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Patricia Snyder; P J McWilliam Infants and Young Children; Oct-Dec 2003; 16, 4; Children's Module pg. 284

> Infants and Young Children Vol. 16, No. 4, pp. 284-295 © 2003 Lippincott Williams & Wilkins, Inc.

Using Case Method of Instruction Effectively in Early Intervention Personnel Preparation

Patricia Snyder, PhD; P. J. McWilliam, PhD

The case method of instruction (CMI) is a viable instructional strategy for use in early intervention personnel preparation, particularly when the focus of instruction is to enhance learners' application, synthesis, and evaluation skills. The case method of instruction promotes decision-making and self-reflection through use of case stories, which depict real-life dilemmas early interventionists encounter in their interactions with children and families. Learning to use CMI effectively is not self-evident or easily mastered without guidance and supportive resources. In this article, we present information related to selecting quality cases, preparing for case discussion, facilitating case discussion, and evaluating learner outcomes. Strategies described have been field-tested and validated with 128 early intervention instructors who participated in intensive training designed to increase their knowledge about and use of CMI. **Key words:** case studies, early intervention, faculty development, learning methods, teaching methods

THE CASE METHOD OF INSTRUCTION (CMI) is an active instructional strategy, which has been demonstrated to enhance learners' application, problem-solving, and decision-making skills (Snyder & McWilliam, 1999). The case method of instruction also is believed to foster reflective thinking and is used to help learners appreciate multiple perspectives, clarify beliefs, and analyze how beliefs influence decisions (Lundeberg, 1999; McNaughton, Hall, & Maccini, 2001).

From the School of Allied Health Professions, Louisiana State University Health Sciences Center, New Orleans, La (Dr Snyder); and the Peabody College at Vanderbilt University, Nashville, Tenn (Dr McWilliam).

The work described in this article was supported by the US Department of Education, Office of Special Education Programs grant 11324R980058. The views expressed are those of the authors, not the funding agency.

Corresponding author: Patricia Snyder, PhD, School of Allied Health Professions. Louisiana State University Health Sciences Center, 1900 Gravier St, New Orleans, LA 70112-2262 (e-mail: psnyde@lsubsc.edu). Case studies are the primary tools used in CMI; they describe real-life situations individuals are likely to encounter. A type of case study commonly used in CMI is the problem- or dilemma-based case, which requires learners to offer solutions for or make decisions about complex problems. Led by a skilled facilitator, learners participate in case analysis using their knowledge and experiences to arrive at reasoned courses of action, which address the dilemmas presented.

Learning to analyze complex situations and to evaluate various solutions critically are important skills for early interventionists who often interact in situations where ambiguous or competing perspectives operate. As McCollum and Catlett (1997, p. 109) noted, "The crucial point for early intervention training, in which processes, values, and relationships are the core of service delivery, is that these must become an explicit part of the curriculum." The case method of instruction represents a viable instructional approach for helping students learn how to analyze complex situations, make informed decisions,

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predict outcomes, and think critically and reflectively.

Increasing numbers of instructors who conduct preservice and inservice training are using CMI and some are exploring its effectiveness for teaching application and problem-solving skills (Elksnin, 1998; Lundeberg, Levin, & Harrington, 1999; McNaughton et al., 2001; Wasserman, 1994). The advantages of CMI as an instructional strategy in early intervention personnel preparation also have been recognized, particularly with regard to instruction in areas of family-centered service provision, teaming, and cultural diversity (Johns & Harvey, 1993; McWilliam, 1992, 1995; Snyder & McWilliam, 1999; Snyder, McWilliam, Lobman, & Sexton, 1998). The availability of compiled case studies related to early childhood (eg, Driscoll, 1995; Rand, 2000) and early intervention (eg, McWilliam, 2000a; McWilliam & Bailey, 1993) has made it somewhat easier for instructors to incorporate CMI into their instructional repertoires.

Despite recognition of CMI as an effective instructional strategy and the availability of case stories, surveys of educators in both regular and special education have shown that these individuals would like practical guidance before using CMI, particularly in areas related to case selection, case preparation, case facilitation, and learner evaluation (Elksnin, 1998; McNaughton et al., 2001). Our work with CMI in early intervention through a series of federally sponsored projects from the US Department of Education, Office of Special Education Programs (OSEP) has confirmed that instructors value the opportunity to receive guidance about how to use CMI effectively. Further, we have found that the number of instructors who currently use CMI effectively in early intervention is relatively small. Most instructors have never experienced CMI in their own professional development and it is not a method that is easily learned without supportive resources and instructional guidance (McWilliam & Snyder, 2002).

The purpose of this article is to provide general guidance for using CMI effectively in early intervention personnel preparation. Following a brief overview of CMI, we offer criteria for case selection, describe case preparation strategies, offer tips for case facilitation, and discuss issues associated with evaluating learner outcomes. All strategies presented in this article have been field-tested and validated with 128 early intervention instructors from 6 states who participated in the *CMI Outreach Project* funded by OSEP from 1998 through 2001.

OVERVIEW OF CMI

The case method of instruction has been associated most often with business, law, and medical schools (Wasserman, 1994). Although many assert that the use of case-based instruction in education is relatively new, Elksnin (2001) noted that cases were used in teacher education as early as the mid-1800s and Merseth (1999) traced the use of cases in education from the 1920s. Most scholars agree that interest in case pedagogy began to grow exponentially in the 1980s following publication of A Nation Prepared: Teachers for the 21st Century (Carnegie Commission, 1986), which recommended use of CML In the early 1990s, several casebooks and books or articles about cases and case methods in education were published (eg, Merseth, 1991; Shulman, 1992; Silverman, Welty, & Lyon, 1992; Wasserman, 1994). During this time, McWilliam (1992) recognized the value of CMI for use in early intervention and coauthored the first casebook specific to early intervention (McWilliam & Bailey, 1993).

Although CMI was proclaimed as an effective pedagogical approach, empirical support for its perceived benefits was rarely evident until the later 1990s. Merseth (1996) reviewed the evidence for case-based instruction in a chapter published in the *Handbook of Research on Teacher Education* and commented that, "The collective voice of its proponents far outweigh the power of the existing empirical work" (p. 722). Fortunately, the contemporary focus in case-based instruction has broadened to include not only the anecdotal appeal of the method, but understanding,

through empirical research, the effects of this approach on instructors and learners (Lundeberg et al., 1999; Merseth, 1999). Several studies have been conducted in early intervention demonstrating the effectiveness of CMI for increasing knowledge, strengthening application skills, modifying attitudes, and enhancing problem-solving skills (eg, Snyder et al., 1998; Snyder & McWilliam, 1999).

DISTINGUISHING CASE INSTRUCTION

Many approaches to case instruction have been described in the literature. Gideonse (1999) observed that one challenge associated with improving the efficacy of case instruction is defining what a case is and what case instruction means. The case method of instruction we use in early intervention personnel preparation is distinguished by several important features. First, the cases are open-ended and dilemma-based with resolution left to the learner. The cases are written narratives or stories that depict realistic, not extreme, issues encountered by early interventionists in their day-to-day work with children and families. Dialogue is used to enrich the presentation of the case and to reflect the importance of communication in early intervention, particularly between professionals and family members. Second, the instructional emphasis in CMI focuses on a decision-making process and not on arriving at the "right" answer. The case method of instruction challenges learners to apply knowledge to practical situations and to consider alternative solutions for solving the dilemma. A learner's mastery of theory, facts, and specific skills is considered important, but only insofar as the learner is capable of employing them during the decisionmaking process. Third, through skilled facilitation by an instructor, learners participating in CMI engage in lively case discussion with one another. They apply knowledge, hear alternative viewpoints, reflect on their beliefs and values, and use a decision-making process to solve dilemmas. Whole-group case discussion is emphasized, although learners occasionally discuss cases in small groups or participate in other case-related activities such as

targeted role-plays, team simulations, or other cooperative learning activities.

The case method of instruction differs from traditional instruction in a number of ways with respect to student and instructor roles (Elksnin, 2001). In CMI, learners do not sit passively and take notes while the instructor provides carefully outlined facts on the subject matter. The majority of instructional time is spent in analysis of cases and learners are expected to keep up-to-date on related readings, read and prepare for case analysis, and participate actively in case analysis and other case-based instructional activities.

The role of the CMI instructor differs markedly from that of the traditional instructor and has been variously described as that of facilitator, moderator, catalyst, resource, and director (Christensen & Hanson, 1987; Wasserman, 1994). Silverman et al. (1992) goes so far as to characterize CMI as "teaching without a net." The CMI instructor must create an atmosphere of suspended judgment, encourage independent problem-solving by participants, foster use of critical thinking skills, and keep the discussion going without becoming involved in the actual decisionmaking. The instructor also serves as a resource, providing learners with information and theory in a particular area of study or pointing them in the right direction to find answers for themselves.

CASE SELECTION CRITERIA

Regardless of whether instructors choose to use cases written by others (eg, McWilliam, 2000a,b) or write their own cases (Naumes & Naumes, 1999; Wasserman, 1994), they must evaluate key characteristics associated with quality cases. Table 1 shows a case selection checklist based on recommendations provided by McWilliam (1992, 2000b), Shulman (1992), Sudzina (1999), and Wasserman (1994). We recommend instructors use this checklist to review cases they are considering for use in instruction.

Identifying quality cases is a necessary, but not sufficient, step in case selection. Ultimately, cases selected must address relevant

Table 1. CMI Case selection checklist.

Categories	Associated criteria
Quality of narrative	Presents dilemma that compels decision-making Dilemma realistic Dilemma relevant for learners who will use it Case written from the perspective of the decision-maker Descriptive phrases allow for mental images of people, places, and events to be formed Includes realistic dialogue Multiple solutions are possible; not one right answer
Instructional focus	 Permits examination of issues/topics relevant to focus of instruction Contains content relevant for addressing teaching objectives Knowledge and skills emerging from case analysis generalizable to other situations
Supplemental materials	 Summary of case provided Discussion questions provided Teaching notes available with suggested case facilitation questions Case addenda and continuations available Supplemental learning activities (eg, role-plays, team simulations, written assignments) provided Resources (eg, books, articles) relevant to case listed Matrix organized by cases and topics provided
Validation	Case field-tested and validated by instructorsCase field-tested and validated by learners

topics and help accomplish instructional goals and objectives. Instructors should avoid using cases simply to teach a different way. Without specific linkages to instructional content and objectives, learners will become frustrated with cases and case discussion and will not derive maximum instructional benefit from the method.

One effective strategy for matching case topics to instructional content is to develop a case matrix. The matrix lists the quality cases the instructor has identified in each row and topics of interest related to instructional content in each column. A check mark is entered in a cell in the matrix for each topic the instructor believes could be effectively addressed using a particular case. Once a case story is used, an instructor can note learners' reactions in the matrix (eg, learners commented that they identified strongly with the dilemma raised in this case; this was an

excellent case for stimulating discussion related to parent-professional conflict).

Matching cases to instructional objectives requires the instructor to consider carefully how the case discussion and associated activities (eg, supplemental readings, role-plays) are expected to impact learning. We recommend instructors develop teaching notes for each case they use. Among other things, the teaching notes outline the topics addressed by the case and specify associated instructional objectives. The appendix shows an example of teaching notes for a case titled "Supermom," which can be accessed at www.cmiproject.net.

CASE PREPARATION STRATEGIES

Once a case has been selected, instructors must consider how to prepare themselves, the learners, and the instructional setting for case instruction. Use of effective case preparation strategies in these 3 areas is necessary for the success of CMI.

Instructor preparation

Instructors often believe that preparation is not necessary because they cannot predict precisely the direction case discussion will take. On the contrary, we believe instructor preparation is essential before case facilitation occurs (McWilliam, 2000b). As Wasserman (1994) noted, even highly advanced case teachers who have facilitated the same case many times prepare extensively in advance of a case session. At a minimum, instructors need to (a) know the case material, (b) be knowledgeable about the topic or content areas addressed in the case stories, (c) explicate their teaching objectives, and (d) develop teaching notes that help guide case facilitation and follow the CMI decision-making or problem-solving process (see Fig 1).

Knowing the case material involves reading the case thoroughly shortly before case discussion, regardless of how many times an instructor has read the case previously. We recommend instructors write down essential details because the more fluent they are

about the case, the better they are able to serve as informed resources for learners who may neglect important information, make unwarranted assumptions about characters or events, or remember facts incorrectly. Instructors also need to be versed in topics or content areas addressed in the case stories. For example, in the Supermom case story, a number of controversial treatments for children with Down syndrome are mentioned (eg, cosmetic surgery, megavitamin therapy). Before discussing this case, instructors should locate information about these topics so that they are able to answer learners' questions when they arise. Often a case instructor needs to provide factual or theoretical knowledge to participants during a case discussion or direct learners to appropriate sources for additional information.

Instructors who explicate their teaching objectives are more effective in keeping case discussion on track and focused on relevant issues. This does not mean instructors cannot choose to adjust teaching objectives during the course of case discussion, should they decide discussion is proceeding down a productive, yet somewhat different path than originally anticipated. Without specifying



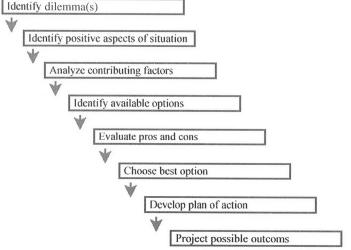


Fig 1. CMI decision-making process. From McWilliam and Snyder (1993).

objectives a priori, however, we have found the instructor runs the risk of having chaotic, unfocused discussion.

Once instructors have specified their teaching objectives, they have a general framework on which to build case discussion questions. We recommend instructors develop teaching notes (see appendix) to list case discussion questions. Questions should be organized using the CMI decision-making process outlined in Fig 1. In general, the questions are designed to help (a) open the case discussion, (b) identify and analyze dilemmas/issues and contributing factors, (c) consider differing perspectives, (d) project actions that might be taken, (e) consider likely consequences of particular actions, and (f) summarize major insights or highlight learning that has occurred as a result of case discussion. Knowing which questions to ask and when and how to frame them with precision improves with practice and continuously refined teaching notes. In addition, some casebooks or instructor guides offer example questions that can be considered by instructors preparing for case discussion (eg, McWilliam, 2000b).

Preparing learners

Learners need a general orientation to CMI and they benefit from specific case preparation activities employed in advance of case discussion. The types of preparation activities implemented vary depending on salient characteristics of the learners. Factors affecting the activities used include whether learners are taking the course for university or inservice credit; if they are novice or experienced early interventionists, administrators, or support staff; and their previous experience with CMI (Sudzina, 1999). For students participating in preservice instruction, we recommend instructors present an oral and written introduction to CMI, including an overview of CMI, its purposes, and what learners should expect during case discussions. Several casebooks provide an orientation to CMI and the associated decision-making or problemsolving process (eg, McWilliam, 2000a; Rand, 2000).

Students should be expected to read a case thoroughly before class. One way to ensure students have read the case is to have them complete case-relevant assignments before class. Among the assignments students can be given are preparing notes for class discussion, locating information about a particular topic relevant to the case, responding in writing to questions posed at the end of a case story, and completing a comprehensive case analysis.

Learners participating in inservice instruction also benefit from a general orientation to CMI. Our experiences are that these individuals either need to be provided with written information about CMI in advance of the inservice session (eg, include CMI overview article in mailings sent to participants) or during the first portion of the session, if the information is not able to be shared with participants beforehand. Time to read case stories and to complete associated case preparation activities must be allotted during inservice instruction.

Instructional setting preparation

As McWilliam (2000b) noted, although CMI can be implemented in almost any environment, certain environments are more conducive to the method. Good acoustics in a room help ensure the instructor can hear all participants and participants can hear each other without use of any type of amplification. A well-lit room is important so that participants can see each other, the instructor, and stay energized. Scating should be arranged so that participants are facing the other participants in the room. We find circular arrangements of chairs, a conference table, or a Ushaped arrangement work well.

Boards or flipcharts and chalk or markers should be available for the instructor to write notes to record and organize information discussed during case analysis. Self-adhering flipchart paper is particularly useful because instructors can affix completed pages to walls around the room so that participants can refer to these notes throughout case discussion. Instructors typically find it useful to remain

standing during case discussion, so that they can write on boards or flipcharts and circulate around the room. Because CMI involves active discussion among participants who may not know one another, we place tent-like name cards on the tabletop in front of each participant with first names written in large letters.

CASE FACILITATION STRATEGIES

For CMI to be optimally effective, the instructor must manage case analysis discussion by using case facilitation strategies. Although useful facilitation strategies have been detailed in the CMI literature and will be described in this portion of the manuscript, we caution that instructors will need to identify which facilitation strategies work best for them and the learners with whom they interact. We have observed hundreds of instructors and have concluded there is not one right way to facilitate a case discussion. In fact, Silverman (1999) commented that although

the facilitation styles of experienced case leaders can be emulated, the personal style of each facilitator is not fully transportable. She noted case facilitators could mimic closely what experienced case leaders do, but may achieve different results. Thus, our discussion focuses on describing general case facilitation strategies and on validated methods for refining whatever strategies the instructor adopts.

Table 2 shows a list of general facilitation strategies instructors have found useful for enhancing case discussion. Key among these strategies is to use the CMI decision-making process shown in Fig 1 to guide case discussion. This process provides a framework for organizing case analysis. Although presented as a linear model, rarely does case analysis and discussion proceed in the lock-step manner depicted in Figure 1. Facilitators should not be overly concerned if participants jump from one step in the process to another; however, they should keep the overall process in mind and use pointed questions to redirect the group to neglected steps. Primarily it is

Table 2. General facilitation strategies useful for enhancing case discussion

- Establish "ground rules" for case discussion (eg, how participants will be invited to speak, how participants will signal that someone is dominating the discussion)
- Use the CMI decision-making process to guide discussion
- Use thought-provoking, generally open-ended questions to stimulate discussion
- Avoid questions that imply there is a "right" answer
- Allow the audience to carry the discussion
- Summarize or redirect participants if discussion begins to ramble
- Discourage premature solutions; redirect learners to neglected steps in the decision-making process
- Use facilitation strategies that encourage participants to talk with one another (eg, ask participants to respond to each other's comments)
- Maintain nonjudgmental stance; challenge participants to defend their positions, but do not criticize them
- Use boards or flipcharts to organize and summarize case discussion
- Encourage alternative perspectives through probing questions
- Draw attention through probing questions to neglected facts or assumptions (eg, Do we really know the mother is "in denial"? How do we know this?)
- Summarize discussion periodically; refer participants to information recorded on boards
- Model active listening throughout the case discussion
- Acknowledge and address affect (eg, you seem to feel very strongly about this issue; do you know why you feel this way?)

the *process* of arriving at a solution to the dilemma raised in the case that is of primary benefit to learners, rather than the solution itself (McWilliam, 2000b).

Displaying key points of case discussion

Many facilitators use written displays to organize and summarize aspects of the discussion to which they or learners may need to refer during case discussion. An organized view of the discussion also permits learners to recognize their individual and collective contributions to the case analysis. There is not one right way to organize a discussion display and each instructor will need to identify recording strategies that work best for them and their learners. Examples of written displays can be found in Silverman, Welty, and Lyon (2000).

Modeling and facilitation

Case facilitation skills can be enhanced by observing an experienced case instructor. In our outreach training, participants watch CMI in action by participating in case discussions we facilitate (modeling and participation). After participants view an entire case facilitation and the group debriefs the case using the CMI decision-making process, we begin another case discussion. During this case facilitation, discussion is interrupted periodically to explain what the facilitator is attempting to do and how these tactics relate to the basic principles of CMI. Participants are encouraged to interrupt the case discussion to ask questions. We provide participants with a Case Facilitation Guide they can use to identify key elements of the facilitation process (a copy of the facilitation guide is available on request from the authors).

Practice with feedback

After observing experienced case instructors, we recommend instructors lead case discussions and solicit feedback from peers or experienced instructors (practice with feedback). We have used this approach in our outreach training and the 128 instructors we have trained rated this aspect of the training as very useful (M = 4.67, SD = 0.61 on a 5-point scale,

with score of 5 characterized as *very useful*). To help peers organize the feedback they provide to novice instructors, we have developed a *CMI Peer Coaching Guide*. This guide is used during outreach training and when instructors seek feedback from those who observe their classes or inservice training sessions (a copy of the peer-coaching guide is available from the authors). We recommend instructors videotape their training session so that they and their peers can observe case facilitation skills while they are discussing them.

Other strategies

Other suggested strategies for enhancing and evaluating case facilitation skills include forming discussion groups with other interested instructors to share CMI strategies, discuss important teaching issues that emerge, and engage in self-guided reflection about case teaching. Feedback from learners, obtained through formal written comments or informal discussion, also offers important information about whether instructional objectives are being met through CMI and how learners perceive case instruction (Silverman et al., 2000).

EVALUATING LEARNER OUTCOMES

Surveys of special education faculty have repeatedly confirmed that instructors who have used or plan to use CMI are concerned about its instructional impact and how to evaluate learner performance (Elksnin, 1998; McNaughton et al., 2001). The 128 instructors who participated in our outreach training also expressed concerns that assessing student outcomes would be too difficult with CMI (M = 2.17; SD = 1.1 on a 5-point scale, with score of 1 indicating significant concerns and a score of 4 indicating no concerns).

We have conducted 2 investigations in early intervention personnel preparation to evaluate the instructional impact of CMI (Snyder et al., 1998; Snyder & McWilliam, 1999). Learner outcomes included knowledge acquisition, attitudes about family-centered early

intervention, application skills related to family-centered service provision, satisfaction with course and instructor, and case analysis skills. When compared to students who received traditional instruction, those students who had participated in a course where CMI was the predominant instructional strategy demonstrated similar levels of knowledge acquisition, attitude change, and application skills, but noteworthy, positive differences in course and instructor satisfaction and case analysis skills (Snyder et al., 1998). These findings suggest CMI may be as effective as other methods of instruction when certain learner outcomes are studied (eg, knowledge, attitudes) and may be more effective for establishing problem-solving or critical thinking skills. Additional research needs to be conducted, however, to elucidate what learners actually learn, and do not learn, from CMI and the facilitation methods that best support learning (Lundeberg et al., 1999; Richert, 1992).

Formative evaluation is also important in CMI, including evaluating learner's case preparation and case discussion performances. Several authors have described formative evaluation strategies; many involve using case analysis rubrics that provide feedback on the

completeness of the learner's examination of the dilemma and the comprehensiveness of the response (Allen, 1999; McNaughton et al., 2001; Wasserman, 1994). Example criteria used to evaluate case analysis responses include clarity, completeness of analysis, internal consistency of problem-solving logic, coherence of argument, evidence of considering multiple perspectives, and evidence of use of supporting resources.

SUMMARY

Among the skills necessary to become an effective CMI instructor is the ability to locate and evaluate case materials, accomplish case preparation activities, develop and enhance case facilitation skills, and explore innovative strategies for evaluating learner performances and outcomes. We have presented information and resources intended to be helpful for instructors interested in exploring CMI as an alternative instructional strategy. We believe the method holds great promise for enhancing the quality of early intervention personnel preparation, particularly for helping learners to become better problem-solvers and reflective practitioners.

REFERENCES

- Allen, J. D. (1999). Teaching with cases and lessons learned: The journey of an educational psychologist. In M. R. Sudzina (Ed.), Case study applications for teacher education: Cases of teaching and learning in the content areas (pp. 37–55). Boston: Allyn and Bacon.
- Carnegic Commission. (1986). A national prepared: Teachers for the 21st century. New York: Carnegie Forum on Education and the Economy.
- Christensen, C. R., & Hanson, A. J. (1987). *Teaching and the case method*. Boston: Harvard Business School.
- Driscoll, A. (1995). Cases in early childhood education: Stories of programs and practices. Boston: Allyn and Bacon.
- Elksnin, L. K. (1998). Use of the case method of instruction in special education teacher preparation programs: A preliminary investigation. *Teacher Education and Special Education*, 21, 95–108.
- Elksnin, L. K. (2001). Implementing the case method of instruction in special education teacher preparation

- programs. Teacher Education and Special Education, 24, 95–107.
- Gideonse, H. D. (1999). What is a case? What distinguishes case instruction? In M.R. Sudzina (Ed.), Case study applications for teacher education: Cases of teaching and learning in the content areas (pp. 1–7). Boston: Allyn and Bacon.
- Johns, N., & Harvey, C. (1993). Training for work with parents: Strategies for engaging practitioners who are uninterested or resistant. *Infants and Young Children*, 5(4), 52–57.
- Lundeberg, M. A. (1999). Discovering teaching and learning through cases. In M. A. Lundeberg, B. B. Levin, & H. L. Harrington (Eds.), Who learns what from cases and how: The research base for teaching and learning with cases (pp. 3–27). Mahwah, NJ: Erlbaum.
- Lundeberg, M. A., Levin, H. L., & Harrington, H. L. (Eds.). (1999). Who learns what from cases and how: The research base for leaching and learning with cases. Mahwah, NJ: Erlbaum.

- McCollum, J. A., & Catlett, C. (1997). Designing effective personnel preparation for early intervention: Theoretical frameworks. In P. J. Winton, J. A. McCollum, & C. Catlett (Eds.), Reforming personnel preparation in early intervention: Issues, models, and strategies (pp. 105–125). Baltimore: Brookes.
- McNaughton, D., Hall, T. E., & Maccini, P. (2001). Case-based instruction in special education teacher preparation: Practices and concerns of teacher educators/researchers. *Teacher Education and Special Education*, 24, 84–94.
- McWilliam, P. J. (1992). The case method of instruction: Teaching application and problem-solving skills to early interventionists. *Journal of Early Interven*tion, 16, 360–373.
- McWilliam, P. J. (1995). Teaching family-centered skills through the case method. Zero to Three, 15(3), 30– 34.
- McWilliam, P. J. (2000a). *Lives in progress: Case stories in early intervention*. Baltimore: Brookes.
- McWilliam, P. J. (2000b). Instructor's guide for lives in progress. Baltimore: Brookes.
- McWilliam, P. J., & Bailey, D. B. (1993). Working together with children and families: Case studies in early intervention. Baltimore: Brookes.
- McWilliam, P. J., & Snyder, P. (1993, December). Teaching through the case method. Paper presented at the International Conference on Children with Special Needs, San Diego, CA.
- McWilliam, P. J., & Snyder, P. (2002). CMI outreach project: Final report. Chapel Hill, NC: University of North Carolina, FPG Child Development Institute.
- Merseth, K. K. (1991). The case for cases in teacher education. Washington, DC: American Association of Colleges of Teacher Education.
- Merseth, K. (1996). Cases and the case method in teacher education. In J. Sikula (Ed.), *Handbook of research on teacher education* (pp. 722–746). New York: Simon & Schuster/MacMillan.
- Merseth, K. K. (1999). Foreward: A rationale for casebased pedagogy in teacher education. In M. A. Lundeberg, B. B. Levin, & H. L. Harrington (Eds.), Who

- learns what from cases and how: The research base for teaching and learning with cases (pp. ix-xv). Mahwah, NJ: Erlbaum.
- Naumes, W., & Naumes, M. J. (1999). The art and craft of case writing. Thousand Oaks, CA: Sage.
- Rand, M. K. (2000). Giving it some thought: Cases for early childbood practice. Washington, DC: National Association for the Education of Young Children.
- Richert, A. E. (1992). Writing cases: A vehicle for inquiry into the teaching process. In J. H. Shulman (Ed.), Case methods in teacher education. New York: Teachers College Press.
- Shulman, J. H. (Ed.). (1992). Case methods in teacher education. New York: Teachers College Press.
- Silverman, R. (1999). Commentary on "The role of the facilitator in case discussions." In M. A. Lundeberg, B. B. Levin, & H. L. Harrington (Eds.), Who learns what from cases and bow: The research base for teaching and learning with cases (pp. 117–119). Mahwah, NJ: Erlbaum
- Silverman, R., Welty, W. M., & Lyon, S. (1992). Case studies for teacher problem solving. New York: McGraw-Hill.
- Silverman, R., Welty, W. M., & Lyon, S. (2000). Case studies for teacher problem solving: Instructor's manual. New York: Primis/McGraw-Hill.
- Snyder, P., & McWilliam, P. J. (1999). Evaluating the efficacy of case method instruction: Findings from preservice training in family-centered care. *Journal of Early Intervention*, 22, 114-125.
- Snyder, P., McWilliam, P. J., Lobman, M., & Sexton, D. (1998, May). Evaluating the efficacy of case method instruction. Poster presented at the Conference on Research Innovations in Early Intervention, Charleston, NC.
- Sudzina, M. R. (Ed.). (1999). Case study applications for teacher education: Cases of teaching and learning in the content areas. Boston: Allyn and Bacon.
- Wasserman, S. (1994). Introduction to case method teaching: A guide to the galaxy. New York: Teachers College Press.

Appendix

Teaching Notes

Supermom

Topics/issues from matrix

- Parent reactions to the birth of a child with a disability ("denial"; mother's vs father's reactions; coping styles)
- Father involvement in early intervention (or lack of involvement)
- Family priorities (more specifically, parent-professional disagreement re: priorities and courses of action; what to do when professionals perceive that family priorities/decisions are not in the best interest of the child).
- Dealing with a well-informed family... perhaps "overly-informed"
- Controversial treatments

Teaching objectives

- Describe various coping strategies and appraise the coping strategies being used in this case
- Develop strategies for dealing with parent-professional disagreement regarding intervention priorities
- Apply the family-centered principle related to "sharing complete and unbiased information with families" to this case and evaluate how to address information about controversial treatments

Opening questions

- How many of you have ever encountered a situation similar to the one described in this story?
- What would it be like to work with a family like the Jordan's?
- What do you think about Ellen Jordan? What was your immediate reaction to her? What kind of a mother is Ellen...what words would you use to describe her?

Identifying the dilemma(s)

- What is Ellen Jordan doing that bothers this early interventionist so much?
- What are the early interventionist's concerns about this situation? (list)

- What is it that Ellen wants? (ie, family priorities, information that Ellen wants)
- Any additional issues?

Sample of Typical Responses

	Priorities/concerns (family and professional)
(Ellen)	Cosmetic Surgery
(Ellen)	Diet/weight control
(Ellen)	More therapy (keeping Wilson "on track" vs letting him be a child)
(Ellen)	Computer
(EI)	Emotional support for Ellen
(EI)	Father's/Robert's involvement
(EI)	"Denial" (Ellen's "acceptance" of Wilson's disability)

- [Positive] Does Ellen Jordan have any redeeming characteristics? Is she doing anything right?
- [Positive] Is the early interventionist doing anything right? What words would you use to describe her strengths?

Contributing factors

- Why do you think Ellen Jordan might be doing all of this? Why does she want these things?
 - Larger/deeper factors: Messages given to parents about early intervention(eg, how Ellen "sets up" for therapy; what constitutes a "good" parent; more therapy is better; expertise—need therapists, so babysitter can't do it)
- Why does Ellen's behavior bother the early interventionist? Would you share this early interventionist's concerns? If so, why?
- What is actually best for Wilson? How do we know this? (ie, facts vs values)
- What strategies do you believe Ellen is using to cope with Wilson's diagnosis?

Options/solutions

• In the story, this early interventionist has gone to her team members for advice.

- If you were one of the members of this team, how would you advise her to address the issues?
- OR . . . Let's look at Ellen's priorities (revisit list). How might this early interventionist deal with each of these issues? *Note*: You can also identify options for dealing with El's concerns (eg, father's lack of involvement; emotional support for Ellen; denial)
- How should the early interventionist deal with Ellen's requests for information? Did our readings for this class give us any suggestions about how to deal with Ellen's requests for information?
- [As options are generated....] How do you think Ellen would respond to this? Ask questions that focus on the long-term versus short-term consequences of each potential course of action—consequences for Ellen as well as for Wilson...(and Robert)?

[Remember to ask participants to identify pros and cons for potential solutions]

Plan of Action: Based on the option chosen, probe participants about the plan of action. For example, if the group wants to provide Ellen with information ask:

• How would you advise the early interventionist to proceed with gathering information? What types of information should she/he gather? In what types of formats might the information be provided? How would you recommend the interventionist share the information with Ellen/her husband?

Closing

- Based on our discussion of this situation (*Supermom*), what lessons have we learned? What suggestions could we offer to early interventionists that might help them when they encounter families like the Jordans? (Make a list)
- How does our discussion relate to the chapters we read about coping strategies and principles of family-centered care?
- Write a short summary of the coping strategies the group thinks Ellen is using.
- Ask students to do a "Quick Write" in response to the following question: "Based on our case discussion and assigned readings, offer a short analysis of why you believe Ellen's coping strategies are or are not adaptive. [A "Quick Write is a short essay written by students in a 3- to 5-minute timeframe.]