

Practice Vignette 1 “MIKE”

Mike is a 15 year old boy who is currently living with his grandparents. He is not in contact with his mother who has a serious substance dependence disorder. The identify of his father is not known. His last contact with his mother was more than five years ago. Over the past three months, Mike has grown increasingly argumentative and disruptive at home and school. He has been suspended one day two weeks ago for fighting. This has involved heated arguing and swearing at several other youth. In one fight, he was seen pushing the youth he with whom he was arguing. Teachers report that his grades have slipped considerably. He has gone from being a B/C student to getting mostly failing his courses this school year. Mike is not in special education. His IQ was recently estimated to be 96.

At home, grandmother reports that he starts arguments with her, ignores curfew and sometimes stays out with friends until 2 or 3 in the morning. There is no evidence that he has engaged in any criminal behavior. Mike’s problems appear to have started after his grandfather had a stroke. Grandfather is better but was left with a partial paralysis that forced him to retire early. Grandmother works at an area grocery store. No other children or adults live in the house, although Mike’s aunt, who has five children lives in the neighborhood. Mike is reportedly close to his cousins and spends a lot of time at their house. Mike has expressed interest in moving in with aunt but she is unwilling to take on the added responsibility. Grandparents are currently feeling like they are no longer able to handle Mike’s behavior and are asking about foster care or residential treatment options. Grandparents report that they do not understand why Mike is so ungrateful to them for taking him in. Mike expresses worries about the Grandfather’s health and resentment about all the restrictions they have tried to place on this behavior.

Mike has lived with his grandparents since he was an infant. At that time, child welfare had taken him from his mother due to allegations of neglect. She would leave him alone for long periods of time and failed to address his basic needs. As an infant, he was significantly underweight. He now is healthy and active. Grandparents are not active in a church and neither they nor Mike have ever attended religious services.

Mike reports that he has a girl friend but has never been sexually active. Mike reports he has been seeing this girl for about 8 weeks. He has a number of male friends at school.

At the assessment, Mike seemed to be a generally sullen and non-responsive young man. His was dressed in baggy shirt and jeans and listened to a portable cd player until the assessor asked him to turn it off. He answered questions but did not elaborate even when pressed. He reports no suicidal or homicidal ideation. When the conversation turned to talking about Mike’s girl friend his mood brightened notably and he smiled and talked openly.

Test Vignette 4 “SUZI”

Suzi is a nine-year-old girl living in a residential treatment center since she was six years old. Suzi was severely abused and neglected by her birth mother and other adults who were in and out of the home. Records indicate that Suzi experienced severe sexual abuse as a child when she was residing with her father. At age 2 and ½, Suzi’s maternal uncle and aunt became her and her older brother’s legal guardian. They are loving, caring and invested in her care. Suzy’s aunt and uncle have two children of their own but have been unable to handle her behaviors in their home although they still take care of her brother. They relinquished custody of Suzi and she is now in the custody of the state and has been in and out of several foster placements before coming to the residential treatment center. It was determined that due to the past abuse it is not a viable option for Suzy to live with her biological mother or father. In addition Suzi expresses great fear that she will have to go to live with her mother again and will be “hurt.” These expressions of fear are after visits from her biological mother. Her father had been incarcerated for the abuse of her older brother. The location of her father has not been known for several years.

She is struggling with the fact that there have been several “families” in her life, but the one family with which she wants terribly to belong to (her uncle and aunt) has not currently able to have her live with them. This family feels that they are unable to meet her needs and the safety of the other children would be compromised if Suzi returned to their home at this time unless they received considerable in-home assistance. Aunt and Uncle are both employed. He is a delivery truck driver who works the morning shift and she works at a local motel during the afternoon shift. Neither have any physical or emotional problems nor is there any evidence of substance abuse. They own their own home which they maintain well. They have not visited Suzi consistently while she has been in residential treatment, but state their willingness to take her into their home ‘under the right circumstances’.

Suzi does well in school academically, however she school records indicate that she is loud, hyper, oppositional and argumentative with peers and staff. Her peer relationships have been testy and confrontational. She has made verbal threats to hurt her peers, but she has not acted on her threats.

Suzy has difficulty coping with feelings of anger, rejection, depression and anxiety as she becomes aggressive, oppositional and defiant. She does not injure others with her aggression but she often destroys belongings. She has denied any thoughts of suicide. She has difficulty accepting limits and following directions of adults and authority figures. She becomes easily frustrated and will act out aggressively (e.g, by pushing chairs, slamming doors) during group activities. In addition Suzy has poor personal boundaries, difficulty forming meaningful attachments, wetting herself when she is angry, soiling herself, inappropriate touching of peers, impulsivity, low self esteem, feels unwanted, has poor social judgment and has conflicting feelings towards foster care which all contribute to her poor social adjustment. Attempts to obtain a foster family for Suzi have failed because of her oppositional behavior and the significant problem of her encopresis. She is able to control her bowel movements in school and rarely soils herself, there but she continues to soil herself on a regular basis in the RTC. Her personal hygiene has been variable.