

# Qualitative Case Studies:

## *Assessing Workforce & Service Gaps Through Multiples Lenses*

Mapping and Assessment of the Child  
Protection System in Nigeria

# Workforce assessment tool focuses on:

(Maestral International & UNICEF, 2010)

- Titles or descriptions for people working in public services, community level, & NGO's
- Quantitative data on authorized, filled, & vacant positions; qualified/not qualified staff; caseloads
- Description of staff recruitment & turnover, professional associations, education and training institutions, & cross-sector training
- Perceptions of quality of education & training
- Then *system-building priorities* are established (laws & policies, cooperation, *capacity, services*, public awareness & education, & accountability)

# Qualitative case studies

(Baxter & Jack, 2008; McCoyd & Kerson, 2013)

- Methodology for studying *complex* phenomenon in context
- Promotes effective, contextualized reflection on practice
- It is important in studying child protection systems because you can explore:
  - complex processes at multiple levels - individual, family, community, organizational, & system
  - phenomena (child sexual abuse) within their contexts using a variety of data sources (child, family, community, social workers, government/NGO stakeholders).
- We are looking at the problem through *different lenses in real time!*

# *Truth* is relative

- The strength of qualitative case studies is that stakeholders can *tell their stories*
- Through these stories, stakeholders are better able to describe their own views of reality
- This allows for a better understanding of the *different truths through different lenses*.
- It is these collective stories that give meaning to why certain decisions and pathways were taken from problem-identification to outcome

# When do you use a case study approach? (Baxter & Jack, 2008)

- The focus of the study is on “how” and “why” questions
- The behaviors of those being studied can't be manipulated (case studies are in real life and real time);
- Contextual conditions are just as important as what is happening
- For example, decision-making in child protection cases– the *how and why decisions were made* can best be understood when you study *the context* in which they were made – who worked whom; who didn't work with whom; who was included/excluded; power differentials; boundaries; teamwork; and outcome(s)

# Instructions for group discussions of case studies:

- Discuss cases as *illustrative of gaps in the system*
- Don't get caught up in the case details but the focus on the overall decision-making processes, outcomes, and the various stakeholders involved
- The idea is to *link the case inputs and outcomes* to System Building Priorities in the toolkit
- What gaps do you see that contributed to the specific pathways the cases took?
- What specific system changes might alter the trajectory of the pathway to improve outcomes?

# Case study discussion guidelines:

## *Workforce Capacity & Services & Service Delivery Mechanisms*

1. Problem identification and definition
  - a) What was the identified problem? Are there other problems that were not identified?
  - b) Were there earlier signs that there was a problem? Why were they not identified?
2. Assessment
  - a) Was an assessment done on the child in the initial phase by the appropriate professional? (social worker, psychologist, lawyer or judge, other professional).
  - b) What assessment of the family and community risks and security factors was done?
3. Timeliness of problem identification, response, follow-up, etc.

# Case study discussion guidelines:

## ***Cooperation, Coordination, and Collaboration***

### 4. Decision-making, teamwork, and cross-sector coordination

- Who were the gatekeepers (those in authority to make decisions about the child)?
- When gatekeeping is shared, to what degree was there teamwork?
- How would you evaluate decisions made about response, use of community resources, and teamwork? What are the gaps in making decisions?
- What are the education, health, and justice sectors' roles and to what degree were they involved?

### 5. Referral pathways

- Are the ones taken appropriate? How effective were cross-sector referrals?
- Are there others that could have been taken, based on what you know?

## ***Accountability Mechanisms***

### 6. Outcome(s)

- What is your evaluation of the outcome or outcomes as defined in these cases?
- What other outcome or outcomes would you suggest that ensures that the well-being of the child is considered?
- To what degree were the players accountable in their decisions, follow-up, and outcomes?



Debriefing on the case studies are organized around the *Gaps in the System* (to inform system building priorities):

- A. Laws, Policies, Standards and Regulations
- B. Cooperation, Coordination and Collaboration
- C. Capacity of Workforce - **For example, lack of capacity of frontline workforce to do assessments, case planning, & referral**
- D. Service and Service Delivery Mechanisms – **lack of trauma counseling for victims of sexual assault**
- E. Communication, Education and Mobilization for Social Change
- F. Financial Resources – **lack of resources to support home visits by social welfare officers/case managers**
- G. Accountability Mechanisms

# References

- Baxter, P. & Jack, S. (2008). Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report, 13* (4), 544-559.
- Maestral International & UNICEF. (2010). *Child protection systems: Mapping and assessment toolkit*.
- McCoyd, J. M. & Kerson, T. S. (2013). Teaching reflective social work practice in health care: Promoting best practices. *Journal of Social Work Education, 49*, 674-688.