



CONDUCTING NEEDS ASSESSMENTS FOR COMMUNITY-BASED MENTAL HEALTH PROGRAMS: EVALUATION PLANNING, DATA COLLECTION & ANALYSIS IN COMPLEX ENVIRONMENTS

Dr. Sarah Suiter, Vanderbilt University

Dr. Charles Brown, Centerstone Research Institute

Dr. Kathryn Mathes, Centerstone Research Institute

AGENDA FOR TODAY'S SESSION

- Introductions
- When You Know What You Don't Know: Using the Needs Assessment to Understand Community Attitudes Toward Adolescent Sexuality
- Developing Partnership Approaches to Conducting a Community Needs Assessment for Substance Abuse Programs
- Early Connection Network: Assessing Needs, Strengths, and Possibilities for an Early Childhood System of Care
- Concluding Remarks and Q&A



SETTING THE CONTEXT: WHY NEEDS ASSESSMENTS?

- Centerstone of America
 - Clinic-based Services
 - Grant-funded Services
- Centerstone Research Institute
 - Research & Evaluation
 - Data Analytics
 - Grant Writing
- Post-Award project refinement
 - Plan grant-funded work
 - Engage stakeholders
 - Deepen understanding of community needs, strengths & interests



THEMES FOR TODAY'S PRESENTATIONS

- Factors that shaped individual approaches to conducting needs assessment
- Research methods employed for each needs assessment
- Implications of needs assessment process for program implementation and design





WHEN YOU KNOW WHAT YOU DON'T KNOW: USING THE NEEDS ASSESSMENT TO UNDERSTAND COMMUNITY ATTITUDES TOWARD ADOLESCENT SEXUALITY

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A PROBLEM IS IDENTIFIED
(TN AMONG THE TOP TEN!)

Tennessee
has the 9th highest
teen birth rate of
all states



OFFICE OF ADOLESCENT HEALTH AWARDS CENTERSTONE A 5-YEAR GRANT TO ADDRESS THE PROBLEM IN MIDDLE TENNESSEE

Award Information:

- OPHS/OAH-TPP Tier 1 – 2010
- Length of Project – 5 years
- Budget: \$150,000 per year for evaluation & dissemination

Year 1: Planning, Piloting, & Readiness

- ✓ Continue to Assess Needs and Resources
- ✓ Finalize Goals & Objectives/Logic Model
- ✓ Assess Program Fit
- ✓ Build Organizational Capacity
- ✓ Finalize Implementation Plans
- ✓ Pilot Program Implementation



Program Purpose

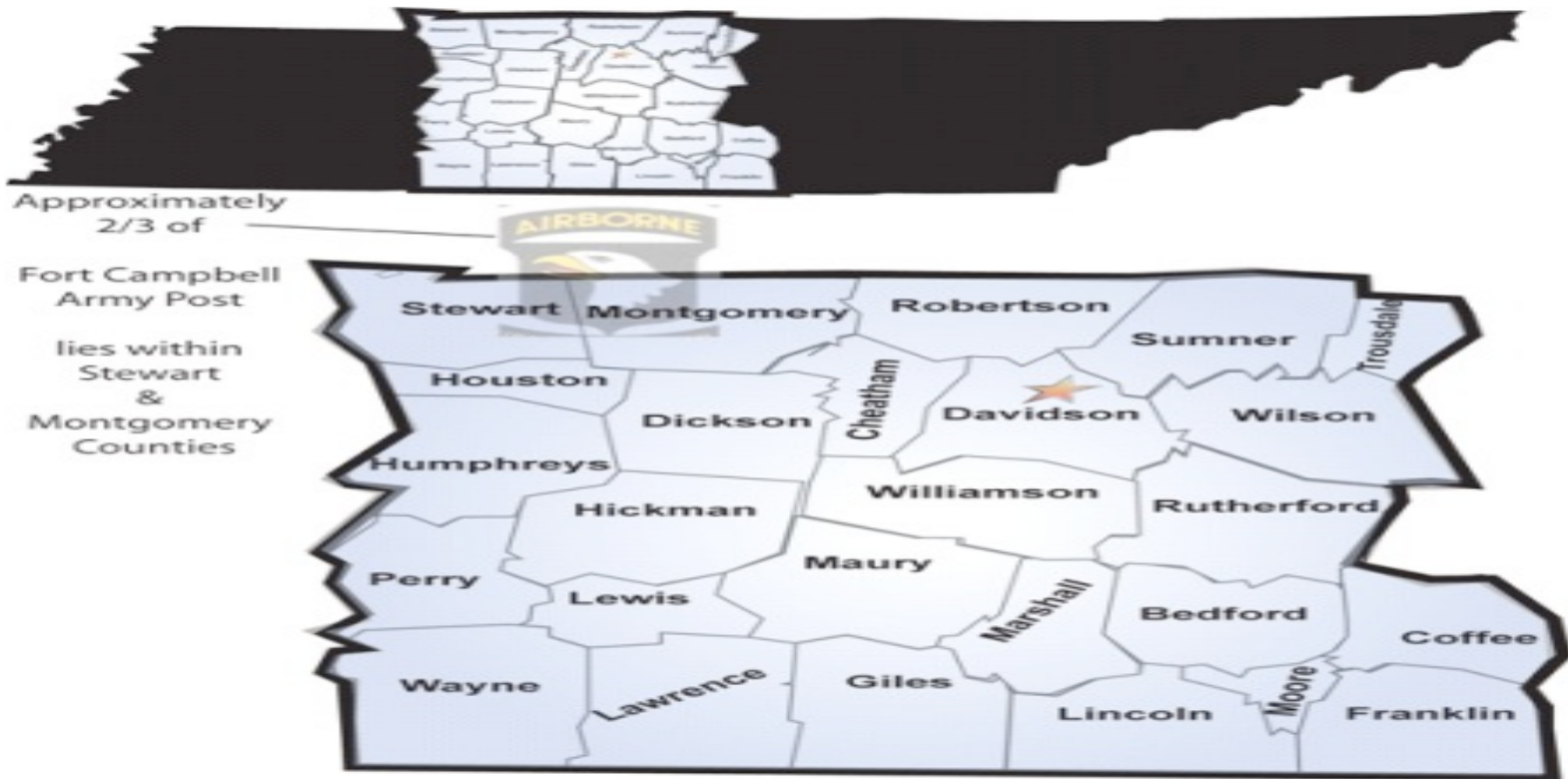
To implement, provide, enhance access to, and sustain engaging, comprehensive, age-appropriate, culturally sensitive, evidence-based teen pregnancy prevention services that will reduce teenage pregnancy, behavioral risks underlying teenage pregnancy, and other associated risk factors.

Target Population

Adolescents ages 12-19

Target Geographic Location

26 Tennessee Counties



Number to be Served

*Unduplicated Total of at least 13,300 adolescents over the course of 5-years:
(Year 1: 300; Years 2: 2,500; Year 3: 4,000; Year 4: 4,000; Year: 5: 2,500)*

FACTORS THAT SHAPED THE NEEDS ASSESSMENT

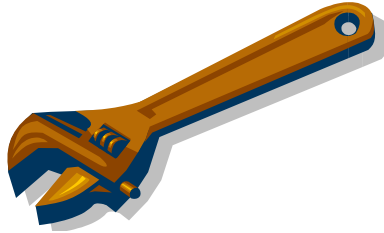
Partners:

- ☐ Pregnancy Resource Center
- ☐ Care-Net Pregnancy Services
- ☐ Hope Pregnancy Center
- ☐ Humphreys County Department of Health
- ☐ Pregnancy Support Center
- ☐ Wayne County Department of Health
- ☐ Centerstone Community Mental Health Centers
- ☐ Cumberland Crisis Pregnancy
- ☐ Planned Parenthood of Middle & East TN
- ☐ A Woman's Place Pregnancy Center
- ☐ Middle Tennessee School Systems



NUTS & BOLTS OF THE NEEDS ASSESSMENT

SECONDARY DATA SOURCES



Epidemiological
Indicator Data for
Adolescent
Pregnancy

American
Community
Survey
estimates
2005-2009

Centers for Disease
Control (CDC) Behavioral
Health Risk Factor
Surveillance System

National
Institute on
Alcohol
Abuse and
Alcoholism
Report

National Fatality Reporting
System (NFRS)

NUTS & BOLTS OF THE NEEDS ASSESSMENT

PRIMARY DATA SOURCES

- Inventory of Current Services and Resources: Primary Data Sources
- Survey Monkey Questionnaire targeting community providers, teachers and administrators
- Telephone interviews with key stakeholders
- Comprehensive web search.



SURVEY MONKEY

Services & Resources Commonly Available

- Health and Wellness Coordinators, Superintendents, Community Center Representatives, Planned Parenthood Directors, Teachers, Principals, etc.).

Attitudes related to various teen pregnancy issues

- Seventy-seven individuals were invited, 35 people responded (45.5%).



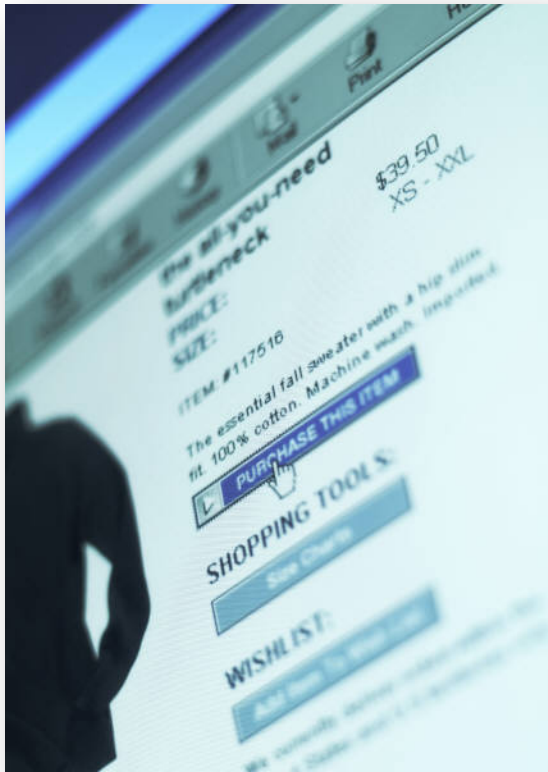
Telephone Interviews:

- Pregnancy Resource Centers, Department of Health Centers, and Birth Control Clinics, etc.
 - What adolescent pregnancy prevention services do you offer?
 - What adolescent pregnancy prevention curriculum do you implement in schools and/or in community-based youth groups
 - How do you collaborate with other counties on issues of teen pregnancy prevention?

TELEPHONE INTERVIEWS



WEB SEARCH



RESOURCES

- Websites
- Information
- Education
- Assistance
- Pregnancy Prevention
- Family Planning
- Adolescent Parenting



Behavior among High School Students Statewide, 2009				
Risk Behavior	TN	National Benchmark	Confidence Interval	N
Ever had sexual intercourse	53.4%	46%	(49.2–57.5)	2,137
Had sexual intercourse for the first time before age 13 years	7.5%	5.9%	(5.9–9.5)	2,134
Had sexual intercourse with four or more persons during their life	16.6%	13.8%	(13.9–19.7)	2,128
Had sexual intercourse with at least one person during 3 months prior to survey	38.8%	34.2%	(35.2–42.5)	2,128
Drank alcohol or used drugs before last sexual intercourse (among students who were currently sexually active)	18.2 %	21.6%	(15.5–21.3)	779
Did not use a condom during last sexual intercourse (among students who were currently sexually active)	40.5 %	38.9%	(36.1–45.1)	771
Did not use birth control pills before last sexual intercourse*	83.4%	80.2%	(80.0–86.2)	746

INDIVIDUALS ATTITUDES DIFFER FROM COMMUNITY/SCHOOL NORMS

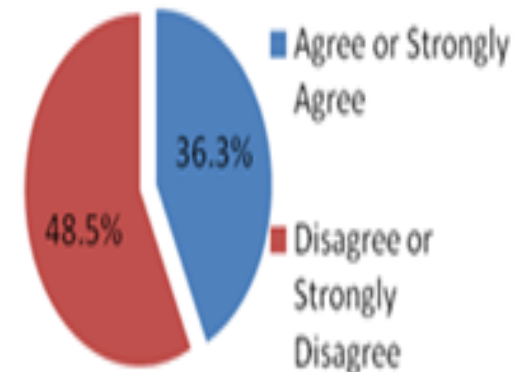
Comprehensive~??

"I personally beleive that a combined abstinence and safer-sex approach is most effective in reducing teen pregnancy rates"



Abstinence Only~??

"I believe that my community would accept/support a combined absintence and safer-sex curriculum in school and community settings."



ANTICIPATED LACK OF ACCEPTANCE OF A COMPREHENSIVE TEEN PREGNANCY PREVENTION CURRICULUM IS ACCURATE!

Schools

Superintendents, principals, teachers recognize that a comprehensive curriculum has the greatest efficacy. But warn that parents will not accept a comprehensive discussion of sexuality at school.

Parents



THE NEEDS ASSESSMENT SAVED TIME, MONEY, & RESOURCES

- Detailed knowledge about each county served and prevalence of problem
- Scope and Curriculum Change Request To OAH prior to implementation
- Lower Training Costs
- Easier access to students & teachers
- Very high rate of parents providing informed consent
- Implementation smooth & target numbers reached
- Students reporting high levels of knowledge gain and attitude change





DEVELOPING PARTNERSHIP APPROACHES TO CONDUCTING A COMMUNITY NEEDS ASSESSMENT FOR SUBSTANCE ABUSE PROGRAMS

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FUNDING FOR SUBSTANCE ABUSE PREVENTION PROGRAM

Award Information:

- Federal Grant: HHS/ SAMHSA (October 2010)
- Total Funding: \$1.5 million for Program & Evaluation Services
- Length of Project: 5 years

Required Activities:

- Within first 30 days
 - Hire Staff
(3) Evaluation Staff
- Within first 90 days
 - Complete and Submit Community Needs Assessment Report



REASONS FOR CONDUCTING NEEDS ASSESSMENT



1 Identify Program Sites

- Gather potential program sites within each county
- Assess readiness to provide services

2 Set Priorities

- Collaborate with stakeholders to determine which needs to address

3 Determine Assets/Barriers

- Document specific factors related to at-risk young adults in target communities



Context:



Target Areas:

- State Universities
- Public Housing for Low-Income Adults
- Labor and Workforce Development Agencies
- Local Recreation Facilities



Stakeholders:

- College Officials
- HIV Medical Providers
- Community Leaders
- Faith-Based Clergy Members
- Representatives from Local & State Government Departments



NUTS AND BOLTS OF THE NEEDS ASSESSMENT

Methodology:

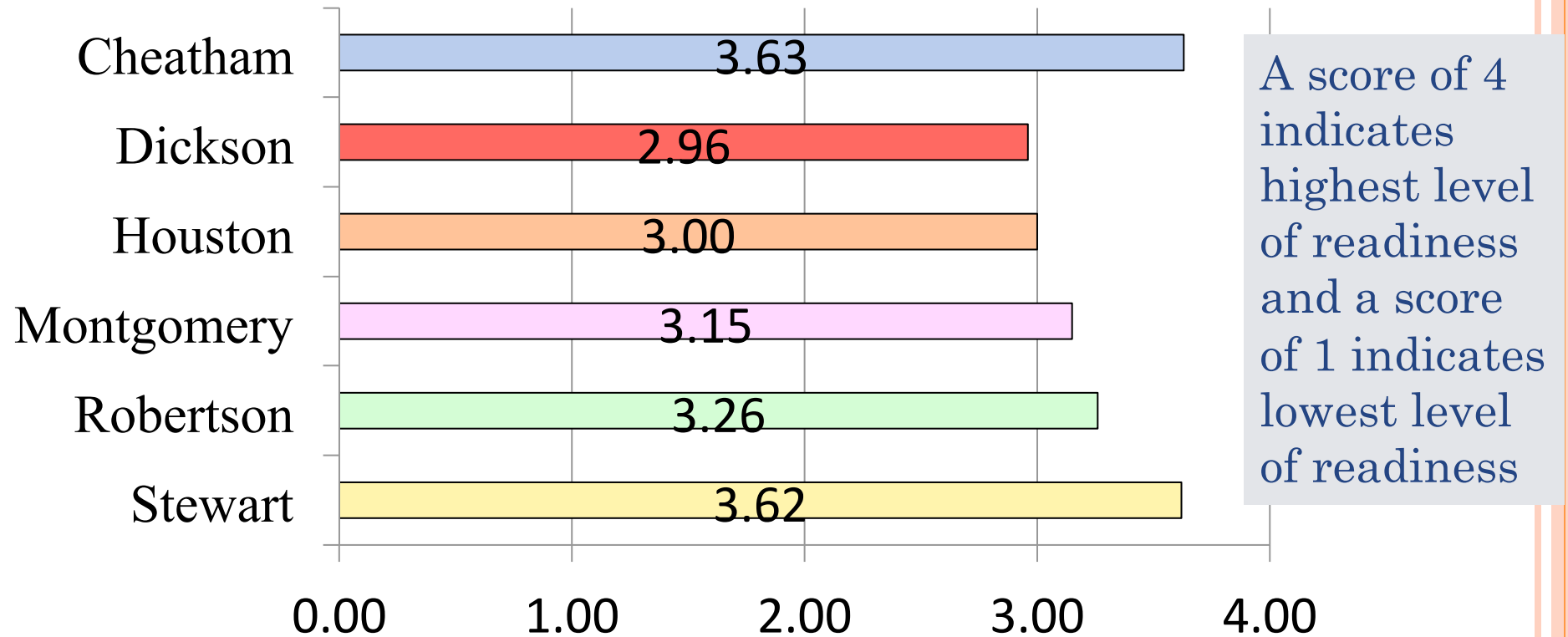
Instruments:

- Survey
- Qualitative Interviews
- Existing Data

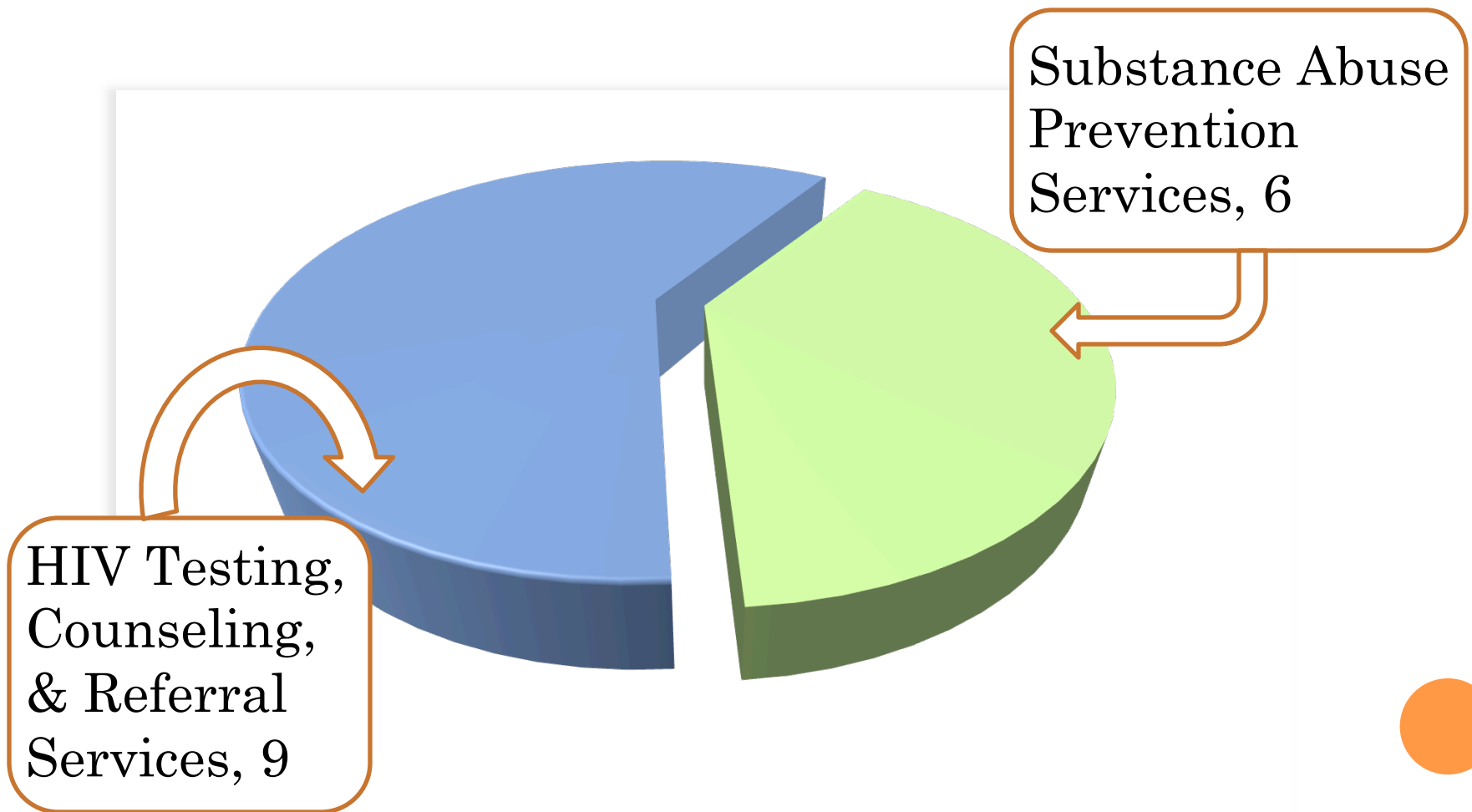
- Readiness Assessment Tool
- Key Informant Guided Interview



COMMUNITY READINESS SURVEY FINDINGS

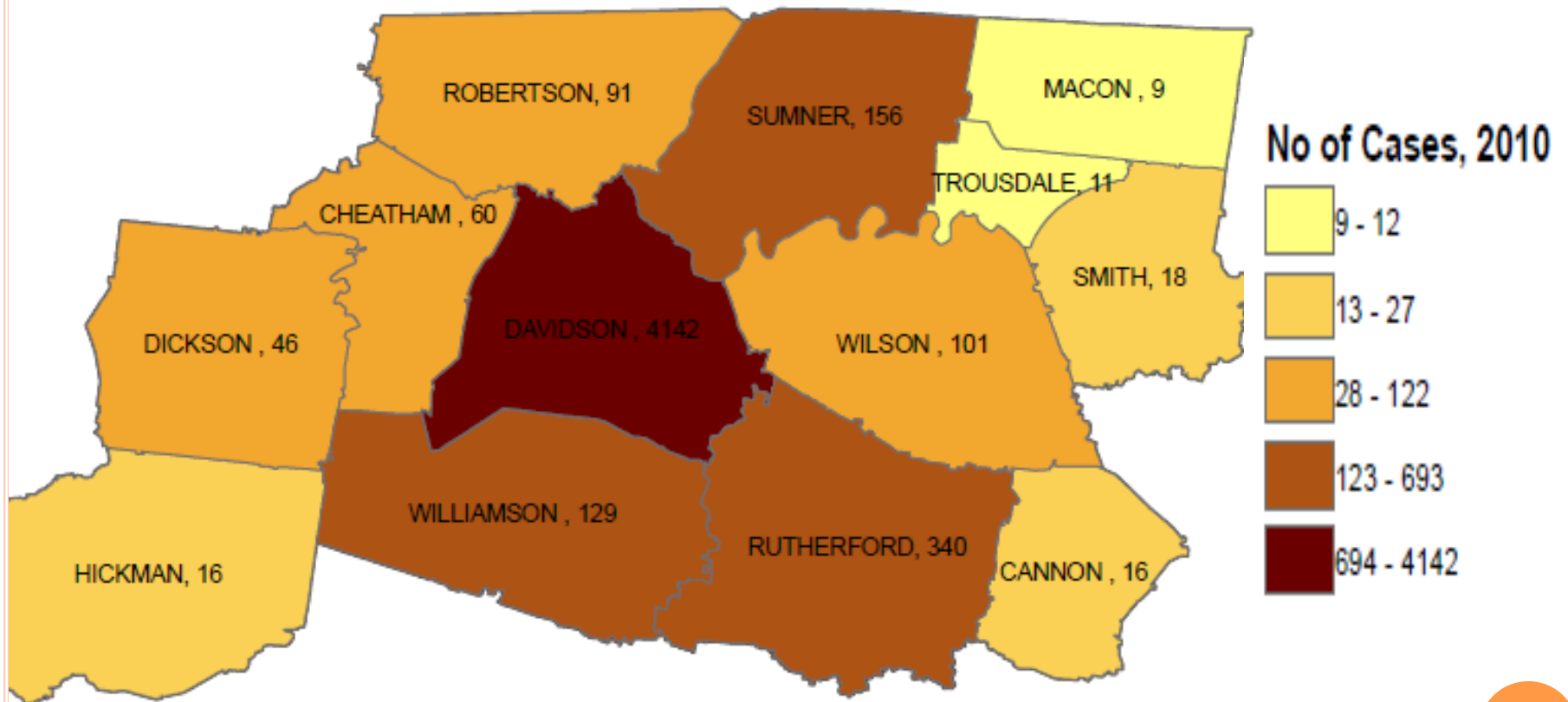


AVAILABILITY OF SERVICES IN TARGET COMMUNITIES



COUNTY PROFILE

HIV Disease Prevalence, by County 2010



Total Cases = 5135

COUNTY PROFILE

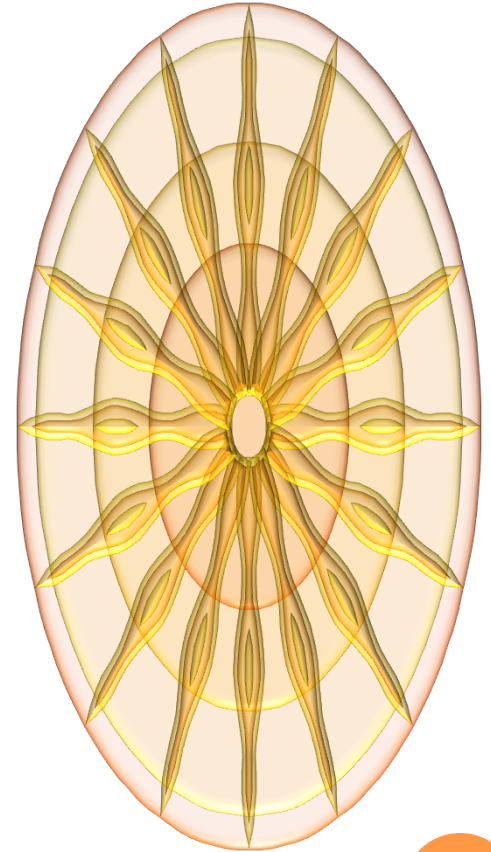
DUI Arrests in 6 County Area


Total Population (2007-2008)		
COUNTY	DUI Arrests 2007	DUI Arrests 2008
CHEATHAM	20	25
DICKSON	40	40
HOUSTON	5	10
MONTGOMERY	157	73
ROBERTSON	45	65
STEWART	9	14



IMPLICATION FOR PROGRAM IMPLEMENTATION

- Community Readiness
 - Perceived opinions and attitudes of stakeholders guided service delivery in each county and implementation site
- Group Decision Making Contributed to Specifically Tailored Services
 - Frequency of program sessions offered
 - Amount of time to devote to program sessions
 - Expectations for participants attending the program





EARLY CONNECTION NETWORK: ASSESSING NEEDS, STRENGTHS, AND POSSIBILITIES FOR AN EARLY CHILDHOOD SYSTEM OF CARE

Dr. Sarah Suiter

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SYSTEMS OF CARE NATIONALLY

- The Comprehensive Community Services for Children and their Families Initiative
 - 1993-2010
 - 173 communities
 - \$1.49 billion
- System of Care Values
 - Family-driven
 - Youth-guided
 - Cultural and linguistic competence
 - Individualized and community based
 - Evidence based



TDMHSAS OFFICE OF CHILDREN & YOUTH ON SYSTEMS OF CARE

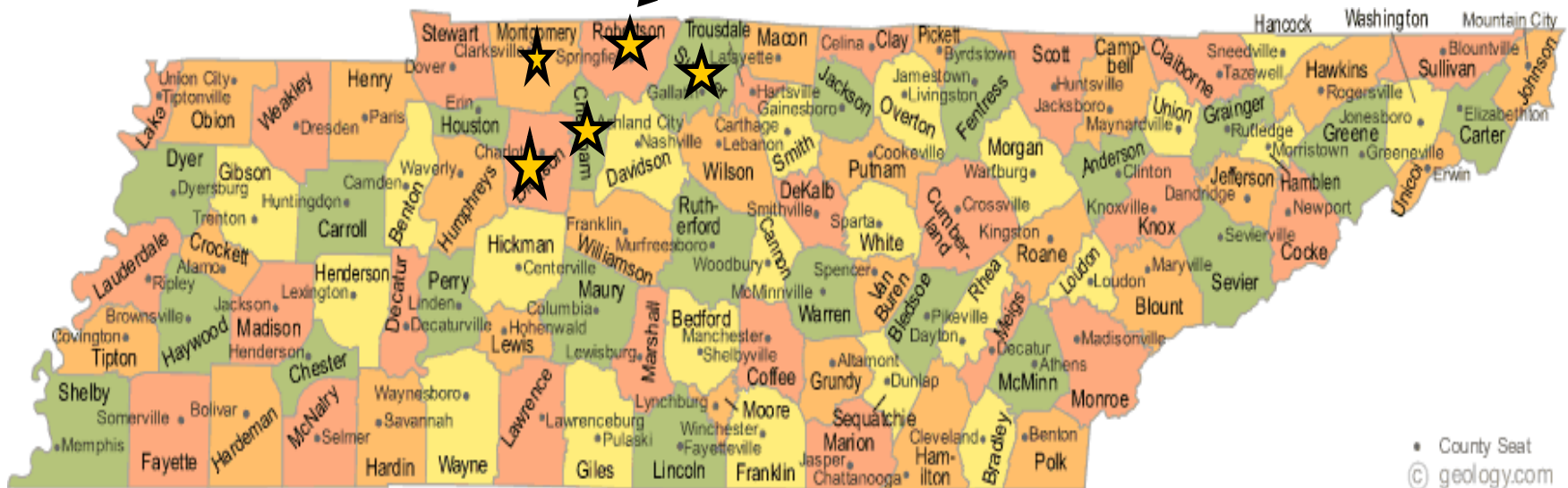
“Systems of care is not a program — it is a philosophy of how care should be delivered. Systems of Care is an approach to services that recognizes the importance of family, school and community, and seeks to promote the full potential of every child and youth by addressing their physical, emotional, intellectual, cultural and social needs.”

([http://www.tn.gov/mental/mentalhealthservices/
sp_child_sysCare.html](http://www.tn.gov/mental/mentalhealthservices/sp_child_sysCare.html))



TENNESSEE SYSTEMS OF CARE

Early Connections
Network



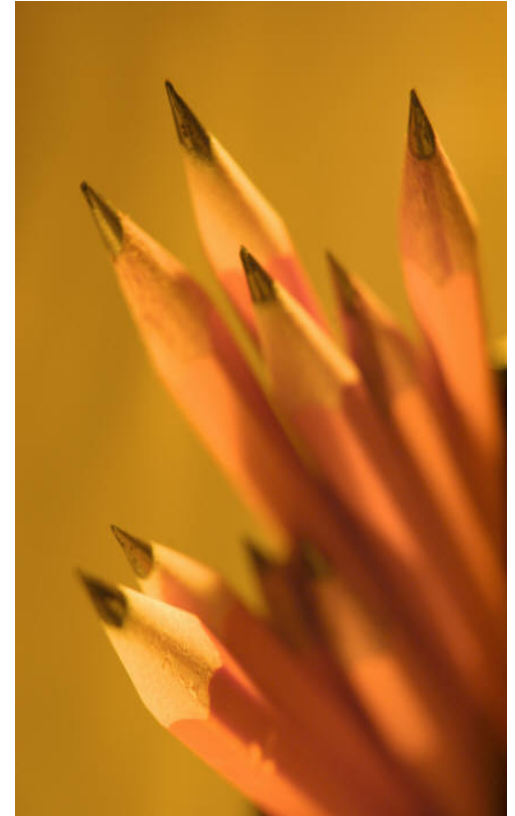
FACTORS INFLUENCING NEEDS ASSESSMENT PLANNING AND DESIGN

- Contextual factors:
 - Geographic area
 - County identities
 - Openness and willingness to share & participate
- Project-based factors:
 - 1 year for planning and implementation
 - 2 full-time staff designated for project
 - Required participatory approach
 - Need for relationships as well as information



DATA COLLECTION METHODS

- Existing Reports & Studies
- Resource Mapping
- Focus Groups
- Concept Mapping



EXISTING DATA SOURCES

County Health Rankings:

<http://www.countyhealthrankings.org>

National Center for Children in Poverty

<http://www.nccp.org>

Kids Count

<http://www.kidscount.org>

U.S. Census

<http://www.census.gov>

TN Department of Health, Division of Health Statistics

<http://health.state.tn.us/data.htm>

Child Trends Databank

<http://www.childtrendsdatabank.org/>



FACTS ABOUT THE 5 COUNTIES...

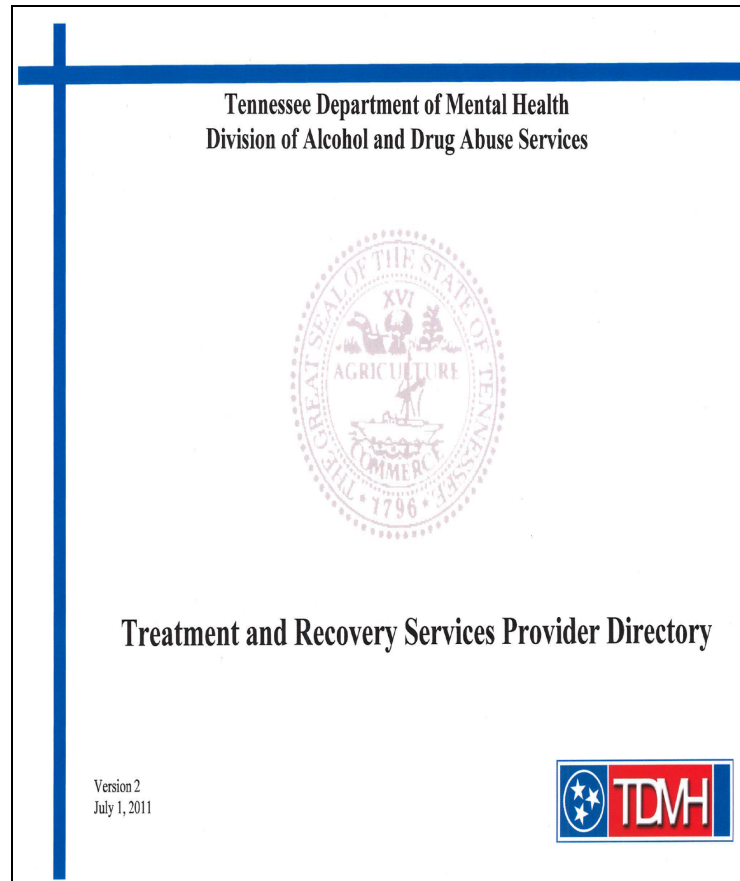
- Percentage of youth committed to State custody in Dickson County is almost twice that of the State-wide average percentage
- Percentage of substantiated cases of child abuse and neglect in Montgomery County is almost twice that of the State-wide average percentage
- 1 out of every 5 adults in Robertson & Sumner Counties report that they receive inadequate social and emotional support
- Unemployment in the 5 county area ranges from 8.5%-11.5%



RESOURCE MAPPING PROCESS

Data Sources

- Existing Resource Directories
- RA's knowledge of the counties
- On-line searches
- Phone book
- Word of mouth



RESOURCE MAPPING PROCESS

○ Categories

- Child Services
- Clothing
- Child Care
- Educational
- Employment
- Financial
- Food
- Housing/Shelter
- Legal
- Medical
- Mental Health
- Parenting
- Substance Abuse



County resources - Microsoft Excel

Table Tools

Home Insert Page Layout Formulas Data Review View Design

Cut Copy Paste Format Painter Clipboard

Times New Rom 12 A A Font

B I U Merge & Center Alignment

General Number Styles Cells Editing

Conditional Formatting as Table Styles

Insert Delete Format

Σ AutoSum Fill Clear Sort & Find & Filter Select

134 fx

	A	B	C	D	E	F	G	H	I	J	K	L
	Name	Address	City	State	Zip	phone numbe	fax numbe	Contact perso	e-mail	Information	County	Column
1	Adult Education Services	430 Greenwood Ave	Clarksville	TN	37040	(931) 542-5040				Adult high school, adult basic education, GED, preparation literacy, English as a second language, sign-language, vocational classes,	Montgomery	
2	CLARKSVILLE AREA CHRISTIAN HOME SCHOOL SUPPORT GROUP		Clarksville	TN	37040	931-647-7889		Lisa Wise		This is a support group for families who either are interested in or actively pursuing educating their children at home. For information about support group meetings or other activities - or for information about the Tennessee law pertaining to home schooling, enrolling with Hours - Sunday School Class and church services. Services Provided - Special Sunday School Class for the deaf. Sign language interpreter for church services. Open to the whole deaf community (not just	Montgomery	
3	DEAF MINISTRY	Hilldale Baptist Church	Clarksville	TN	37040	931-648-8031		Director - Rose Watrous		Fees (if any) • None. Services Provided • The 4-H program provides educational experiences that will stimulate young people to gain knowledge, develop skills and form positive attitudes to prepare them to become capable, responsible and compassionate adults. 4-H members learn by doing when they participate in any of the offered educational activities. The emphasis of 4-H is public speaking, workforce development, leadership, citizenship, service learning, and life skills. Youth may participate in 4-H through school clubs, after-school clubs, community clubs, school enrichment programs, special	Montgomery	
4	FOUR-H YOUTH PROGRAMS	1030A Cumberland Heights Rd	Clarksville	TN	37043	931-648-5725		Martin Koon		Fees (if any) • free to enrolled. Services Provided • Comprehensive child development program funded to serve 216 children from low-income families. Children must be 3 or 4 years old on or before Sept. 30; 10% enrollment opportunities for children with disabilities. Preschool curriculum designed to enhance social, mental, and Programs that provide supplemental instruction for students who are having difficulty with their coursework or who want to get more out of their regular educational program. General Information. Program Provides an opportunity for any child, parent or concerned neighbor to call about any criminal activity or other concerns that may affect the quality of education. It is available 24 hours a day to anyone wishing to report gang, or drug activity, weapons, physical abuse.	Montgomery	
5	HEAD START (COMMUNITY ACTION AGENCY)	350 Pageant Ln., Suite 307	Clarksville	TN	37040	931-648-5774		Director - Felicia Bagwell			Montgomery	
6	Clarksville Office - Tutoring	220 Forbes Ave, Ste A	Clarksville	TN	37040	(931) 647-5811					Montgomery	
7	Clarksville-Montgomery County Crisis Intervention Center - School Safety Hotline	PO BOX 212	Clarksville	TN	37040	(931) 648-1000					Montgomery	
8	Apsu Child Learning Center	637 8th Street	Clarksville	TN	37040	(931)645-6296					Montgomery	
9	Summit Heights Learning Center	20J Summit Heights	Clarksville	TN	37040	(931)645-2845					Montgomery	
10	Dickson County Board of Education - Adult Education	817 North Charlotte Street	Dickson	TN	37055	(615)446-2114					Dickson	
11												

Ready

start Microsoft Power... Inbox - Micro... How to Take a ... Microsoft Excel ... untitled - Paint Search Desktop 74% 3:09 PM

RESOURCE MAPPING

	Cheatham	Dickson	Montgomery	Robertson	Sumner
Child Services	2	2	4	2	7
Clothing	0	6	7	1	7
Child Care	28	31	41	47	26
Educational	2	7	10	0	17
Employment	0	4	6	1	5
Financial	3	2	2	0	7
Food	5	5	7	1	8
Housing/Shelter	0	2	12	1	7
Legal	0	3	3	0	10
Medical	9	18	33	31	26
Mental Health	5	9	26	5	36
Parenting	0	4	10	0	9
Substance Abuse	1	2	8	0	1

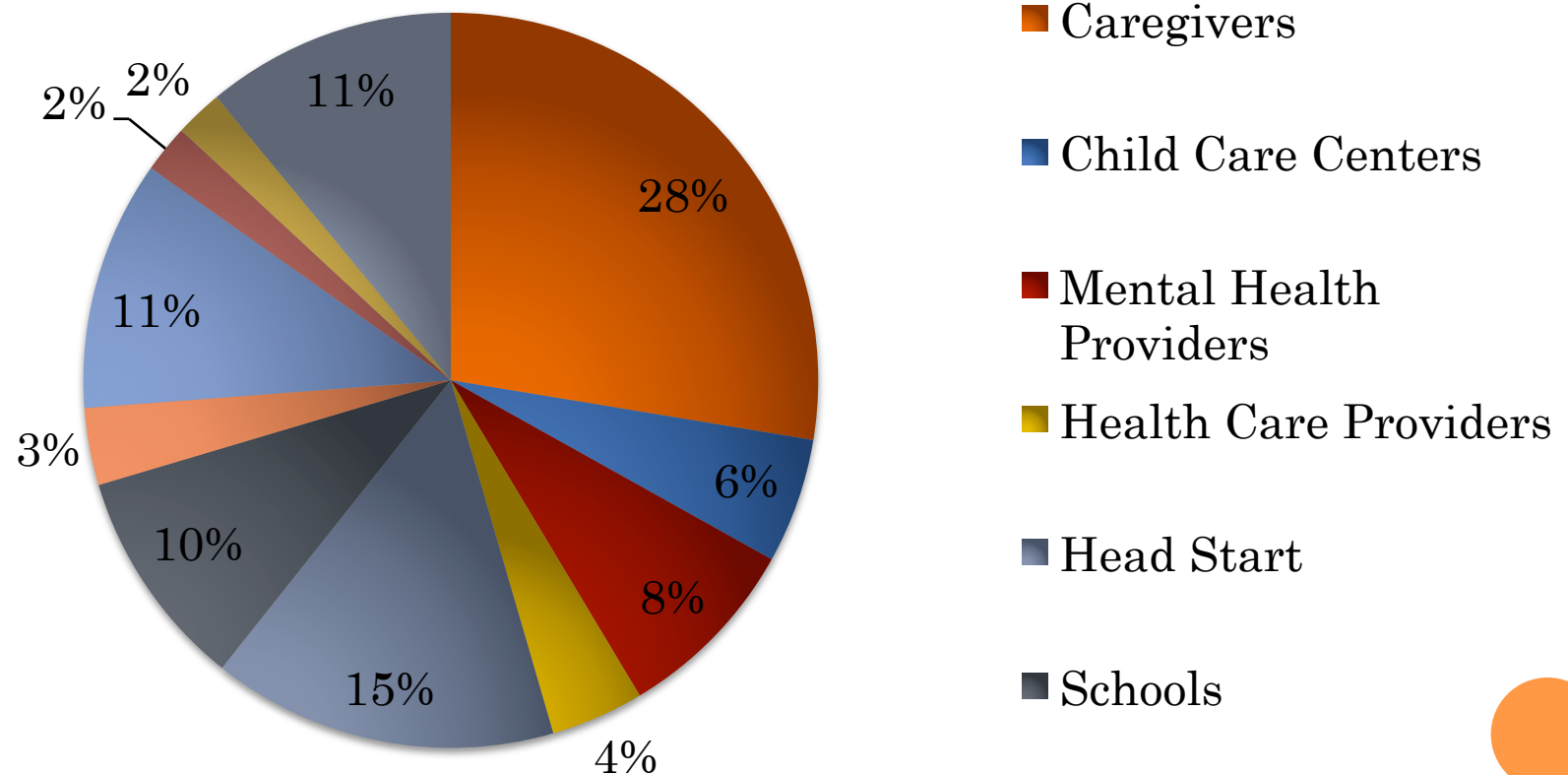


FOCUS GROUP PROCESS

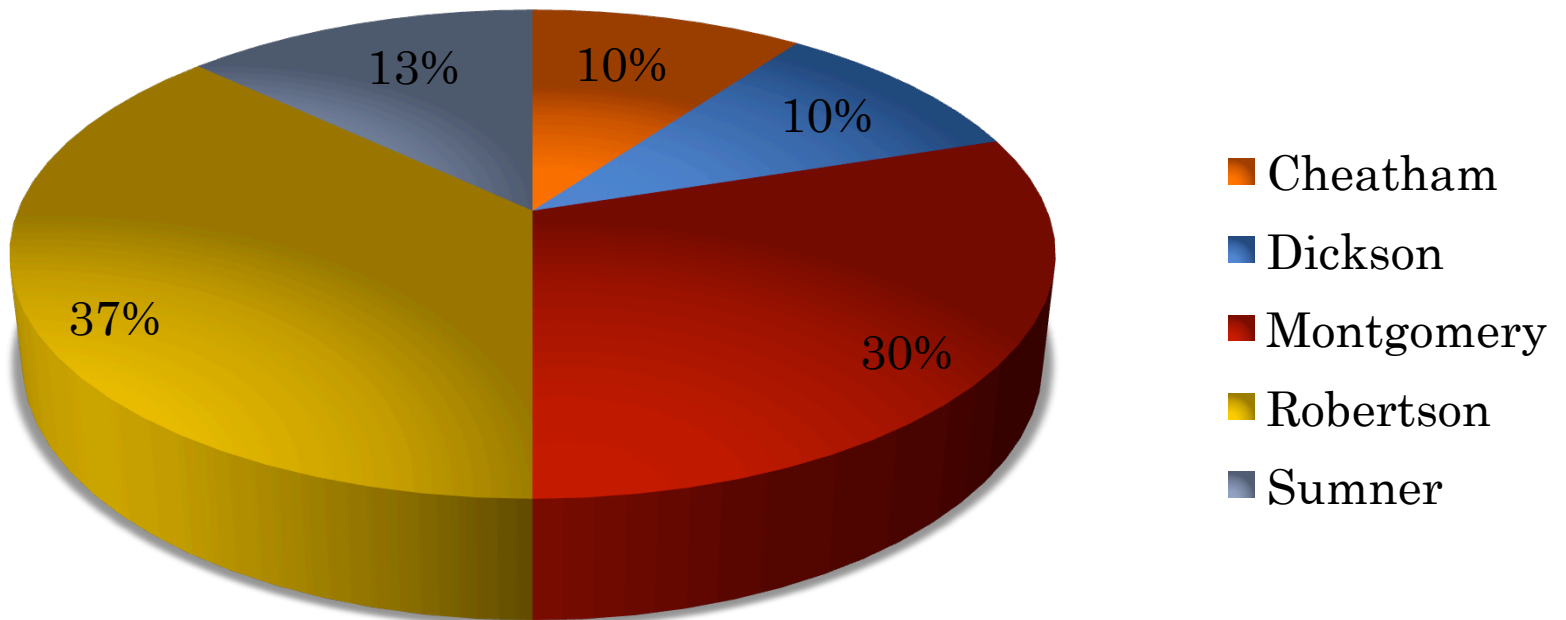
- Worked with Staff & Parent stakeholders
 - Reviewed & edited questions
 - Reviewed & edited posters & consent forms
 - Developed sampling strategy
- Sampling strategy
 - DCS Community Advisory Boards
 - County Health Councils
 - Early Childhood Education & Child Care
 - Parents & Caregivers
- Community leaders assisted with focus group invitations & logistics
- Total of 21 focus groups, 130 participants



FOCUS GROUP PARTICIPANTS BY TYPE



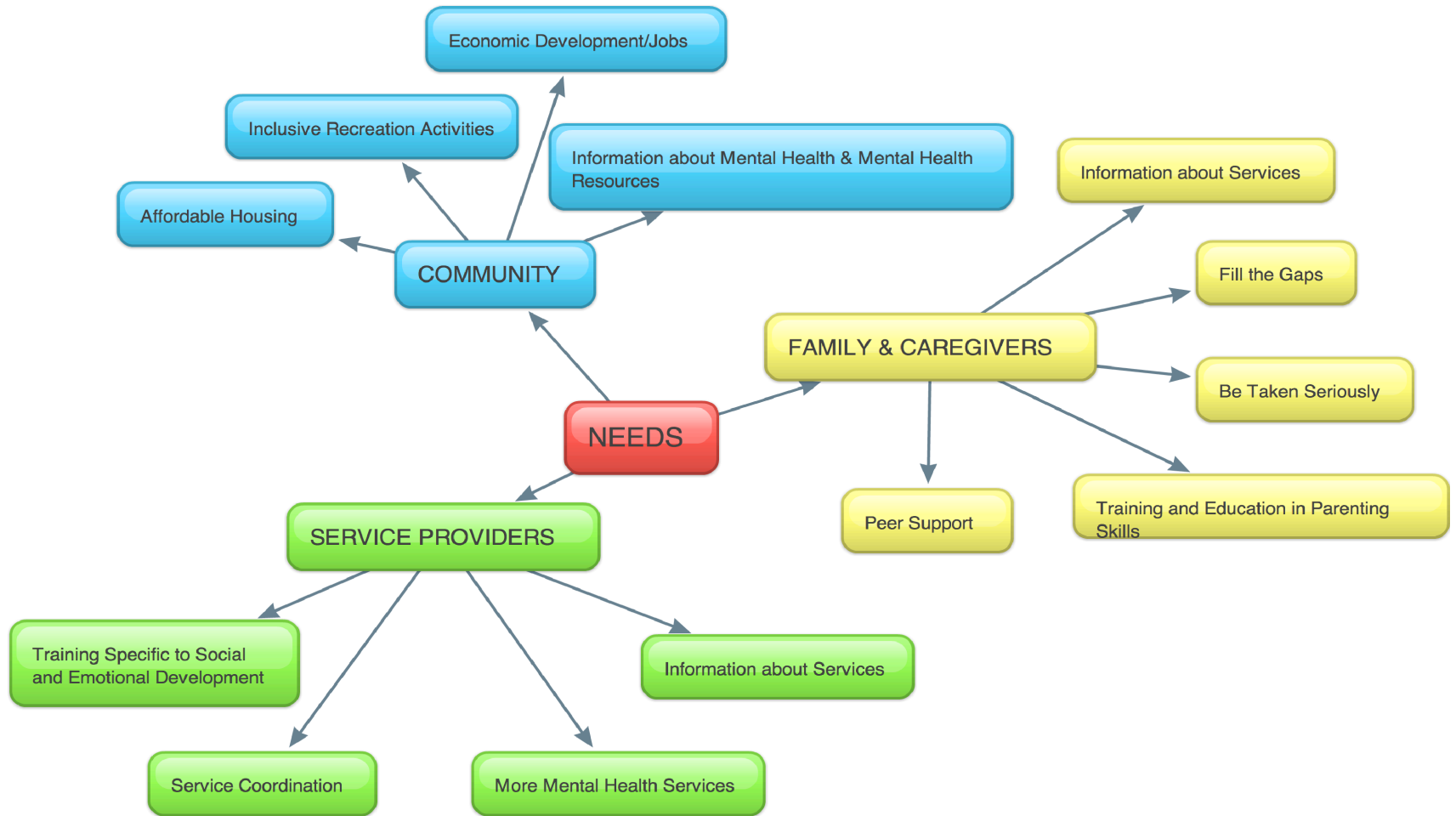
FOCUS GROUP PARTICIPANTS BY COUNTY



WHEN IT COMES TO SUPPORTING HEALTHY EARLY CHILDHOOD DEVELOPMENT IN YOUR COUNTY...

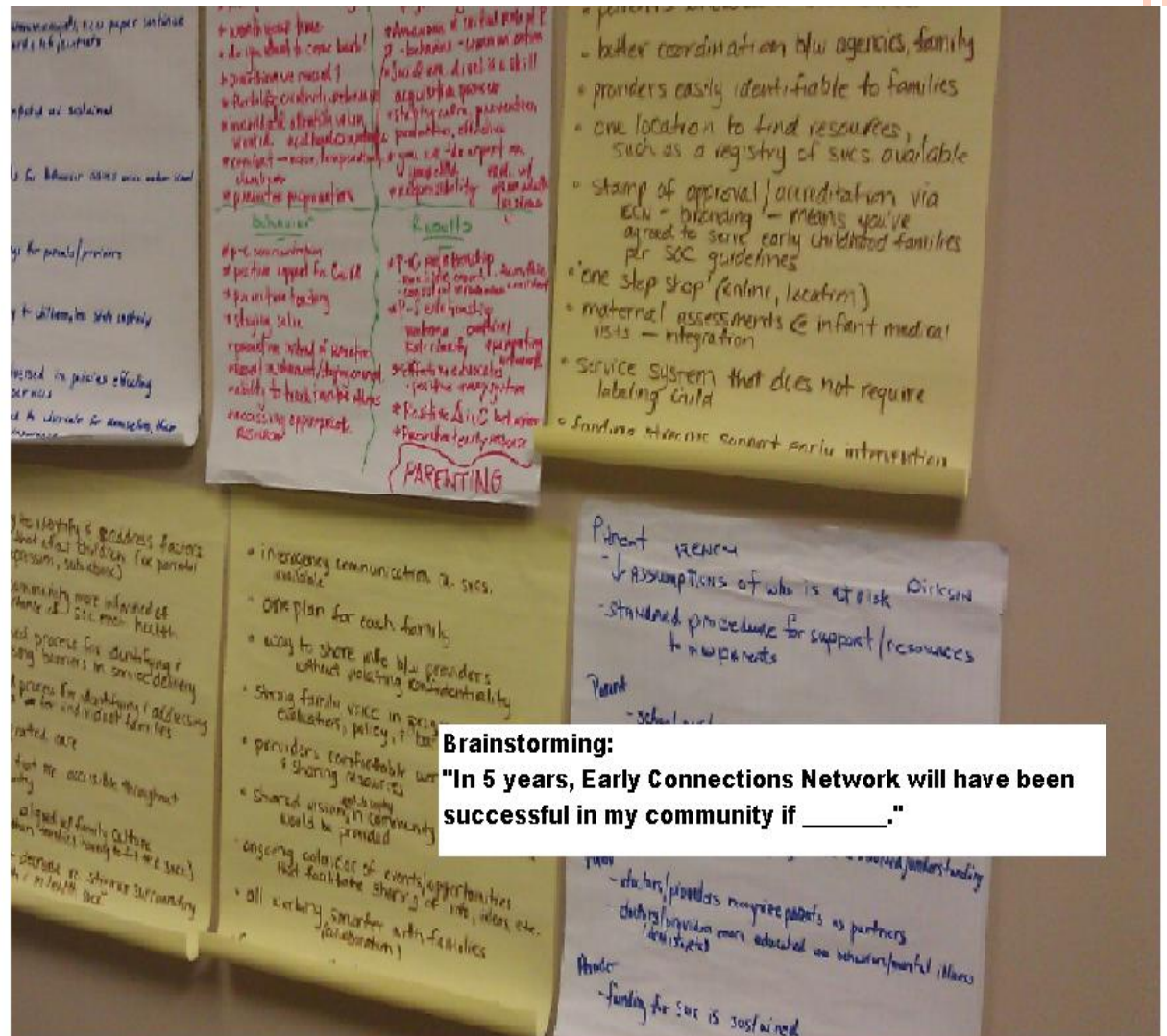
- What are some of the biggest strengths?
 - Of young children?
 - Of their families?
 - Of your community as a whole?
- What are some of the biggest needs?
 - Of young children?
 - Of their families?
 - Of your community as a whole?
- Do service organizations in your county work together?
 - If so, in what ways? By sharing information? Resources? Referrals?
 - If not, why not?
- How do resources flow in your community? How about knowledge?
- If there was one thing that you could change that you think would improve the well-being of children in your county, what would it be?



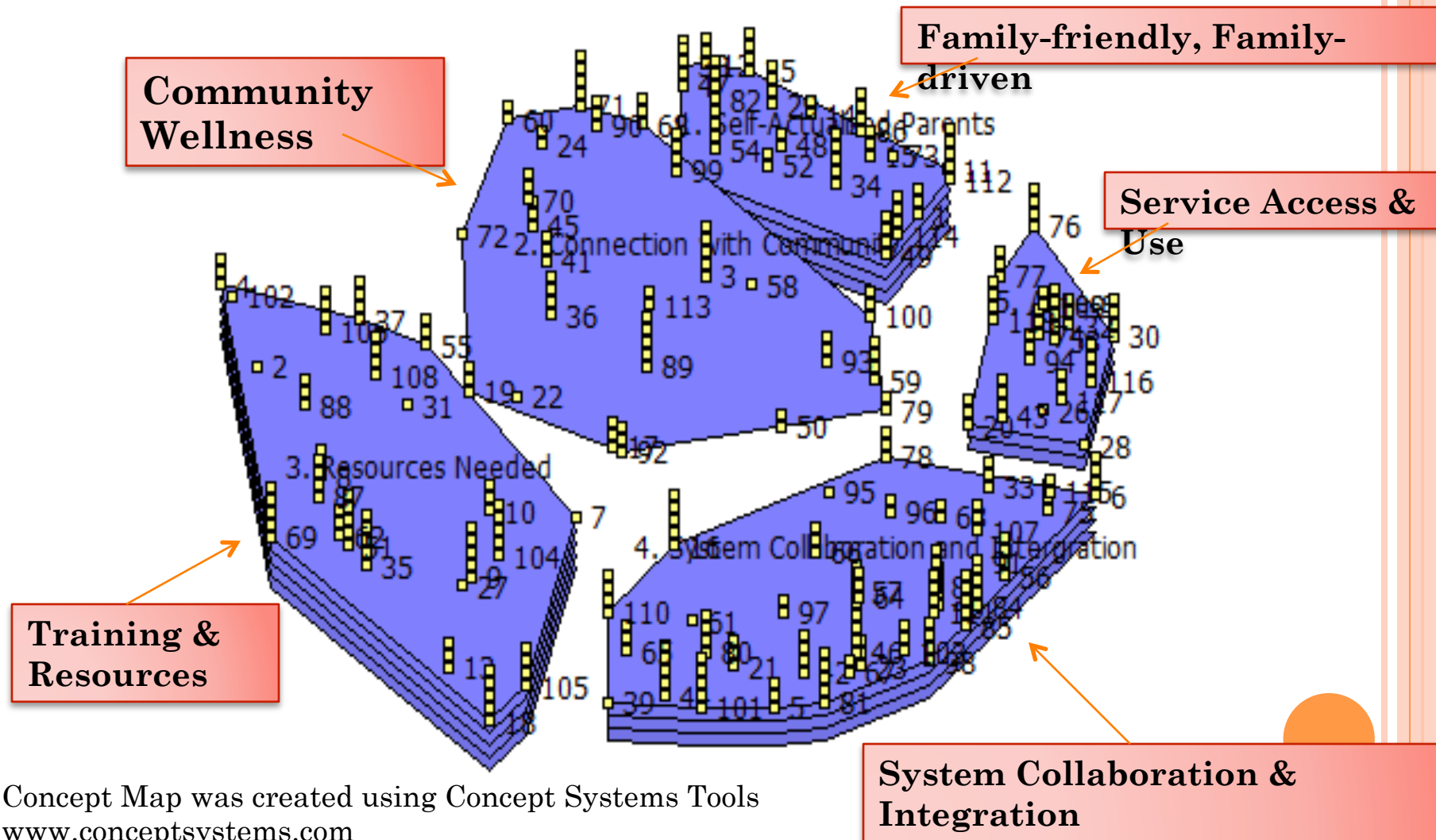


CONCEPT MAPPING

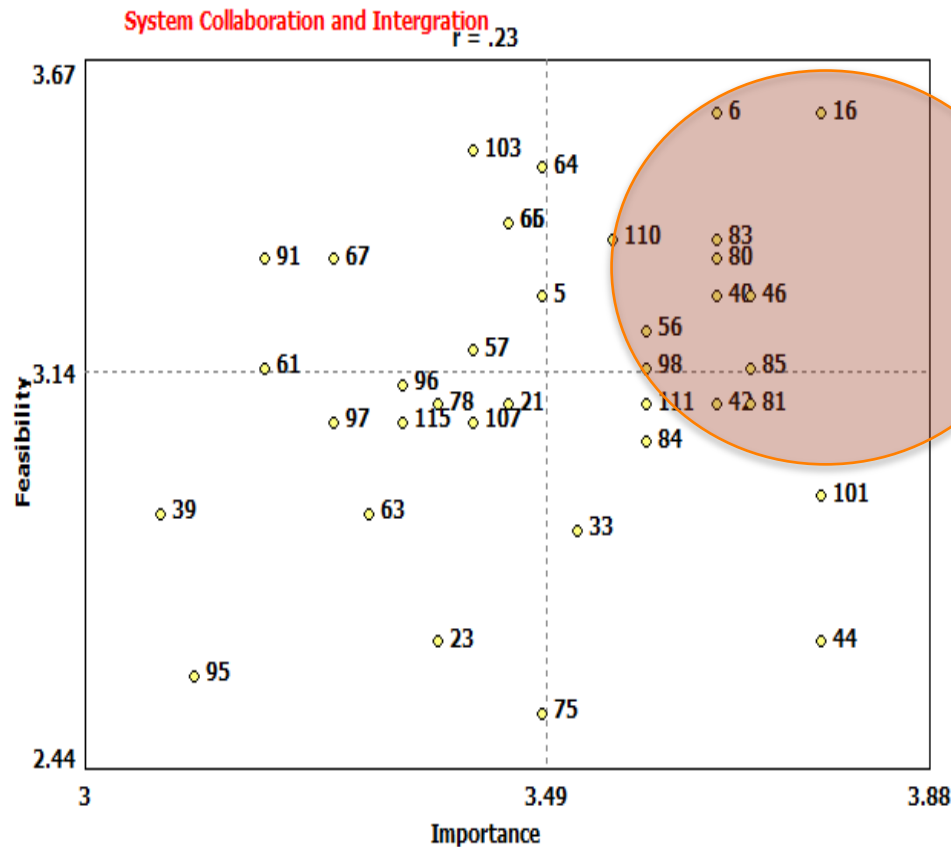
- Brainstorming
- Sorting
- Rating
 - Feasibility
 - Importance



ECN CONCEPT MAP



SYSTEM COLLABORATION & INTEGRATION



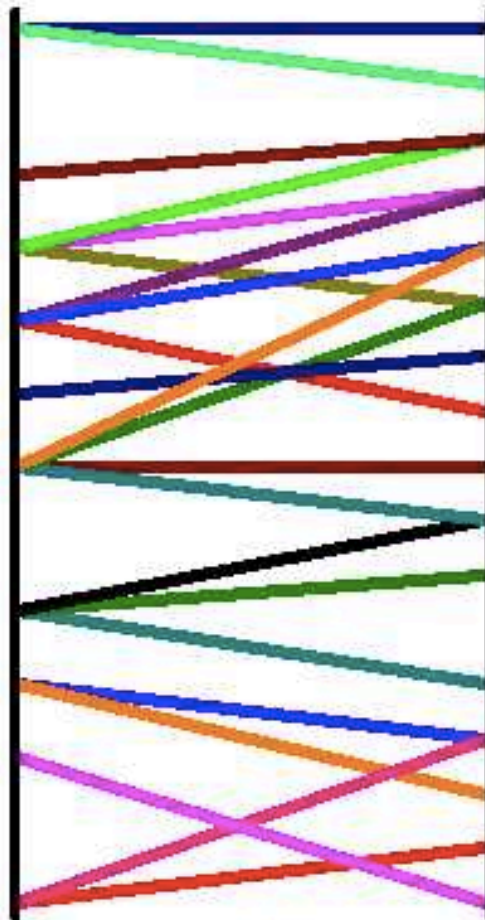
“Go Zones” was created using Concept Systems Tools
www.conceptsystems.com

SYSTEM COLLABORATION & INTEGRATION

- 16: Service providers know what resources are currently available
- 6: Correct and current information about each service agency is available
- 83: There is a flow chart for each county that shows what to do and where to go when a child is having problems
- 80: Tracking and follow-up of children and families receiving services is improved
- 64: ECN has a presence in the health department



4
 Funding for System of Care is sustained
 based on behaviors/mental illness
 needs and make appropriate referrals.
 (rather than expulsion or disenrollment)
 going on effective behavior strategies
 going on-going training to their staff.
 Training opportunities are well-marketed
 for behavior/mental illness needs
 support for early childhood workers
 in daycare/early childhood settings
 All pediatricians implement EPSDT
 going for parents and child care staff
 on care and individualized services
 schools are more ready for them.
 are resources for Hispanic families
 system is seeing fewer behavior issues
 intervention without labeling the child
 importance of early brain development.
 about other services in their county.
 People use Title I resources
 the literacy level of Hispanic families
 about other issues - such as literacy).
 about who is at risk and who isn't
 2.67



3.89
 Funding for System of Care is sust
 Doctors/providers are more educa
 Supervisors within service providi
 Pediatricians are trained to identifi
 Childcare centers are engaged in in
 School administration, teachers, a
 There is more professional develop
 Kids are more ready to enter scho
 Caregivers can access high-quality
 There is a funding structure that
 Fewer children are expelled from d
 Training opportunities are well-ma
 All pediatricians implement EPSDT
 Everyone (parents and profession
 There is school readiness training
 There are resources for Hispanic fa
 There are funding streams that su
 The school system is seeing fewer
 Service providers are mandated to
 There are fewer assumptions abou
 People use Title I resources
 People are more familiar with diffe
 There is a program to raise literac
 3.05



IMPLICATIONS FOR PROGRAM PLANNING

- Created shared understanding
 - Language & terms
 - Key issues and strengths
- Challenged previous assumptions
 - County culture
 - Parent/professional divide
- Built relationships
 - Identified “movers and shakers” in the communities
 - Developed trust among staff, families & service providers



The left side of the slide features a series of vertical stripes in shades of brown, tan, and grey. Overlaid on these stripes are several orange circles of varying sizes, arranged in a cluster that tapers towards the bottom.

CONCLUSION

FACTORS THAT DICTATE NEEDS ASSESSMENT DESIGN

○ Time & Resources

- what is the most important knowledge to garner?
- what is the best way to access that knowledge?
- what knowledge can help me expand my resources?

○ Requirements of the Project

- “We now use the country itself, as its own map, and I assure you it does nearly as well.” (Carroll, 1893)

○ Stakeholders and Context

- Users and implementers
- Resources/limitations and hospitality



NEEDS ASSESSMENTS...

- Should be done whenever possible
- Test assumptions of program planners and evaluators
- Guide the investment of resources
- Can be accomplished through a variety of methods:
 - Existing data
 - Surveys
 - Focus groups
 - Key informant interviews





Q

&

A

