Children participation in the case management process

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Abstract. In 1989 The provision of Article 12 of the United Nations Convention on the Rights of the Child defined the child’s right to participate - to express his/her opinion and to participate in solving issues related and affecting him/her. In Lithuania, the abundance of legal acts enforces the child’s right to participate, but in practice it is observed that the implementation of the child’s right to participate is not sufficiently ensured. The case management process, as a way of helping the child and/or his/her family, came into force in Lithuania in 2018, but the implementation of the child’s right to participate in the context of the case management process is poorly analyzed in the scientific literature. Scientists from Lithuania and abroad advocate the importance of involving the child in the decision-making process, since this is how their most important skills are formed and their ability to cope with stress increases. The data of the implemented qualitative research revealed twofold approach of case management professionals to the participation of the child and becoming him/her a participant of the case management process. The abundance of professionals’ experience reflects the absence of a common practice that enables the child to participate.

1 Introduction

Case management as a new model started in Lithuania in 2018 after essential changes in the Law of the Republic of Lithuania on the Fundamentals of the Protection of the Rights of Child. The leading procedural document Description of the case management procedure came into force as well. According to Lithuanian legal documents case management is the organization and provision of comprehensive social support to the child and his/her representatives, coordinated by the case manager, in order to help them overcome social difficulties, the successful resolution of which would prevent possible violations of the child’s rights.

In order to implement the case management process effectively, it is important to ensure that the child participates in it actively. The child’s right to participate is enshrined in the United Nations Convention on the Rights of the Child (1989) [1] Article 12 of which guarantees the right of the child to have a voice in all matters affecting him/her, and adds that children must be given the opportunity to participate in decisions that directly affect their future. However, the Report of the Ombudsman for the Protection of the Rights of the Child [2] notes that the proper implementation of the child’s right to participate is still not ensured in the practice of professionals. Children are not given the opportunity to express...
their opinion and participate in decision-making, or the implementation of this right has been viewed in a formalistic manner, whereby the necessary attention has not been paid to the content and proper implementation of this right. The Reports of the Ombudsman for the Protection of the Rights of the Child [2] point out that it is important to adequately guarantee the realization of children’s rights, as acting against the interests of them increases the risk of failing to develop key skills, resilience to negative environmental factors, and resilience to their future social and economic development.

Children themselves are very unlikely to seek help from adults because of their harmful experiences [3]. Children’s low participation is linked to fear of possible consequences [4], a lack of professional competence in relation to children’s communication patterns [5], shame, lack of confidence or lack of opportunities to express themselves in a way that is appropriate to their age and capabilities [6]. According to Murray [7], in order to communicate, recognize and understand the child’s needs, it is necessary for the adults to establish a reciprocal, reflective and inter-subjective relationship with the child, applying the principles of sensitivity, emotional intelligence, motivation, listening, pedagogy and the ethics of care. According to Žukauskienė [8], this is especially true in early adolescence, the most sensitive period of adolescence, when biological changes are rapid, stress is relatively high and coping skills are relatively low.

The reform of the Lithuanian child rights protection system and the implementation of the case management process started in 2018, but there is a lack of research on case management and no research about the experiences of case managers and other professionals and about the methods used for the effective involvement of the child in the case management process. The aim of the paper is to analyze the experiences of professionals in ensuring child’s participation in the case management process.

2 Concept and principles of case management

There is not a definition of case management showing the complexity of the processes. Theoretically case management could be defined as an approach to service delivery that attempts to ensure that clients with complex, multiple problems receive all the services they need in a timely and appropriate fashion. Case management is a collaborative process which assesses, plans, implements, co-ordinates, monitors and evaluates the options and services required to meet an individual’s health, social care, educational, employment needs and other needs, using communication and available resources to promote quality cost effective outcomes [9]. Despite various definitions of case management, there are key aspects that would define case management as such. First of all, it is applied only in the case when a person has a complex problem, which could not be solved by one organization or one service system, therefore inter-institutional cooperation is needed and very often case management means not only coordination of various services but also development of new ones. Case management is a person centered approach and emphasizes importance of person’s involvement in the process.

Harkey [9] specifies that throughout the case management process, case managers act in accordance with the interests, wishes, needs, and values of the individual. In addition to monitoring the implementation of the plan, case managers are also responsible for providing support to service users. They are also responsible for providing advice to agencies and professionals organizing and delivering the services in order to assess and understand the possibilities for support, to identify what would be the best for meeting client’s needs, and to ensure that the interests and expectations of the client are met.

According to Vasiliauskiene and Kavaliauskienė [10] the case manager is an intermediary between the family experiencing difficulties and the institutions providing services. The activity of the case manager is to bring together professionals who can
provide relevant support to the family and coordinate the process of services, empowering families, identifying and utilizing the available resources, identifying the risk factors faced by the family and the child.

The case management approach is based on an individual approach to the client and the holistic approach to the situation. Throughout the case management process, once the support plan has been drawn up, the case manager remains responsible for monitoring the inclusion of additional services or organizations in the case management process, considering the individual situation of the client. According to Raipaa and Cepuraitė [11], the case manager’s duty is to provide clients with all the information about the services available in the community, their nature and to ensure the availability of these services. Considering the client’s needs and the nature of the situation, the case manager helps the person to decide which services would help to improve the situation in both personal and family life, and in the course of the process - in cooperation with social partners and service providers - monitors the impact of one or another service on the client’s life, and, if necessary, makes suggestions on the availability of additional services.

Vasiliauskienė and Kavaliauskienė [10] note that it is not appropriate to apply the method or model to all social work clients, as each situation is unique. Therefore, the case management process, although consistent, gives freedom to the case manager and his/her team to develop the family support network in a multifaceted but client-centred way. It is important to note that what has helped in identical situation in the past may not necessarily be the same for another person facing a similar problem, so it is important for the professionals every time to approach the client and the situation individual.

3 The legal regulation of the case management process

At the end of 2017, the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour informed the public about the changes in the restructuring of the Lithuanian child rights protection system planned for July 2018. The presented project reflected the separation of legal and social protection of children’s rights and the beginnings of the case management implementation in Lithuania. The two areas covered were legal protection of children’s rights, implemented by the State Child Rights Protection and Adoption Service, its central and territorial units, and social protection of children’s rights, implemented by municipal administration and subordinate structural units, state agencies, municipal institutions and non-governmental organizations. The latter include the organizations of prevention (services, programmes, etc.), the supervision of the care process and the training of foster carers, and post-intervention (dealing with the consequences) [12].

Law of the Republic of Lithuania on the Fundamentals of the Protection of the Rights of Child [13] notes that the support to the child and the family must be focused on the provision of complex services for the child and his/her family. A case manager may be appointed for children experiencing social difficulties, children with special needs or children in breach of the law, as well as for children who are guaranteed the support of an inter-institutional cooperation coordinator under the Law on Education of the Republic of Lithuania [14]. It should be noted that support initiated for the child could also be provided to the child’s parents and/or other legal representatives.

The case management process and the appointment of a case manager for a child and/or family is initiated by the State Office for Protection of Child Rights and Adoption in case of substantiated information about a possible violation of the rights of the child and in case of necessity to assess the need for support to the child and/or family and/or in case of a need for child protection. However, the case management process may be initiated not only at the request of the State Office for Protection of Children’s Rights and Adoption, but also at the
request of the child’s parents or at the request of institutions and organizations which provide services to children and/or families, in accordance with the description of the Case Management Procedure [15]. A case manager could also be appointed in the context of the minimum and medium supervision measure. The Law of the Republic of Lithuania on Minimum and Medium Supervision of the Child [16] states that the implementation of the minimum supervision measures imposed on the child shall start with the appointment of a case manager by the head of the coordinating institution, after receiving a decision from the Director of Administration. The description of the procedure for coordinated educational support, social and health care services also mentions the activities and functions of the case manager in organizing the provision of coordinated educational support, social and health care services to the child [17].

4 Legal framework for the child’s right of participation

The right of the child to be heard and to have his/her views considered is one of the core values of the United Nations Convention on the Rights of the Child (1989) [1], which defines the legal and social status of the child. According to the Ombudsman for the Protection of the Rights of the Child [2], the State must guarantee the child’s right to be heard directly or adopt or amend laws in such a way as to enable the child to exercise this right fully: to ensure that the child receives all the necessary information and advice to enable him/her to make a decision that is in his/her best interests. Article 12(1) of the United Nations Convention on the Rights of the Child [1] ensures the right of the child, who is capable of express his/her own views, to express them freely on all matters affecting him/her, e.g. right of participation. The child must be given the opportunity to be heard in any judicial or administrative proceedings concerning him/her either directly or through a representative or other appropriate body, in accordance with the procedures laid down by national law.

The right of the child to express his/her views is also defined in the Civil Code of the Republic of Lithuania [18]. Article 3.164 of the Code defines the participation of the minor child in the safeguarding of his/her rights. The article provides for the child to be heard when a matter concerning him/her is being decided. The child who is capable of expressing his/her own views must be heard directly, or, if the opposite is the case, through a representative, and his/her wishes must be taken into account, provided that they are not contrary to his or her best interests. The child’s right to express his or her views is also regulated by Article 4(4) of Law of the Republic of Lithuania on the Fundamentals of the Protection of the Rights of Child [13]. It stipulates that a child who is capable of forming his/her own views must be listened to if this is not contrary to his/her interests and his/her views must be taken into account.

Article 4 of the Law on Minimum and Average Supervision of the Child of the Republic of Lithuania [16] states that one of the principles of minimum and average supervision of the child is the participation of the child in decisions concerning the child. The right of participation of the child is also regulated in Chapter 3, point 17 of the Case Management Procedure [15]. It states that case management meetings must be organized in a way that ensures the child’s right to participate: the child must be able to participate in the case management meetings if he/she so wishes, unless this is contrary to the child’s interests.

From the analysis of the Lithuanian legislative framework covering the right of participation of the child in matters concerning and affecting him/her, it can be noted that the legislation of the Republic of Lithuania reflects the provision of the United Nations Convention on the Rights of the Child (1989) [1], and legally enforces the ensuring the child’s right of participation.
5 Challenges in the implementation of the child’s right of participation

In the Report of the Ombudsman for the Protection of the Rights of the Child [2] it is noted that in practice the child’s right to participate is still not properly implemented. During the reporting period (2020), the Ombudsman observed that in different situations where children were not given the opportunity to express their views and participate in decision-making or the implementation of this right has been treated formally, without the necessary attention to its content and proper implementation.

When discussing the implementation of the child’s right of participation, Stripeikienė [19] points out that only respect for the rights of the child, greater attention to and consideration of the child’s opinion, provides more opportunities to take decisions that are in the best interests of the child. Murray’s [20] research discusses the reasons why it is important to hear the voice of the child and what lies behind not listening to the child’s voice. The author observes that ignoring the child’s opinion implies that he/she is not seen as a full member of the family, as a part of society, and teaches the child to be undemocratic. He emphasizes that disregarding the child’s opinion excludes the child from the opportunity to be recognized and valued, inhibits the child’s well-being, sense of identity and development, and reduces motivation for learning, independence, and self-regulation. Collins [21] notes that children’s participation is a significant challenge for practitioners for a variety of reasons, including discrimination based on the child’s age, rejection and avoidance of opportunities to talk to the child, and a lack of motivation to encourage participation. Child involvement and the realization of children’s rights are reflected at the theoretical level rather than in practice.

6 Experience of professionals in ensuring child’s participation during case management process

6.1 Research methodology

According to Žydžiūnaitė and Sabaliauskas [22], qualitative research helps to gain insight into how various social processes work, to understand how people turn their traits and habits into behaviour, decisions, and performance, which can be observed at various levels, to find out deeper meanings of experience. Therefore, the qualitative research methodology was chosen for the investigating professionals’ experience in ensuring the child’s right to participation.

Non-probability criterion sampling was used for recruitment of research participants. They were selected on the basis of the following two predefined criteria: case managers, social workers and other professionals of the territorial department of child rights protection who are involved in the process of case management and shall have at least two years of experience in the case management. The sample consisted of 15 professionals.

Semi-structured interview was chosen for data collection. According to Gaižauskaitė and Valavičienė [23], it allows collecting in-depth, contextualized, open answers from the research participants, expressing their opinions, feelings, and experience. According to Bitinas, Rupšienė and Žydžiūnaitė [24], the advantage of a semi-structured interview is that it allows the researcher to understand better the problem under investigation, to discover unforeseen aspects of the problem under study. Traditional qualitative content data analysis was used for data analysis by carefully reading collected data, reducing it, coding, forming subcategories, and categories [23].
The main principles of qualitative research ethic were followed. Depersonalized data is presented in the article.

6.2 Professionals’ experience in involvement a child in the case management process

The analysis of the collected data revealed eight subcategories about professionals’ experience towards the involvement and participation of the child in the case management process (see Table 1).

<table>
<thead>
<tr>
<th>Category</th>
<th>Subcategory</th>
<th>Illustrative quotation</th>
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<tbody>
<tr>
<td>Professionals’ experience towards the involvement of a child</td>
<td>Involving depends on the situation</td>
<td>“[...] you have to look at the totality of the circumstances, how much and where to involve the child. If he is involved, then he must answer [...]” (I8)</td>
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<td>in the case management process</td>
<td>Seeking opportunities for child participation</td>
<td>“If the child is not well-spoken or is afraid of other people, again we look [...] how to help the child socialise.” (I7); “[...] if there is an important question, you have to invite him, you have to listen to him, but then you have to ask him if he wants to sit with adults.” (I14); “The hardest job is to agree with them that they need services. [...] bribes with some things [...] don’t do anything for themselves, especially teenagers. It’s important to hear what that child’s needs are.” (I15)</td>
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<td></td>
<td>Making a compromise</td>
<td>“[...] we had a girl [...] she would refuse to participate, she wouldn’t come. It is important to listen to the child, but how are we going to listen to the child under duress? “[...] you have to step back. The pressure is there, everybody says: we have to listen to the child’s opinion [...] the rights of the child have to be called in. The case management has to make the meeting so that the child hears. We want to do our own thing, but how does the child feel?” (I1)</td>
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<td></td>
<td>Asking others help in making relations</td>
<td>“I go carefully through schools with social pedagogues, through specialists [...] through some groups that have a close relationship with the child.” (I13)</td>
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<td></td>
<td>A child does not need to know everything</td>
<td>“[...] maybe that child doesn’t really need to know all that much. We emphasise the legal aspects, the relationships [...] where the parents don’t see maybe, they don’t do it the right way [...], the child doesn’t need to hear it.” (I7)</td>
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<td></td>
<td>Taking into account the child’s age, health</td>
<td>“I think it all depends on age and maturity [...]. They can certainly say what they think, but you can’t blindly trust them either, because you have to look at the whole situation.” (I9)</td>
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<td></td>
<td>Being in the child’s environment</td>
<td>“[...] where there are problems with adolescents [...] I myself seek contact with them, I go to these institutions and I seek not through the parents, but pure contact with the child, to try to involve them, to try to influence them in some way.” (I12)</td>
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<td></td>
<td>Suggesting the help for a child</td>
<td>“You see, maybe they don’t tell you what kind of help you need. [...] you see that maybe he needs something [...] employment, psychological help. Then you offer it.” (I2)</td>
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</table>
A dual approach to child participation has emerged. Some professionals have a positive view, saying: looking for opportunities for the child to participate; using help from others to establish relation; seeking compromise; the professional needs to be in the child’s environment; and children are offered support. The participants in the study try to facilitate the participation of the child in the case management process, use support and try to listen to the child and consider his/her preferences. Other professionals indicate that in their practice the participation depends on the situation in the family. The child does not need to participate in order to protect the authority of the parents. The participation takes into account the child’s age, health, which suggests that some professionals avoid the responsibility to ensure child’s right of participation in the case management process, preferring to work with the child’s legal representatives if the situation in the family is not the child’s fault. If the case management process was started because of a child, professionals tend to involve him/her in the case management process.

### 6.3 Becoming a participant in the case management process

The analysis of the collected data revealed seven subcategories about how a child becomes a participant in the case management process (see Table 2).

<table>
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<th>Category</th>
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<th>Illustrative quotation</th>
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<tbody>
<tr>
<td>Becoming a participant in the case management process</td>
<td>Uncertainty if a child needs to participate</td>
<td>“[..] nobody wants to communicate with five different specialists [...] the child communicates with the VTAS, the case manager and the social worker, the psychologist [...] the social pedagogue. [...] I disagree, it is too difficult for a child to tell six people the same thing.” (I15)</td>
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<td></td>
<td>Depends if the situation is directly related to the child’s behaviour</td>
<td>“If proceedings are initiated for violations of the rights of the child, which are specifically related to the child, the consequences of his or her behaviour […], then in such cases he or she is automatically involved.” (I15)</td>
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<td>Trying to form a relation with a child</td>
<td>“[..] there must be access to him so that he is not frightened; and to be able to say boldly how he feels about the situation. Speak up, tell […]” (I2)</td>
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<td>Asking the parents to mediate</td>
<td>“[..] we ask parents to make it possible to meet family members […], to introduce ourselves, to explain to the children […] who we are, that we will visit, that we will interact […]. (I3)</td>
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<td>Refusal of a child to participate in case management process</td>
<td>“[…] is absent because he doesn’t want to be. We come across cases like this where the child refuses any services […], he is often not interested in that period of adolescence […]” (I5)</td>
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<td>Aiming to involve the child through parents/specialists</td>
<td>“[..] the child does not have a strong bond with the parents, the parents are not the authority. It is a major challenge for the social worker to match both children and parents. If there is no communication, it is difficult to expect a positive willingness to get involved.” (I5)</td>
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<td></td>
<td>Organizing support for a child</td>
<td>“Case management, after all, is started for the children. We receive […] a violation from child protection. We react and work on it” (I11)</td>
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</tbody>
</table>
The data revealed the following factors that influence the involvement and participation of a child in the case management process: professionals are not sure whether the child should be involved; consideration is given to whether the situation is directly related to the child’s behaviour; attempts are made to form a relation with the child; parents are asked to facilitate contact with the child; involvement of the child in the case management is sought through the parents/professional; support is organized for the child; the child refuses to take part in case management process.

The results of the research illustrate the different views of the professionals who initiate and organize the case management process regarding the child’s participation in the case management process, which suggests that there is no consensus within the system when it comes to the child’s participation in the case management process. According to Bijleveld [25], even professionals working in the same organization may have different views on what child participation means, as well as what is wanted, or what level of participation is realistic to achieve. She adds that research shows that in practice social workers tend to decide what they think is best for the child first, leaving no room for meaningful influence on children’s preferences. Bijleveld [25] adds that case management practitioners report difficulties in finding out the real needs of children, and a willingness to receive training and concrete tools to listen to the child’s voice and to ensure their right to participation.

7 Discussion and Conclusions

Regarding the child’s right of participation in the decision-making process when the obligations were assigned to the child, it was observed that case management professionals involve children in the decision-making process either directly (by talking during the case management meeting) or indirectly (by discussing it prior to the case management meeting). However, the analysis of the data highlighted the problem of the professionals’ desire to fulfil their own expectations, but not the interests of the family and of the child. The child’s willingness to participate in the case management process is twofold: they do not easily connect with the case management professionals, but they engage in communication when they perceive the case management process as a benefit. Nevertheless, repeated answers suggest that the child finds it difficult to participate in the case management process due to possible stigmatization, feelings of anger and resistance, reluctance to communicate with professionals due to fatigue with the situation and interventions in the family, and perceive participation as self-judgement and punishment.

Professionals may impose obligations on the child without taking his/her views into account and without informing him/her, or may impose an obligation while making him/her understand that the obligation will be imposed in any case. This raises the assumption that professionals are partly prepared to allow children to participate in decision-making processes. When discussing the sharing of power and responsibility between children and adults, the unambiguous conclusion is that the professionals’ answers indicate that power and responsibility are most often shared between adults rather than between adults and children.

The experience of the professionals who initiate and organize the case management process are divided into two positions. Some of the professionals are in favour of listening to children’s opinions, they make efforts to ensure that the child is listened to, they try to involve him/her with the help of other professionals, and they take advantage of the opportunity to be present in the nearer to the child environment. Other professionals are more resistant considering the situation that led to the violation of the child’s rights, the age, and maturity of the child, the state of health, and the need to maintain the authority of the parents over the child.
There is no consensus among case management professionals on the child participation in the case management process. Children are more likely to become active participants in the process if the case management process is initiated as a direct result of their behavioural problems. In this case, professionals’ efforts to organize help meet resistance - children refuse to participate.

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