Assessment of Service System Strengths, Gaps and Access Barriers

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Overview

- Methodology to collect service system strengths, gaps and access barriers
  - Qualitative via focus groups
  - Quantitative at the client/family level
- Overview of findings
- Summary

Qualitative Methods

- Focus groups conducted at baseline and then every 18-months
- Total of 7 or 8 groups each wave
  - 2-3 groups with consumers
  - 3 groups with providers
  - 1 group with policy makers
- 2 waves completed to date

Focus Group Protocol

- **Service System Strengths**
  - What services do families impacted by violence in the home need the most
    - Which of these services is available
    - Have you seen an increase in service availability

Focus Group Protocol

- Service System Gaps
  - What needs to be done to better serve children and families impacted by violence in the home
    - What types of programs are needed
    - Have you seen an increase in service availability

Focus Group Protocol

- Barriers to Service Access
  - What are some of the barriers that might get in the way of a young family affected by violence in the home using the services that are currently available
    - Probe for: linguistic issues, cultural competence, financial constraints, etc.
    - Any decrease in barriers in the past year

Qualitative Methods

- Groups were audio-taped and a verbatim transcript was produced

- Data coded and aggregated using standard methods (Krueger, 1994)

  - Data summarized into major areas such as service needs, barriers to providing and assessing services, etc.

  - Comments made by a consensus of one group or across multiple focus groups are included in the summary report

Qualitative Results

- Services needed
  - Therapy for children exposed to violence
  - Long-term therapy
  - Services for perpetrators
  - Mentoring services
  - Affordable childcare
  - Affordable job skills training
  - Shelter services

- Barriers to receiving services
  - Lack of funding
  - High staff turnover
  - Lack of bilingual providers
  - Lack of staff trained to provide culturally competent services
  - Transportation
  - Need more information regarding the services that are available in the community

Qualitative Results

- Changes in the last year:
  - Increased ability to identify children exposed to violence in the home
  - Increased collaboration among providers
  - Increased availability of services for perpetrators
  - Increased availability of mental health services for young children

Quantitative Methods

- Data collected at the family level:
    - Services needed (ideal world)
    - Possible barriers to service receipt
    - Whether services were received
    - Barriers to service receipt
    - Outcome of service
    - BSSI family plan.wpd

Quantitative Methods

- Data can be aggregated at the service, domain or system levels
  - Service level
    - To determine if there are barriers to obtaining a particular service (e.g., wait lists)
  - Domain level
    - Is there a particular service sector that this system is having trouble accessing
  - System level
    - Systemic issues (e.g., transportation)
    - An assessment of service system maturation

Quantitative Results

- ## Service level
  - Mental health consultation for children was received 51.9% of the time it was needed
    - Barriers included: lack of transportation (26.1%); waiting lists (9.3%); location (7.7%)
  - Group treatment for adult victims of domestic violence was received 28.6% of the time it was needed
    - Barriers included: waiting lists (30.8%); lack of transportation (11.5%); culturally appropriate services not available (8.6%)
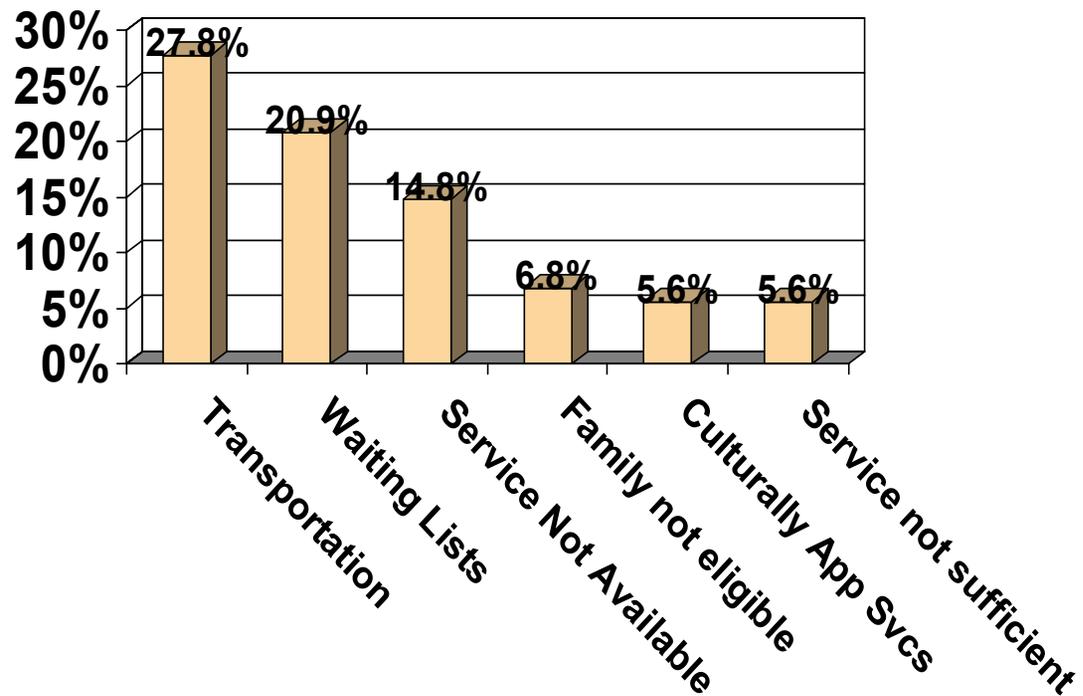
Quantitative Results: Domain Level

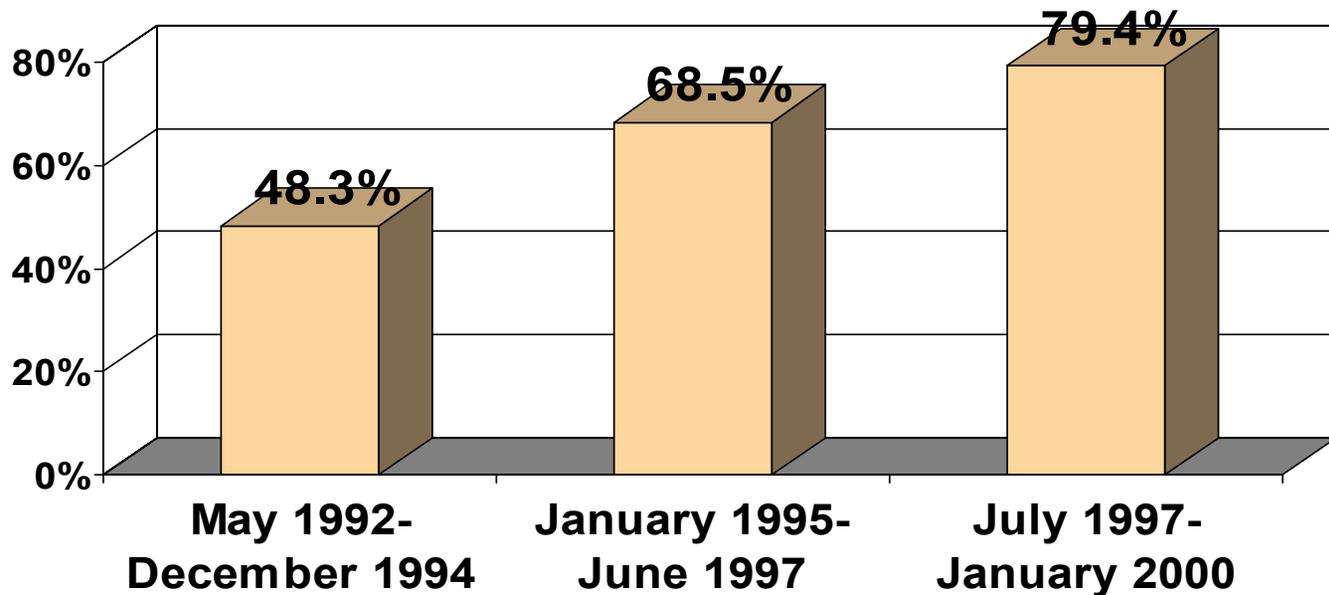**Percentage of Services Recommended that were Received**
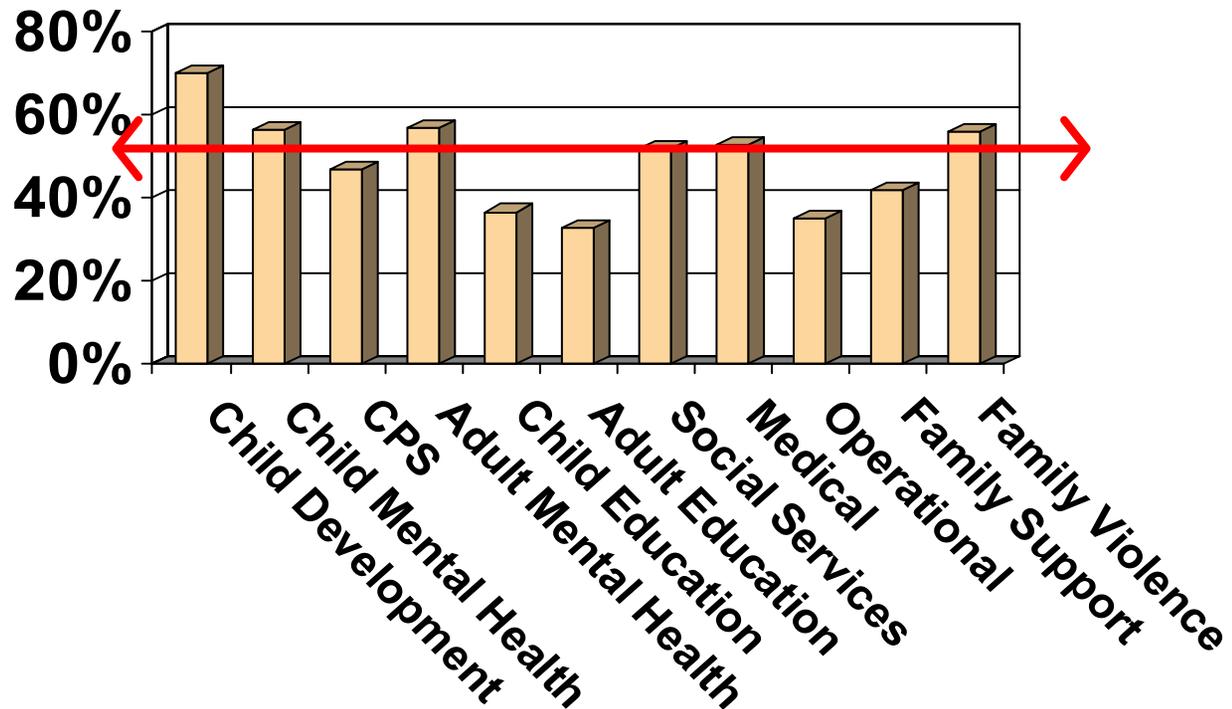
Quantitative Results: System Level

Barriers to Accessing Services

Quantitative Results: Systems Level

Percent of Services Recommended that were Received

Bar chart showing:
- May 1992-December 1994: 48.3%
- January 1995-June 1997: 68.5%
- July 1997-January 2000: 79.4%

Overall Results: Services Needed

- **Qualitative**
  - Therapy for children exposed to violence
  - Long-term therapy
  - Services of perpetrators
  - Mentoring services
  - Affordable childcare
  - Affordable job skills training
  - Shelter services

- **Quantitative**
  - Housing subsidies (18.8%)
  - Psychiatric evaluations for adults (28.6%)
  - Group treatment for adult victims (28.6%)
  - Group treatment for children (40.4%)
  - Family treatment (52.1%)
  - Individual child treatment (56.2%)

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Overall Results: Services Needed

- Qualitative (Quantitative)
  - Therapy for children exposed to violence - (56.2%)
  - Long-term therapy - (n/a)
  - Services for perpetrators - (100%)
  - Mentoring services - (92.1%)
  - Affordable childcare - (63.6%)
  - Affordable job skills training - (52.4%)
  - Shelter services - (housing subsidies 18.8%)
  - Translation services - (100%)

Overall Results: Barriers

- Qualitative
  - Increased funding/services
  - High staff turnover
  - Lack of bilingual providers
  - Lack of staff trained to provide culturally competent services
  - Transportation
  - Need more information regarding the services that are available in the community

- Quantitative
  - Transportation (27.8%)
  - Waiting lists (20.9%)
  - Services not available (14.8%)
  - Clients not eligible (6.8%)
  - Culturally appropriate services not available (5.6%)

Summary

- Qualitative data much less labor intensive to collect however, the data it yields can represent perceptions versus actual needs

- Quantitative data can provide useful information regarding the allocation of resources however, it takes awhile to collect

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Summary

- Qualitative data quite useful during the needs assessment phase to determine target areas.

- Examination of the two together can reveal misperceptions and help systems to allocate services based on actual needs.

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