



APPLYING A PROTECTIVE FACTORS APPROACH: CASE STUDY

Case Study 1: Karin

Karin, a first time, 17-year-old mother, has recently been through a Child Protective Services investigation for allegations of physical abuse of her 6-month-old son, Max. After an extensive investigation, the allegation was unconfirmed, but Karin voluntarily agreed to participate in Early Intervention Services. Karin says she has difficulty trying to calm Max. She says that he cries a lot and does not sleep for more than a few hours at a time. Max was born prematurely but has gained weight well, is trying to roll over, and is starting to make noises. Karin typically breastfeeds Max every two hours. When held, Max pulls his feet up to his body, and, when Karin places a hand on his stomach, he cries even more. Karin tries to hold her son in an upright position when he cries, but this strategy does not seem to work well. Karin is exhausted and tired because she generally takes care of her son by herself.

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Case Study 2: Ana

Diego is an energetic, verbal child who has been involved in Head Start for two years. He turned three-years-old over the summer and was recently moved into a new Head Start classroom. Compared to last year, Diego now seems less settled and focused. His behavior is sometimes aggressive and he occasionally pushes other children. He has a hard time finishing any classroom activity. When his teacher intervenes and tries to talk to him about his behavior, he shrugs and ducks his head, often appearing startled or afraid. Diego's mom, Ana, is a single mother who works two part-time jobs to make ends meet. Ana has disclosed a history of alcohol use, but says she quit drinking after going through rehabilitation and joining Alcoholics Anonymous. Ana often feels alone and says she is struggling to take care of Diego. His teacher learned from the Head Start Family Advocate that Ana has recently started seeing a new boyfriend who she met at an AA meeting.

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Case Study 3: Leah

Rachel is an 18-month-old girl. She was placed in kinship care with her Aunt Leah after being removed from her parents' home following the severe physical assault of a sibling by her stepfather. Rachel was exposed to chronic violence in her birth home, as her stepfather battered both her mother and her older male sibling. Rachel has sleep difficulties, increased startle response, difficulty concentrating and a quick agitation response. Leah is worried that Rachel is behind in her development. Rachel enjoys playing with soft toys and being in the bathtub, but resists any forms of affection and rarely smiles. Her Aunt Leah is an experienced parent who is active in her neighborhood and church; however, Leah is frustrated with her perceived inability to successfully nurture and support Rachel. Leah is starting to believe that Rachel simply does not like her.

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Case Study 4: Jeanette and John

Joshua, a 2-year-old boy, is often dirty, hungry and poorly supervised. CPS recently became involved with his family, and a worker interviewed Joshua' mother, Jeanette. During the interview, Jeanette acknowledged that she is under tremendous stress due to a sometimes-violent relationship with her husband, John. She admitted that caring for Joshua has been difficult because he is often irritable and rejects her attempts to console him. Joshua can also be very restless and clingy toward her, especially when John is present. Jeanette also said that Joshua was "slow to develop." Jeanette admits that she and John have a history of drug and alcohol abuse, although she states she is now clean. John works long hours at a car wash and does not have much energy or patience when he gets home; however, he does love taking Joshua to the playground when he has a day off. After the interview with Jeanette, a service plan that included parenting classes was put in place for the family. Through this CPS intervention, Joshua and his family now appear more stable and less chaotic. Their caseworker has just learned Jeanette is three months pregnant.

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