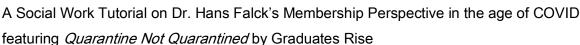
## What if We All Focused on Membership??





# What if We All Focused on Membership??

A Social Work Tutorial on Dr. Hans Falck's Membership Perspective in the age of COVID featuring *Quarantine Not Quarantined* by Graduates Rise

## Starring:

Dr. CynCorrigible as themselves

#### The Grey A

as himself

Shane Cunningham

as Dr. Math (voice)

Malia Marshall

as Dr, Math (puppetry)

Darcy Katt as herself



Writer, Producer, and Assistant Director: Dr. CynCorrigible

Cinematographer, Editor, Director: Alex Baldwin



## Featuring Quarantine Not Quarantined by Graduates Rise:

Dr. CynCorrigble, Lyrics, Vocals

The Grey A, Music, Vocals, Guitar, Synthesizer

Bingham Barnes, Bass

Rollum Haas, Drums

Recorded, Engineered, and Mastered by Jeremy

Ferguson at Battletapes in Nashville, Tennessee

Album artwork by Marilu Herrera

Music Video Directed, Filmed, and Edited by Alex Baldwin

Video Co-Produced by Sarah Walton and Dr. CynCorrigible

Hair & Makeup by Emaline Briggs

Video with Audio Descriptions: https://youtu.be/iSYUkRjyo1E



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A Social Work Tutorial on Dr. Hans Falck's Membership Perspective in the age of COVID featuring *Quarantine Not Quarantined* by Graduates Rise by Dr. CynCorrigible

An independent release of Graduates Rise, Nashville, Tennessee, USA

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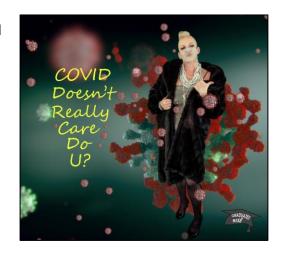
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## **INTRODUCTION**

This Learning Guide accompanies a recorded lecture designed to help students think about their role as a member of the human race and is created for social workers and social science practitioners that want to push beyond the traditional binary relationship between individual and collective. Learning objectives are designed to assess holistic competence as aligned with the Council on Social Work Education's Educational Policy and Accreditation Standards (CSWE, 2015). To add this content to your syllabi, select the social work



competency that fits the focus of your course, the assignment prompt that fits your course delivery style, and then add the related tasks your students will need to complete to meet your expectations and grading policies. Each prompt has options for face-to-face, synchronous web, asynchronous web, and hybrid options for small group work. At minimum, I recommend you assign the 45 module to your students and then have a group discussion. The rest of this guide provides options to get you started to add this content easily to any core social work course. If you are not a social work Instructor, feel free to adapt this content to your needs. Reach out to me if you need help. Please find <a href="@GraduatesRise">@GraduatesRise</a> on social media and let us know if you use these materials and share any conclusions you may come to about the usefulness of the Membership Perspective to social work and beyond.

Table 1: Potential student learning tasks and credit hour calculations	
Tasks to build and demonstrate student knowledge	Suggested Task Hours
Watch What if we all focused on membership?? recorded lecture	1
Review and contemplate this Learning Guide (close read p. 1-7; OK to skim interests p. 8-18)	1
Review NASW Code of Ethics, Values and Ethical Principles (NASW, 2021)	1
Review CSWE <u>EPAS 2015</u> , <u>Nine SOWK competencies</u> (CSWE, 2015)	1
10 item knowledge test (All test items come directly from this learning guide & video)	1
Tasks to demonstrate student skills	
Review other scholarly sources (6-10 minutes per page for a close read)	1
Locate one new scholarly source (search, scan, include/exclude, retrieve, store, & cite)	1
Solo Work - Critical analysis of 1 scholarly source (deep review)	1
Small Group Work - Critical analysis of 1 scholarly topic or source (deep review)	2
Tasks to demonstrate students' cognitive and affective processes	
Group Discussion (face to face, synchronous web conference, and/or using breakout rooms)	1
Written - Discussion board, original post & 2 replies	2
Written – Paper (1 hour per page)	5
Oral presentation (face to face, synchronous web, or recorded presentation) 1 hr per min of prep	5
Written presentation – PowerPoint slides (0.5 hours per slide)	3

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#### MEMBERSHIP PERSPECTIVE SUMMARY

"The irreducible state of human existence is membership." ~ Dr. Hans S. Falck



Dr. Hans S. Falck was born in 1923 in Hamburg, Germany and he escaped with his family in 1939 just before the borders were closed to Jewish people. He served in the US Army during the 1940s. In 1949, Mr. Falck received his Bachelor of Arts from Case Western Reserve University. He received his Master of Arts from Syracuse University in 1950, and his Master of Social Work in 1953 from the University of Buffalo. In 1960, he received his Doctor of Philosophy from Syracuse University. His special interest areas included Health Social Work, Medical Sociology, Philosophy of

Science, problems of individualism, socialization, and group formation, psychoanalytic theory and social science theory, small group and organization theory, and social work in mental health. Dr. Falck was a past chapter president of the National Association of Social Workers (NASW) and a founder of the Virginia Organization of Health Care Social Workers and is Professor Emeritus of the School of Social Work at Virginia Commonwealth University (NASW, 2004). Author of Social Work: The Membership Perspective (1988), Dr. Falck's greatest contribution to the field has been his development of theories of membership and his study of its implications and consequences for social work practice. In this work, Falck challenges common dualities in the world that impact social work practice, including the individual vs. the environment, social vs. psychological, and art vs. science. Where previous thought had sought to classify a phenomenon as one or the other, the Membership Perspective establishes that for human beings, we are always simultaneously both of these

things, and more! Falck's Membership Perspective is grounded in observations about how human beings behave rather than empirical findings that objectify and reduce. His findings indicate that all human life and activities are group based and that we are all inextricably bound together, while simultaneously being uniquely individual.

## Beliefs about humans Falck argues are a result of the "split" of the individual:

- Separateness: A human being's uniqueness entitles them to needed satisfactions
- Independence: The highest level of behavior is reflected in human independence
- Self-attribution: Relationships to others are characterized by attributes of the self as actor of consequence
- Distinctiveness: A human defines their identity by what distinguishes them from others
- Freedom: A human is free to the degree they make decisions leading to maximum benefit to themselves Ideas used by the Dual Model of Social Work to repair/discuss the split:
- Addition: Additive; The individual AND the group
- Hyphenation: Additive, uses a hyphen; Person-In-Situation
- Mediation: Not additive; Social worker creates or serves as a bridge between separated parts
- Parts-Whole: The parts and the whole are always connected, even when split, although un-measureable

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Falck's Membership Perspective serves as a holistic approach to understanding individualism and collectivism through membership, with membership being the irreducible state of human existence. Dr. Falck depicted the Membership Grid, shown in Figure 1, as an infinite amount of unique bubbles, all connected in a grid. Each is a unique individual bubble, but they all are also always simultaneously part of the Grid. Figure 2 shows how Dr. Falck depicted the person as an individual member, enmeshed in continuous membership processes such as expression of individual personality, relationships with family and friends, expression of ethnicity and culture, engagement with coworkers and other social groups, and other aspects of human life.

## Falck defines a MEMBER as:

- A physical being bounded by semi permeable membranes and cavities
- 2. A social being in continuous interaction with others who are both seen and unseen
- 3. A psychological being capable of private experience

## Things that can be inferred about membership:

- 1. A member's actions are socially derived and contributory
- 2. The identity of each member is bound up with that of others through social involvement
- 3. A member is a person whose differences from others creates tensions that lead to growth, group cohesion, and group conflict
- 4. Human freedom is defined by simultaneous concern for oneself and others.

Figure 2: The Person as Member

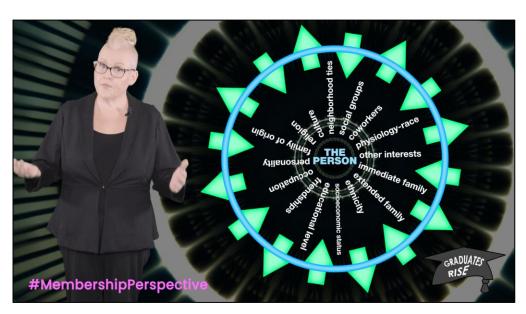
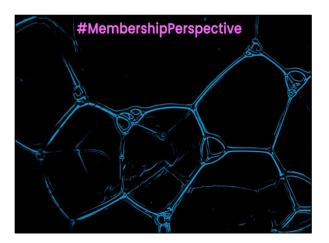


Figure 1: The Membership Grid



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Falck defines membership through the lens of boundaries, which denote where one thing ends and another thing begins. Figure 3 depicts how Dr. Falck modeled the two Boundary Principles he established including:

- Constant Connectedness: Holds that all components are permanently linked by virtue of common need, function, and prerequisites for survival. Membership is permanent and cannot be reversed.
   Relationships are not external to the person but denote permanence in time, meaning, and process.
   Even if a relationship ends, the absence of the closeness of that relationship will continue to exist.
- 2. Conditional Accessibility: Holds that the nature of access from one member to another is subject to specifiable conditions, or selectivity. Access is governed by rules that are both facilitative and restrictive and can be thought of as either physical (likened to the cells in a human body) or structural (such as social interaction within social systems), or otherwise functioning in a non-physical sense (i.e. social norms, trends, generational patterns, etc.).

In converting these Boundary Principles into social work intervention tactics, one will need to think about the conditions of accessibility between all members and then develop, maintain, or adjust the boundaries that serve to maintain constant connectedness among all humans that exist in the membership grid.

#MembershipPerspective

Constant Connectedness

Conditional Accessibility

Conditional Accessibility

Figure 3: Boundary Principles of Membership

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## Four functions to guide analysis of Membership:

Membership can be positive, negative, or ambiguous. The two Boundary Principles of membership to help make this theory useful. Learning to understand the boundaries between humans and how these serve to maintain life can be an important way for social workers to intervene.



## Membership in Biology: Physical Functioning

All body components are interlinked, directly and indirectly and cannot function without each other.

Conditional accessibility (semi-permeable boundaries such as the blood-brain barrier) also serves to maintain life. External, manmade boundaries between humans also impact physical functioning.

#### Membership as Social Process: Interaction

Survival depends on human interaction, both verbal and nonverbal. Connections between humans are also selective, which can create both positive and negative impacts in a human life.

#### Membership as Meaning: Symbolization

Like interaction, Symbolization is both constant and selective at the same time. This expresses itself in monitoring behavior, where one may monitor the significance of their own behaviors, or the behaviors of other group members. Inclusion or exclusion is important and leads to how one interprets membership.

#### Membership as Intrapsychic Process: Internalization

The internalization of how objects relate in the external world forms the bridge between external and internal reality. The meanings behind membership create intrapsychic beliefs that impact how a person expresses membership. For healthy development, it is critical that internalizations support change.

#### How the Membership Perspective could impact social work practice:

Dr. Falck's book provides discussion regarding the implications of focusing on membership to social work practice at the individual, group, and community levels. Primary social work tasks would become centered on boundary management and ensuring boundaries served to maintain and promote quality of life. The Membership Perspective would call for social workers to be trained to help people with boundary-related tasks such as: creation and monitoring of boundaries, clarification of the conditions of accessibility between boundaries, confrontation to protect members if a boundary is damaged, counseling to promote member development, facilitation of interactions between members, options identification and supported choice, and supported Interpretation of the meanings of interactions and relationships with other members (Falck, 1988).

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#### KNOWLEDGE TEST ITEMS

All knowledge test items come directly from Dr. Falck's book (1988), as discussed in the summaries provided in this Learning Guide and throughout the recorded lecture. Select the best response to each item, according to Dr. Falck's Membership Perspective.

- 1. Dr. Falck argues that membership is the irreducible state of human existence.
  - a) True
  - b) False
- 2. Which of the following beliefs about humans is impacted by social science splitting the human?
  - a) Independence
  - b) Separateness
  - c) Self-attribution
  - d) All of the above
- 3. The Dual Model of Social Work uses which of the following alternatives to repair the split human?
  - a) Freedom
  - b) Hyphenation
  - c) Self-attribution
  - d) All of the above
- 4. Which statement is NOT TRUE regarding how Dr. Falck defines a Member?
  - a) A member is a physical being bound by membranes and cavities
  - b) A member is in continuous interaction with others, both seen and unseen
  - c) A member is capable of private experience
  - d) A member is free to the degree to which they maximize their own personal benefit
- 5. Dr. Falck argues that membership is the perfect state of existence and there is never any conflict.
  - a) True
  - b) False

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- 6. Which of the following best explains how beliefs about individual human freedom might be viewed through the lens of the Membership Perspective?
  - a) Humans are free when they do whatever they want, whenever they want
  - b) Humans are free when they do whatever government leaders tell them to do
  - c) Humans are free when they are able to care for themselves and others
  - d) All of the above
- 7. Which of the following beliefs can be inferred from member actions?
  - a) Member actions are socially derived and contributory
  - b) Members are in continuous interaction with other members
  - c) Members are capable of private experience
  - d) All of the above
- 8. If applying the Membership Perspective, a social worker might do which of the following?
  - a) Assess a person's interactions with others as positive, negative, or ambiguous
  - b) Support a person to create personal boundaries based on their COVID risk
  - c) Facilitate a community safety plan to ensure everyone's safety during a natural disaster
  - d) All of the above
- 9. Which of the following human processes can serve as an analytic tool to measure membership?
  - a) Biology and physical functioning
  - b) Social processes and interactions
  - c) Meaning and symbolization
  - d) All of the above
- 10. Adopting the Membership Perspective would erase people's uniqueness.
  - a) True
  - b) False

**∀nswers:** 1,)a 2,)d 3,)b 4,)d 5,)b 6,)c 7,)d 8,)d 10,)b

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# EXERCISE OF JUDGEMENT, SIMULATED PRACTICE EXERCISES FOR COMPETENCIES 1-9 Competency 1: Demonstrate Ethical and Professional Behavior

Review the <u>recorded lecture</u> related specifically to the <u>NASW Six Core Values</u> (13:56 to 14:40), how "freedom" is conceptualized within the split human/dual model of social work (14:40 to17:28), and the membership perspective (21:05 to 23:12). Also, review <u>NASW Code of Ethics, Ethical Standard 1.02 Self-Determination</u> (NASW, 2021). Consider: 1) what the Membership Perspective posits and how it is different than seeing everyone as individuals split from their groups, 2) what the NASW Ethical Standard 1.02 states about our commitments to client self-determination, and 3) how the Membership Perspective and different ideas about freedom might impact social workers interpretation of 1.02, and 4) how viewing people as members rather than individuals might change social work practice.

#### 1.02 Self-Determination

Social workers respect and promote the right of clients to self-determination and assist clients in their efforts to identify and clarify their goals. Social workers may limit clients' right to self-determination when, in the social workers' professional judgment, clients' actions or potential actions pose a serious, foreseeable, and imminent risk to themselves or others.

- Synchronous/Group Discussion: Assign students the above, then facilitate a discussion using the following prompts: Has social science split the human from its group? How does this impact our beliefs about humans? When looking at NASW Ethical Standard 1.02, how might the Membership Perspective help or hinder social workers in managing ethical conflicts between self-determination of clients and the will of larger society? Does focusing on boundaries make practice easier than focusing on individuals? How might the Membership Perspective open new avenues for social work practice?
- Asynchronous/Discussion Board: Work independently to reflect on this content, then make an original post that discusses the following: 1) a summary of what the Membership Perspective posits, 2) a summary of NASW Ethical Standard 1.02, and 3) a discussion of how the Membership Perspective and different ideas about freedom might impact your interpretation of 1.02; and 4) Discuss/hypothesize how viewing individuals as members rather than individuals might change social work in your practice area.
- <u>Hybrid/Small Group Work:</u> Work in small groups to reflect on this content, then prepare a document that discusses the following: 1) a summary of what the Membership Perspective posits, 2) a summary of NASW Ethical Standard 1.02, and 3) a discussion of how the Membership Perspective and different ideas about freedom might impact how social work interprets 1.02; and 4) Discuss/hypothesize how viewing individuals as members rather than individuals might change social work practice.

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## Competency 2: Engage Diversity & Difference in Practice

Review the details of at least three (3) of the stories posted on the <u>Stories from the Front Line</u> website from the American Hospital Association (AHA, 2022). Choose one (1) story to focus on and consider: 1) who are the people impacted in the story – are they best understood as individuals/collectives, or as members with group boundaries?; 2) how are these people impacted in relation to COVID?; 3) describe/hypothesize how aspects of diversity played a role in their story (such as race, ethnicity, gender, sexual identity, social class, economics, disability, or other unique factors of <u>intersecting identities</u>); and 4) describe/hypothesize how membership intervention did/could improve COVID response and outcomes for the human race.

## Synchronous/Group Discussion:

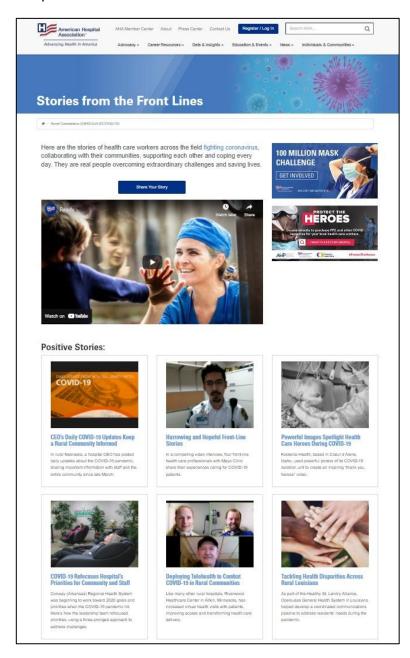
Assign students the above, then facilitate a discussion using the following prompts:
Which stories stood out to you and why?
How did diversity play a role in each story?
How did/could the Membership Perspective and/or other social work interventions help improve outcomes for the human race?

## Asynchronous/Discussion Board:

Work independently to develop an original post about your chosen story. Be sure to hyperlink and explain your story to demonstrate that you understand it and provide your analysis using the social work lens for each of the items for consideration.

## Hybrid/Small Group Work:

Work in small groups to develop an original report about your chosen story. Be sure to hyperlink and explain your story to demonstrate that you understand it and provide your analysis using the social work lens for each of the items for consideration.



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## Competency 3: Advance Human Rights and Social, Economic, and Environmental Justice

Review the <u>COVAX website</u> and other relevant sources you may find to consider world health and vaccine equity (WHO, 2021 July 24).

## Synchronous/Group Discussion:

Review the comic story series Monster Alert, as published in No One is Safe from COVID-19 until Everyone is Safe (WHO, 2021 July 20), then facilitate a discussion with the following prompts: Which group should get the medicine – the rich or the poor? What other intersectional disparities exist that matter to COVID? What kind of response would the Membership Perspective influence?

## Asynchronous/Discussion Board:

Work independently to search for personal stories about people's access to COVID vaccines. Choose one article that you think best fits this assignment then make an original post that hyperlinks the article and discusses the following: 1) a summary of the article and why you chose it, 2) a discussion of how the person's access to vaccination impacted their lives, 3) a discussion of how the person's access to and beliefs about vaccination impacted other members of the human race; and 4) Discuss/hypothesize how membership intervention did/could improve outcomes for humans.

## Hybrid/Small Group Work:

Groups should review the full COVAX website and specifically the <a href="Model">COVID-19 vaccine introduction toolkit</a> (WHO, 2020, Nov 16). Work in small groups to specify a geographical setting and then

World Health Organization Monster Alert A story of how we must act globally to protect ourselves locally from COVID-19

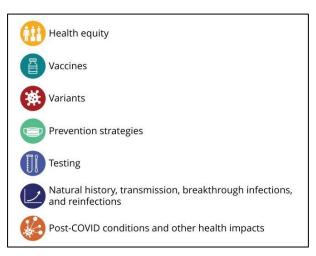
develop a written description for how a social worker might lead an interdisciplinary team to develop a vaccination roll out plan for an under-vaccinated area. Be sure to specify the location and relevant cultural factors that may impact vaccine uptake in that area, along with descriptions of any specialized tactics. Consider the various types of professionals you would need to form your workgroup and lay out the primary tasks you would need to undertake to plan, implement, and evaluate a comprehensive vaccine roll out plan. Cite at least four scholarly sources that inform your work.

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## Competency 4: Engage in Practice-informed Research and Research-Informed Practice

Review the <u>CDC Public Health Science Agenda for COVID-19</u> (CDC, 2022, Jan 5). Consider the individual public health science questions listed as they fall under the seven (7) topic areas of health equity, vaccines, variants, prevention strategies, testing, natural history/transmissions, and post-COVID health impacts; then consider how these help to shape the six (6) priority areas shown with corresponding intervention objectives including disease detection, controlling transmission, understanding the natural history, protection in healthcare and non-healthcare settings, prevention/mitigation/intervention strategies, and social/behavioral/communication science. Also, review the wealth of resources available through the <u>COVID-19 Publications Database</u> (CDC, 2022, Jan 12). Additionally, review <u>NASW's description of how social work practice has been impacted during COVID-19</u> (NASW, 2022) and other relevant sources you may find. Consider: 1) how do real world practice settings inform the COVID research agenda?; 2) how

accessible are the scholarly reports about best practices to real world community leaders such as business owners, system administrators, or social workers; and 3) describe/hypothesize how social workers have/may be involved in research to improve our utilization of evidence-based practices during COVID to improve human outcomes. How might the Membership Perspective be used to improve research and evidence-based planning?



#### Synchronous/Group Discussion:

Assign students the above, then facilitate a discussion using the following prompts: How does real world practice with COVID inform research about COVID? How do those research reports of what works best translate or get back to the practice community for use? How did/could social work intervention improve the feedback loop to promote effective and efficient outcomes for the human race?

## Asynchronous/Discussion Board:

Work independently to review the content as described and then develop an original post responding to the items listed above for consideration.

## Hybrid/Small Group Work:

Work in small groups to review the content as described and then develop an original report responding to the items listed above for consideration.

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## Competency 5: Engage in Policy Practice

Review the <u>recorded lecture</u> content related specifically to applications of the Americans with Disabilities Act (ADA) during COVID (33:17 to 35:50 minutes). Also, review the *What You Should Know about COVID-19 and EEO Laws* article (USEEOC, 2021) to better understand the Americans with Disabilities Act (ADA),

Section 504 of the Rehabilitation Plan, Title VII of the Civil Rights Act, and other public policies that protect workers with disabilities, as enforced by the US Equal Employment Opportunity Commission (USEEOC).



## Synchronous/Group Discussion:

Assign students the above, then facilitate a discussion using the following prompts: Which group should have primacy for concern in access to public spaces throughout the world – people who refuse to get vaccinated or people with underlying health risks and why? Are there policies and procedures that would allow these groups to find ways to co-mingle in the world? How might the Membership Perspective alter human understandings of these public policies? How might being viewed as members help or hinder people with disabilities in securing accommodations for equal access to public services?

## Asynchronous/Discussion Board:

Work independently to search for personal stories about people who have been either included or excluded from public settings during COVID. Choose one article that you think best fits this assignment then make an original post that hyperlinks the article and discusses the following: 1) a summary of the article and why you chose it, 2) a discussion of who was impacted and how, and how disability and/or diversity impacted their story, 3) an analysis of which of the public policies listed above are relevant in the story; and 4) discuss/hypothesize how membership intervention did/could improve life outcomes.

## Hybrid/Small Group Work:

Be sure to review <u>Section B. Confidentiality of Medical Information</u> (USEEOC, 2021). Groups should also review <u>Contract Tracing Resources for Health Departments</u> (CDC, 2021 Sept 23). Work in small groups to specify a business setting where social work services are provided and close contact among employees is required (such as an emergency room) and then develop a written policy and procedure description for how an employer would contract trace while ensuring staffing and confidentiality. Be sure that all positive cases are reported, and that all high-risk employees are identified and protected.

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## Competency 6-9: Engage, Assess, Intervene, and Evaluate Practice with Individuals, Families, Groups,

## Organizations, and Communities

Imagine that you have been compelled by a punk singer in an edutainment module to try and promote community safety and resilience during COVID. Reflect on what you have learned from this module and any insights you may have developed about Individualism versus Membership. Then consider a core social work practice theory, the <a href="Membership:Ceneralist Intervention Model">Generalist Intervention Model</a> (GIM). For each of the following cases occurring at each level of social work



practice, <u>design a plan</u> with <u>specific techniques</u> to: 1) identify and engage relevant client/clients, 2) conduct culturally competent assessments, 3) agree on interventions and plan when and how to implement selected tactics, and 4) evaluate to identify when it's time to alter tactics, terminate services, and/or follow up. Consider how viewing clients as Members rather than Individuals may impact your practice choices.

- 1. <u>Individual:</u> You are a Licensed Clinical Social Worker (LCSW) working in a pediatric emergency department. You have been asked to treat a fourteen year old child who has come into the emergency room reporting severe anxiety related to COVID. The child does not have a history of mental health issues and physicians have determined that they are in good health, however they report they are greatly suffering from feeling cut off from society and the future and they are having trouble breathing and thinking. Review <u>best practice protocols for managing COVID-related stress</u> (Lee & Simpson, 2020) in emergency rooms and devise a plan to best support this child.
- 2. Family: You are a Licensed Clinical Social Worker (LCSW) working in Tennessee and a family comes to you for help resolving a conflict between the mother (age 42) and the father (age 46) related to whether or not to send the children back to in-person daycare/school. Both parents are being required to return to in-person work or change jobs. They have one child that is age eight and is an A/B student, and another child who is age three and has an auto-immune condition that puts them at increased risk for COVID. All are vaccinated except the youngest child who cannot yet receive a vaccine safely. Review resources about supporting young children with disabilities to go back to school (Lupus Foundation of America, 2021) and create a decisional balance sheet to help this family make decisions.

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- 3. Groups: You are a Licensed Clinical Social Worker (LCSW) working in Tennessee and managing a community based support group that meets at a local Senior Citizens Center. About half of the seniors who come to the center have been fully vaccinated and the other half have either not reported or specified that they do not intend to get vaccinated. Review best practices for Senior Centers during COVID (National Council on Aging, 2020) and identify a plan of action to ensure safety.
- 4. <u>Organization</u>: You are an Advanced Practice Social Worker (APSW) in Tennessee who has been contracted by a local organization that provides support services to homeless people to design COVID safety protocols to help ensure public safety during outreach, where employees are out in the field providing food and other critical life support services to homeless people. Review <u>best practices for homeless service providers</u> (CDC, 2021 Nov 3) and create a safety plan that engages employees.
- 5. <u>Community:</u> You are an Advanced Practice Social Worker (APSW) in Tennessee who has been contracted by a local city government to help manage an interdisciplinary team charged with designing a comprehensive community-level strategic plan to reduce the city's COVID-related population level indicators, specifically their vaccination rates and their COVID-related hospitalization rates during COVID surges. Specify if your community is rural or urban and be sure to develop culturally relevant strategies to get people vaccinated, and keep them from needing to go to the hospital during surges.

## Synchronous/Group Discussion:

Divide the large group up into smaller groups and have each small group discuss an assigned case, then come back to discuss each case as a large group.

## Asynchronous/Discussion Board:

Work independently to select a case and then make an original post that describes how you would design a plan of action. Hyperlink and APA cite at least three (3) scholarly resources that inform your plan.



## Hybrid/Small Group Work:

Work in small groups to select a case and then make an original report that describes how you would design a plan of action. Hyperlink and APA cite at least three (3) scholarly resources that inform your plan.

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#### REFERENCE

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