the month and Lee only has “one bed” in the inpatient program and just “one opening” in the intensive outpatient program. Lee is thinking about the family’s behavior with other service providers, including the church food pantry. Lee is thinking about the prior relationship with the mother on the softball league. Lee is thinking about the “sway” the paternal grandfather has in the community and in Lee’s spouse’s work. Lee is thinking about their kids in the same school.

Lee completes the home visit completes the home visit. Lee’s assessment findings are the family is neglecting the children with the lack of food, care, and supervision. The mother talks about her all-consuming substance abuse and how her out of control use prevents her from parenting. Lee believes she can keep the children in the home but needs to build a strong resource net for the family.

How does Lee ethically manage the resources for this family?