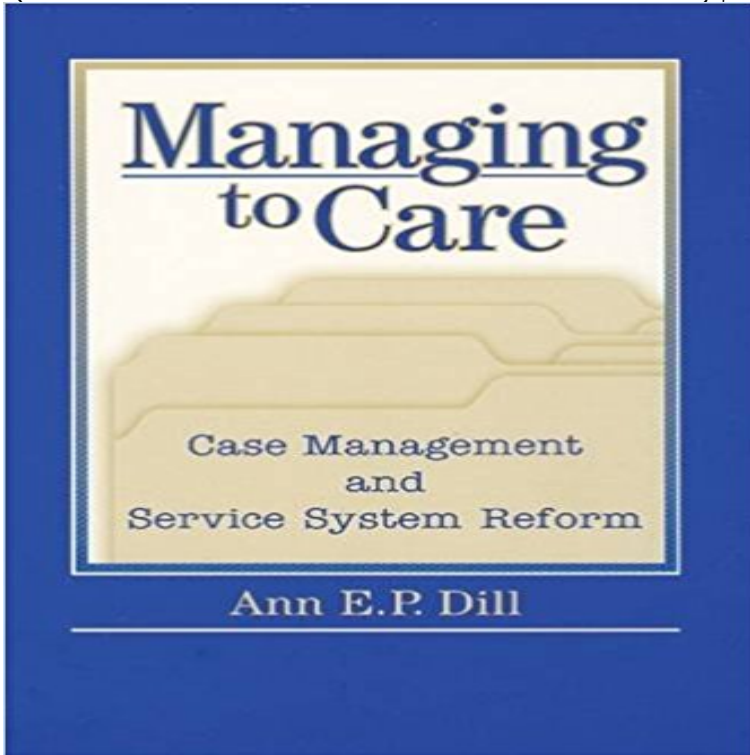


# Managing to Care: Care Management and Service System Reform (Social Institutions and Social Change)



The point of departure for *Managing to Care* is widespread concern that the present delivery of health and social welfare services is fragmented, uncoordinated, inefficient, costly, wasteful, and ultimately detrimental to clients health and wellbeing. Dill traces the evolution of case management from its start as a tool for integrating services on the level of the individual client to its current role as a force behind the most significant trends in health care. Those trends include the entrenchment of bureaucracy, the challenges of once dominant professions, and the rise of corporate control. The authors purpose in adopting this analysis is to invite further scrutiny of the case management profession, and at the same time to identify new possibilities for its application. This volume brings together thoughts developed over many years of observing and participating in case management programs. It provides a multilayered perspective of case management, showing linkages among its social and historical contexts and the ways it is practiced today in diverse service settings. The author emerged convinced about the essential need for care coordination, and that present ways of providing care can work against our highest objectives in doing so. The paradoxes and contraindications embedded in case management practice became a major theme of the book. *Managing to Care* is highly critical of the ways case management has come to absorb and reflect the organizational flaws of the very service systems it was intended to reform. Too often management of the case comes to dominate care. The author does not call for a rejection of professional systems in favor of a resurrected informal community. While much can and should be done to strengthen our ties to one another, there will always be people whose problems require more expert help. Dill argues here

that case management can provide such help, and provide it well, but only if it is grounded in the human dimension of a caring relationship. Ann E. P. Dill, associate professor of sociology and gender studies at Brown University, is a medical sociologist and social gerontologist. Her research examines issues affecting the long-term provision of health care and social services, both in the United States and in countries formerly part of Yugoslavia.

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