

APPLICATION OF THE CASE MANAGEMENT PROCESS IN CASE OF VIOLENCE AGAINST THE CHILD

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Abstract

Violence against children is a global problem that will have a negative impact on children's future. Despite a high number of cases of violence against children, it is observed that many cases of violence are hidden or invisible and are therefore not reported. The purpose of this article is to analyse the case management process in case of violence against the child. The study involved 6 case managers with case management experience, working with families where the child has experienced violence. The qualitative content analysis revealed 5 stages of the case management process in case of violence against the child, extensive inter-institutional collaboration, collaboration with the family and its primary network as well as forms of collaboration. The study defines recommended complex and preventive services for families where the child has experienced violence. The importance of psychological counselling is highlighted.

Keywords: case management; case manager; violence against the child.

Introduction

Nearly three-quarters or 300 million children aged 2 to 4 years are regularly exposed to physical and / or psychological violence from parents and guardians (caregivers) (World Health Organization [hereinafter, WHO], 2020). According to the data of the Department of Statistics of Lithuania¹, in 2021, 1619 cases of physical violence against children, 870 cases of neglect, 239 cases of sexual abuse and 207 cases of psychological violence were reported. Comparing the data of 2017-2021, it has been found that in 2019, most cases of violence were recorded – 5469, while in 2020, there were almost half as many such cases – 2877.

Case management is one of the most widely used methods of social work, the goal of which is to provide more coordinated and higher-quality help to a family experiencing any form of crisis (Dirgėlienė, Alėjūnė, 2020). Raipa and Čepuraitė (2017) state that there are various definitions of case management, because this method can be applied in different areas, so there is a great diversity. The application of the case management process is closely related to the planned activities of the institution, and the effectiveness is manifested due to many factors. This method is based on an individual approach to the client. The case manager is responsible for providing information to clients about all existing services, their nature, and ensures the availability of these services.

The case management process is analysed by foreign scholars Frankel, Gelman, Pastor (2019), who state that this process is not always consistent: it can take place in cycles, each time returning to the beginning. The longer the case manager works with clients, the more opportunities arise to identify additional problem areas or to define problems in different contexts. Collaboration in social work when solving domestic violence and child protection problems was studied by O'Leary, Young, Wilde, Tsantefski (2017). The results of this research demonstrated that such collaboration had led to positive outcomes for families. The importance of collaboration in social work in Lithuania is analysed by Purvaneckienė, Venslovaitė, Stonkuvienė, Žiliukaitė (2019). These scholars define that ten or even more institutions may be involved in providing assistance to clients and emphasise the importance of their interrelation in seeking quality, availability and effectiveness of services. Gudžinskienė, Mačiukienė (2022) studied forms of collaboration and communication, providing social services to families. Pivorienė (2007) analysed case management in social work.

Lithuania still lacks newer scientific research related to the case management process in case of violence against the child. Therefore, the following **problem questions** are raised: What is the course of case management in case of violence against the child? With whom does collaboration take place and what forms of collaboration are applied in the case management process in case of violence against the child? What are complex and preventive forms of assistance in case of violence against the child?

The research object is the case management process in case of violence against the child.

The purpose of the research is to analyse the case management process in case of violence against the child.

¹ Reports on violence against children 2017–2021. <https://osp.stat.gov.lt/statistiniu-rodikliu-analize#/>.

Research objectives: 1. To reveal the course of case management in case of violence against the child. 2. To identify the aspects of collaboration with specialists and forms of collaboration, applied in the case management process in case of violence against the child. 3. To identify the forms of provided complex and preventive assistance in case of violence against the child.

Research methods: analysis of scientific information sources and legal documents, semi-structured interviews, qualitative content analysis.

Research methodology and organisation

The qualitative research was employed to implement the purpose and objectives of the research. To achieve the objectives of the research, the data collection method – a semi-structured interview – was used. The selected forms of research data collection were: live interviews and online interviews using video and audio tools through video chat systems ‘Google Meet’ and ‘Zoom’. The data processing method applied in the research is the qualitative content analysis. Gaižauskaitė and Valavičienė (2016) point out that it is important to follow the informant’s perspective and interpret what the research participant wanted to say rather than what the researcher wants to hear.

The research instrument is a semi-structured interview questionnaire. During the semi-structured interviews, case managers answered 17 open-ended questions, 1 clarifying question and 4 additional questions. The questionnaire is divided into 3 groups of questions (see Fig. 1)

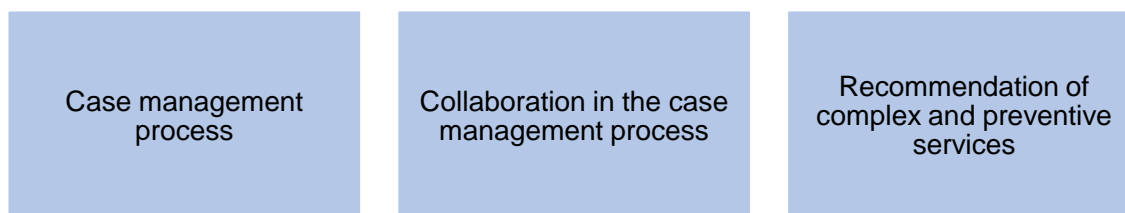


Fig. 1. Groups of questions in the semi-structured interview questionnaire

These groups of questions allow to achieve the purpose of the research. The case management process in case of violence against the child enables to reveal its course and ongoing processes. Collaboration in the case management process in case of violence against the child allows to analyse the forms and the process of collaboration. Recommendation of complex and preventive services for the family in case of violence against the child reveals the importance of these services in cases of violence against the child in families.

The procedure for conducting the research. Semi-structured interviews were conducted in December of 2022 and in April of 2023. Conducting the study, four principles of research ethics were followed. These were: the principle of anonymity – research participants were told that the interview was completely anonymous, no personal information that could identify informants would be mentioned and their answers would be coded, which would make it impossible to identify the person; in addition, no specific questions were asked, according to which it would be possible to identify the subjects; the principle of confidentiality – research participants were notified that the obtained data would be provided in a coded form and only in academic activities, which guaranteed the confidentiality of subjects; the principle of benevolence – the informants’ participation in semi-structured interviews was voluntary; the principle of justice – the research data were not falsified and the research was conducted honestly (Gaižauskaitė, Mikėnė, 2014; Gaižauskaitė, Valavičienė, 2016).

The research sample. The study involved 6 case managers: 5 women and 1 man. Analysing the subjects’ statements, informants were coded with the following abbreviations: AV1, AV2, AV3, AV4, AV5, AV6. All informants had work experience in the field of case management with families where the child had experienced violence. The informants were selected using a non-probability sample – a snowball (or chain-referral) sampling method. Žydžiūnaitė and Sabaliauskas (2017) accentuate that when the snowball selection method is chosen, the researcher forms the sample considering individuals’ recommendations that correspond to the topic under study and are worthy of inclusion in the study. Convenience sampling was used to form the sample, which allows the researcher to access the participants that are most easily accessible to the researcher, enabling to achieve the goal of the topic under study. The informants involved in the study have a Master’s degree in social work, a university Bachelor’s degree in social pedagogy, and a professional Bachelor’s degree in social sciences. The informants’ work experience in the field of case management ranges from 1 to 5 years.

Research results

The study analyses the case management process in case of violence against the child. Case managers, together with a social worker, begin it with the assessment of the family's needs for assistance (see Table 1).

Table 1. **Assessment of family needs for assistance in case of violence against the child**

Category	Subcategory	Number of statements
Assessment of the family's needs for assistance	Collecting information from specialists	32
	Collecting information from the family	24
	Assessment of the family's situation	41

The case management process in case of violence against the child begins with the collection of information: "*<...> child rights department forwards information about the family <...>*" (AV3). This stage is relatively systematic, requiring that the case manager and the social worker assigned to work with the family should learn everything about the client and his or her life, which could be relevant in problem solving. When collecting information from family members, it is important to be able to select real information so that assistance can be provided purposefully. This is proved by the following statement of the informant: "*<...> we receive incorrect information from family members <...>*" (AV2). Zastrow (2017) states that after meeting the client, it is important to collect information such as: who lives at home; what cases of violence have occurred in the family.

According to informants, after receiving the necessary information from specialists and family members, the situation that occurred in the family is evaluated: "*<...> we assess the need for assistance for the child and the family, we fill in a questionnaire.*" (AV3). To work with the family, case managers and social workers must have assessment-oriented knowledge and skills needed to manage and interpret family data, which help assess clients' strengths, limitations, and experienced challenges (Hepworth, Rooney, Rooney, Strom-Gottfried, 2017).

During the course of the research, the second stage of the case management process was analysed – organisation of assistance and drawing up an assistance plan (see Table 2).

Table 2. **Organisation of assistance and drawing up the assistance plan in case of violence against the child**

Category	Subcategory	Number of statements
Organisation of assistance and drawing up the assistance plan	Organisation of case review meetings	39
	Setting the aim and objectives of the assistance plan	17
	Planning of assistance measures	23
	Solving problems arising to the family	16

When planning assistance for the family in case of violence against the child, case review meetings are organised: "*<...> we start planning the case review meeting <...> we agree on a date, time, how we will do it.*" (AV2). At the case review meetings, the family can state what assistance they expect, which ensures that family members will be more motivated to implement assistance measures because they themselves name them. Shiraishi (2018) revealed that during the organised case review meetings, professionals share information about the family, and an assistance programme is jointly drawn up. The assistance plan for the family, drawn up at the case review meetings, includes the expected goal and objectives. The opinion of the family is taken into account so that it participates in this process, which is confirmed by the following statement of the informant: "*Parents' views are heard and <...> we see what the tasks are.*" (AV1). Considering the family's needs, specialists' recommendations, the assistance plan provides for assistance measures: "*<...> during the meeting, ways of helping, measures <...> are discussed*

<...>” (AV5). The American Case Management Association (2020) states that family members’ expectations, included in the planning process, should be realistic. Organising assistance for the family in case of violence against the child, the social worker working with the family actively solves the problems arising for the family: “<...> *we analyse issues relevant to the family* <...>” (AV3). Holosko (2018) reveals that the case manager, the social worker and the client make various necessary joint decisions more easily if the client first accepts his or her problems.

During the research, the implementation stage of the assistance plan in case of violence against the child was analysed, showing what process takes place at this stage (see Table 3).

Table 3. **Coordinating implementation of the assistance plan in case of violence against the child**

Category	Subcategory	Number of statements
Implementation of the assistance plan	Motivating the family	32
	Implementation of assistance measures	20
	Assessing family independence	5

One of the most important aspects in implementing the goal and objectives provided for in the assistance plan is motivation of the family: “<...> *you have to motivate them* <...> *to try, to go* <...>” (AV3). Guul, Pedersen, Petersen (2021) emphasize that motivated clients are more likely to succeed, which means that the client achieves high performance through hard work and motivation. Informants state that the implementation of assistance measures is an important, long-term process aimed at changing the existing situation in the family, as evidenced by the following statement of the informant: “*The implementation process consisting of assistance measures <...> is planned for the long-term perspective.*” (AV2). While the family is implementing the assistance plan, it is important to assess the family’s independence: “<...> *the family may be able to independently handle <...> personal issues.*” (AV2). It is important to pay attention in which areas the family is able to perform certain functions independently so that it is easier to enable family members to carry out other necessary functions as well (Demidenko, Routasalo, Helminen, Paavilainen, Suominen, 2018).

Analysing the research results, one of the stages of the case management process in case of violence against the child is family monitoring (see Table 4).

Table 4. **Family monitoring in case of violence against the child**

Category	Subcategory	Number of statements
Family monitoring	Visiting the family’s living environment	40
	Communication with family members	36
	Continuous information collection	21

In the family monitoring stage, informants named visiting the family’s living environment as one of the main actions: “<...> *the social worker intensively visits the family.*” (AV1). Visiting the family’s living environment allows the case manager and the social worker working with the family to observe how family members fulfil their obligations provided for in the assistance plan. Analysing the research results, a sub-category of communication with family members was distinguished: “<...> *in order to eliminate the risks, we talk and involve the child*” (AV6). Rollins (2020) stresses that communication between the social worker and the client allows building trust and empathy, observation, and experience sharing in seeking certain change. Constant information collection is an important process in seeking that the child is not exposed to violence in the family: “<...> *we will monitor, see that the child is safe.*” (AV1). Regular monitoring and motivation of the family helps family members to fulfil the tasks set out in the assistance plan.

The research analyses the completion stage of the case management process in case of violence against the child (see Table 5).

Table 5. Completion of the case management process for the family in case of violence against the child

Category	Subcategory	Number of statements
Completion of the case management process	The family can function independently	11
	The family has moved out of (does not live in) the municipality	3
	No minor children left in the family	1

Informants stated that completing the case management process, it was important for the family to be able to function independently: “<...> *the family is able to function independently <...> we make a decision to complete the case management process.*” (AV1). Frankel, Gelman, and Pastor (2019) state that one of the criteria for completing the case management process is the evidence of the client’s ability to independently manage his or her actions towards certain goals. The case management process can also be completed when the family moves to another municipality: “<...> *we discontinue services <...> during the meeting <...> if they are leaving.*” (AV5). Although the case management process is terminated for the family, it is transferred and continued in another municipality. Since the case management process is only applied to families who have a minor child, the informants state that when children turn 18, the case management process is terminated: “<...> *that’s how we are friends, we only let them go when the child turns 18.*” (AV6). The case management process can take a very long time if the family is not motivated to seek change.

The study analyses the case manager’s collaboration of with various institutions; therefore, the category of inter-institutional collaboration was distinguished (see Table 6).

Table 6. Inter-institutional collaboration in the case management process in case of violence against the child

Category	Subcategory	Number of statements
Inter-institutional collaboration	Educational institutions	33
	State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour	40
	Health care institutions	8
	Social service institutions	13
	Municipal administration, Social Support Department	5
	Pedagogical Psychological Service	4

Inter-institutional collaboration is important in the case management process in cases of violence against the child for providing comprehensive assistance for the family. Informants stated that in cases of violence against children, there was very close collaboration with educational institutions and the State Child Rights Protection and Adoption Service under the Ministry of Social Security and Labour: “<...> *a strong contact is established with the educational institution.*” (AV2); “<...> *collaboration is closer with the child rights department <...>*” (AV1). Analysing the obtained research results, collaboration of the case manager with health care institutions was distinguished: “<...> *we collaborate with health care institutions <...>*.” (AV6). Collaboration with health care institutions allows the case manager to collect information about the client and organise assistance accordingly. The obtained research results reveal collaboration with social

service institutions: “<...> *Mother Teresa’s family home <...> we collaborate intensively <...>*” (AV2); with municipal administration, Social Support Department: “<...> *we have to communicate with municipal employees intensively <...>*” (AV2). The results of the study conducted by Gečienė and Gudžinskienė (2018) have demonstrated that the social service provider must create close collaborative relationships with other social service institutions while effectively pursuing the goal. Informants state that they also have to communicate with the Pedagogical Psychological Service: “<...> *specialists of the Pedagogical Psychological Service <...>*” (AV3). It is important that the family should receive targeted assistance that is close to their place of residence; therefore, communication takes place not only with various social service institutions but also with other institutions providing relevant services for the family.

Analysing the obtained research data, collaboration with specialists in the case management process in case of violence against the child is noticeable (see Table 7).

Table 7. Collaboration with specialists in the case management process in case of violence against the child

Category	Subcategory	Number of statements
Collaboration with specialists	Mental health professionals	6
	Mobile team specialists	22
	Care coordinators	2
	Coordinator of inter-institutional collaboration	1
	Social pedagogues	7
	Educators of educational institutions	3
	Family doctors	8
	Addiction counsellors	3
	Social workers	13
	Law enforcement professionals	21

The results of the study highlighted collaboration with mental health specialists, as evidenced by the following statement of the informant: “<...> *a psychologist, psychiatrists get involved <...>*” (AV2). The psychologist’s services are important not only for the family but also for the specialists working with the family, because namely psychologists provide conclusions and recommendations that are important when making decisions in a child’s case (Michailovič et al., 2019). The informants stated that they collaborated with the specialists of the mobile team: “<...> *the mobile team gets involved in this process <...>*” (AV3). The mobile team professionals provide recommendations, which are taken into account in the case review meetings. Michailovič et al. (2019) indicate that mobile team specialists visit families in cases of violence against the child, which allows to provide more information to other professionals and help clients more effectively.

Analysing the research results, one of the informants mentioned collaboration with care coordinators: “<...> *care coordinators get involved.*” (AV2). Planning the necessary services for the family to achieve effective collaboration with institutions, informants mention communication with the coordinators of inter-institutional collaboration: “<...> *you can contact the coordinator of inter-institutional collaboration <...>*” (AV5). The results of the study highlighted close communication with social pedagogues: “<...> *social pedagogues.*” (AV3); teachers of educational institutions: “<...> *pedagogues <...>*” (AV3). When communicating with social pedagogues, the case manager can share the provision of assistance to the child, which can be organised not only in the case management process but also at the educational institution.

During the research, a subcategory of family doctors was distinguished. Informants revealed that they had to collaborate with family doctors in collecting relevant information in case of violence against the child: “<...> *collaboration with family doctor <...>*” (AV2). Collaborating with the family physician, the case manager collects more detailed information about the family’s ability to function independently. Collaboration with addiction counsellors is also noticeable: “<...> *intensive collaboration with the addiction counsellor <...>*” (AV2). When in addition to violence against the child in the family, parents are also addicted to alcohol, psychotropic substances and

the like, the case manager has to collaborate with the addiction counsellor, this way seeking to reduce risk factors in the family.

Close collaboration also takes place with social workers working with the family: “<...> we need to collaborate with social workers <...>” (AV1). The Description of the Case Management Procedure (2018)² stipulates that the case manager and the family’s social worker are assigned to work together with the family. Therefore, it can be concluded that the case manager constantly collaborates with the family’s social worker in the case management process, seeking to jointly make decisions and coordinate their work. The informants who participated in the research indicated that they also collaborated with law enforcement specialists: “<...> you have to deal with the police, law enforcement.” (AV3). Since in case of violence against the child, the child’s rights are violated, the involvement of law enforcement is important. Bučiūnas and Velička (2017) state that inter-institutional collaboration takes place between various institutions, including law enforcement institutions such as the court, police or the prosecutor’s office.

The study analysed collaboration with the family’s primary network in the case management process in case of violence against the child (see Table 8).

Table 8. **Collaboration with the family’s primary network in the case management process in case of violence against the child**

Category	Subcategory	Number of statements
Collaboration with the family’s primary network	Collaboration with family neighbours, local community	10
	Collaboration with the family’s loved ones	6

In order to organise assistance effectively, informants identified the importance of collaboration with the family’s neighbours and the local community: “<...> members of the community where the family lives, these are neighbours <...>” (AV2). For professionals, the family’s immediate environment can provide relevant information if the family itself is not collaborative or provides incorrect information. According to informants, collaboration takes place with the family’s loved ones in the case management process: “<...> with other family members <...>” (AV2). It is appropriate to collaborate with the family’s loved ones in the case management process in cases of violence against the child so that the child can feel safe and have someone to communicate with. Gevorgianienė et al. (2021) state that parents resist assistance, express open aggression, and professionals find it complicated to communicate with parents due to parental drunkenness or unwillingness to communicate. Considering this, collaboration with the family’s loved ones helps case managers to collect relevant information and include this in the assistance provision process.

The research analysed the forms of collaboration in the case management process in cases of violence against the child (see Table 9).

Table 9. **Forms of collaboration in the case management process in case of violence against the child**

Category	Subcategory	Number of statements
Forms of collaboration	Formal collaboration	17
	Non-formal collaboration	5

Analysing the research results, formal collaboration as one of the forms of collaboration in the case management process in case of violence against the child was distinguished. This is confirmed by the following statement of the informant: “<...> communication also takes place through official documents <...>” (AV2). Gečienė and Gudžinskienė (2018) point out that

² Description of the Case Management Procedure, approved by the Minister of Social Security and Labour on March 29, 2018 by order No. A1-141. <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/11e612d5345711e884a38848fe3ec9e2/asr>.

collaboration opens up the possibility of improving performance. The study distinguished a subcategory of non-formal collaboration: “<...> *non-formally too* <...>” (AV2). According to Farukuzzaman and Rahman (2019), interpersonal communication can take place between co-workers, and it is non-formal. Non-formal collaboration speeds up the receipt of information from professionals and the case management process takes place more effectively. Case managers communicate non-formally when it is necessary to quickly share information with other specialists and when there is no need to communicate by official letters. Summarising the research results and authors’ insights, it can be assumed that non-formal collaboration is important in such cases where it is aimed to transfer information about the family very quickly.

During the research, complex services recommended to the family in the case management process in case of violence against the child became evident (see Table 10).

Table 10. Complex services recommended for the family in the case management process in case of violence against the child

Category	Subcategory	Number of statements
Complex services recommended for the family in case of violence against the child	Psychologist’s and / or psychiatrist’s consultations	31
	Organisation of the child’s occupation	5
	Recommending training for parents	14

The obtained research results demonstrate that in case of violence against the child, the case management process includes recommendation of the psychologist’s and / or the psychiatrist’s consultations: “<...> *we recommend attending the psychologist’s consultations, and in more difficult cases, the psychiatrist’s consultations.*” (AV3). Michailovič et al. (2019) state that psychological assistance in cases of domestic violence is the most recommended and available service for the family. Informants emphasised that psychological consultations for the whole family were organised, but they were more intensive for the child who had experienced domestic violence: “<...> *we organise the psychologist’s services for the child.*” (AV2). Informants named that one of the complex services offered for the family was organisation of the child’s involvement in activities: “*The child’s occupation must be organised* <...>” (AV1). Organisation of children’s occupation in their close environment, employing the community’s occupation services, increases children’s involvement in the community (Gudžinskienė, Rimkevičė, 2021).

In the obtained research results, a subcategory of recommending training for parents has been noticed and distinguished. This complex service is intended for parents so that they can change inappropriate behaviour with their child, self-develop certain abilities and improve their mental health, as proven by the following statement of the informant: “<...> *we offer parents various training courses on how to strengthen oneself, how to accept oneself* <...>” (AV1). Gudžinskienė and Burvytė (2018) emphasise the necessity of strengthening positive parenting skills, since this helps to build positive relationships between parents and children, promotes positive communication and collaboration.

Analysing the research results, a category of preventive services recommended for the family in case of violence against the child was distinguished (see Table 11).

Table 11. Preventive services recommended for the family in the case management process in case of violence against the child

Category	Subcategory	Number of statements
Preventive services recommended for the family in case of violence against the child	Provision of preventive information	11
	Recommendation of preventive training	3
	Family counselling on various issues	3
	Continuous assistance	3

It is noted that case managers provide the family with preventive information: “*We give various leaflets* <...> *mothers’ line, children’s line, for the child* <...> *to read.*” (AV1). The US Preventive Services Work Group (2018) indicates that additional information provided for the

family about the types of available preventive services is associated with positive outcomes. The informants involved in the research emphasised that they also recommended preventive training: “<...> *one of the preventive services is positive parenting.*” (AV1). This way it is aimed at giving parents the opportunity to change parenting methods that determine family life. Račkauskienė (2018) accentuates that preventive training promotes psychological change in parents, they become more self-confident, feel calm and inner strength, while changed parenting helps children communicate, they become more caring and responsible. According to case managers, preventive services also include family counselling on a range of issues: “<...> *we offer the family to receive preventive services <...> consultation of a social worker <...>.*” (AV2). Efficient preventive assistance primarily involves provision of brief counselling and information (US Preventive Services Work Group, 2018).

Summarising the research results, it can be concluded that it is important to be able to select real family information from family members so that the assistance process can be organised in a targeted manner. Case managers also stressed that throughout the whole process of assistance, the family was involved and empowered to identify problems and the assistance measures needed. Effective implementation of the stages in the assistance plan necessitates such assistance measures as motivating the family, the family's encouragement and visits to the family's home. To achieve success in the case management process in case of violence against the child, it is highly important that collaboration with educational institutions, State Child Rights Protection and Adoption Service, various professionals, the family and the family's primary network takes place. Recommending services to family members, case managers highlighted improvement of mental health, training for parents and the psychologist's or psychiatrist's consultations for all family members. Provision of preventive information for family members is also important. The most relevant social services in case of violence against the child are information, mediation and representation, social skills development, support and / or restoration, and psychosocial assistance services.

Conclusions:

1. The qualitative research revealed the course of the case management process in case of violence against the child: 1) *assessment of the family's needs* – the aim is to collect information from professionals, family members and to assess the family's needs; 2) *organising assistance and drawing up the assistance plan* – in this stage, it is aimed to organise case management meetings, to draw up the assistance plan containing the aim, objectives, assistance measures, and to address the family's concerns; 3) *implementation of the assistance plan* – it is sought to motivate the family to implement assistance measures and to assess change with regard to the family's independence; 4) *family monitoring* – it is aimed to visit the family's place of residence, communicate with family members and observe the family; 5) *completion of the case management process* – it is carried out when the family proves that it is able to function on its own, when the family moves to another municipality, or when the child reaches adulthood.

2. The research revealed close inter-institutional collaboration with educational institutions, State Child Rights Protection and Adoption Service, health care institutions, social services institutions, the municipal administration, the Social Assistance Department, the Pedagogical Psychological Service. Collaboration in the case management process takes place with mental health specialists, mobile team specialists, care coordinators, inter-institutional collaboration coordinators, social pedagogues, pedagogues of educational institutions, family doctors, addiction counsellors, social workers, and law enforcement specialists. Cooperation with specialists of educational institutions allows the case manager to get primary information about the child, since he spends most of his time there. Therefore, it is important to maintain close contact with these specialists. It is important to communicate with the family and its primary network. Collaboration takes place formally, by official letters, or non-formally, by exchanging important information.

3. Case managers identified complex and preventive services organised for the family in case of violence against the child: 1) complex services recommended for the family: psychologist's and / or psychiatrist's consultations; organisation of the child's occupation; recommendation of training for parents; 2) case managers offer the following preventive services for the family: provision of preventive information, recommendation of preventive training, family counselling on various issues, continuous assistance. By providing consultations to the family for preventive purposes, the case manager ensures the receipt of targeted information, referral assistance in obtaining relevant services for the family.

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