

John Smith

Date of birth: 12/19/1999

Reason for Referral:

The family was brought to the attention of the Santa Clara County Children and Family Services, Child Protective Services unit in July of 2008. At this time the mother was struggling with a drug addiction, and left the child alone at home with no provisions for two days. The mother was also under a voluntary agreement for services through the Children and Family Services.

Family Description:

The family consists of the mother Maria, age 42, and the focus child, John age 9. Maria has three other children: Steven, age 19, Lisa age 24 and Brian age 26. Maria has a criminal history that includes possession of a controlled substance and forgery. Maria has been clean from all drugs for nine months. Lisa is still involved in Maria's and John's life, and Maria still keeps in touch with her other two children. Maria's mother lives in the area, but is unable to support the family in many ways due to her medical condition. John does know and has a relationship with her. John's father has not been a part of the family's life; his whereabouts are unknown.

Family Composition:

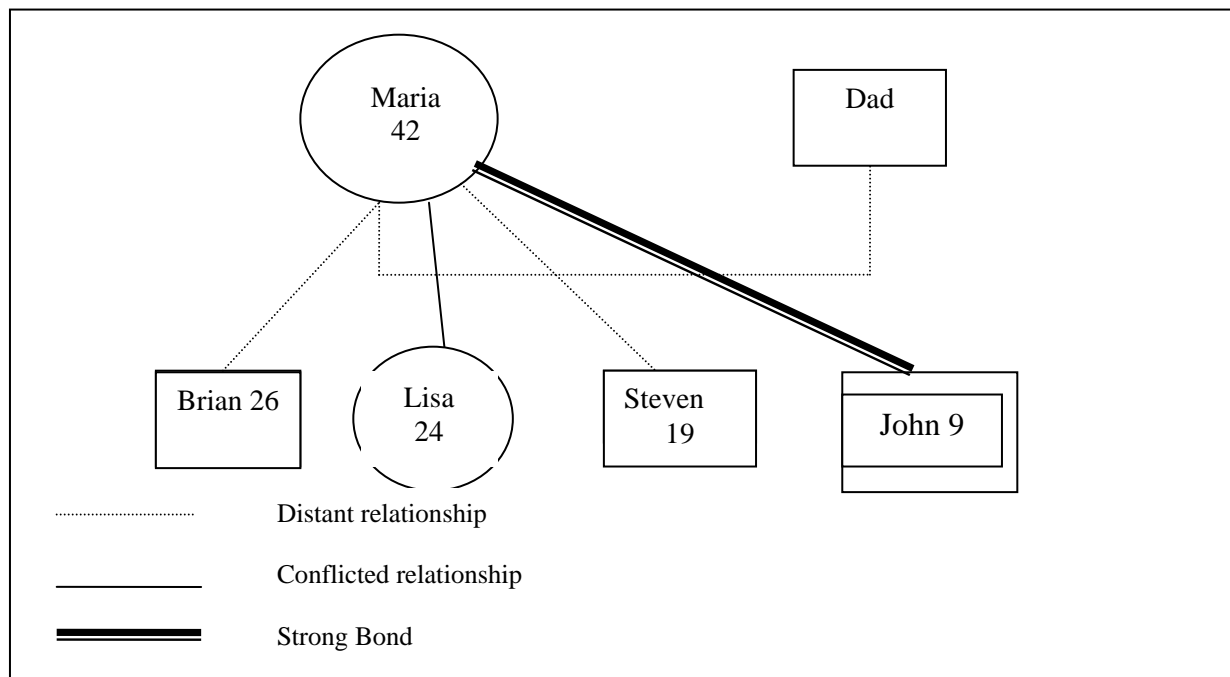
Maria, mother, 42

John, child, 9

Steven, brother, 19

Lisa, sister, 24

Brian, brother, 26



The two older boys have a distant relationship to their family. The 19 year old son lives with his maternal uncle since their involvement in CPS. Steven chooses not to be involved much with the family. Lisa has begun in the last year to rebuild a relationship with her mother. Their relationship had been conflicted also, but after Maria's has been sober, Lisa has been more involved. John and his mother have a strong relationship. They are building a new relationship also, since he was out of her care for six months, and has been back in her care for almost six months now. As she has maintained her sobriety, and has tackled her mental health concerns, their relationship is changing and not yet stable. John's relationship with his other siblings members in many ways is connected to their relationship with his mother, since she is his primary caregiver. The older brothers have less contact with John, than does his sister Lisa.

Nature of Client's and Family's Problem:

This family's main problem begins with trying to minimize the effects of Maria's drug addiction on the family and John. Maria has an extensive history of abusing drugs that dates

back more than fifteen years. John was raised in an environment in which his mother was much of the time seeking out means to acquire her drug of choice. John was either left at home with his older siblings, or was among his mother when she was at home and intoxicated.

This was not the family's first involvement with Child Protective Services. Maria had a previous substantiated referral for similar allegations that has brought them to CPS this last time. The first referral was for Brian and Lisa. The family was given resources and was later the case was dismissed. The family was on a voluntary contract with Santa Clara County CPS at the substantiation of the last referral in November of 2007.

Developmentally John is on target for a nine year old child. His mother has stated, John has always been a smart child. He began to walk at 11 months old, and no known delays in gross or fine motor skills. On the ASQ he showed no risk for problem solving and social. His mother stated that he tested out to be within a normal range for speech and language throughout his development. Today he is playful and has told me he is the second fastest boy in his class, and is learning how to cross while he jumps rope. He has been called gifted by professionals who came to the classroom to demonstrate a new teaching model. There have been no concerns for cognitive delays in John. Many of the concerns for John are with issues of self-esteem, and other internal struggles. John has made statements implying he was a "bad boy". John does have anxiety issue as far as I can see from my limited interactions with him, and an enuresis condition may have been diagnosable at an earlier time.

Axis I        309.24 Adjustment Disorder with Anxiety (Primary)

307.6 Enuresis With Nocturnal Only

Axis II        V71.09

Axis III       Asthma

Axis IV      Problems with primary support system  
                  Housing problems

Axis V        75

Coping Capacities of Client and Family: Strengths, Obstacles, Risks and Protective Factors:

The family has a wealth of strengths. Maria is a very determined woman. Once she has an idea, she dedicates herself to finishing her goals. She is able to maneuver many different systems, and understands what she will have to do. Maria is very intelligent and has a great love of her son. John is also very intelligent, and resilient. He is happy being with his mother, and carries many of her qualities. He is sociable, and has friends. I have been quite impressed by his knowledge of the area and how to return home.

Obstacles include Maria having limited financial means. She is on disability and there are limited jobs she would be able to handle. She is however, looking into returning to college, to obtain a degree. Risks for the family are the possibility of Maria having a relapse, or John being negatively influenced by their past life.

Other Persons or Systems Involved in the Client and Family Situation:

John and Maria have maintained a close relationship with John's former foster family. They are involved in church and frequently attend together. The family is one support the family can rely on. Another support for the family, and in particular, Maria, is her former residential drug treatment program. She completely identifies with the group and their mission. She credits the program for saving her life, and allowing her to get John back. This program is still a large part of Maria's life, and John attends the events often.

Available or Needed Resources:

Maria is an extremely resourceful woman, who is able to find the resources she needs. A few of the resources Maria feels she is in need of is her own transportation, and more steady housing. Maria's schedule is filled with her mental health appointments, Post Traumatic Stress Syndrome Therapy, substance abuse after care counseling, drug testing, and therapy for and with John. Having a reliable vehicle is a primary goal for Maria, but saving money has been a long process due to Maria being unable to work. She is on medical disability, and has a limited income. They are also living in a shelter, with a year long agreement. She recently, on her own, found another program she qualified for, and is now looking to get a housing voucher which is valid for three years.

For John he is at a time when stability is the main factor he needs in his life. Maria is on her way to accomplishing this. John will need stable housing to be able to develop friendships and blossom into a young man in these next several years. A positive male role model would also be beneficial for John. Both of his older brothers may be able to fill this role, but that again depends on their relationship and feelings toward Maria.

Client's and Family's Motivation to Work on Their Problems:

The family has shown to be very resilient. They are able to talk to one another and work things out. They both have developed an interest in church, and have begun to bond over Bible readings. They both have a good and optimistic attitude. Although they do have struggles, they both seem willing to work on them.

Treatment Plan:

Working with this family through the Children and Family Services, we do not develop treatment plans for the family. If I were working with this family in that capacity my treatment plan would be as follows:

Presenting problem: John has shown negative effects of anxiety, including enuresis.

Goals: Short term goal is to reduce and eliminate current symptoms of anxiety.

Long term goal is to work on the mother and child relationship so he is able and comfortable to express himself, and for the mother to be able to understand the effects of trauma and anxiety of the child.

Interventions: I would use CBT as an intervention. This would allow John to deal with the thoughts that may be causing his increased anxiety. In his case the negative thoughts may produce a feeling of fear, which may lead to enuresis.

### Family System Diagnosis

The primary stage this family is experiencing is the mother's addiction recovery. The family system is still developing and changing as the mother is dealing with her own personal struggles. Some struggles that are typically in families with addiction may be too rigid or diffuse boundaries, inappropriate roles and distorted patterns of the family's communication and behavior. In this family I see these characteristics. The mother is very demanding and has high expectations for her child. She has talked about she has never really parented in the past due to her addiction, and now she is very strict. At times this can seem inappropriate for the child's age of 9, and for their current situation. The communication and behavior patterns are currently being worked on in family therapy, where there seems to be good progress. She is able to ask her son for feedback in different aspects of their life. She is also learning how to be patient and understanding of his needs and struggles. Many of these characteristics are interconnected and affect one another.