Unit IV
Theories /Approaches to Practice &
Recording in Case Work Practice

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Theories of Case Work

Psychosocial Approach
Problem Solving Approach
Crisis Intervention
Behaviour Modification
Functional Approach and Development of an Eclectic model for practice
Case Work deals with the people, their environment and the relationship between them (Person-in-situation).

- **What is psychosocial approach?**
- Psychosocial Approach (Case Work) means “attention to both interpersonal system (parent, child, husband and wife, family) and personality system (Id, ego and superego) of the individuals.

- It is one of the approaches adopted by the caseworkers to deal with the problems of the Individuals.
Origin:

- This approach is traced to Mary Richmond’s formulations. However, this approach changed and it was influenced by Socio Economic events of 1920s and 1930s as well as the growth of personality theory and social theory.

- Freudian Theory began to feed with this point of view in 1926. The early contributors of to this theory were Marion Ken Worthy, Betsely Libby, Hamilton Gordon, Bertha Reynolds, Charlotte Towle, Florenceday and others.
Psycho-social approach has drawn from many sources.

- From practice
- Ideas from Gestalt psychology
- Contributions of psychoanalysis
- Social Sciences influences.
- Cultural anthropology:
Characteristics of Psycho Social Approach

- This approach is an open system of thought, which constantly changes.

- It grows as new data become available and as new proposition concepts, hypothesis, and theories emerge.
Objectives of Psycho Social Case Work

- To alleviate the clients distress and decreasing the mal – functioning in the person situation systems.
- To enhance the clients comfort, satisfaction and self realization.
- This may enhance the adoptive skills of client’s ego and the functioning of the person – situation system.
- Change may be needed in either the person or his situation or in both. I.e. In what aspects a person and (or) his situation need changes or improvement.
- Attentions to both inter personal system (parent – child husband wise, family and the personality system (Id, Ego, and Super Ego).
Stages of the approach

PHASE I

Arriving at an understanding with the client of why the contact is taking place

Establishing a relationship with the client which will enable him to use the workers help.

Encourage the client in treatment.

Beginning the treatment from the initial phase itself.

Gathering information needed for the psycho-social diagnosis and the guidance in treatment.
PHASE - II ASSESSMENT OF THE CLIENT (IN HIS SITUATION)

- This phase is otherwise known as diagnostic period helpful to assess the strength as well as the weakness of the client.

What is diagnosis? (It is a guide to treatment)

- According to Webster: Diagnosis means recognizing disease from its symptoms.

- It is a scientific determination critical scrutiny or its resulting judgment.

- In Case Work – Diagnosis means: Critical scrutiny of client, his situation and his trouble, which help is needed for the purpose of understanding the nature of the difficulty with more detail and accuracy.
PHASE – III  TREATMENT

- According to Hamilton Garden “Treatment as a “furnishing a Service” or Behaviour towards some one”. Its nature and intensity depends upon both the clients might involve meeting deficiencies with social resources, programs modification or resource adjustment as well as counselling or therapy.

- Treatment is a starting point “Means by which change is brought about and the ways in which diagnosis guides the worker [in his choice]. The treatment is directed to bring about a change. In treatment process communication plays vital role—ie client – worker, client – collateral, client – client and worker – collateral.

- Treatment begins in first interview itself. (i.e. non – specific treatment is involved even in the first interview). The worker usually assess some form of sentiments and an opportunity for ventilation which is of potential therapeutic value. He encourages the client to reflect up on his situation and himself in order to understand the situation or himself or both.
PHASE – IV TARGET

- This approach is widely used in family settings, medical settings, psychiatric settings, schools, and other child welfare settings.
- This approach is adopted to solve the environmental problems and the problems of interpersonal nature. This approach is widely used in clinical settings as well as in social settings.
- This approach depends upon the motivation of clients and the voluntary nature of treatment relationship.
- Hence, adoptions are therefore necessary -
  - Where motivation is low or non-existent.
  - With those with severe character disorders
  - Alcoholics
  - Drug addicts
  - Delinquents and
  - Mental patients, who are ill, seriously regressed.
FUNCTIONAL APPROACH

ORIGIN:
- This approach was developed by faculty members of school of social work of the university of Pennsylvania in the 1930s. Bertha Reynolds’ contributed more on developing the functional approach.

PRINCIPLE OF FUNCTIONAL CASE WORK
A/C to Ruth. E. Smalley
- Diagnosis : Understanding the problem (Analyze or Assessment)
- Use of time phase:
- The use of agency functions use of agency policy & procedures – so that the client may know what he is dealing
- Use of relationship
PHASES OF FUNCTIONAL APPROACH

1. Initial phase:
   **Beginning:** (Intake procedures and getting started”)
   - Each new beginning recreates the life fear, the fear of separation, individualization, the fear of not experiencing, etc.
   - It is the worker’s sensitivity to what is involved in particular beginning.
   - What will makes him to reduce the fear, resistance etc.
   - Making the unknown known by being clear about is agency’s, service, and its conditions to avail the service, what can be expected from the agency and what is the requirements and expectations of agency”.
   - “The known is the less fear and more manageable than the unknown”.

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Middles:

- Middles are characterized by the worker taking increased responsibility for his part in the situation and / by a deepening of the relationship involved. The worker must make efforts to deeper the relationship, and make it possible to gain a new sense of accomplishment and power through bring something to conclusion.

Endings:

- Endings have their own feelings and quality. Ending may be resisted and feared. Clients may resist and postpone endings even after the relationship has lost its meaning or is to be terminated under the conditions of agency service.
- Ending are inevitable for every beginning there is an ending.
II. Assessment Phase (of the client in his situation) or diagnosis

- For effective (social work service) service there is a need for understanding of the total situation, understanding of the individual, group or community – change with course of using the service offered.
- *i.e. understanding about:*
  - The value of the particular problem (or any problem)
  - Understanding the particular kind of individual
  - Characterization of an (or any kind of) individual
  - Needs of an individual at various points in the life process.
  - Various ways of dealing with stress
• The nature of various degrees of mental retardation.
• Common physical, psychological and social illness
• In understanding of socio economic and cultural differences and how such differences affect the individual’s life.
• An understanding of the various patterns of individual life expression in a particular gestalt or balance of will, emotion, and impulse.
• The case worker is responsible for encasement his knowledge through independent or formal study of the individual to whom the works is currently offering services.
• Some of is understanding will derive from various regards and reports available with him or with the agency or institutions.
III HELPING PROCESS (Treatment)

- Functional approach uses the term helping process rather than Treatment because it accurately expresses the concept that the centre for changes resides in the client, with the worker facilitating what the client can do rather than the worker is responsible for treating.

- STEPS IN TREATMENT:
  - Use of time
  - Understanding the individual
  - Use of agency function
  - Use of structure
  - Principles of process

- TARGET:
  - The functional approach is applicable to all fields of practice for social work and to all the social work methods both primary (case work, group work, community organization) we deals with client or client system directly and secondary (supervision, Administration, Research and education for social work)
CRISIS INTERVENTION THEORY

- Crises can be defined as “an upset in a steady State”.

- Intervention:

- It is a specific action by a worker in relation to human systems or process in order to induce change. The action is guided by knowledge, and professional values as well as by skilfulness of the worker (Luise C. Johnson)

- Conscious interference of the worker into the client’s affairs in order to move the client/group towards its goal or to introduce clarification, enlighten or a change in direction.

- It is a procedural activity directed towards the inducement of changing personality and social system. Essentially the interventions are purposeful, goal oriented and situational. They may change structural, cultural and functional pattern of individual.
Goals of Intervention:

- The goal is the restoration of Social Functioning and enhancement of Coping Capacity

Characteristic of crisis theory:

- This theory is useful in dealing with individuals and families in situation of urgency and stress.
- It is useful to both clinical and primary prevention strategy in mental health
- Played vital role in behavioural and personality change
- It is eclectic in nature

Factors responsible for the state of Crisis:

- One or series of hazards events which leads to some threats
- In ability to respond with adequate coping mechanism
- Threat to current and past events
Assessment of the client in situation (Diagnosis)

- Assessing the clients --
- A way of diagnosing acute situational stress,
- A way of classifying hazardous events & people reaction to them.
- The understanding the process of personality functioning - i.e. How ego processes function in transaction with the external and internal state.
- Appraisal of basic personality structure and identification of basic defenses as well as habitual adaptive patterns is relevant and important in crisis intervention.
- Ability to understand the personality structure of the client.
- Systematic investigations of clients history (vertical & horizontal) – i.e. scanning of development emotional, and social functioning, manifestation of psycho pathology etc.
- Knowledge on how people behave and try to cope in crisis situation etc.
Treatment Principles & Methods
- Relief of symptoms.
- Restoration to the optimal level of functioning
- Understanding the relevant precipitating events
- Identification of remediable measures.

Intervention Strategies:
- Increasing or developing new desired behaviour
- Decreasing undesired behaviours
- Changing Cognitive Patterns

Behaviour Modification:
- Increasing or developing new desired behaviour
- Procedure for increased Desired Behaviour
Positive Reinforcement:
  Shaping
  Covert Reinforcement

Negative Reinforcement:
  Coaching or Promoting
  Fading (Vanishing)
  Role Playing:- [Behaviour Rehearsal]
Procedure for Decreasing Undesired Behaviour:

a). Negative Practice
b). Positive Punishment
c). Negative Punishment
e) Extinction (destruction)
f). Systematic Decentralization
g). Substitution of sexual for anxiety response
h). Aversive counter conditioning
i). Covert sensitization
j). Contact desensitization
k). Thought stopping
Complex Procedure:

a). Differential reinforcement:
b). Discrimination Training:
c). Assertive Training:
d). Modelling

Indirect or Environmental Modification:-

- It includes human environment of the client both taking in what he needs, and can use and what he must interest of his growth.
BEHAVIOUR MODIFICATION
(MODIFICATION/ALTERING OF BEHAVIOUR)

- Behaviour:
- Any activity of the individual is called behaviour.
- The way in which the some one behaves is called behaviour.
- Response (behaviour) to the stimulus (motivation) is the behaviour.
- **Behaviour** refers to thinking, feeling (emotion), talking and doing.
- **Thinking** is covert (hidden), because they are not visible.
TYPES OF BEHAVIOUR

- **Observable Behaviour:** Any behaviour that can be observable.
  Eg. Screaming (loud, noise), stuttering, lecturing, laughing, Aggression, Self Injury, Destructiveness, Over activity, etc.

- **Measurable Behaviour:** Behaviour that cannot be visible but measurable only.
  Fear, depression, anxiety, sexual disorder, Ego impairment, damage self-image (personality, character, self esteem), hostilely (bitter), etc.

- **Desirable behaviour:** The behaviour is acceptable or tolerable by others

- **Undesirable behaviour:** Behaviour, which seriously interfere with normal life of a person or with whom he or she lives or works.
How to identify Behaviour Disorder

Observable Behaviour/ Events:

- Any behaviour that can be observable. eg. aggression, self injury, destructiveness, over activity, etc

Un-observable Behaviour/ Events:

- Through measurement
- Eg. Fear, depression, anxiety, sexual disorder, Ego impairment, damage self-image (personality, character, self esteem), hostilely (bitter), etc.
How can we Determine Undesirable behaviour?

- Behaviour which seriously interfere (obstruct) with normal life of the person or with whom he/she lives or work

What is Behaviour Modification?

It is a form of Intervention.

- Modification means - Change, Adjustment, Adoption or Altering of Behaviour
- This technique is used for elimination of undesired behaviour and successful when adaptive behaviour is taught at the same time
Method of Changing/ Altering Behaviour

Principle of Classical Conditioning (Pavlov)
Principle of Operant Conditioning (Skinner)
Principle of Trial & Error (Thorndike)
These are called Behaviour theories or Stimulus-Response

Gestalt theory – by Kohler (Learning by Insight)
Social Learning by Bandura (Socialisation-Experience)
These Two theories are called Cognitive Theories Or Field Theories
I. Principle of Classical Conditioning (Pavlov)

Classical means: In an established manner or Traditional, Usual, Standard, etc

Conditioning means
  A type of Training or Learning or
  Modification of behaviour by learning;
  That is modification (change) of behaviour by learning

Conditioning is the process by which behaviour is learned.

Learning means change in behaviour that occurs as a result of practice or experience.
Thus, Classical Conditioning means:

Learning (conditioning) in an established manner or

Modification of behaviour in an established manner or

Change of behaviour in an established manner.

(i.e. wants to develop a desired response to shape the behaviour)
What is the basis for learning?

- The basis for the learning is **Motivation**
- Eg. Dog - Bell - Food
- The training (hearing of bell sound and seeing of food) enable the dog to salivate whenever the sound was produced. This response (saliva) that has been learned (by this dog) is called conditioned response.
Conditioning is the process by which behaviour is learned.

When a response (reply/answer) to a stimulus (motivation/impulse) has been learned, the person’s behaviour has been modified.

Many behaviour are unconditioned. They happen naturally.

An unconditioned stimulus produces as unconditioned response.

Eg.
1. People’s eyes water in a high wind
2. They salivate when given food
3. They withdraw their hands sharply when burned
Counter (oppose) conditioning seeks to associate desirable response with particular stimuli in opposition with undesired response.

According to Pavlov ‘Motivation’ (Reward) is the basis for learning (Change/Modification of behaviour)

That is Reward (Motivation) is given before the work is over
Techniques used in classical conditioning

1. Systematic desensitisation:
   - The most commonly used counter conditioning techniques is systematic desensitisation.
     - Eg. This is often used with Agoraphobic (fear of public place) or School phobic

ii. Assertiveness (boldness) training:
   - This Technique is used where people are unconfident.
   - Counter conditioning has been used in various forms of sexual therapy:
     - Another example is:
   - Conditioning children who are “enuretic” (enuresis - The involuntary discharge of urine)
There is loud buzzer/bell connected to an electrical contact placed with in soft mates under the child. The bell sounds when some urine makes contact with the mates and the child wakes up and can complete urine in a toilet.

This process has two effects:

1. the child is conditioned to wake when the bladder is full. So avoid bed-wetting.

2. The tone of the bladder muscle is improved; strengthen the capacity to get through the night without wetting.

These responses are set up as form of counter conditioning to the natural process.
II. Principle of Operant Conditioning
B.F. Skinner

- Operant means operate on the environment i.e. Self
- Conditioned means modification of behaviour by learning.
- Operant Conditioning means Self-learning or programmed learning or instrumental learning.
- That is modification of behaviour through self-learning.
- The technique of operant conditioning can be used to shape the human behaviour. That is helped to modify the behaviour
A/c to Skinner, human behaviour is primarily the result of self-learning (operant conditioning). Some of our beliefs, customs and goals may be learned through this technique.

The term operant conditioning was coined by skinner to indicate, “when a response operates on environment, it may produce change”.
Skinner’s experiment with rat

Initiating Stimuli  Bar Press  Food
Response  Reinforcing stimuli (Reward)

According to this theory:
Nothing is taught, everything is learned.

A/C to Skinner, any reward is given only after the work is over.
Learning (change of behaviour) can be controlled by REWARDS and PUNISHMENT.

Rewards

Intrinsic Rewards - comes from within
Extrinsic Rewards - comes from outside

Intrinsic Rewards –

Eg. 1.
A boy who assembles a radio in order to communicate with his friends – drives a satisfaction when he completes the instruments and fined it works.

Eg.2. A child wants to learn to ride a bicycle.
Here motivations are intrinsically motivated by pleasure derived from learning new skills.
Extrinsic Rewards

Eg. 1
- Mother promise to buy her child a walk man if she cleans the house

Eg. 2
- Fear of being ridiculed by his peer groups if a child fails to ride a bicycle - may also be a motivation
- These are extrinsic motivation (rewards)
Punishment

- Let us focus on learning (modification of behaviour) can be controlled by **Punishment**
- Govt. exercise social control by levying fine or sanction of imprisonment.
- Eg. Violation of Traffic rules.
- **Note**- Punishment often less effective than the reward, because it temporarily suppresses a response.
Advantages:
1. Punishment can effectively eliminate an undesired behaviour if alternative desired behaviour is available.
   Eg. A child may be punished for watching T.V. but praised for reading books.
2. Punishment can be quite effective, when the organism responds to a signal to avoid Punishment.
3. Punishment may be informative  Eg. Electric shock.

Disadvantages of Punishment
1. Punishment may result in altering the behaviour but consequences can not be predicted.
2. Punishment induces fear and anxiety among the individual leads to fix the behaviour instead of eliminating the behaviour
3. Punishment may leads develop a dislike of the situation where the punishment occurred.
The most effective use of punishment is the informative one, so that the child will know what is allowed and what is not allowed.

When children test the patience, it is best to use discipline firmly but not harshly. Discipline should be used promptly and consciously.

Nagging consciously may be more brutal than immediately spanking.

A child who is threatened with vague and postponed punishment may be affected more severely than a child who is punished but afterwards pardoned and accepted.
3. Principle of Trial & Error (Thorndike)

- A/C to this theory If a behaviour is followed by something **pleasant**, most likely, the behaviour will be **repeated**.
- If a behaviour is followed by something **unpleasant**, the behaviour will not be **repeated**.
- (Eg. In Thorndike experiment, the cat tries many kinds of **response** like Hitting, Dashing, Biting, etc., before opening the box the first time. **After a few trials** the cat learn to open the box (escape from the box) and able to eat the food.)
Conditioned by repeated trials-Reinforcement

Techniques of Reinforcement: (both classical, Operant and Trial & Error)

Reinforcement: means strengthening the response of the individual

There are two types of reinforcement

Positive Reinforcement

Negative Reinforcement
• **Positive Reinforcement**: A procedure to increase the desired behaviour by presenting a reinforcing stimulus on performance of the response. Unwanted behaviour may well be positively reinforced.

• The reinforce may be any object, verbal approval, any other stimulus, etc.

• **Negative reinforcement** –

• The word Negative indicates the removal or reduction of the effect of the stimulus.

• Eg. Quarrel with Spouse/ superiors
**Shaping:** means reinforcing small steps towards the desired behaviour.

E.g. Mr. “A” is seven year old boy never learned appropriate communication skills – the counsellor would price him give a piece of price, encourage him at each and every time he spokes correctly.

Here desired behavior is developed by sequentially reinforcing successively closer approximation, to the terminal goal behavior.

**Fading (Vanishing):** means seeing where the behaviour is used in another situation in which the behaviour is to be used.

E.g. The idea for Mr. X to enter in to the community after his 5 years stay in the psychiatric hospital.
Modelling: means demonstrating the behaviour

Coaching or prompting: means advising the client about appropriate behaviour.

Physical guidance: moving the client’s body in the way required. Eg. Piano teacher positions a student’s body and hand correctly.

Once behaviour is established, reinforcement may be withdrawn.

Punishment: Procedure applied to suppress or decrease the undesirable behaviour.

Positive punishment: When unpleasant consequences follow, are immediately related to and reduce behaviour. This is called positive punishment.

Negative punishment is the removal of a pleasant part of someone’s life unless they perform behaviour.

Eg. Permission to eat ice cream is denied to a children whenever they refuse to do their homework from school.
In summary,

- Reinforcement, whether positive or negative, strengthens behaviour.

- Punishment, whether positive or negative, reduces the behaviour.

- Positive always means doing some thing,

- Negative always means taking something away. Both can be used together.
4. Gestalt Theory-Learning By Insights (Kohler)

- It is German Gestalt means - Shape, Whole, Form, Configuration- Total Phenomena or Total Events.
- Gestalt means Insight. Insight means making meaningful connections between two things. That is Learning by Insight.

According to this theory,

- ‘Behaviour can be studied in parts but viewed as a whole’.
- According to Kohler Insightful Learning is meaningful learning.
- In learning by Insight, the correct solution not only appears suddenly but also it appears repeatedly on subsequent presentation of the problem.
- Once the problem is solved, the problem is no longer a problem.
5. Principles of Social Learning (Bandura)

- **Social means** man-to-man relation – through socialization
- **Learning** means change in behaviour (Education helps to change of behaviour)
- **Social role** – Any role you do related to others
- That is **modification of behaviour through experience** i.e. through **socialization process** or through **man-to-man relation**.
- That is **modification of behaviour through experience** i.e. through socialization process or through man-to-man relation.
- Most learning is gained by people’s perception and thinking about what they experience. They learn by copying the example of others around them through modeling/model.
Recording in Case Work

Record

- Record – Documents, Register - to note down the work or events
- Recording: The act of one who records or registering.

- In Case Work Recording means documents related to client and his history with reference to treatment, etc.

- In the simplest terms, records are documents (Gelman, 1992; Streat, 1987). Records ensure that clients receive adequate and appropriate services, assure case continuity, and provide a means for administrative monitoring.

- Records are tools for diagnosis, assessment, treatment planning, ongoing monitoring of services to clients, and, in some states, are considered legal documents (National Association of Social Workers [NASW], 1991).
Sources of Records

- Intake Sheet – details about the client’s address, personal data (demographic data), Referral by whom, reasons for referral, Family background, etc.

- Social Workers Diary - containing details on home visits, collateral contacts, Interview with clients, etc.
Types of Records:

1. Case Record:
   Information about the client situation and service transaction that is documented by the social workers during the intervention process and retained by the agency or in the case work file.
   The purpose case record is to co-ordinate, communicate, set goals and remember intervention strategies.

2. Person Oriented Records (POP)
   A format used by the social workers and some agencies to keep specific, accountable and goal directed records of the intervention process with each client. An adaptation of the physician’s problem oriented record (POP) the person oriented record contains an initial data base, treatment plan, assessment, progress notes and progress review.
3. Problem Oriented Record (POR)

- A format used by social workers, physicians, nurses etc. to develop and maintain efficient case records. It was developed by Lawrence Weed, originally as medical record and it has been applied in multidisciplinary conducts and adopted for the needs of many different professions. This record contains four component:
  - The data base (Face sheet information, Presenting problem, relevant demographic, cultural and medical data, mailing list and so on).
  - The problem list (each problem has a number so that when it is resolved it is convenient to see and check of).
  - The plan (different possible steps to take in resolving each of the numbered problems).
  - The follow up actions (what has actually done to implement the plan)
The POR is highly focused on specific problems and their progress and resolution and thus makes the case worker more easily accountable than do less focused chorological summaries.

3. Diagnostic Record
   - It means stating the analysis of the problem
   - II. Narrative – describe the events, orderly account of events.
   - III. Summative/ Summary Record: - cumulative, Comprehensive report of the client
Principles of Recording:

- **Secrecy**: Content of record should be a confidential matter
- **Objectivity**: Without any bias and prejudices, accuracy, simplicity, brevity (brief) should be the guiding factors for in preparing, records.
- **Simple language** and style- while writing records
- **Appreciations** should be avoided
- **Summary** is a good device for organising and analyzing facts.
- **Reaction of the clients** should be recorded- like emotions, anger, happiness, irritability, etc should be recorded
Use/purpose/importance of Records:

- By maintaining records a worker can improve his professional Skills and Techniques.
- Records can be useful to learn by his own errors and thus make his help more effective and systematic.
- Records not only help a worker to evaluate his own work, but he can also improve up on his own methods.
- Records can create interest, not only among the workers but also the clients and help in building-worker client relationship.
- Records more supervision and teaching easier and effective.
- Records can be used for social work Research and Planning.
- Through records a worker can show his agency what he has done.
- Records also useful for future references (in order to refer future work).
- Records help in providing services in a systematic basis.
- 10. Records help to provide information of the client.
- Records help to provide information on the rate point.
- Records help to provide evidence of non-progress.
- Records help to mold or shape the intervention programme.
- Records help to determine whether the programme has moved too quickly or whether the client has requisite skills in his repertoire (stock, collection) for behaviour change.
- Records help to determine whether it might be necessary to move back to an earlier stage of intervention.
To evaluate the factors impeding (hamper, delay) the effectiveness of the mediator.

To determine to extend to which the progress has been mobilised (which could lead make decisions to make changes in the techniques).

To determine when the termination goal has been reached.

To assess the efficiency of the programme.

To assess the effectiveness of the programme.
Maintenance/ Qualities of Case Work Records

- Should be reasonable
- Should have clarity, accuracy and objectivity
- Standardization and Uniformity should be maintained
References

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