

ECED 512

SPRING 2010

I chose to write this case study on a special little girl named Cassidy*. She is a 3 year old little girl from E. Greenwich where she lives with her younger brother and mom. Her dad no longer lives with Cassidy as he is getting help due to his alcohol abuse and gambling on sporting events. He often drank around Cassidy and was abusive to her mother, her brother and Cassidy when he lost a game and drank. Cassidy's parents have been going through a difficult divorce the last 8 months and this has taken a tremendous toll on the physical and emotional health of this three year old. Her parents fought a lot and many times used Cassidy to verbally hurt one another. Cassidy loves both of her parents, but always was a daddy's girl as her father took care of her before she began preschool and spent a lot of time together. They were very close. Cassidy often forgave daddy for drinking and "getting mad" she many times feels like a bad girl and I believe she feels as though she is the reason her parents married did not work out.

As her father moved out and the fighting between her parents became more physical (dad visited and was arrested on domestic assault on mom) Cassidy began feeling very upset and started acting out in school. She would get very upset when things didn't go the way she wanted, she always felt she was not good enough, and seemed very distant and very emotional. Cassidy cried in school almost the entire time she was there. I know Cassidy personally as I was her babysitter and close friend of the family. When Cassidy was born, she was the apple of her parent's eyes. She is from Italian descent on both sides and comes from a firm strong background of morals, catholic faith and support. She attends church every Sunday with many members of her extended family followed by a family dinner where she can play with her

cousins and be with family. When Cassidy was born both parents spent all of their time and energy on their very happy little girl. She was always smiling and laughing and was the quietest baby I have ever seen! She giggled when she wanted to get your attention. As she got a little older, she enjoyed crayons, blowing bubbles, playing with her neighborhood friends, and singing her favorite songs.

Cassidy was a very outgoing three-year-old little girl in the beginning. She was very thoughtful and loving to her family and friends. She comes from a catholic Italian family and young parents in their twenties. Cassidy's mother is a teacher and also works a retail job in the afternoon. Her father was a waiter/bartender at a local restaurant. He recently lost his job due to his trouble with alcohol and aggression with other employees. As there was abuse both verbal and physical at home, (Cassidy and her brother have been taken to Hasbro on various occasions for "accidents" while in daddy's care) Cassidy's beautiful smile began to fade. Though she knew something wasn't right and different with daddy, Cassidy loved her daddy and wanted to be with him all the time. Daddy didn't feel the same as he began not to take responsibility and care of Cassidy and her baby brother who needed much care. He wanted to drink and spend the day at leisure without worry of his two children. Her brother often went without a diaper change, the children were not fed, and no attention or supervision was focused on the children. Cassidy played with her brother and tried to somewhat make sense of what she could do to help daddy. Daddy would close the door in her brother's room to muffle his cries as he was trying to watch a game or drink. Cassidy attended a half day preschool and these things were seen after she came home. She told her mommy what daddy did and her father denied nothing. He agreed to all she stated and after a couple of similar incidents where

her husband neglected the children, left empty bottles of alcohol laying around and she noticed bruises on her 1year old son, she finally filed for divorce. During all this family stress, Cassidy watched helplessly as her parents fought in front of her. She did not know what was happening or how to handle it. She cried a lot and began having feelings of guilt. This led to Cassidy beginning to act out emotionally and physically. [Where did her guilt come from?](#)

Cassidy began having emotional episodes at home and in her center in which she would hurt herself in various ways (purposely giving herself paper cuts/hitting herself in the head/banging her head against her bed/scratching at her eyes/scratching her skin to make it red/and throwing herself on the floor). She began having temper tantrums (hitting/yelling/kicking/and disobeying demands), did not eat much (once going 3 days without food and failed attempts at force feeding her), and showing various behaviors of a depressed child (isolating herself, wanting to be alone, sad, crying, sleeplessness.) Not only was she acting out in school, but her mother had trouble controlling Cassidy at home. She would throw her food at dinner, rip pictures, hit her brother and mother, cry frequently, yell and have many meltdowns. Her meltdowns became worse when her father was told to move out and she was at home with her mother. It was as though she needed her father's abuse to "be happy". At first it seemed that the divorce did not bother Cassidy as we all thought she was so young and didn't understand. She was still smiling and was okay in school until her father moved out. Her tantrums were not just her frustration now...but her way of letting us know that she was not okay with what was happening. She wanted everyone to listen. [Detailed documentation.](#)

Cassidy attends a head start where she had numerous friends up until the divorce of her parents when she began having trouble. When her parents were together, she was a happier child playing with others and very involved in her class. She has now become very distant, not interested in playing or talking and very quiet and to herself. As far as her physical development, she is 3'1" and weighs 33 pounds. She is average size compared to the other children in her class and she has very good posture. As far as children at her age she has good motor coordination and Cassidy has achieved many fine and gross motor skills. Before her traumatic family experience, she was able to ride a bike with training wheels and she loved to help bathe herself. She also loved to show me how she would feed herself with a small spoon and fork. She could zip, unzip and button her coat without assistance. She always loved to draw circles and heart shapes. [Good description.](#)

According to a psychologist she now works with, these are happy shapes and show the child's feeling of love and happiness. She no longer draws these shapes and likes to now scribble and use dark colors such as black and blues. I sometimes play music and color with her when I visit and she seems to respond better when she is in the presence of someone she feels "safe" with and listening to happy music. She does this in her sessions at therapy which has helped her to express herself artistically. She is able to twist and partially braid her doll's hair, but her favorite doll now lays under her bed unused. [Good examples.](#)

It is difficult to understand how a normal happy 3 year old active, healthy child could suddenly fall apart and become a thin, sad, and become closed off. She is no longer social with her teachers, friends and family and likes to keep to herself. Her mother allows her to have

space and do things she likes to do. But I feel the more space she is given, the more she is withdrawn and wants to be alone. After her father moved out, she stayed in school half day and with her grandmother the other half until her mother came home for a few hours until returning to work. During this time, she was surrounded by her loving grandparents and 2 cousins around her age that she used to love to play with and was very close with. Her grandmother tells me that Cassidy likes to color by herself, does not want to eat any snacks, is uninterested in television shows such as Sesame Street (that was her favorite!) and did not want to play any games with her grandmother. She would just stare off, lost, confused, and if this type of focus was broken and you were to ask Cassidy to do something even if in a polite manner, she would immediately yell, scream, and if bad enough would start hitting her head on the floor or table. To prevent this type of action, her family simply left her to herself so that she was content at least. Good descriptions.

Her mother worked more hours as she now needed to be a single mother supporting her two children under the age of five. The divorce was not finalized and there were still situations where dad would confront mom or start issues with the family. Cassidy would act out and wanted to leave mommy to stay with daddy, of course her mother insisted she stay with her for safety and tried to explain that daddy was sick and needed more time.

Cassidy has great physical skills, she loved to tumble and do cheers. She always told me that she wants to be a cheerleader when she “grew up”. She also loved to run and ride her scooter. She was very adventurous and there was almost nothing that she wouldn’t try. These days, she likes to sit and cuddle up to her teddy, staying inside often as other children play and

uninterested in television or music. She has no interest in other children or playing games. She used to always be very excited to do anything that she saw the other kids are doing.

Sometimes she would do more activities because she liked to spend a lot of time with older kids in the neighborhood. She was very confident in everything that she did and she considered herself to be a big girl. [Good before and after descriptions.](#)

When she was a baby, she loved to sit on my lap and “read” stories together. She learned some words and phrases of the story as she got older and pretended to read. She would frequently make up stories to go along with the pictures in the book. Cassidy loved to talk with adults and her language skills evidence the fact that most of her conversations occur with people who have strong communication skills. She would talk to almost anyone and sometimes people thought that she is older than 3 because of her higher level language skills and intelligibility. Cassidy feels like she already knows a lot. She frequently tells her mother and friends that she does not need help because she is a big girl and she knows how to do it on her own. When doing an at home observation, I tried to read with her again to see how she would react and tried to ask her questions about how she was, how school was going, any games she wanted to play with me etc...She said “No” and said she was sleepy so I left her to rest. When I checked on her moments later, she was scribbling on paper and pressing hard on her crayon until it broke. When she noticed me in the door she had a tantrum, and told me to go away. I calmed her by singing our favorite song, “Twinkle Twinkle, little star” and she sang some words with me as I slowly crept back into the room and sat on the couch. For a few moments, I saw the old Cassidy and she smiled slightly. She came over to the couch and rested on my shoulder sitting on my lap. We sang the song again and I rubbed her back. After a few

moments, she began to cry in a sad tone and said “Sowy sessa I a bad girl” and rested on my shoulder. After a few moments of crying, she fell asleep.

At school, Cassidy became a discipline problem, bullying other students, yelling out, throwing things, hurting other students, hurting herself, playing rough, not doing her work, and her teacher not knowing the severity of how Cassidy was taking all this change of course punished her by moving her seat, not allowing her to be with the whole group in lessons, and on more than one occasion has been restrained. Last month, Cassidy was restrained for trying to stab a teacher with an adult scissor she took from the teacher’s desk. When asked “why?” she stated that the teacher didn’t love her and “she wanted her to leave.” Mom was called and a parent conference allowed the teacher and aids to speak with Mrs. S on what was going on at home and in school. Cassidy fell behind in her learning group since she could not partake in activities and get along with other students. She now sits at her desk and watches the other students in the whole group setting. When the others are in centers, she then will be able to experience the lesson with the teacher on a one on one basis along with an aid. During snack time, she lays on her mat and stares at the ceiling holding her teddy bear and sometimes naps. She no longer eats at school and the sight of food makes her nauseous and her “tummy says no”. Since the stress of the divorce, Cassidy also goes to bed at different times due to her mother’s schedule and because she likes to be the last one in bed. Many times she has nightmares and wakes up very upset. She has begun sleeping with mom in her room so mom can watch her but if she had a terror she begins screaming and again hurts herself. (She once began hitting her head against the sharp metal frame of the bed splitting her head open from force which led to a late night ER visit. I was present and it was very disheartening as she cried

and said she was sorry.) When she stays up late due to “thinking” and playing with her toys alone, she takes longer naps at school. Sometimes the lack of sleep adds to her irritability and she can sometimes have many emotions at the same time.

Pre School was her favorite time of the day, a time for her to play with friends, sing at the top of her little lungs, draw, paint, run, and laugh and just be one of the toddlers in her class. I observed her many times before the divorce and she was ahead of all the students developmentally and was a star student. She was always polite and eager to explore and learn. Cassidy was always an inquisitive child as she constantly asked “Why? How?” She loved learning new things and going on adventures to the zoo to see her favorite animals. Cassidy showed such cognitive development as she constantly asked questions and she would later repeat the answer if the question or topic came up again. She would refer to yesterday or last night when talking about an event that had occurred the previous day. Cassidy was very curious, which is why she asked so many questions. She wanted to find out about everything. She always would get very excited when she was shown how to do something new and usually couldn’t wait to try it out for herself. Cassidy is able to reason and generalize. She understands that when her mother cooks, she is not to be in the kitchen because she can get cut or burned. She is also able to tell what clothes are acceptable for church and what clothes are acceptable for play.

She has become a child that just takes things for what they are and has no interest in why things are happening or talking about what she thinks will happen. She always was vocal about her feelings and thoughts and has become mute and when prompted with questions of

her being sad or the divorce, she simply will stare at you with this very angry look in her eye and immediately begin crying and run off.

For the most of the day in school, she is attentive but cannot get through the activities of a whole day as she begins to have emotional episodes where she is distant, sad, angry and crying. She sometimes begins to cry at simple problems and can sometimes be physical when things don't go her way or do what she wants. She has had to be removed from the group (they were trying to include her slowly) due to one particular episode I observed where the group was speaking of families and fathers. She began singing loudly as the teacher was reading about Dads and "What daddies do." When asked to please stop singing, she shouted back, "NO!" When the teacher went over to speak at her level and calmly relax her, she began swinging her arms and trying to hit the teacher. The teacher then picked her up and carried her to the couch in the other play room where she was asked to get it all out. She kicked and screamed and hit the pillows of the couch. After a few moments, she lay down and just cried. She seemed very upset and depressed not wanting to be touched until she was ready. She hugged her teddy bear and then after 10minutes hugged the teacher whom had removed her from the group. She played with Cassidy's hair and talked with her about what was bothering her. In exhaustion, she fell asleep. When her mother came to pick her up, she noted that Cassidy had not slept and was up all night "worrying and thinking" "She seemed very in thought and stared off into space. She wanted to be left alone." At the end of the school day, Cassidy used to take a short nap before her mother came to get her in the afternoon, but she no longer does because her teachers and mother like to try to get her tired enough in the day

so that she can be put to bed at a decent time and will stay asleep through the night. [Detailed description of her behaviors and interactions.](#)

Emotionally disturbed children many times require specialized instruction to achieve success in a school environment. Cassidy now receives a type of IEP that allows for her teachers to set developmental and education goals for her each day. Usually school officials will work with the parent to develop an appropriate educational plan to address the areas of concern. Mrs. S met with the teachers in Cassidy's classroom and principal along with the school psychologist to discuss what can be done for Cassidy and what she may benefit from (individualized and group instruction, taking walks to calm down, doing shorter activities that are simple for her to accomplish and meet goals. And games she can play that will aid in allowing her to interact once again with the other children in the classroom.)

These short spans of time when she is allowed to be isolated after being with her group and being able to walk outside the classroom has helped Cassidy to clear her mind and for her aid to be able to redirect Cassidy to understanding that when she goes back into the classroom she has to try to sit with her "friends" and make mommy see how far she has come. When she returns to the classroom, she seems better and more focused. She is able to work alone when needed and is showing a little progress by being involved in circle time. At the end of each day, she visits the school psychologist who plays various games to help Cassidy channel her emotion and prepare her for the ride home and rest of the day to be ready to deal with and face her emotions and control her behaviors. Cassidy was referred to be screened for a behavior disturbance. I cannot disclose what the screening entailed as her mother asked me not to but it

is easily accessible online as a series of tests that allow the child to play and be observed. Since Cassidy is so young, she does not qualify for screening that a kindergarten at the age of six may receive which is more of an explanation of the child's thoughts and emotions. At this stage, observation is the most essential tool to aiding Cassidy in pinpointing what sets her off and what things can be avoided to make her feel comforted. Good point.

Once begin "diagnosed" as an emotionally disturbed child due to the abuse from her father and alcoholism in the home, actions were made to alter Cassidy's experience in school and at home. She was referred to a team of professions at Bradley Hospital that took on her case. She works with a family therapist, attends play counseling sessions to work off her anger, and is attending outpatient care. This summer she will be attending a program that will allow her to be monitored closer and she can be a temporary patient at the facility. She has just recently begun taking a medication in which to help her remain focused and to help her to be less reactive to situations that trigger her emotion. Her attention has gotten better and she is becoming more social with her peers. She is "warming up" to her teachers and school activities which are great. Her family has always been very supportive of her and her mother and brother through the divorce and family issues and they have remained positive in helping to make Cassidy feel important and special to them. We all want her to get better and be that happy little girl we all know and love. This is a condition that is not easily treated and Cassidy will need to work hard along with her parents to get better but we have faith that the team at Bradley Hospital and their therapies/services can help Cassidy progress. I feel the summer stay will be beneficial in viewing what may be beneficial to her and to better understand how she came to be so disturbed and depressed.

Her social development interaction with other children: Cassidy gets along well with her cousins and other friends around their neighborhood and at day care. Cassidy would alter how she played depending upon whom she is playing with. When she was with the girls, she likes to play with dolls, paint her nails and put on lip gloss. When she was with the boys, she loved being rough. She liked to play tag and even football. Luckily, the boys knew that even though she acted tough, they would have to be gentler with her. Also, when she is around smaller children, she liked to act like a big sister. Cassidy now has a problem sharing, especially if she is sharing with kids who will share with her. She gets upset when other kids do not share with her and will act out. Other children looked to Cassidy as a leader because she was not as shy as the other children her age and she was not afraid to try things first. Adults liked talking to her because she wasn't shy and had excellent communication skills for her age. Her teachers tended to expect more out of her because she acted mature for a three-year-old. Her self-concept before compared to now is that Cassidy had a lot of friends, so she felt loved and she would always say that she loved everyone. She now will not seek her friends and due to her aggressive attitude and tantrums, her friends no longer ask her to play nor play near her. She sadly has now isolated herself as she plays and does not want to be bothered. She likes to be in a quiet setting where she can talk to herself out loud. Cassidy loved all of the frills that come along with being a little girl. Sometimes her mother would have to beg her to wear pants instead of a dress or skirt. She loved to play dress up and pretend to be a lady.

At this stage, Cassidy is a very unhappy little girl. She was always smiling and trying to

make others smile too and now her smile has gone away. Cassidy does show any signs of insecurity. When she goes to head-start, she will give her mother a big hug and kiss and then crying and beg and worrying about her mother leaving. When I asked her why she was so upset, she said it was because she doesn't know if her mother will come back for her. This shows that Cassidy has signs of emotional tension. She is so busy worrying and thinking instead of her normal self that was too busy playing and acting silly. Cassidy may show signs of withdrawal or aggressive behavior when she is teased by her friends and when she feels that someone is being mean to her. Cassidy thinks that everyone is mean and that no one is her friend.

There are many disadvantages for a child growing up in a single parent family after having both parents present since birth. These disadvantages can be seen through Urie Bronfenbrenner's Ecological Systems Theory. First one might wonder just what this Ecological Systems Theory is. "Ecological Systems Theory views the child as developing within a complex system of relationships affected by multiple levels of the surrounding environment." Bronfenbrenner described his approach to child development best in a bioecological model. This model is centered on the child and how their immediate environment effects his development, and from there stems out to broader environments.

There are five systems in this model: microsystem, mesosystem, exosystem, macrosystem, and chornosystem. The microsystem is the relationships between the child and his/her own immediate environment. The mesosystem deals with the immediate settings such as the immediate family. The exosystem is the social settings that indirectly effect the

child's development, such as the extended family. The macrosystem more is the societal and cultural settings on a larger scale, like the laws, customs, and values of where the child is growing up. The chronosystem is a little harder define, this refers to how the environment is not constant it is ever changing, and the chronosystem is the temporal changes in a child's environment, that produce new conditions that will effect his/hers development.

Growing up in a single parent house greatly affects how each system or layer of the Brofenbrenner model will influence or affect the child's development. After Interviewing Cassidy's mother who is a teacher herself and using my acquired insight from my best friend that grew up in a single parent home for the first 8 years of her life, I was able to dissect how each level of the model affects the child. At the microsystem level, I felt that being in a single parent home really doesn't affect the child's development any differently than other children, say as much as other levels may. I always felt that at that young of an age the child doesn't know that only having one parent present and giving him/her attention is not the norm. With Cassidy I can see that I was wrong and that this is affecting her in a way where she feels unstable without her father and her mother to her is simply not enough attention. When I asked Ms. S her how she believes children perceive their situation of only having one parent, she responded by saying, "in the early years children really don't know any better so they view it or perceive it as being normal, they just don't know any better. Now once they get older and go to school and start spending time at friends houses, in groups at school etc they start to notice that hey most of them have two parents, and usually do not like that they are different."

“Being that my daughter has always been very socialized with both my ex husband and I, I feel as though she is at this realization now in her mind. She sees everyone having a mommy and daddy and can’t conceptualize the fact that she only has me now.” Cassidy’s lack of a father in her life everyday has troubled her. She feels empty she says when you ask her how she feels that daddy is away. He took her to school, they read together each night, as a family they would go out to dinner and do fun things. This divorce has changed this little girl’s feelings of what families are and what they should look like. It’s as if Cassidy’s father had died and this was her grieving. A dramatic statement.

As one can imagine, the mesosystem can affect a child in a single parent home much differently than in other homes. In this level children begin to play with other children and also perhaps go to pre-school or other child care centers as Cassidy does. As her mom said, when children leave their own personal environment, or their microsystem, and enter a school or hang out over at other children’s houses, or enter the mesosystem, they realize how they are different. Once a child realizes this, their first reaction usually is to really not like that they are different. So their attitude is usually negative and it may result in resentment of their parent or if nothing else brings question their mom or dad as to why it is just them. After listening to how Ms. S described how she thought children perceive their situation, I really realized that it is similar to how my friend felt. She and Cassidy both felt nothing was wrong until they were around friends and in a “parent family” situation. Cassidy in the situation of the tantrum in school shows how Cassidy felt the loss of not having a dad in her life anymore. The opportunities a child gets here are also affected. How has it affected

her brother?

The most important impact or problem that faces a single parent family is the economic impact. They simply don't bring in as much money, and most single families, live below the poverty line for some time period. It is also harder to get things like health insurance (which is now a problem as Cassidy is receiving services for her disturbances), child care, etc. Again these things all require some sort of economic stability, which is harder to sustain in a single parent family. Good point.

One can see that the mesosystem is greatly affected from this social condition. In the exosystem I think Cassidy is affected differently from other children as well. I think that the extended family can actually be a bigger influence than maybe in other families. They most likely play a bigger role and help out more, so here the relationship that a child develops is usually stronger with their extended family than other children might have with theirs. The macrosystem to me really doesn't affect a child in a single parent family that much different than any other type of family. In any types of family you have to follow the same laws, and are taught the same basic values, etc.

I see saw how the mesosystem and exosystem relationships affected Cassidy emotionally. Though she is so young, I feel she is benefitting from the services she is receiving and therapeutic sessions where she interacts with a child psychologist to express her anger and aggression and to better understand the situation at home and in school. When she first started attending, I was allowed to sit in and watch her interact in her angry, sad, stressed way. After a few sessions, I checked in with mom and she stated that after

being screened, Cassidy was diagnosed as severely emotionally disturbed and slightly manic depressed. She began behavior meds and working with a team to help her become better at school and how to correctly address and channel her emotions. She is slowly becoming a little more social and showing signs of interest in the things she once loved. Dad also started to slowly be worked into joining these therapy sessions staying a few minutes and then leaving.

Since Cassidy's mother has sole custody and her father has his own troubles as a recovering alcoholic and gambler (the reason for the divorce) he is working on himself before returning to become an active role in his children's lives. Her extended family (grandparents, aunts, cousins etc...) are all supporting Cassidy as she works to get better. Her mother states that they may try to see how Cassidy may feel in staying on some overnight visits to Bradley Hospital so that they can further investigate her emotions and monitor her progress. This I feel may be beneficial in monitoring what may help Cassidy and also help mom to see what she can do to help aid Cassidy in working with her feelings and actions.

I can see how the exosystem relationships with her friends' families (both parents coming to pick them up, or at a birthday party her mother mentioned she would be more upset) and how her extended family members' families indirectly affected how her attitudes changed and affected her microsystem and mesosystem.

Brofenbrenner has given a lot of attention to the chronosystem as an important environmental system. He has called attention to two problems seen in young children of this age: the large number of children who live in poverty especially in single parent families

and the decline in values. The effects of divorce on a child can be complex depending on the age of the child, strengths and weaknesses of the child at the time of the divorce, the type of custody involved, socioeconomic status and post divorce family functioning. (Cox 2001) It is very important that Cassidy has a good support system during this time (relatives, friends) an ongoing positive relationship between the custodial parent and the ex spouse, being able to meet financial needs, and quality schooling to help Cassidy adjust to the stressful circumstance of divorce. Good points to consider. How does it affect the whole family?

I think that Cassidy's mom is working to really improve her parenting skills and give her children the greatest chance of being happy with knowledge of how this situation with Cassidy and the divorce is going to affect the children. I feel that the best way to go about this is to see how each level of Bronfenbrenner's model, and how each level affects each other. Piaget and Erickson would also be two theorists that would focus on the particular step by step developmental change that Cassidy will have. Erickson's life span development theory proposes eight stages, each centering on a particular type of challenge or dilemma: trust vs. mistrust (Infancy-first year), autonomy versus shame and doubt (Infancy- second year), and initiative versus guilt (Early Childhood (preschool years –ages 3-5). Cassidy is in the initiative versus guilt stage where she will experience a big social world where she is challenged more than when she was in infancy. To cope with these challenges, she needs to engage in active, purposeful behavior which she was involved in before the stress in her home life. Good points.

At this stage we as teachers expect the child to become more responsible and require

them to assume some responsibilities for taking care of their bodies and belongings as I mentioned before when Cassidy could wash herself and cleaning up her toys. By doing this she was developing a sense of responsibility and was gaining initiative to become more independent. Due to her emotional and behavioral issues that she is now having, she has begun to develop uncomfortable guilt feelings as she may feel irresponsible or too anxious. Cassidy's parents take an authoritative viewpoint on parenting and raising her and her little brother. They were positive and encouraged Cassidy to be independent but still place limits. They always asked Cassidy how she felt and what she thought and wanted to do. This helped Cassidy be more vocal with her opinions and feelings. Sadly she has lost this positive communication but we are all hoping that she will work hard to include herself in everything and can verbalize her thoughts. These stages set by Erickson aid professionals and families to understanding socioemotional development of a young child. Piaget proposed two stages of moral thought and Cassidy would fall into the heteronomous morality (ages four to seven) stage where justice and rules are conceived of as unchangeable properties of the world removed from the control of people. (Heatherington 2002.)

There was a lot of information that I was asked not to include by Cassidy's mother which I completely respect. She would not like me to disclose any notes taken as I observed her in her screening process and at home. I hope that Cassidy and her family will improve and become stronger as she receives treatment. I believe that therapy will not only help her, but to help construct a healthy relationship between her parents as they will need to both work together for the benefit of Cassidy in her treatment. Hopefully Cassidy will have the

presence of her father more in her life and he will retain that role as father and better himself as well. I look forward in watching Cassidy learn and grow into a well adjusted little girl and wish her the best in her recovery!

**Name has been changed for privacy purposes.

Well done presentation and discussion of your family case study. You provide many detailed descriptions and examples from your observations and interactions with the family. There must have been many challenges documenting this case study. You provided in-depth knowledge and insight into the case study. Good integration of research throughout the case study. More focus on the needs of the family and younger brother would add to the family case study.

BIBLIOGRAPHY

- Heatherington, E.M., & Stanley-Hagan, M. (2002) Parenting in divorced and remarried families. In M.H. Bornstein (ed.). Handbook of parenting (2nd Ed.). Mahwah, NJ: Erlbaum
- Cox, M.J., & Harter, K. S. M. (2001). The road ahead for research on marital and family dynamics. In J.P. McHale & W.s. Gronlneck (Eds.), Retrospect and prospect in the psychological study of families.
- Brofenbrenner, U. (1979). The ecology of human development. Cambridge, MA: Harvard University Press.
- Cohen, D., Stein, V., Balaban, N., & Gropper, N. (2008). Observing and recording the behavior of young children. (5th Ed.) New York: Teachers College Press.
- Kalke, T, & Glanton, Ann. (2007). Positive behavioral interventions and supports: using strength-based approaches to enhance the culture of care in residential and day treatment education environments. *Child Welfare*, 86(5), doi: (EJ783035)
- Heckel, L, & Clark, A. (2009). The Relationship between divorce and the psychological well-being of children with adhd: differences in age, gender, and subtype. *Emotional & Behavioural Difficulties*, 14(1), doi: (EJ828668)

- McCullough, C. (2009). A child's use of transitional objects in art therapy to cope with divorce. *Art Therapy: Journal of the American Art Therapy Association*, 26(1), doi: (EJ833505)
- Fenichel, E. (2003). The Impact of adult relationships on early development. *Zero to Three*, 23(3), doi: (ED476239)

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To whom it may concern,

My name is x and I am currently a graduate student at Rhode Island College studying in the area of Early Childhood Education. In this program I have conducted a case study of a student with special needs. Her family is going through a tough time as the child is being screened for an emotional disturbance and services. The child has been pulled from her school due to the issues she is facing and the family has now decided to provide the child with services from Bradley Hospital's mental health program. For many parents, this is a tough time in which there are a lot of families finding themselves under a tremendous amount of stress. Finding the right program and assistance for any child with any type of mental or emotional problem is very important and many times parents just don't know who to turn to.

I write this letter to you on behalf of this family proposing a possible outreach program for parents of emotionally disturbed, ADD and ADHD children. I believe that a weekly group meeting could be beneficial to allow parents to share stories, discuss information and learn together how to help their families cope with family anxiety and stress. Teachers from local communities may be able to help better educate parents on the things they can do to work with their students at home and to create a safe environment for them to grow and learn. I know that at the YMCA, families can join together to meet on various nights to complete art and music programs, or can join support groups for families facing alcoholism, or support groups for parents wanting to help their children succeed in school. I feel as though a support group, even if based online can allow parents to share information with one another and share successes and failures that they have endured as their child faced treatment.

As parents meet, children can socially interact with one another under a supervised setting and can play freely. The children can also express themselves through music and art

classes as well. The parents can trust the fact that their child is in good and qualified hands of professionals that are either trained in the social contexts of children or who may have a medical background that can address the needs of these children.

The YMCA is a place for families and communities to join to work together in creating a tight bond. If we can support students in their academics as well as their socialization; we are meeting a goal, but if we can aid students that may need some assistance and allow their families to connect with families in similar situations or experiences, we are also creating a community of learners. You state on your website that, **“Every child and youth will deepen positive values, their commitment to service and their motivation to learn.”** I believe this value that you place in your centers. We need to join together to help these families in need of our support, guidance and love and as a YMCA member and volunteer, I feel as though this goal can be achieved with hard work.

My main goal for this letter is to aid in helping to educate families about the additional services they can have in their community to allow their families to be healthy and safe. There are many groups aiding in the health of these children, but we forget about the families that are also involved in this process. In writing this letter I hope that you will see that there is a great need in our community for families and children to reach out to communicate with one another on the topic of special needs children and to provide one more support system other than what are in our schools. This need should not be taken lightly and I would love to meet with you and discuss the opinions and stories of families that stand behind the start of this group. I believe we can change the lives of these children and the families behind them. I thank you for reading this letter and hope we can soon speak seriously.

Sincerely Yours,

x

| Well written letter. It would be good to add some research and statistics to back up your letter

ECED 512

Family Case Study and Advocacy Letter Rubric

Name: **Date:** 5/18/10 **Score:** 31 **Revision:**

| <p align="center">Exceeds Expectations</p> <p align="center">33- 35 Points</p> | <p align="center">Meets Expectations</p> <p align="center">26- 32 Points</p> | <p align="center">Does Not Meet Expectations</p> <p align="center">0- 25 Points</p> |
|---|--|--|
| <p>An in-depth case study of one family in a diverse setting that addresses family life – including risk and protective factors – and culture is presented. The case study is a detailed, comprehensive description of the family and child’s development in all domains. Their characteristics and needs are detailed and documented with examples and anecdotal records. (APA format)</p> <p>6 - 7 Points Standards 1, 2, 3, 4, 5 Tools 2, 3, 4, 5, 6, 7</p> | <p>An in-depth case study of one family in a diverse setting that addresses family life – including risk and protective factors – and culture is presented. The case study is a detailed and provides a description of the family and child’s development in most domains. Their characteristics and needs are described with some examples and anecdotal records. (APA format)</p> <p>5.5- 6 Points Standards 1, 2, 3, 4, 5 Tools 2, 3, 4, 5, 6, 7</p> | <p>A case study of one family in a diverse setting that addresses family life – including risk and protective factors – and culture is presented. The case study describes the family and child’s development. Their characteristics and needs are addressed with some details and examples. (APA format)</p> <p>0- 5.5 Points Standards 1, 2, 3, 4, 5 Tools 2, 3, 4, 5, 6, 7</p> |
| <p>An understanding and knowledge of the child, family, school, and community are valued and demonstrated through a detailed description of their complex characteristics and values. Knowledge and application of ethical principles and guidelines are followed. Documentation of informed consent is included.</p> <p>2- 3 Points Standards 1, 2, 3, 4a, 5 Tools 1, 6, 7</p> | <p>An understanding and knowledge of the child, family, school, and community are valued and demonstrated through a description of their characteristics and values. Some knowledge and application of ethical principles and guidelines are followed. Documentation of informed consent is included.</p> <p>2- 3 Points Standards 1, 2, 3, 4a, 5 Tools 1, 6, 7</p> | <p>Some knowledge of the child, family, school, and community is described. Knowledge and application of ethical principles and guidelines are followed. Documentation of informed consent is included.</p> <p>0- 2 Points Standards 1, 2, 3, 4a, 5 Tools 1, 6, 7</p> |

| Exceeds Expectations | Meets Expectations | Does Not Meet Expectations |
|--|---|---|
| <p>Cultural competence is demonstrated by a high level of competence in understanding, describing, and responding to the diversity of culture, language, and ethnicity within the child's family and community.</p> <p>4 - 5 Points Standards 2, 3, 5 Tool 1</p> | <p>Cultural competence is demonstrated by some competence in describing and responding to the diversity of culture, language, and ethnicity within the child's family and community.</p> <p>3.75 - 4.5 Points Standards 2, 3, 5 Tool 1</p> | <p>Cultural competence is somewhat demonstrated by limited competence in describing the diversity of culture, language, and ethnicity within the child's family and community.</p> <p>0 - 3.5 Points Standards 2, 3, 5 Tools 1</p> |
| <p>An understanding of the risk and protective factors which may influence the child's development and family resiliency is described and documented in detail. Multiple interacting influences on the child's development and learning are presented in detail. Risk factors in the child's life, family and community which may add stress to the family and threaten healthy development are documented, researched and detailed within the case study.</p> <p>4- 5 Points Standards 1, 2, 3, 4a, 5 Tools 1, 2, 3, 4, 5, 6</p> | <p>An understanding of the risk and protective factors which may influence the child's development and family resiliency is described and documented. Multiple interacting influences on the child's development and learning are presented with some detail. Risk factors in the child's life, family and community which may add stress to the family and threaten healthy development are documented and researched within the case study.</p> <p>3- 4.5 Points Standards 1, 2, 3, 4a, 5 Tools 1, 2, 3, 4, 5, 6</p> | <p>A limited understanding of the risk and protective factors which may influence the child's development and family resiliency is described. Some interacting influences on the child's development and learning are presented. Some risk factors in the child's life, family and community which may add stress to the family and threaten healthy development are presented within the case study.</p> <p>0- 3 Points Standards 1, 2, 3, 4a, 5 Tools 1, 2, 3, 4, 5, 6</p> |

| Exceeds Expectations | Meets Expectations | Does Not Meet Expectations |
|--|---|---|
| <p>Strategies for supporting psychological well-being and healthy child and family development are assessed and recommended through documentation and a mastery of relevant theory and research. Professional conclusions and recommendations for advocacy, and interventions, as needed, are well documented in the case study. APA format is used.</p> <p>4 - 5 Points Standards 1, 2, 3, 4b, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> | <p>Strategies for supporting psychological well-being and healthy child and family development are assessed and addressed with relevant theory and research. Conclusions, recommendations for advocacy, and interventions are professionally documented in the case study. APA format is used.</p> <p>3.75 - 4.5 Points Standards 1, 2, 3, 4b, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> | <p>Strategies for supporting psychological well-being and healthy child and family development are somewhat addressed through theory and research. Conclusions and recommendations for advocacy and interventions, as needed, are somewhat addressed in the case study. APA format used.</p> <p>0 - 3.5 Points Standards 1, 2, 3, 4b, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> |
| <p>Advocacy for protective factors for the child and family which address school, family, and community partnerships, and support are well researched, documented and discussed in an advocacy letter on behalf of the child and family for a support service or program needed within the school and/or community.</p> <p>9 - 10 Pts. Standards 1, 2, 4a, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> | <p>Advocacy for the child and family which address school, family, and community partnerships, and support are addressed and discussed in an advocacy letter on behalf of the child and family for a support service or program needed within the school and/or community.</p> <p>7.5 - 8.5 - 9.5 Pts. Standards 1, 2, 4a, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> | <p>Advocacy for the child and family is limited and/or unsubstantiated in an advocacy letter. There is little advocacy or justification for a support service or program needed within the school and/or community. School, family, and community partnerships are either not addressed or addressed in a limited way.</p> <p>0 - 7.5 Pts. Standards 1, 2, 4a, 5 Tools 1, 2, 3, 4, 5, 6, 7, 8, 9</p> |

ECED 512
Family Case Study and Advocacy Letter Rubric

Name: _____ **Date: 5/18/10** **Score: 31** **Revision:** _____

Standards: 1a, b, 2a, b, c, 3a, b, c, d, 4a, 5a, b, c, d, e are incorporated into this rubric through the family case study and advocacy letter.

Tools: 1, 2, 3, 4, 5, 6, 7, 8, and 9 are incorporated into the Family Case Study and Advocacy Letter and Rubric.

The Family Case Study and Advocacy Letter is an in-depth case study of one young child (Birth -8 years) and family in a diverse setting that addresses family life – including risk and protective factors – and culture. An understanding and knowledge of the child, family and community are demonstrated through research, observation, and documentation. Cultural competence is demonstrated through research of and demonstrated sensitivity to the family, school, and community cultures. Competence in understanding, describing, and responding to the diversity of culture, language, and ethnicity within the child’s family and community is demonstrated in the case study and advocacy letter.

An understanding of the risk and protective factors which may influence the child’s development and family resiliency is described and documented. Multiple interacting influences on the child’s development and learning within the cultural context are presented in detail. Risk factors in the child’s life, family, school, and community which may add stress to the family and threaten healthy development are documented, researched and detailed within the case study. Strategies for supporting psychological well-being and healthy child and family development are assessed and recommended through documentation and a mastery of relevant theory and research. Professional conclusions and recommendations for advocacy, and interventions are documented in the case study. Advocacy for protective factors for the child and family which address school, family, and community partnerships, and support are researched, documented and discussed in an advocacy letter on behalf of the child and family for a support service or program needed within the school and/or community.