

Final Paper Case Conceptualization

SWK656 NB: Clinical Social Work Practice II with Families

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### **Introduction Client(s)**

The family composition consists of the biological mother named Ms. Angelica Rivera (age 27), the biological father, Mr. J. Romano (26), a child named Liam (3), and a 2nd child named Liandro (1). Angelica Rivera is a 27-year-old Latina female. The family's primary language is Spanish. She was born and raised in Puerto Rico. Ms. Rivera moved to New York five years ago. Her highest level of education is the 8th grade they are living in the shelter system in Manhattan, New York. The biological father, Mr. Romano, was born and raised in Puerto Rico, moved to New York five years ago and is currently incarcerated due to a drug conviction and his highest level of education is GED. The children, Liam and Liandro only speak Spanish. They are not of school age, but they attend daycare.

### **Presenting Concerns**

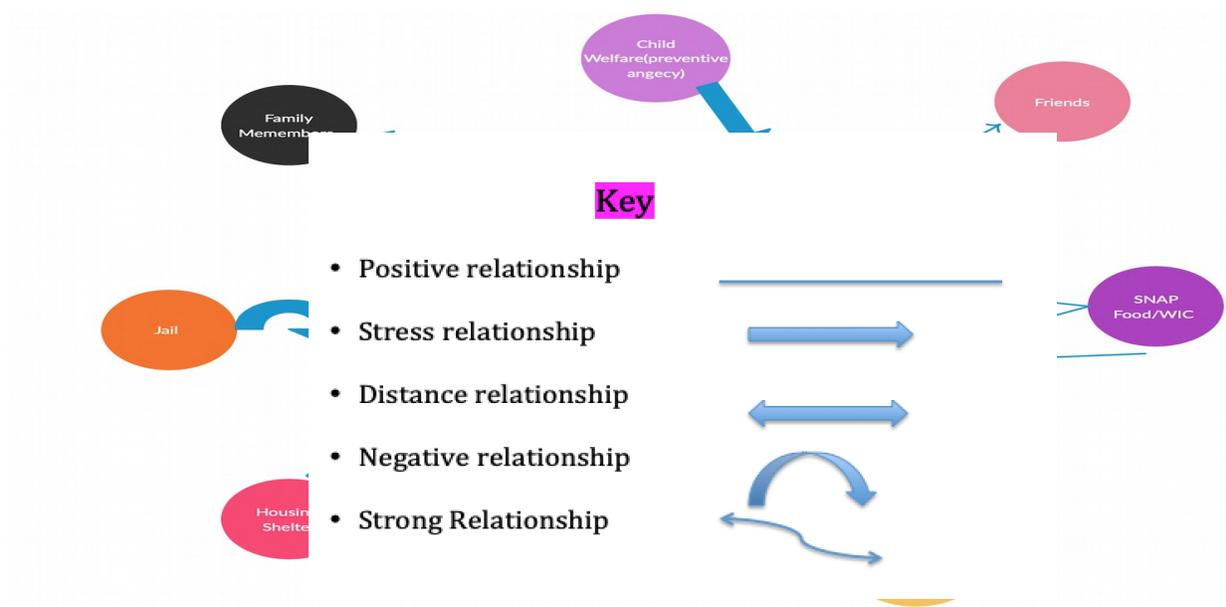
The presenting problem is that the family is living in a shelter. The family is unable to obtain permanent housing because Mr. Romano who used to pay the rent is incarcerated since September 2019, and Ms. Rivera is unemployed because of her level of education and language barriers. Also, Ms. Rivera reported that her family is unable to get a housing voucher at the shelter because a household member must have income. At the moment, the family does not have any income.

Additional concerns presented by the family are that both children have medical conditions. Liandro was a premature baby and child Liam was born with a mildly twisted arm because Ms. Rivera used to sleep on her left side when she was pregnant with him. Ms. Rivera expressed that child Liam does not speak yet and she is concerned. Ms. Rivera has not had the children evaluated due to a lack of knowledge. Ms. Rivera reported experiencing insomnia

because she has been worrying at night of her family's housing situation and getting a job to be able to provide for her family and get an apartment for them. It makes her feel worthless because she feels that she is unable to find a job.

### **Background Information**

#### **Ecomap**



This case was called in by the Administration for Children's Services (ACS) and referred to The Lower East Side Family Union. The initial source reports stated the unit was filthy and unkept; there were sharp objects on the floor, which presented a danger to the child. The MSW intern spoke to Ms. Rivera about the services that were recommended by the ACS to her family and herself. The recommended services were the following: early intervention for children and mental health services. Ms. Rivera accepted services from Lower East Side Family Union on 10/2/19. Ms. Rivera is a 27 year old is a Latina Female single mother, she is not romantically involved with Mr. Romano. Ms. Rivera was born and raised in Puerto Rico. Ms. Rivera has reported that her parents still reside in Puerto Rico. Ms. Rivera's relationship with her parents is distant. Ms. Rivera reported that she has one sister who is one year older. They used to have a close relationship when they were kids but now they barely speak. Ms. Rivera comes from a poverty family. She had to drop out of school to start working. Ms. Rivera's highest level of education is the 8 grade. Ms. Rivera moved to New York with her boyfriend Mr. Romano. She has been living in New York City for five years. Ms. Rivera is unemployed and has reported no family support. The biological father Mr. Romano (26) of the boys is incarcerated due to a drug conviction as of 10/20/19 so Ms. Rivera is not able to receive any support from him.

Ms. Rivera reported that she was a premature baby. Her mother gave birth to her when she was 31 weeks old. Ms. Rivera stated that she was delayed in walking and talking. Ms. Rivera started walking at the age of 2 and started talking at the age of 3 saying words such as "mama and dada". In addition, Ms. Rivera reported that diabetes runs in her family. Both of her parents have diabetes. Ms. Rivera has reported no health conditions with herself.

### **Trauma/ Abuse history ( recent and past)**

Ms. Rivera did not report any history of domestic violence or substance abuse. Ms. Rivera expressed that she remembers her parents having a positive relationship with each other.

Also, Ms. Rivera did not report any abuse with the biological father of her children. Ms. Rivera expressed a trauma in her life since the biological father of her kids was incarcerated and she was left alone in New York with two little kids.

### **Substance Use Abuse**

Mr. Romano is incarcerated for a drug conviction as of 10/20/19. Ms. Rivera mentioned that Mr. Romano used to consume drugs but she never did. But it was something that never interested her.

### **Precipitating Events**

The recent life event was that Mr. J. Romano the biological father of the kids got incarcerated. He was the provider for the family. Due to Mr. J. Romano getting incarcerated, it led Ms. Rivera and the children went into the shelter system and they are currently living in the shelter. They began to live there because Ms. Rivera was not able to afford to pay the rent of the apartment where they used to live at.

### **Related Historical Background**

Both children may have medical conditions. Child Liam was born with a mildly twisted arm because Ms. Rivera used to sleep on her left side when she was pregnant with him. Also, Ms. Rivera is concerned because he is three years old and he barely speaks. As per Ms. Rivera, she mentioned that she was delayed in her speech. She did not start talking until the age of three. The child Liandro was a premature baby who was born at thirty weeks. Ms. Rivera as well herself was a premature baby. Through my caseworker contact with the family. Ms. Rivera

reported that child Liam would point to the object when he wanted something so his mom could get it for him.

### **Client/ Family Protective and Risk Factors**

#### **Belief System**

Ms. Rivera has appropriate cultural beliefs as she reported that she grew up as a Roman Catholic. Ms. Rivera shared that she remembers going to church with her parents and sister every Sunday. Also, Ms. Rivera shared that she remembers her and her sister when they got baptized. Ms. Rivera stated that she does not go to church normally, but she randomly does go to a Roman Catholic Church named Saint Mary.

#### **Roles Models**

Ms. Rivera's role models of strength are her parents because even though they have a distant relationship now because she is New York and refuses to tell her parents about her situation here in New York. Ms. Rivera stated that the reasons that her parents are role models to her are because her parents work hard to provide for her and sister and how they keep the family together. Also, Ms. Rivera stated she admired how her parents were always together, and we're there to support each other. She saw how her parents had each other's backs. Ms. Rivera mentioned that one day she hopes to be her children's role models in life. Ms. Rivera stated that she tries to be the best mother to her children, just like her parents were to her and her sister. Ms. Rivera mentioned that she wished that she could have that relationship with the biological father of her children. But unfortunately, she does not, and also she does not want the kids around their biological father because Ms. Rivera believes he is not a good role model for her children.

#### **Organizational Patterns**

Ms. Rivera has ineffective problem-solving coping strategies because she has not attempted to look for employment. She has not searched for her child Liam to be evaluated for his speech delay since he is not speaking yet. Also, she has not searched for child Landron to be evaluated to see if he is developing appropriately since he was a premature baby.

### **Social Support System**

The family has a lack of social support. Since they have no family members or friends who could support them financially or emotionally here in New York. On the other hand, Lower East Side Family Union which is a preventive agency is a social support system for the family Lower East Side Family Union provides the family with community-based resources and promotes the safety and well being of the children.

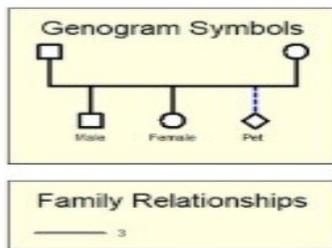
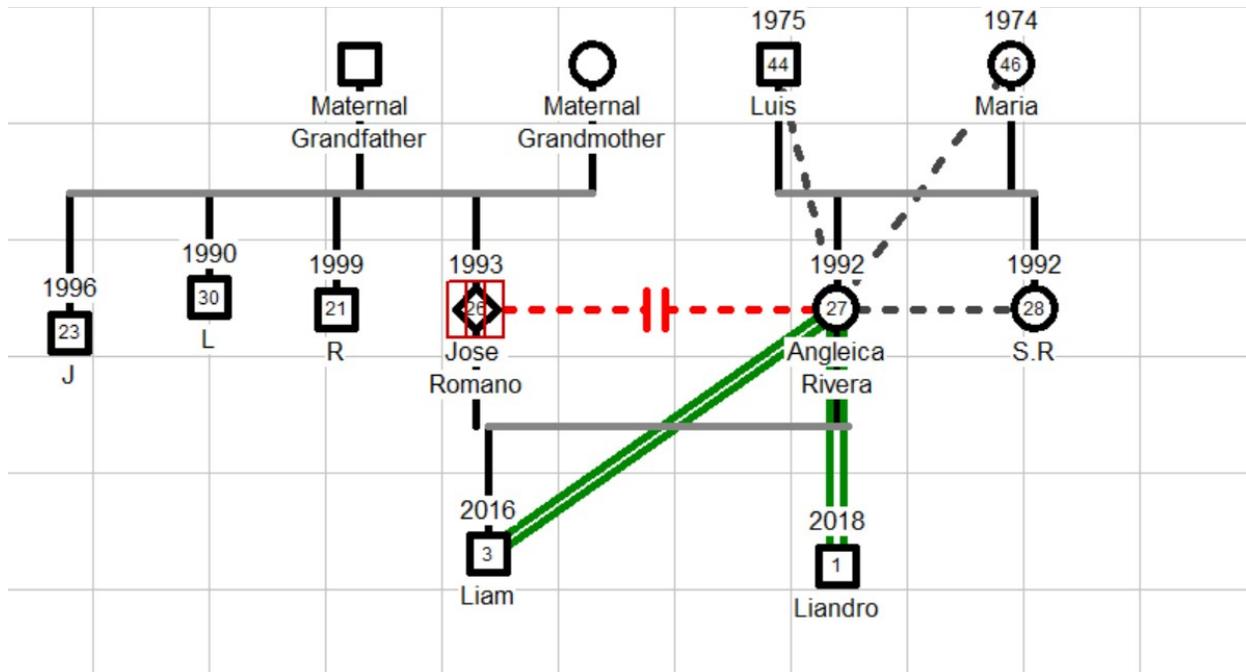
### **Economic Resources**

The family is living in poverty. The family is living in the shelter system. The shelter is giving the family a roof over their heads. Also, since the family is living in poverty, they receive SNAP food and WIC benefits. These help the family with food assistance.

### **Reactivation of Past Events**

Through casework contact, Ms. Rivera has demonstrated evidence of strengths. As Ms. Rivera had expressed her desire to obtain employment, she can get permanent housing for her family and get out of the shelter system, so the children can have their bedroom like they did before Mr. J Romano got incarcerated. Also, she expressed her frustration of living in the shelter with two young kids. It is uncomfortable.

### **Family Structures**



**Family Life cycle stage**

**Independence-** Ms. A. Rivera and Mr. J. Romano moved to New York in their 20’s on their own.

**Coupling or Marriage-** Ms. A. Rivera and Mr. J. Romano were together for 3 years and lived together but they did not get engaged or marry.

**Parenting babies through adolescents-** This stage does not apply for Ms. A. Rivera or Mr. J. Romano.

**Launching adult children-** Ms. A. Rivera was 24 and Mr. J. Romano was 23 when they had their first child.

**Retirement or senior year** - Ms. A. Rivera and Mr. J. Romao have not reached this stage.

### **Boundaries**

Ms. Rivera's lives alone in the shelter with her two sons. Also, Ms. Rivera's sons are too young to understand any issues or problems.

### **Triangles and Coalitions**

The mother and children projected to the father their frustration because of his absence. The mother verbally takes her emotional stress out onto the children.

### **Hierarchy Between Child and Parent**

The mother is the head of the household. She is the provider and the disciplinarian. Both children are treated equally. They are only 2 years apart from each other. The children are depending on the mother for emotional support and physical support. Their mother is their support system.

### **Attachment Patterns For Family With Children**

Liam and Linadro appeared to have a positive relationship with Ms. Rivera because they have emotional connections to Ms. Rivera because she is the primary caretaker, and they are always with her. Both boys have an attachment bond with Ms. Rivera, as Ms. Rivera demonstrates through her non-verbal communication with her love for her children. Also, the boys have a secure attachment bond with Ms. Rivera because they always want to be around their mother. It demonstrates that they feel safe with Ms. Rivera. Ms. Rivera had expressed that when she was a little girl, she always wanted to be around her mother. This demonstrates that she as well had a secure attachment bond with her mother as a little girl.

### **Interactional Pattern To Problem**

Interactional patterns affect communication patterns. Ms. Rivera failed engaging in a positive communication pattern with her children because when she got upset she burst out to her children. Ms. Rivera should have an alternative method to channel her emotions on her children when she gets upset with them. Instead of yelling at them speaking to them.

## **Family Assessments**

Genogram: “A genogram is a picture of a person’s family relationships and history. It goes beyond a traditional family tree allowing the creators to visualize patterns and psychological factors that affect relationships”. The genogram provides a clear family history outline of any potential intellectual disabilities or potential connections to Ms. Rivera's diagnosis of depression and unjustified anxiety ( Garth, A,2019 ).

Family Centered assessment - MSW intern will complete a family centered assessment with the family . This assessment “focuses on the whole family, values family participation and experience, and respects the family's culture and ethnicity”. ( Comprehensive Family Assessment Guidelines for Child Welfare, M.D.).

Solution Focused assessment: MSW intern will complete a Solution-focused assessment tool with Ms. Rivera. The solution-focused assessment tool will help the family find a solution to their problem to help them achieve a more satisfactory future (Besenhofer, R., M.D.) .

Family trauma assessment: MSW intern will complete a family trauma assessment. This assessment will “ provide valuable feedback to you and the family so that treatment can target the specific and interrelated needs of children and their families” ( ).

## **Assessment Tools**

### **PHQ-9**

The PHQ-9 is a screening to assess depression. The MSW intern completed the PHQ-9 with Ms. Rivera. She scored a 11, a moderate depression. Client reported that she had been experiencing insomnia and feeling worthless for more than two weeks. Also, Ms. Rivera reported that she stays in the home majority of the time unless she has to go out to do something. Ms. Rivera reported she does not have suicidal ideation.

### **GAD-7**

GAD-7 is a screening for anxiety disorder. The MSW intern completed the GAD-7 with Ms. Rivera. She scored an 8 on GAD-7 which was for mild anxiety.

### **CAGE**

The CAGE is a screening to assess for substance abuse. The MSW intern completed the CAGE questionnaire with Ms. Rivera. She scored 0 on her cage assessment for substance abuse.

## **Theories Application**

Ms. Riveras exhibits depression as she has reported that she sleeps all day and that she feels worthless. Ms. Rivera may feel like this because she has no family support. Ms. Rivera is alone in New York City. Another factor is that Ms. Rivera has exhibited depression because of financial situations and that she does not have permanent housing. Also, another factor that Ms. Rivera displayed depression because her unit at the shelter was filthy and unkept.

The MSW intern will come from a strengths perspective with Ms. Rivera's family; additionally, the MSW intern will use Cognitive Behavioral Family Therapy (CBFT). Also, the MSW intern will use Solutions-Focus Family Therapy (SFFT) for Ms. Rivera's family because it will help the client with her needs, and it will give the client hope that there is light at

the end of the tunnel. MSW intern would ask the client the miracle question “ if all this problem went away, where would you be?” with this statement, the client would be able to imagine where she wants to be. Lastly, the MSW intern will use Narrative Family Therapy because it helps the family by providing knowledge of their ability to live those values so they can effectively confront the present and the further problems. Narrative family therapy “It encourages people to rely on their own skills to minimize problems that exist in their lives” (Team, G. T. E., n.d.). CBFT will be helpful to Ms. Rivera’s family because it helps deal with overwhelmed problems in a more positive way. "CBFT is able to focus on a variety of problems, from promoting changes within individuals in families to altering family interaction styles" (lan, J., 2018). For this point, the client and MSW intern could develop short and long term goals. “SFFT works to help the family identify its strengths and to reach a concrete solution in a brief period of time. Solution-focused family therapy is a psychotherapeutic approach that works to find, develop and work on solutions based on the family’s resources, rather than working on problem-solving, which is based more on what is wrong with the family their issues”(Wyden, G. V., 2019).

### **Treatment Plan**

**Goal 1-** Reduce the severity of depression of Ms. Rivera to help her family to promote a healthier environment.

Objective 1: Ms. Rivera will process her recent loss (husband, financial support and the father of her kids. ( Cognitive Behavioral Family Therapy )

- o Intervention: 1: MSW intern will use the miracle question with Ms. Rivera (Solution focused family therapy)

- o Intervention: 2:MSW intern will utilize techniques of CBFT to discuss the process of her recent loss.
- o Intervention: 3: MSW intern utilized role play techniques with Ms. Rivera. It will help develop social skills. Also give her the opportunity to expressed her story (Narrative family therapy)

**Goal 2-** Ms. Rivera will get children evaluated within the next 3 months.

Objective 1: Ms.Rivera will be protective in completed the necessary steps in order to obtained the children evaluation within the next 3 months ( Solution focused family therapy

Intervention 1: Ms. Rivera will write a letter for child Liam and child Liandro to get evaluated by early intervention.

- o Intervention 2 : Ms. Rivera will go to YAI to assessment and will up follow up any recommended services
- o Intervention 3: Ms. Rivera will explore OPWDD services.

**Goal 3-** The family will keep the shelter unit clean and well organized.

Objective 1 Teach the family health living skills.

- o Intervention 1: MSW will explore for class that teaches the family health living skills (solution-focused therapy)
- o Intervention 2: The family will apply what she learns from the class.
- o Intervention 3: The family will implement what they learn from the class to keep their shelter unit clean and well organized

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