

SOCIAL CONDITION MATRIX



Manual for Differential Response Service Providers

Introduction

The Social Condition Matrix system is a tool to help the case manager or family advocate with case management and their ability to measure the progress of the families they serve. This system is based on your own observations and interpretations of a family's status with respect to 12 functional areas in which dependent families typically have problems. There's no way to truly put on paper the complex realities of the families, but the Social Condition Matrix helps by quantifying the qualitative.

Developed in partnership with California State University Bakersfield, the Matrix makes it possible to provide funders, policy makers and community members with data that clearly demonstrates program outcomes in individuals and families. The Matrix encourages skill building in a parent and the development of outcomes that enable the measuring of family progress. The most recent evaluation research shows that both are important in achieving change. Over time you will see the effects of the family services provided reflected in these records through changes in condition. To the program managers, service outcomes reveal the kind of problems presented by client families, what services seem to be effective, and in what areas more effective alternatives and resources should be available.

You will use the Social Condition Matrix system under the direction of your site supervisor. This manual is your instruction book on procedures and evaluation standards for using this system. The individual site supervisors are the matrix system managers. The Kern County Network for Children will participate in training and technical assistance. You should keep a notebook of your questions and suggestions to share with your supervisor. Supervisors will send this feedback to the Kern County Network for Children office.

Strength-Based Case Management & Social Condition Matrix

What Is Strengths Based Case Management?

Strength-Based Case Management is a best-practices model where individual and family service plans are developed and implemented in partnership WITH the family – rather than FOR the family. An assessment of client strengths and natural support systems is a key component to strength-based service planning. By focusing on strengths and opportunities within the family system and de-emphasizing weaknesses and deficits, case management staff can assist clients in defining success and then effectively help them move toward it.

What is important to note here, is that, often people do not recognize their strengths. Sometimes people recognize a strength, and can use it in one area of their lives but don't know how to generalize the strength to other areas. We can help the families we work with, "own" their strengths, by mirroring them back to them, and helping them see how they can use them in other areas of their lives.

How Is The Matrix Related To Strength-Based Case Management?

The Matrix works well within the Strength-Based Case Management model because individuals and families are assessed holistically – not just as a bundle of problems. Assessments are regular and consistent, not just a response to crisis situations. Additionally, progress can be easily shared with clients periodically to help them visualize improvements over time.

The Social Condition Matrix Outcomes Model:

- Assess where to start with families
- Chart family progress
- Set goals with families
- Assess effectiveness of services

The Strengths Conversation

Doing a strengths-assessment is like meeting a person with whom you wish to develop a relationship. It is like meeting someone for the first time at a social gathering and getting to know them better through conversation. Some of the best people to converse with are the ones that know what questions to ask to get us to talk about the things that mean the most to us. When we walk away from that kind of an interaction we feel validated regarding who we are, our beliefs, our work, or what ever it was we shared about from the core of our being. Essentially in that kind of interaction we have been talking about our strengths and culture.

Processing the Strengths Conversation

In considering family outcomes over time, the following questions can guide the worker and clients in understanding the ups and downs in various Family Condition Scales, and the correlation between Ladder Steps.

- List all of the strengths that you learned that the person you interviewed has. Example: thrifty, fun loving, hard working and so forth.
- What did you learn about this person's culture? Who are they as a person? Example; preferences, desires, goals, ethnic background, heritage...and so forth.
- What did you learn about other people who are important to this person? Example: people who have helped them or inspired them, people who care about them, people they like.
- How long has this family been receiving services?
- What was their primary reason for referral or seeking assistance?
- What other services have been received, and how were those needs identified?

- What positive or negative correlation do you see between the family's status levels over time, and why do you think they exist?
- How do their status levels individually and collectively compare to those of other families who have been receiving services for the same amount of time?
- What positive or negative events have occurred in the life of the family during the time for which the data is being considered?
- What have the family's goals and priorities been during this time, in terms of what you and they agreed that they would work on?

How The Social Condition Matrix Works

The key to this system is the Social Condition **Matrix Assessment** or Form A. You will prepare it regularly under the supervision of your site supervisor. Matrix Assessment form is based on “snapshot” in time of home visit (what is the current situation at time of home visit) and should be filled out as soon as home visit is made.

When To Evaluate

Although case managed families are typically seen on a weekly or biweekly basis, Matrix Assessments should happen at intake, close of case, and once every 90 days throughout the case management period. (KCNC recommends that families with an “In Crisis” or “At-Risk” rating be considered intensive cases. Intensive cases should be seen more often by the Advocate or Home Visitor and followed closely by Supervisors. Although in-home visitation may be more frequent for these families, the Matrix Assessment will still occur every 90 days.) Keep in mind that several Assessments are required because change can not be observed from a single contact.

Items On Matrix Assessment (Form A)

The Social Condition Matrix measures incremental progress, stabilization or decline of a client’s condition. The Matrix involves 12 **Family Condition Scales** ranging from *Income/Budget and Housing* to *Community Involvement and Conditions of Children*.

A **Family Condition Ladder Step** is defined as the portion of the Scale that measures the actual progress of an individual client. Progress can be measured in terms of the following ladder steps:

- **Self-Sufficient:** The situation is stable and may not deteriorate any further. Intervention is not a priority.

General Case Management _____
Intensive Case Management _____

Social Condition Matrix

Case Number: _____

Family Advocate: _____

Date: _____

Intake Assessment? _____
Closing Assessment? _____

Family Condition LADDER STEPS:	Family Condition SCALES <small>On each scale, circle one number</small>											
	1. Income & Budget	2. Employment	3. Housing Stability	4. Food & Nutrition	5. Health Care	6. Transportation	7. Adult Education	8. Family Routines	9. Community Involvement	10. Child Care	11. Conditions of Children	12. Inge & Abuse?
Self Sufficient (3/3)	30	30	30	30	30	30	30	30	30	30	30	30
Stable (2/3)	20	20	20	20	20	20	20	20	20	20	20	20
At Risk (1/3)	10	10	10	10	10	10	10	10	10	10	10	10
In Crisis (0/3)	00	00	00	00	00	00	00	00	00	00	00	00

A. Condition of Children
 CPS notified? Children removed from home?
 Explain "at risk" or "in crisis" scores on Condition of Children scale. Continue on back if needed.

B. Overall Condition of Family
 In Crisis? At Risk? Stable? Self Sufficient?
 Explain your general overall impression about the condition of the family. Continue on back if needed.

C. Key Sources of Information
 Interview? Phone Call? Records/Reports? Home Visit? Other? _____

D. Advocate Signature: _____ **Date:** _____

Form A
revised 9/2009 Kern County Network for Children

General Case Management _____
Intensive Case Management _____

Social Condition Matrix

Case Number: _____

Family Advocate: _____

Date: _____

Intake Assessment? _____
Closing Assessment? _____

Family Condition LADDER STEPS:	Family Condition SCALES <small>On each scale, circle one number</small>											
	1. Income & Budget	2. Employment	3. Housing Stability	4. Food & Nutrition	5. Health Care	6. Transportation	7. Adult Education	8. Family Routines	9. Community Involvement	10. Child Care	11. Conditions of Children	12. Inge & Abuse?
Self Sufficient (3/3)	30	30	30	30	30	30	30	30	30	30	30	30
Stable (2/3)	20	20	20	20	20	20	20	20	20	20	20	20
At Risk (1/3)	10	10	10	10	10	10	10	10	10	10	10	10
In Crisis (0/3)	00	00	00	00	00	00	00	00	00	00	00	00

- **Safe:** There is no anticipation of the situation deteriorating into an at-risk situation, at the very least, in the short-term.

- **At-Risk:** If the situation is not addressed promptly, it will likely deteriorate and become a crisis.

- **In-Crisis:** The situation needs immediate attention (e.g., for every scale there is an actual crisis that must be addressed without delay).

Initial Assessment?	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Family Condition LADDER STEPS:																				
Self Sufficient (3.0)	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0	3.0
Stable (2.0)	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
At-Risk (1.0)	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
In Crisis (0.0)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Table 1: Family Condition Scales & General Indicators

Each Family Condition Scale is comprised of indicators to help a case manager determine the Family Condition Ladder Step. The following table summarizes the Family Condition Scales and the respective indicators for each Scale:

Income & Budget	Employment	Housing Situation	Food & Nutrition
<ul style="list-style-type: none"> * Income level in context of local cost of living * Meet basic needs * Debt * Credit * Long & short-term financial goals (Savings) * Budgeting skills & financial discipline * Knowledge & understanding of financial institutions & resources 	<ul style="list-style-type: none"> * Employed or not * Presence or absence of career goals, appropriateness of goals. * Level of education, job skills; work history * Employment in field of choice * Income, hours, benefits 	<ul style="list-style-type: none"> * Security of housing over time * Safety of housing * Stability of housing over time * Condition of housing * Income & resources for housing 	<ul style="list-style-type: none"> * Ability to afford adequate food * Quality of diet * Nutritional value of meals * Conditions of food preparation resources (utensils, space, appliances, sanitation)
Health Care	Transportation & Mobility	Adult Education	Family Relations
<ul style="list-style-type: none"> * Health habits * Access to health resources * Status of physical health * Ability to afford health care * Mental/Behavioral health 	<ul style="list-style-type: none"> * Access to transportation based on level of need * Safety, condition of transportation * Legal status of driver, vehicle (license, insurance, etc.) 	<ul style="list-style-type: none"> * Level of education * Learning/Credential * Literacy * Skills * Values * Planning 	<ul style="list-style-type: none"> * Family health * Ability to resolve conflict * Interfamily communication skills * Parenting skills * Extended family relationships * Domestic violence
Community Involvement	Child Care	Condition of Children	Drugs & Alcohol
<ul style="list-style-type: none"> * Knowledge of & access to community resources * Participation in the community (i.e. school, church, clubs, etc.) * Social conditions in the neighborhood * Ability to communicate with others * Type of relationship with family, friends & neighborhood 	<ul style="list-style-type: none"> * Access to quality child care/after school programming * Ability to afford child care/after school programming * Assure safe environment 	<ul style="list-style-type: none"> * Safety (risks of physical violence, sexual abuse, supervision & injury prevention) * Hygiene * Emotional development 	<ul style="list-style-type: none"> * Presence, degree of substance abuse * Ability & willingness to identify needs & access resources

Family Assessment Process & The Matrix

Baseline and Subsequent Assessments

A case manager will meet with a family member to determine initial scores for each of the outcome categories contained in the Matrix. Enter your name and the date of the assessment on the form. If this is an intake or closing Assessment, check the appropriate line. For each of the 12 family condition scales on the matrix, there are four primary levels that can represent the family's current status. They are *In Crisis*, *At Risk*, *Stable*, & *Self-Sufficient* represented by 0.0, 1.0, 2.0, & 3.0. Your task is to pick the one "ladder" step for each scale that most closely describes the family. For descriptions of each ladder step for each scale, please be guided by the *Social Condition Matrix Scale Descriptions* in this manual. Considering all of the information at your disposal, circle the one number corresponding to the ladder step that best describes the family's current status on each scale. All 12 family condition scales should be assessed (except child care if not applicable).

Box A: Use this box for an explanation of "In Crisis" or "At Risk" ratings with respect to Scale #11, Condition of Children. These ratings could reflect abuse, neglect, or injury that should be reported to DHS's Child Protective Services. A low ladder rating should be clearly explained in this block, including whether CPS has been called & if children were removed from the home.

Box B: In this block Advocates should check off **one** status (In Crisis, At Risk, Stable, or Self-Sufficient) that best describes their impression of family's overall condition. The overall condition of the family is not intended to represent an average of the twelve scale ladder values, but rather should reflect the advocate's general impression of the family as a whole. One scale factor, such as income, employment, child condition, health, or food may color your impression the family's overall condition, if it strongly influences the family's very existence. Use the following descriptor as a guide for your overall rating of a family's overall condition. A low ladder rating of "In Crisis" or "At Risk" with respect to Scale Condition of Children & Overall Condition of Family should be clearly explained in the Matrix Assessment form (boxes A & B).

Overall Condition Descriptions

Ladder Level

Scale Descriptions

Self-Sufficient (3)	Family members are healthy & generally secure , committed to improvement & making progress toward goals. Family may require some temporary public or private assistance. Family can afford adequate housing in a safe neighborhood.
Stable (2)	Family does not face significant threats. Most needs are met, but family requires some outside assistance . Family members demonstrate some willingness to work toward change. Family is out of crisis, not significantly at risk & can afford adequate food & shelter. Housing is safe & secure, & space is adequate for family size.
At Risk (1)	Family relies on temporary or inappropriate solutions & members appear unable or unwilling to work for change. Family is not in crisis, but is moving in that direction & relies heavily upon outside assistance . Housing is overcrowded or may be unsafe, or there may be other severe problems.

In Crisis (0)	Unmet needs threaten physical or emotional safety of family members. Family cannot meet needs, lacks knowledge of, or access to, adequate assistance. Family's situation cannot improve without outside intervention . Family may be homeless or on the verge of it & may not have adequate food. Or, the family may be falling apart because of the severity of another problem.
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At this point, the Advocate should decide if the case will be “generally” case managed or “intensively” case managed. If the Matrix Assessment indicates a family is “in crisis” or “at risk” OR if the overall condition of family is noted as “in crisis” or “at risk”, KCNC recommends adding the family to your intensive case load. Discuss this decision with your supervisor as necessary. Mark the appropriate line at the top of the page.

Box C: Use this box to indicate where your primary information came from for this Matrix Assessment.

Box D: A signature line is available for the case manager to sign & date when the assessment is completed *(Optional)*.

The case manager and client use the baseline data to make a plan for the coming week, month or quarter. Completing the matrix together, they then develop time-limited outcomes upon which to work. This process also provides the worker and client a visual picture of both areas they need to address and the strengths they may be able to tap in working on problem areas.

Every time a case manager and client meet after the initial interview, they revisit the matrix to document change that has occurred since the last time they met. After reviewing and reflecting upon the progress (or lack thereof), they assign new scores and revise the plan for the next time period accordingly. This systematic review and revise structures the meetings, the partnership in assisting the family toward self-sufficiency, and the documentation of the family's work.

Points To Remember

- Do not walk in with a preconceived notion of what a family needs. The Matrix is not an assessment tool used to issue judgment against the family; it is designed to help the family during their time of need.
- Listen carefully to the Family's story. To build a relationship it is important that you listen carefully to the family during the SCM assessment. Asking a battery of questions without really taking the time to listen and understand the family response puts the focus on you, not the family. If you interview a family rather than have a conversation, he/she will feel you are doing a job. If you have a conversation, they will know and feel you actually care.
- Give the highest value to the family's understanding of their situation. The family will be more empowered when you let the family be the expert on their own situation.

- Restate what you have heard using Matrix indicators Use the Matrix status indicators to restate what you have heard, and check for understanding with the family member, so that you understand the current family situation.
- Ask more questions to cover the Matrix categories If you don't have enough information to complete an assessment, ask more questions to clarify the family's situation.
- It is important to find the right status level to score reflecting the "actual situation" of the family.
- Not necessary to use the labels of In-Crisis or At-Risk with families. They may be given other names, or just their number designation (1 or 2), when the labels are a barrier to effective work with families.

Scales & Ladders Guidance Materials

Within each scale there are several indicators that are used for determining a client's assessment step.

Scale 1: Income & Budget Scale

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family is able to pay its bills, manage its debt load & meet basic needs* without outside assistance. Lack of income &/or budgeting skills do not seriously limit family choices. The family may have or be building toward a bank account & good credit rating. Family has employment with potential for advancement & sufficient earned income & benefits to meet basic family needs. The family can stick to a monthly budget; pay bills on time & delay purchases to debt load; able to obtain credit.
Stable (2)	Household income is sufficient to meet basic needs*, but the family may require some subsidized assistance . The family is generally able to make & follow a budget, but cannot save much money & may experience problems due to insufficient cash. Family generally pay bills on time; able to get limited credit. Family has consistent employment (not necessarily with the same employer).The family has realistic prospect of a stable income. Family can meet basic family needs through employment income, benefits & other sources. Family can plan a monthly budget & is aware of or uses appropriate resources for help;
At Risk (1)	Family may have TANF, but will end in 6 months or less. The subsidized support barely meets basic needs*. Have sporadic, low-paying employment. Earned income/benefits/SSI & social services are not enough to support basic family needs. Child support may be their only source of income. The family's use of income may be marked by unplanned &/or inappropriate, spontaneous spending, often late paying bills; showing little or no effort to acquire a stable income. Have difficulty getting credit. The family may be unwilling or unable to plan or save. Limited knowledge of budgeting or ability to access resources for help;
In Crisis (0)	The family has little or no income. Family's TANF may have ended or parent may have been sanctioned out of CalWORKS. Family disconnected from social services. The family cannot afford to meet basic needs* & requires ongoing assistance. Budgeting skills may be insufficient for the family to manage what cash it does receive. Cannot pay bills or obtain credit. Unemployed; no leads for next job. The family may be largely unaware of s available resources for help.

* Basic needs typically refers to food, clothing, shelter, gas or electricity, transportation (gas or bus fare), & essential household goods like hygiene items, cleaning supplies, etc.

Scale 2: Employment Scale

Ladder Level	Scale Descriptions
Self-Sufficient (3)	One or more household members have marketable skills & permanent full-time or nearly full-time employment , with the potential for developing skills & advancement. Good job retention. The household's employment income & benefits are adequate for the needs of the household. Family has an established legal residency or citizenship.
Stable (2)	At least one household member may be in CalWORKS program & in good standing. Household members may be under-employed, but may have opportunities for job advancement or skill development. Understanding of job skills, can search for job with assistance; some positive work history has employment or works in the home. Pay & benefits may be inadequate to meet all household needs, but basic needs are met. In the process of obtaining legal residency.
At Risk (1)	No household member is in CalWORKS & members may be unemployed , or only hold one or more temporary or part-time jobs which may include seasonal agricultural, construction, or other outdoor employment. Members currently unemployed are searching for a job, but may have minimal employable skills or little positive work history, & there are few opportunities for job improvement or skill development. Family members are flexible in seeking employment, although most jobs last less than six months. Current employment is not in career of choice or does not offer opportunities for advancement. Members may be unemployed with benefits. Wages do not allow family to meet basic needs. May receive unemployment or SSI. Employee often barter skills in exchange for rent, child care, clothing & food. Undocumented but still employed.
In Crisis (0)	Household members are unemployed without benefits & may not be seeking jobs. They have no prospects for employment & no marketable job skills & no positive work history. They are not in a CalWORKS program & may have been sanctioned out of one. They are not receiving unemployment or SSI. Undocumented, not employed at this time.

Scale 3: Housing Situation Scale

A family is homeless if they have no housing, particularly if they are living on the streets or in a homeless shelter. Temporary housing is living in transitional housing or with family or friends. The family is vulnerable if they are renting or own a home but are significantly behind in rent or mortgage payments or have received eviction or foreclosure notices. A family is stable if they receive some form of regular assistance with their rental payments. This is typically through public housing or the Housing Choice Voucher Program (formerly Section 8), but also includes any assistance from other organizations that is depended on a regular basis.

Ladder Level	Scale Descriptions
Self-Sufficient (3)	The family is living in housing that is safe, sanitary, & affordable in a safe neighborhood. Family spends approximately 30% of income for rent or mortgage & housing size of home is appropriate to family size & composition. Family is able to pay rent or mortgage each month without public assistance for at least a year & have enough income for other expenses. The family may have identified more preferable options (to own a home, etc.) & is working toward realization of that goal.
Stable (2)	Family is in permanent housing that is affordable , possibly with the assistance of housing subsidies or lives in temporary situation that will last at least six months. Family spends less than 50% of income on rent or mortgage. Housing is not hazardous, unhealthy or overcrowded. If they require assistance, there is a prospect of becoming self-sufficient in the future. The size, location, or condition of housing is safe but may not be completely adequate for the family's needs.
At Risk (1)	The family is living in temporary or transitional housing & not certain where next shelter is to be found. The housing situation is not intended to be permanent, including shelters. Family spends more than 50% of income on housing, with supportive services. Family unable to pay rent or mortgage on time every month & is in danger of eviction or foreclosure. Utilities have been shut off or client has received 15 day or 48 hour notice. Housing is deteriorating, unsafe, unsanitary & seriously overcrowded for family size. The family may be doubled up with more than one family in a unit intended for fewer residents
In Crisis (0)	The family is on the verge of homelessness or living on the street, in a car, living temporarily with others, homeless motel/shelter or other temporary shelter. No income to pay rent. Individual health &/or safety is threatened by lack of shelter or sanitation. They are unable to resolve the situation without outside intervention . <i>(If children are present, this may require a CPS investigation, due to health/safety issues.)</i>

Scale 4: Food & Nutrition Scale

Food pantries/soup kitchens refer to places a family can go to receive free food to take home or prepared meals. Food subsidies are forms of public assistance for nutritional purposes. These include food stamps, the free & reduced breakfast & lunch program, & WIC (Women, Infants, & Children) program. A family moves to stable if food subsidies & their own income meet the needs of the family (i.e. they don't need to use food pantries or soup kitchens in addition).

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Household members eat regular, well-balanced meals daily. The family may not have enough income to purchase "extras" but their basic nutritional needs are met. The family is rarely hungry.
Stable (2)	Household members have an adequate amount of food, but may rely on public assistance in order to meet basic nutritional needs (i.e. food stamps, WIC, Gleaners). Food subsidies & budget meets the needs. Food choices may not always be the most nutritious, but the family is seldom hungry.
At Risk (1)	Household does not have an adequate amount of food. They rely on food stamps & other sources of free/low cost food to meet nutritional needs, but the amount of food may not be adequate. Nutrition habits &/or food budgeting may be poor. Receives food subsidies, occasionally needs to use food pantries/soup kitchens. The family is periodically hungry .
In Crisis (0)	Household has no food or lacks a way to store & prepare food. The family does not receive food stamps & struggles daily to find adequate food from free or low cost sources are substantially dependent on outside sources of assistance for food. The family is often hungry. (If children are present, this may require a CPS investigation due to health concerns.)

Scale 5: Health Care Scale

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family members can get medical care when needed, usually with a primary doctor or clinic, & has some alternatives regarding form of treatment. They may be covered , at least in part, by private medical health insurance. Members successfully manage any chronic health issues. Personal hygiene & preventive health habits appear to be good.
Stable (2)	The family is able to get medical care with a primary care physician or clinic, but with difficulty (some gaps in care). May have public health insurance or can pay for insurance coverage for major health care needs for entire family but relies a combination of sources to pay for it (i.e. SSI, free clinics). Family may not regularly manage chronic health issues or take advantage of well-child visits or physicals. Personal hygiene & preventative health habits may be lacking.
At Risk (1)	Access to health care is seriously limited by lack of money or insurance. Family relies on public insurance & is not financially equipped to handle medical needs; underinsured; inadequate coverage for entire family. Limited knowledge of or access to appropriate medical resources. No primary care physician. Family makes inappropriate use of health care system by using the Emergency Room as a primary health provider. Family members may have chronic conditions that are not being managed appropriately. Personal hygiene & health habits appear to be poor. (Also use for ongoing mental health issues.)
In Crisis (0)	Family members have no medical coverage (public or private) & no access to health care system other than free services. Unable to qualify for health insurance for any family member. No knowledge of or access to medical resources & they may ignore chronic health problems or have a serious, yet untreated, illness or injury. Personal hygiene & health habits are very poor. (If children in the home are seriously impacted by health issues, a CPS investigation may be necessary.)

Scale 6: Transportation & Mobility Scale

A family is vulnerable if they rely on public transportation or other means of transportation (walking, riding with others, etc.) but it significantly limits their choices in other life areas. This might include a lack of employment opportunities or lack of adequate child care because they can't get to areas where these are available, or they can't get to them conveniently enough. A family is stable if they have a car but it is in danger of breaking down or is in danger of being repossessed, or if they are in danger of losing the ability to drive it legally.

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Transportation is generally available & mostly convenient & reliable, allowing household members to meet basic transportation needs. Members only occasionally have difficulty in getting places. There may be a licensed & insured driver in the family & there may be an automobile.
Stable (2)	Transportation is generally reliable but may be somewhat inconvenient . There may be an unreliable car or threat of loss, poor driving history, poor insurance coverage. Public transportation is available or needed services are within walking distance. Household members can usually find transportation to meet basic needs, but may occasionally have to rely on others or not be able to travel.
At Risk (1)	Transportation is unreliable & unpredictable . Household members drive without a license or car insurance. Family may have no car & uses public transportation or other means but it limits choices. Bus routes are not adequate for the family & they have no other access to transportation, which impairs ability to meet basic needs & limits opportunities for such things as education, work & social contact.
In Crisis (0)	There is virtually no public or private transportation available to family members. Family members do not have drivers' licenses & driving skills. Family lives in isolated location which prohibits accessibility to needed services. There is no public transportation. The ability to meet basic needs & have opportunities for education, social activity & employment are frustrated & sharply limited because of the lack of transportation.

* Lack of money for gas or bus fare is reported under Income & Budget. This measure is about access to transportation not the ability to afford it.

Scale 7: Adult Education Scale

Full-time employment is 36 or more hours per week. Underemployed is a situation in which a worker is employed, but not in the desired capacity, whether in terms of compensation, hours, or level of skill or experience. For example, a person earning minimum wage at a full-time job will usually be considered underemployed despite their skill level, because of the low compensation. Likewise, someone possessing a Master's Degree but working at a fast food restaurant would also be considered underemployed, because their employment does not match their skill level. A Degreed or Professional field refers to an occupation requiring extensive & special education or experience, & usually is accompanied by higher salaries or wages.

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Adult family members value education & model a positive attitude toward learning. Household members have secondary school level education or training , or are actively pursuing education or certification, either formally or informally. Such education may include college, technical school, job training, or other less formal education. Their skill & education level is appropriate for desired employment &/or personal enrichment.
Stable (2)	Adult family members have an appreciation for education. They may be enrolled in adult school, GED or ESL classes, or job related training, including CalWORKS. They may be working toward a high school diploma or certificate . Adult family members interested in furthering education, but unclear on educational goals. Their skill & education level is adequate for desired employment &/or personal enrichment.
At Risk (1)	Adult family members do not demonstrate a desire for ongoing education. They have not taken advantage of job training, such as CalWORKS, or other available programs, & may be working on attaining GED or improved literacy . Their skill & education level is not adequate for desired employment or personal enrichment. There may be a language barrier that limits employment opportunities. Family has no access or support to appropriate educational resources.
In Crisis (0)	Adult family members show little or no interest in ongoing education or job training & are not in a welfare-to-work program. They may have a history of failure in school & model a negative attitude about learning. Their skill & education level is seriously deficient for desired employment or personal enrichment. Adult members lack basic skills & may be functionally illiterate .

Scale 8: Family Relations Scale

A family is in crisis if domestic abuse (in whatever form, violence, verbal, sexual, etc.) or neglect is currently present in the home. A family is vulnerable if there is little to no interaction between members, or if there is excessive negative interaction. "Stability" refers to the stableness of the family unit in the home or family, i.e., the degree to which all family members are present on a regular basis. (Divorce, especially immediately following, constitutes a lack of stability in the home.) Positive interaction is a caring environment, open communication, positive support for all members, etc. A family is thriving if it has a full history of positive interaction & includes a full history of stability in the household (in most cases divorce, domestic abuse, or neglect has a negative impact on the family unit that remains with that unit forever).

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family members appear to have a sense of family unity & are physically safe & emotionally secure with each other. Family members are generally supportive & seem to resolve conflicts easily. The family is usually free from conflict & there appears to be no serious violence or aggression. Family members often communicate respectfully. Extended family well-connected & offers support consistently. Parents appear to have good parenting skills & may appear to enjoy child raising. Parental expectations, rules, consequences match children's development & are understood by children. Children are usually happy, outgoing & relate well to parents.
Stable (2)	Although some negative behaviors may be present in family interactions, they are not serious & members acknowledge & seek to change them. The family is usually free from conflict & there appears to be no serious violence or aggression. Conflicts are resolved for the moment, in a safe process, with or without assistance. Family members can relate with one another with some success. Parental expectations, rules, consequences are often effective. Members are connected to extended family & friends & usually receive some support from them when requested.
At Risk (1)	Household members appear to have little or no positive interaction with each other. Communication among family members is strained. Conflicts expressed with anger & acting out, may be some ability to discuss afterwards. Family composition may change frequently & there are rarely stable family relationships. Parents often unable to take charge when children defy/ignore them. Children may have inadequate care & may appear unhappy, withdrawn, or aggressive. There could be a history of running away. Minimal contact or support from extended family. (If you believe there is a possibility of abuse or neglect, you must report this to CPS immediately for investigation.)
In Crisis (0)	Family members appear to have no supportive relationships within the family unit. Members appear unable to develop positive relationships & interactions frequently involve conflict . Conflicts are frequent & recurrent, with threats &/or violence. Communication among family members is abusive or cut off. Parents consistently overreact or under-react when children defy or ignore them. There is evidence of child abuse, neglect or domestic violence. Isolated by distance or emotional conflict from extended family. Intervention is needed. A report to CPS is mandatory if children are present in the home.

Scale 9: Community Involvement Scale

A family is in crisis if they are isolated from family or community, or if the supportive systems in place have a negative impact on the family (like "friends" that provide access to drugs, or extended family members that borrow money all the time). A family is vulnerable if involved with CPS, DFC, or the court system. These supportive systems, while often viewed as negative & certainly indicative of family issues, do have a positive impact on some element of the family unit. Case management support is support received by individuals working closely with the family to alleviate needs & accomplish goals. They are typically from social service or faith-based organizations. A family is thriving if they give support outside the family unit, which usually indicates that the family's supportive needs have been fully met & have the ability to provide the same to others.

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family members appear to feel like they are part of the community & derive some support from it. Family members have knowledge of & access to resources & are able to share knowledge about these services. They are actively involved & participate in some community groups & activities, & may make some contribution to community well-being. They actively participate in school-related activities. They engage with neighbors when the opportunity presents itself & consider neighbors "friends."
Stable (2)	Family members are aware of & accesses community resources as needed. Family members have identified community groups/activities of interest, but their involvement in community activities may be limited . Members may lack motivation or knowledge of how to be involved, however, there is some contact & the potential for more is there. On some level, family members have attempted to participate in school-related activities. Members may express some awareness & concern for the community. Consistently interacts with & knows neighbors.
At Risk (1)	Family members access some resources with help. They are aware of community groups/activities but are not involved. Family members appear isolated & also to lack motivation or self-confidence to become involved in community activities. Is aware of school personnel but is not involved in activities. Members have only a limited social network outside the immediate household & have attempted on occasion to connect with neighbors, community members & groups
In Crisis (0)	The family appears socially isolated & members appear to have few or no social or communication skills. Minimal knowledge of resources or services. Members may have no awareness of or involvement in constructive community groups/activities. Family members are not aware of school personnel or involved in activities. Family members may be gang members or involved in other criminal activity. Rarely speaks with neighbors.

Scale 10: Child Care Scale

Child care refers to any type of care given to children of the family, which can include school. The family is in crisis if children are left unsupervised or in unsafe care. Child care is irregular or inconsistent if a family cannot rely on it on a regular basis. A family is stable if they have reliable care but receives financial assistance for the cost of it (school is not considered subsidized care). A family is self-sufficient if they pay for the care on their own, but may not be able to afford the care of their choosing. Scale is not applicable if no child care services are required as a support service so parent(s) can attend work, job training, school, ongoing medical services, etc. (e.g., stay-at-home parent, no children in the household, teenage children).

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family does not require public or private assistance to meet child care needs , however, choices may be limited. Lack of such care is not a significant family problem. The family has alternatives in meeting safe child care needs, & child care does not present a frustration to meeting other important family needs. Sufficient resources to allow choice of child care &/or afterschool programming, but may not be able to afford the care of their choosing. Parent engaged in child's activities.
Stable (2)	Child care needs that are necessary to meet basic family education, training, or employment readiness program needs are met, but usually with county or other assistance , such as the CalWORKS program. Has dependable child care &/or after-school programming for at least six months. Sufficient resources for childcare &/or after-school programming. Consistent supervision & ability to respond to emergency situation.
At Risk (1)	Family is relying on temporary or inappropriate measures for child care; family functions may be frustrated due to irregular or inconsistent care or lack of safe child care. Lack of child care interferes with social services such as employment programs. Child care arrangements have failed on occasion leaving adult unable to work or go to school. Insufficient resources for child care &/or after-school programming. Inconsistent supervision of children.
In Crisis (0)	There is no child care available & this prevents adult(s) from essential activities such as employment, shopping, medical appointments, education, job training, or seeking other social services. Has no knowledge of, or access to, quality childcare & /or after-school programming. Children unsupervised. Children exposed to frequent household visitors.
N/A (<i>Leave ETO field unselected</i>)	No child care services required as a support service so parent(s) can attend work, job training, school, ongoing medical services, etc. (e.g., stay-at-home parent, no children in the household, teenage children)

Scale 11: Condition Of Children Scale

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Children appear safe, healthy, clean, well nourished & well supervised. For their ages, children are developing well & school-aged children are in school. Child supervision is good .
Stable (2)	Child cleanliness, hygiene & supervision may be less than 100% ; however, most child needs are met. School-aged children are attending school. Safe child care is available when needed.
At Risk (1)	Child cleanliness, hygiene & supervision may appear inadequate . Children may be in school but are frequently absent. <i>(If you believe there is a possibility of child abuse or neglect, you must report this to CPS immediately for investigation.)</i>
In Crisis (0)	Unmet needs or other factors threaten child safety & well being. Child safety, cleanliness, hygiene or supervision appears seriously inadequate. There is a real incident or strong possibility of neglect, abuse or violence that cannot be corrected without outside intervention . <i>(If there is a suspected incident or strong possibility of neglect, abuse or domestic violence. A report to CPS is m&atory.)</i>

Scale 12: Drugs & Alcohol Scale

This life area is primarily a yes or no answer, but the thresholds beyond crisis refer to the likelihood that the addictive behavior will return. In general, the more treatment a person receives & the more time that passes since the addictive behavior, it is less likely there will be a relapse. If a person has ever been "addicted" to something, regardless of how much time since, they are more likely to relapse than someone who has never suffered from the addiction. Families with no history of abuse are classified as "self-sufficient" in this matrix, abuse issues may be disclosed later in case management & scores may be lower in later assessments.

Ladder Level	Scale Descriptions
Self-Sufficient (3)	Family members are healthy & report there is no current alcohol or substance abuse in the home. Member(s) of the home may be in long-term recovery (12 months to 2 years removed from substance abuse) & there is a strong support system, 12 Step program or counseling to help prevent relapse.
Stable (2)	Family members may confide there is alcohol or substance abuse in the home, but report the affected person is working toward recovery (less than 12 months) through treatment or a recovery support group. Family member may have alcohol or drug problem but faces it & considers self-recovering. Member is in regular treatment & has a support group as well as family support. If relapse has occurred it has been followed by reentry into treatment & demonstrated progress. Family member may require continuing outside assistance to maintain sobriety but is exposed to prevention information & intervention . Member demonstrates willingness to work toward change, is out of crisis & not significantly at risk.
At Risk (1)	Family members may report regular alcohol or substance abuse in the home. The affected person may recognize need to seek help but has not sought help or information about recovery. Member may not be exposed to prevention information or other intervention. Member may not recognize scope of problems, may be unwilling to work for real change & may be deceptive about his/her problem. Member is not yet in crisis, but is not taking measures to avoid it. <i>(If children may be neglected, call CPS to investigate.)</i>
In Crisis (0)	Family members report regular alcohol or substance abuse in the home with destructive consequences. The affected person does not acknowledge it is troubling the family & is not interested in changing their behavior. He/she is not exposed to prevention, intervention, or treatment program. Member does not work regularly & may engage in abusive or violent behavior & may neglect children & may not take care of personal hygiene or other needs. Member may not contribute to family activities or support. Family member with drug or alcohol problem has been arrested or detained at least once. <i>(If children are experiencing neglect or abuse, a report to CPS is mandatory.)</i>

Scoring In The Social Condition Matrix

Do not walk in with a preconceived notion of what a family needs. The Matrix is not an assessment tool used to issue judgment against the family; it is designed to help the family during their time of need. To build a relationship it is important that you listen carefully to the family during the SCM assessment. Asking a battery of questions without really taking the time to listen and understand the family response puts the focus on you, not the family.

The family situation drives the Matrix scoring, not the other way around. Give the highest value to the family's understanding of their situation. The SCM is meant to reflect the family's situation, not try to fit the family into a particular status level. The family will be more empowered when you let the family be the expert on their own situation. It is important to find the right status level to score reflecting the "actual situation" of the family.

If you interview a family rather than have a conversation, he/she will feel you are doing a job. If you have a conversation, they will know and feel you actually care. Use the Matrix status indicators to restate what you have heard, and check for understanding with the family member, so that you understand the current family situation. If you don't have enough information to complete an assessment, ask more questions to clarify the family's situation.

- The family's overall condition is not intended to represent an average of the 12 scale ladder values, but rather should reflect the advocate's general impression of the family as a whole.

Even though each scale to some extent provides an accurate picture of client situations, it is important to understand the inter-relationship among these scales. For example, according to the Employment scale, an unemployed client with no or a bad work history that is not looking for a job will be assessed as being "In Crisis." On the other hand, the same client may be assessed as being "Stable" according to Health Care Scale if the person has access to subsidized or free medical care and has the ability to deal with health related needs. On the Housing Scale, a homeless person with no mailing address will automatically fall under "In Crisis" category. Therefore, no one scale is sufficient to move a client from in-crisis to self-sufficiency – the best approach is to apply a number of scales on each family or individual client during the initial intake and then develop a comprehensive service delivery strategy involving several scales. Several scales, such as Housing, Education, Employment, Health Care, and Transportation should be applied concurrently.

The case manager can interpret the change in Matrix scores by relating them to the family actions. For example, if a parent becomes employed, the score in employment not only will increase, but also scores in other categories like Income/Budget, Health Care, Food/Nutrition & Family Relations. The family will be able to see that by taking the action to become better employed, other things in life improve.

Record Keeping In The ETO Software System

The use of the Matrix model is responsive to the need for accountability and promotes strategic planning and continuous improvement. The data from the Matrix is used by the worker to assess the status of the clients, by the supervisor to review the cases in their unit, and senior managers to address gaps, allocate resources, and celebrate success. Funders and policy decision-makers can better understand how funds allocated are bringing tangible results.

Advocates & In-Home Visitors are primarily responsible for collecting & entering data on their individual family cases. A case's first Matrix Assessment should be prepared as soon as possible after intake & submitted within 24 hours to your site supervisor. Data from the Matrix Assessment Form will be put into the ETO database under *Participant Assessments*. This also applies for 90-day follow-ups & exit assessments.

- Schedule one visit each month as an Assessment appointment.
- Complete Matrix for household on the Head of Household's name.
- Access the Matrix by clicking the Add Intake, Matrix, Assessments link on the upper page bar & via the home page at the Participant Assessments link.
- Click Take New Assessment.
- Select in the dropdown box either Social Condition Matrix Baseline (new client), Social Condition Matrix Follow Up (update client) or Social Condition Matrix Exit (exiting client) & click Continue
- All fields are required except Child Care which if (N/A), leave blank.
- Select a number of Family Conditions you are working on with the family in order to create an average with the Calculate button. If you skip Child Care, then you will select 11. The Matrix is set up so all domains have an evaluation except Child Care.
- If you make changes to scores, just hit calculate again to re-calculate.
- Schedule a Follow-Up Alert.
- When updating, you can pre-populate with the last Matrix selections.
- If you have closed a case, the case manager should conduct an Exit Matrix Assessment. If unable, to complete an exit Matrix, then use the scores from the last Matrix assessment as the exit Matrix.
- Develop a process for looking at data periodically before you need it for a report. When you check for quality as you go, it is much easier to make corrections or improvements.

For more information about ETO and data analysis, please refer to the DR ETO User Manual at www.kcnc.org.

The Social Condition Matrix Interview Guide

The Social Condition Matrix Interview Guide is a tool designed to assist DR case managers in determining the scores that families receive on the Matrix. These suggested questions can serve as prompts for relevant information from families so that the Matrix can be scored. You may use the answers to determine the family's threshold in each life area & circle the score that most appropriately corresponds to the family's condition. To build a relationship it is important that you listen carefully to the family during the SCM assessment. Asking a battery of questions without really taking the time to listen & understand the family response puts the focus on you, not the family. If you interview a family rather than have a conversation, he/she will feel you are doing a job. If you have a conversation, they will know & feel you actually care.

Income & Budget

- 1) Can the client meet basic family needs through employment income, benefits & other sources?
- 2) Does the client have an established relationship with a financial institution?
- 3) Can the client pay bills on time; save when possible; able to obtain credit?
- 4) Can the client stick to a monthly budget; pay bills on time & delay purchases to handle debt load?

Example questions:

Employment

- 1) Is the client currently employed? If yes, where?
- 2) Is the employment full-time or part-time? Is it permanent, short-term, seasonal, or temporary?
- 3) If the client is currently employed, are they working in a field in which they want to work? Are they working in the field in which they received a degree or certification?

Example questions:

Housing Situation

- 1) Have the client describe their living arrangements. Do they rent or own? Are they living with others, such as family or friends? Are they living in a shelter?
- 2) Is the house in which the client lives safe & secure? Do the doors & windows lock? Is the house in disrepair? Are there exposed wires? Does the family feel safe & secure?

3) Does the client receive any sort of subsidy to assist with their housing payment? Does the client live in public housing? Does the client receive Housing Choice Voucher Program assistance? Is the client receiving any sort of financial assistance for their rent from any other source (trustee, church, social service agency, etc.)?

4) Have the client describe the housing payment history for the past six months. Have the bills been paid on time? Is there a balance carried forward some months? If so, what is the balance? Are there any eviction or foreclosure notices?

Example questions:

Food & Nutrition

1) Have the client describe their eating habits. How many meals do they eat per day? Do they ever go hungry? Do they eat snacks?

2) Discuss with the client any food subsidies that they may receive. Do they receive food stamps? If not, are they eligible? Do the children receive free or reduced breakfast or lunch at school? If not, are they eligible? Do they receive WIC? If not, are they eligible? Has the family used a food pantry or soup kitchen recently? If so, how many times or how often?

3) Does the client have a refrigerator & stove? If so, do they work? Does the client have pots, pans, cooking utensils, & eating utensils? Does the client have a microwave?

Example questions:

Health Care

1) What type of health insurance does the client have, if any? Who in the household is covered?

2) If some in the household are covered by public health insurance, what type is it (i.e., Medi-Cal, Medicare, Healthy Families)?

3) Discuss the family's health care providers. Do they have a primary care physician? Is the client satisfied with the care that they receive? If not, what would they change? Is access to care convenient?

Example questions:

Transportation & Mobility

1) Does the client have a vehicle?

- a) If so, is it reliable? Do they ever have problems with it?
 - b) Do they have a driver's license? Is it current? What is the client's driving history? Are there many accidents & traffic violations? Does the client have car insurance? Is it registered with current plates?
 - c) Is there a loan on the car? If so, are the payments current?
- 2) Is public transportation available to the client? If so, does it generally meet their needs? Is access to public transportation generally convenient (i.e., the timing & routes to work, child care, etc.)

Example questions:

Adult Education

- 1) What is the highest level of education among the adult family members?
- 2) Does the client have interest in educational development?
- 3) Does the adult family members value education & learning?

Example questions:

- What high school did you graduate from?
- Are you still going to school?

Family Relations

- 1) Has the client or anyone in the household ever experienced domestic violence or child abuse & neglect? If so, to whom did the abuse/neglect occur & when? Was the perpetrator ever identified? Have they been removed from the household?
- 2) Are there any issues relating to domestic violence or child abuse/neglect currently happening in the client's family? If so, discuss the situation. Is anyone receiving counseling?
- 3) Discuss the family situation with the client. Is the interaction generally positive? Do family members generally support & respect one another? Is there a lot of fighting or arguing? Has the makeup of the family generally been stable? Are there family members absent from the household? Do family members come & go?

Example questions:

Community Involvement

- 1) Does the client feel they can rely on family or friends for support when they need it? Does the client receive support from sources outside their family or friends? If so, from whom does the client receive support? Is the support the family receives positive?
- 2) Discuss with the family their social service needs. What type of needs does the client have? Does the client access services as needed?
- 3) Is the family involved with Child Protective Services, the Division of Family & Children, or the court system?
- 4) What type of volunteering, if any, do family members do (i.e., public service, at children's school, social service, etc.)? Are they involved with social groups (i.e., religious organizations, clubs, professional organizations, etc.)?

Example questions:

- Have you thought about volunteering at food bank?

Child Care

- 1) Does the client's children attend child care (Child Care is defined as school, day care, preschool, or home care)? If so, how often do they attend? Is the child care regular & consistent? If the children do not attend child care or not every day, why?
- 2) Is it the child care the client wants their children to attend? Is the child care safe?
- 3) Is the child care affordable & accessible? Is the client receiving any assistance to help with the cost of child care? Is the child care geographically located in an area that is relatively easy for the family to access?

Example questions:

Condition of Children

- 1) Do the children appear safe, healthy, clean, well nourished & well supervised?
- 2) Are the children supervised when needed?
- 3) Are school-aged children are in appropriate schooling?
- 4) What is the risk of physical violence in the home?

Example questions:

Drugs & Alcohol

1) Has anyone in the household ever been involved in substance abuse? If yes, explain? Are they currently in a recovery program? Did they complete a recovery program? How long has it been since the abuse stopped?

2) Does anyone in this household use illegal drugs? Do you feel anyone in your family uses alcohol or legal drugs in excess? Has anyone in the household ever lost a job, or not gotten a job, because of substance use? Has anyone in the household ever been arrested because of substance use? Has anyone in the household ever had any problems because of substance use? If yes, describe.

3) Has anyone in the household ever been involved in other addictive behaviors that negatively impact the family (like gambling, sexual addictions, eating disorders, etc.)? If yes, explain. Are they currently in a recovery program? Did they complete a recovery program? How long has it been since the abuse stopped?

Questions to Keep in Mind Each Time You Complete the Matrix

The case manager and client use the baseline data to make a plan for the coming week, month or quarter. Completing the matrix together, they then develop time-limited outcomes upon which to work. This process also provides the worker and client a visual picture of both areas they need to address and the strengths they may be able to tap in working on problem areas.

Every time a case manager and client meet after the initial interview, they revisit the matrix to document change that has occurred since the last time they met. After reviewing and reflecting upon the progress (or lack thereof), they assign new scores and revise the plan for the next time period accordingly. This systematic review and revise structures the meetings, the partnership in assisting the family toward self-sufficiency, and the documentation of the family's work.

The following are questions for the worker to keep in mind each time the matrix is completed (c. 1997 Central Coast Center for Human Development):

- Do I have the list of Criteria in front of me, so that I do not have to recall them from memory in making a determination about Status Level?
- Am I making each decision regarding Status Level as objectively as possible, depending upon the Criteria measures rather than my personal definition of the Level labels?
- Did I gather the information regarding to adequately apply the Criteria in each of the Category Indicators?
- Have I assessed functioning accurately enough that when sufficient progress is made, it can be reflected in a change in status?
- Develop narratives to analyze (explain) the trends in a matrix over time -- do they match the matrix story?
- Does the data I have collected measure what it says it measures?

Source: Institute for Community Collaborative Studies, California State University Monterey Bay
<http://hhspp.csUMB.edu/community/matrix/fdmpilotproj.htm>

Social Condition Matrix
Family Condition Scale Notes

Income and Budget
Employment
Housing Situation
Food and Nutrition
Health Care
Transportation and Mobility
Adult Education
Family Relations
Community Involvement
Child Care
Condition of Children
Drugs and Alcohol

Describe the issue.	What strengths do you have right now that can help resolve this issue?	What additional resources do you need to help resolve this issue?	What steps can you take TODAY to begin resolving this issue?
<p>My son is out of control. I try to discipline him but it never works. He thinks he runs the house!</p>	<p>I'm smart. I'm strong. I'm not afraid to ask for help. I'm willing to learn and try new things.</p>	<p>I need someone to help me understand my son. I need to talk to other parents with rebellious kids. I need a man around the house to be a good role model and help enforce discipline. I need a good book to help me learn to discipline my son better.</p>	<p>Find a counselor to talk to. Make an appointment. Find a support group to attend. Put meeting times on my calendar. Talk to my pastor at church about helping me find some supportive men for my son to do things with. Talk to my dad about being available to talk to my son every day after school. Go to library and check out some parenting books.</p>

Describe the issue.	What strengths do you have right now that can help resolve this issue?	What additional resources do you need to help resolve this issue?	What steps can you take TODAY to begin resolving this issue?

