JohnHoward FactSheet
SOCIETY OF ONTARIO

Client-Centered Case Management: Benefits and Outcomes of Individualized Care

What is Client-Centered Case Management?

Client-centered case management is an approach to client engagement that aims for effective, humane and individualized coordination of, and continuity in, service delivery.

Client-centered programs include strategies to identify and build on clients' strengths and goals rather than focusing primarily on their problem areas. Service providers (hereafter "staff"), in partnership with clients, tap into clients' motivation and identify clients' skills and capacities, existing resources, challenges, and the supports they need to meet their short- and long-term goals. This approach also recognizes the importance of drawing from the strengths of an individual's family and community when developing a plan. Resources within clients' families, support networks, and communities are then individually tailored to clients to meet their goals and needs through an action plan.

Strengths-based approaches employ a holistic approach to working with clients, recognizing their intrinsic value, and working with the individual's strengths and capacities in addition to his/her unmet needs. When employed together, client-centered case management and strength-based approaches aim to reduce stigmatization and marginalization experienced by clients by promoting their self-worth and value, and targeting the spectrum of challenges causing conflict with the law rather than focusing exclusively on individual problems.

"These strategies identify and build on clients' strengths and goals rather than focusing primarily on their 'problem' areas."

Correctional programming often focuses primarily on the "deficits" of justice-involved individuals as targets for rehabilitation. Deficits are problem areas such as unemployment or unstable housing that have been statistically linked to an increased risk of crime – often referred to as criminogenic risks or needs. However, focusing on deficits may worsen stigmatization and marginalization, as clients are not viewed as rehabilitated until they overcome the identified deficits.

Indeed, clients can have difficulty fully reintegrating into their communities if their 'deficits' still exist, and these problems are typically viewed as individual – rather than structural – causes of crime. While challenges in clients' lives (such as mental health issues) are important targets for reintegration, these issues are often complex and require a spectrum of care that facilitate full reintegration.

For example, the root causes of homelessness are integral targets of effective reentry programs. The programs could include components on finding employment, accessing mental health support and meeting basic needs such as healthcare, as part of the overall strategy to assist the client in securing and maintaining housing. Conversely, deficit-based approaches to client programming tend to produce poor outcomes as clients do not escape their negative stigma, structural barriers to success are not addressed, and employ standardized or 'cookie cutter' programming models.

There are defining features of best practice client-centered case management models which serve to promote clients' strengths and effectively support reintegration. These include:

Client-Staff Relationship

- Staff exercise respect, non-judgmental attitudes, attentive listening, and empathy, to establish trust and maintain the dignity of the client.

- The client is considered the expert of his or her personal situation and social reality. Elements of programming such as setting goals are mutually agreed upon between the client and staff, enabling clients to have an active role in their reintegration. To this end, staff are considered facilitators of client-centered care rather than directors.

- Staff use positive reinforcement and encouragement for achievements rather than coercion to participate in programming and/or punishment for client setbacks. Positive reinforcement is also central to reducing the stigma associated with criminal justice system involvement.

Individualized Collaboration

- Client-centered care is individualized based on each client's goals and unmet needs. Programming is not standardized but is continually modified to ensure goals are met.

- An integral part of a successful program model is outreach and flexibility; that is, organizations seek out clients rather than relying solely on clients to seek out the programs. In addition, being flexible as service providers; for example, asking clients where they would like to meet may be more effective than expecting clients to come to staff. Community involvement and collaboration with outside agencies are important ways to initially engage clients in this manner.

- Client-centered programming is a non-linear process. Clients may alternate between stages of programming depending on their goals, outcomes and needs.

- The length of time needed to successfully assist a client differs depending on the client's personal situation, social barriers, unmet needs, available resources and supports.

- Socially marginalized clients (e.g., homeless clients) will likely have less access to resources required to meet their goals and needs. Attentive listening to clients' histories and backgrounds and cultural sensitivity are essential to facilitating access to appropriate resources and pinpointing clients' self-identified goals and needs.

Reducing Stigma

- Strengths-based approaches focus on skills and capacities rather than deficits. Consistent with this approach, barriers to successful reintegration should be perceived as challenges rather than problems to be fixed.

- Reframing challenges as barriers to goals rather than as intrinsic characteristics of individuals, and looking beyond individual challenges to structural ones, are important to overcoming stigmatization.

- Staff match existing resources within clients' communities and support networks to their goals and needs. Communities are equipped with localized resources to support clients, and communities should be inclusive of justice-involved individuals.

- An important aspect of reintegration and restoration is having meaningful social roles that promote skills and capacities and involve clients with their communities. To this end, work and volunteer positions matched to the client's skills and needs could be rewarding for the client, where appropriate.

How To Apply Client-Centered Techniques in Your Agency

1) Outreach and Identification

The first step is to engage in community outreach to identify clients. Reaching vulnerable and marginalized populations involves seeking out clients, rather than expecting clients to approach service providers. It is especially important to engage clients exiting from correctional institutions immediately upon release (if not prior to release) to provide supports around homelessness, mental health, addictions and employment, so that these challenges do not surface or worsen upon community reentry.

Collaborating with outside agencies such as community services, mental health and addictions services is particularly important for identifying clients and for establishing a comprehensive web of support. Comprehensive care involves linking both formal supports such as case managers, and informal supports such as peers. Awareness of issues such as homelessness and poverty, and acknowledging that these issues exist in our communities, helps reduce the stigmatization of affected individuals, mobilizes support and enhances communication across agencies.

2) Assessment

The assessment stage involves comprehensive information gathering about the client's self-identified needs, goals, strengths and areas requiring support. Staff can then determine the intensity of support a client requires, the types of programs and services that are beneficial for the client based on his or her stated needs and interests, and address the client's most pressing issues. Essential elements of programming are establishing trust and respect, getting to know the client, and learning his or her skills, strengths and capacities. Identifying existing support within the client's social circle facilitates reintegration. For example, identifying family members, friends, counselors, and community leaders, allows the client to draw on existing resources.

Client-centered tools are helpful in this stage, such as assessment charts that identify challenges and skills, with a corresponding list of available resources matched to these items. For example, if clients identify unemployment as a barrier, staff can strategize with clients and other agencies by listing available job search and employment resource centres, identifying their existing skills to find suitable and rewarding employment, and listing employment options that do not discriminate against individuals with histories of criminal justice system involvement.

3) Development of a Plan

A plan transforms a client's goals and needs into achievable steps. Goals should follow the 'SMART(S)' criteria (specific, measurable, achievable, relevant, time-bound *and* strengths-based). Considering the strengths-based criterion encourages staff to help clients formulate goals that state the desired behavior in positive terms. For example, the goal should be to "maintain sobriety" rather than to "avoid drinking." Client-centered tools such as action plans specifically tailored toward the client are helpful for developing strategies to meet the client's needs. For example, if a client has identified addiction support as an unmet need, specific options for addressing this need are listed, and staff collaborate with other agencies to facilitate this process. Continued collaboration with the client and corresponding agencies in the client's support network, and revising of goals if necessary, are important parts of the process. Research indicates that disagreements between clients and staff about self-identified goals and needs hamper success with strengths-based approaches under a client-centered model. Staff should ensure that goals are clear, demonstrate respect and empathy for the client's own reality, preserve judgment and bias, and ensure that assessment and action plans are individualized toward the client. Using strengths-based language (e.g. displaying empathy, using positive reinforcement for achievements and asking open-ended questions) are helpful strategies to maintain a rapport throughout the process.

4) On-Going Coordination and Support

Follow-ups with clients to offer encouragement and support and to give them the option of active collaboration if they experience setbacks in their reintegration are integral to the client-centered programming model. Staff should maintain relationships with outside agencies (such as hospitals and treatment centres) to ensure long-term care of clients. Part of this process includes being knowledgeable about available resources and supports, engaging with the client on a regular basis, and developing partnerships with other agencies to deliver a comprehensive network of community support. Depending on their situations, clients may need to return to stages of client-centered care such as assessment and plan development. Clients who view their case staff as empathetic, committed to their case, and available to assist when needed, find more success with their community outcomes.

Key Reading List

1) John Howard Society of Ontario. (2012). *Effective, Just and Humane: A Case for Client-Centered Collaboration.*

2) Rapp, C., Pettus, C., & Goscha, R. (2006). Principles of Strengths-Based Policy. *Journal of Policy Practice,* 5(4), 3-18.

3) Siegal HA; Fisher JH; Rapp RC; Kelliher CW; Wagner JH; O'Brien WF; Cole PA. 1996. "Enhancing substance abuse treatment with case management. Its impact on employment." *Journal of Substance Abuse Treatment* 13 (2):93-98.

4) van Wormer, K. (1999). Strengths Perspective: A Paradigm for Correctional Counseling. *Federal Probation, 63(1), 51-58.*

5) Vera Institute of Justice. 2011. *Why Ask About Family? A Guide for Corrections.* Vera Family Justice Program. www.vera.org/

Fact Sheets are a publication of the John Howard Society of Ontario on a variety of social and criminal justice issues, intended for our Affiliate staff and community partners. All Fact Sheets are available on our website.

The John Howard Society of Toronto's (JHST) Housing Program is a client-centered multi-sectoral housing program model that aims to assist clients in securing independent and affordable housing, while also addressing the complex needs of clients through established linkages to other necessary social supports and services in the community. JHST's Housing Program serves male clients aged 18 and older while not discriminating based on clients' level/types of past convictions or level of need, giving vulnerable populations access to programming. Through a holistic approach to programming and while recognizing the client's strengths and value, the JHST Housing Program identifies the client's housing needs and social health inequities and acts as a central hub to connect the client to community resources, such as mental health and addictions treatment, employment agencies, and community service supports.

The JHST Housing Program is unique in that it employs an individualized strengths-based model to outreach, intake and programming, enabling the client to fully engage in his plan, while simultaneously providing a supportive network through collaborations with outside agencies. Supports are individually tailored toward the client's needs through a democratic process. For example, if clients do not want treatment or specific types of treatment, client-centered programming means that they have the choice to

"They treated me with respect and they were very helpful. They were human."
– JHS Toronto Housing Program Client

refuse without fear of judgment, coercion or denial of services. Some clients may require more intensive support but overall programming is reflective of the client's goals and needs throughout the process.

An evaluation of the JHST Housing Program revealed a number of key findings in support of a client-centered program model that uses strengths-based approaches to client engagement. Overall, clients experienced a considerable reduction in the presence of issues they faced prior to accessing the program, which included alcohol and drug issues, mental and physical health issues, criminal justice involvement, financial problems and poor living conditions. The efficacy of the program is attributed in large part to its strengths-based design and the ways in which staff treated clients, in that staff were knowledgeable, trustworthy, accessible, treated the clients with respect, and offered continuity of care.

These findings underscore the need for providing a spectrum of resources and a network of support that is trustworthy, dependable, and respectful. Clients found success when their case staff were viewed as committed to their case, available for assistance, and had a vested interest in their clients' skills, hobbies, and capacities, which in turn served to increase clients' perceptions of their self-efficacy.

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The John Howard Society Position

The mission of the John Howard Society of Ontario (JHSO) provides that as an organization, we offer programming that is evidence-based. It also mandates that our approach to program delivery be just and humane. Client-centered and strengths-based programming is an excellent example of a proven best practice with respect to both its delivery and its outcomes.

Based on JHSO's own research, a major contributing factor to the efficacy of programs is based on the *experience* staff provide for clients.

This finding has tremendous implications, namely the pressing need for strengths-based and client-centered program models for agencies serving high-need and high-risk clients, as well

as the broader social services sector. Clients with complex issues are too often viewed as the sum of their parts, having to recount over and over again their personal stories, which can lead to alienation from and a sense of disillusionment with the treatment process.

It is essential that human services retain their human element. Client-centered and strengths-based programs are a demonstrated way to meaningfully engage with clients that also enhance program success.