Case Study Analysis

Note: These vignettes have been created for the purpose of providing case examples for admission essays only and do not represent any particular individual or family. The names are fictitious. Any resemblance the vignette may bear to a real family is pure coincidence. Applicants are to choose one case study and analyze it as outlined in the instructions.

Case #1:

You are employed full time as a hospital social worker on an inpatient psychiatric unit. You have been given the following patient on your caseload and need to help in the discharge plan. Even though your responsibilities revolve around Ruby, there are other significant factors that need to be considered in order for any plans surrounding Ruby to be successful.

Ruby is a 59-year old Hispanic woman diagnosed with paranoid schizophrenia and takes medications to help control hallucinations and delusions. She is also diagnosed with diabetes and needs to take insulin. She is morbidly obese. It has been many years since she was last employed. She attended high school through the 10th grade and can read and write at basic levels only. Due to her financial situation and her documented mental illness she receives Social Security (SSD) benefits as a disabled person, has Medicaid coverage for her medical and mental health needs, and qualifies for several low-income programs, such as housing and food assistance.

Ruby was admitted to an inpatient psychiatric unit at a local hospital after her daughters took her to the emergency room saying she was "acting crazy" and that she shouldn't be allowed to return to the apartment because "she can't take care of herself." Ruby was expressing thoughts of suicide at the time of her admission to the hospital seven days ago but is no longer expressing these thoughts and seems ready for discharge back to the community. Ruby reports that she does not know where she will live when she is discharged from the hospital because her landlord is evicting her from the apartment. The lease is terminating at the end of the month (15 days) and her landlord has given her notice that he will not renew the lease with her. It is a one bedroom apartment with rent subsidized by the government. She needs to vacate the apartment in 15 days or eviction proceedings will commence.

Ruby has two unmarried adult daughters. Her daughters are both homeless and they each have two children. The children range in age from 1½ to 4 years old. It appears that the daughters and children have been living with Ruby on and off for the past several months. The neighbors have been complaining to the landlord about the children running unsupervised around the apartment building and about visitors coming and going from the building at all hours of the day and night. Her neighbors also say they suspect that the daughters are involved with illegal drug use and dealing. It is unclear if Ruby would be able to renew her lease if her daughters were not staying with her. Ruby, however, maintains that her family is very important to her and that she intends to help them in any way she can and wants to find a place to live where she can stay close with her children and grandchildren. As Ruby's social worker on the inpatient psychiatric unit, what would you do?

Case #2:

Albert is a 70 year old widowed Caucasian man originally from a European country, who has resided in the United States for the past 45 years. His means are modest, but he does have Medicare and insurance coverage and a small pension that meet his needs. In addition he has about $10,000 in a savings account. He is able to speak and read English but is not proficient in writing in English as his profession has been in agriculture. He has maintained close ties to his family of origin through trips, letters and phone calls; however, he only has one living sister whom he hopes to visit "one last time." He has maintained his culture in his home including speaking his native language with his children. Although he has grown used to "American food" he prefers dietary choices and ways of preparing meals that reflect his country of origin.

Albert has experienced extreme osteoarthritis since his early 50's and has had two knee replacements and a hip replacement. He has been hospitalized for an acute and life threatening infection in his artificial hip, which has resulted in most of his femur and part of his pelvis being removed, in addition to the artificial joint. He is given massive doses of strong antibiotics to save his life, which results in renal failure requiring dialysis. There is a possibility that the renal failure will reverse itself as he recovers sufficiently to be discharged. He has three adult children, who take turns being in the hospital throughout the weeks of treatment. As he begins to recover, family frequently bring in his favorite types of foods to supplant his hospital diet. Hospital personnel do not question this practice.

Albert is to be discharged to a rehabilitation center for occupational and physical therapy so he may return to his home. He does not want to go to the center, because he believes people die in "these places." He finally agrees to go because his family convinces him he needs the strength to live alone, or he will have to move into one of their homes. This proves to be very motivating.

Diet continues to be an issue with him in his new life in the rehab center. He tells the dietician he likes yogurt and dislikes "green." He wants foods he is familiar with, but the facility will not allow his children to bring in meals like the hospital did. The dietician informs him that he needs to get used to the food, because they are likely to order meals-on-wheels for him when he is discharged. Albert reacts by getting depressed, refusing to eat, and has just begun muttering, "maybe I should just die."

His children contact you, the rehab center's social worker, because they are worried about his mental state which is affecting his recovery, and to ask you to intervene with the center's director on Albert's behalf. They in particular think the dietician is arbitrary and unreasonable and they are paying good money for his care and he doesn't deserve to be bullied. They also want accommodations made for Albert's diet, and wonder if Albert could benefit from seeing a psychiatrist. What would you, as the social worker, do in this case?

Case #3:

Kyle is a 12-year-old Caucasian boy. He is the youngest of 3 children. He has a brother who is 17 and a sister, aged 15. Kyle was raised in a lower middle-class area at the edges of a city. His parents divorced two years ago. His father had been physically abusive to his mother. Kyle now lives with his mother, sister and grandparents in a community about four hours away from his home. At the time of the divorce, Kyle's mother left the home, taking him and his sister to live with her parents. She has full custody of Kyle and his sister. His older brother decided to stay with their father and has had trouble doing well in school because he is working to help support himself and his father.

The grandparents are helping Kyle's mother raise the kids and they babysit often. Upon first moving, Kyle adjusted well to his new elementary school and made friends easily. Recently, Kyle's mother has started to date again and is spending more time with one boyfriend in particular. Her dating coincides with Kyle's transition into middle school, which is difficult for many children. In addition, in middle school students from several elementary schools representing different cultural and socio-economic status neighborhoods come together. Kyle has starting acting out in school. He reports not liking the new school and believes he does not fit in with either his old friends or his new peers. He has begun talking about moving in with his father and brother.

In addition, he has become more defiant at home and was recently caught stealing from a department store. Charges are pending and he will need to go to court. His grandparents believe he may be sneaking out and spray-painting graffiti in the neighborhood, because they have found paint on his clothing. Worried, his grandmother has made an appointment with you, the school's social worker, because she is worried about him. She does not know what will happen to him in court, and wants to report to the judge that he is doing well in school. As the school social worker, you can do therapy with Kyle and his family, but you must consider several other factors in this situation to have the best outcomes. As Kyle's school social worker, what would you do in this case?

Case #4:

Denzil is a 12 year old African American boy raised in a middle-class home where both parents work. His parents are currently divorced, with Denzil living with his mother and seeing his father regularly. The relationship between his mother and father is contentious however, because his father believes in doctors and medical treatment, whereas his mother relies on her family and pastor for guidance. His grandmother has strong opinions about traditional healing practices, and raised her own children using family remedies. The fact her children all lived into adulthood is evidence to her the "old ways" work. Denzil's mother does not believe in medical intervention except for physical injuries.

A juvenile court judge has ordered Denzil into a day treatment program seeking compliance by both Denzil and his mother with prescribed treatment protocols. In particular, Denzil has a history of what appears to be ADHD. He has been suspended from school numerous times since kindergarten for being disruptive in class. These suspensions have been exacerbated by his mother, who has begun to keep him at home to treat him with "natural" remedies. Denzil is small for his age, and his mother has read that Ritalin and other drugs for ADHD inhibit grown in pubescent boys. She has him on a special diet, which includes drinking a cup of her special herbal tea every hour.

She has accepted that Denzil has to go to day treatment because of the court order, but wants to continue her herbal treatments in lieu of medications prescribed by the center psychiatrist. She states the behavioral interventions provided by the therapists in conjunction with her regimen will help him. She stated that if she is forced to give her son medications, she will flee the state with him and live in a place where the government cannot control them.

You are the director of a day treatment program in a community mental health center, serving youth ages 12-18 with seriously persistent mental health, behavioral and developmental disorders. Denzil has been placed in your program for therapy, medication management, and specialized schooling. As the director of the program, you have to follow the court order and follow agency policies, while ensuring appropriate and meaningful treatment is being provided to Denzil and his family. Thinking as a social worker, what are the factors to be considered and how will you balance these often competing mandates?