Just ASK Needs Assessment Plan

Introduction

In 2006, the Kansas Association of Centers for Independent Living (KACIL), the Kansas Coalition Against Sexual and Domestic Violence (KCSDV) and the Kansas Department of Health and Environment (KDHE) were funded, by a cooperative agreement to KCSDV from the Office on Violence Against Women in the Department of Justice, to form a collaborative to address sexual assault and domestic violence against women with disabilities. All the partners are advocacy organizations in their field, and each bring unique contributions to the collaborative based on their organization's focus. KACIL is a state-wide member organization for centers for independent living (CILs); KCSDV is a state-wide member organization for community sexual assault/domestic violence (SA/DV) programs; and KDHE is a state agency which promotes the health of people with disabilities.

The collaboration – formally called Just ASK (Autonomy and Safety of Kansas) – has a mission of increasing access points for survivors with disabilities, by connecting centers for independent living and sexual assault and/or domestic violence program. Once connected, Just ASK will support targeted local collaboratives as relationships are formed by promoting increased safety and autonomy of survivors through changes in system structures, policies, procedures, and environments. To realize this mission, Just ASK is conducting a needs assessment with target sites with whom the project will be implemented. The needs assessment will then inform the development of a strategic plan which will guide our work over the next two years.

This document describes the approach, methods and activities of the needs assessment to be conducted with the target sites. The needs assessment will allow us to accurately assess the current state of services and systems for service delivery for survivors of domestic or sexual violence with disabilities in the target sites. It will also inform the strategic plan for systems change, collaboration building, improving services for survivors with disabilities and improving the capacity of organizations providing services.

Target Site Selection

Salina and Wichita were chosen as target sites using a competitive Request for Application (RFA) process. The application required a joint application by the SA/DV program and the CIL and included a narrative demonstrating their willingness to participate in all phases of the grant process. The review committee used specific criteria to choose two target sites that embrace collaboration building as an avenue to systems change and the implementation and use of a needs assessment in this context. The criteria included:

- Experience with collaboration and joint interest in this project. Included a Memorandum of Understanding among the organizations or letters of commitment from the organizations involved.
- Demonstrated willingness to commit individuals with leadership roles from each organization to be engaged in the process.
- Demonstrated willingness to learn and change through intensive technical assistance such as the creation of a formal charter for the local collaboration.
- Demonstrated willingness to participate in a needs assessment process and the formulation of a strategic plan.
- Demonstrated willingness to engage in a systematic, detailed review and possible change of organization policies and protocols to result in sustainable change.

Both Salina and Wichita expressed strong commitment to long term partnerships. Their applications were chosen because they demonstrated not only high capacity but also the creativity, excitement and energy necessary for this work. Each of the target sites have unique characteristics as well. Salina is a semi-urban community with extensive rural outreach including satellite offices in Concordia. The Salina CIL is affiliated with the community organization for people with developmental disabilities. Wichita has a completely urban service area. The sexual assault program and domestic violence program in Wichita are separate, stand-alone agencies with a solid history of cooperation between them. The needs assessment will provide the information to develop a community-specific plans to address barriers to access.

Goals for the Needs Assessment

The following goals have been identified for the needs assessment:

Identify gaps and barriers to services experienced by survivors with disabilities when they seek advocacy services from local SA/DV or disability advocates.

Identify the current strengths and assets of local SA/DV programs and local CILs currently providing advocacy services to survivors with disabilities.

Identify barriers within SA/DV programs and CILs that discourage survivors with disabilities from disclosing violence or discussing a disability.

Identify the elements that contribute to effective co-advocacy between local SA/DV programs and local CILs.

Identify support or assistance that is needed by each target site to continue their collaborations and sustain change beyond this project.

We will use the information gathered through the needs assessment process to determine the activities on which we will focus in our strategic plan. We anticipate that the information gathered from the target sites will have some similarities as well as community-specific differences. Our strategic plan will be drafted in a way that recognizes commonalities but also accounts for unique differences among communities.

Existing Data

Examining existing data can inform the needs assessment by helping to narrow the focus of what is to be addressed in various needs assessment tools, determine the scope of the various populations, and inform the recruitment strategies. Existing data sources have been identified. They include, but are not limited to, sources listed below.

1. The Just ASK collaboration Feedback Project. The collaboration requested information from six sites on their experience when they

participated in the previous violence and disability grant. This information will be used to inform the questions to be used for the interviews, focus groups, surveys and the needs assessment report in the development of themes.

2. The U.S. Census Bureau 2000 updated census that provides 2006 information on total Kansas population, the number and percentage of people with disabilities within specific age ranges. These data help to inform us on the numbers and distribution of people with disability in Kansas.

3. The 2006 Kansas Behavioral Risk Factor Surveillance System [BRFSS] provides data on the number of people in Kansas with a disability, plus information on gender, household income and population density. These data will be used to inform site-specific questions to be used in surveys, interviews and focus groups, as well as information about the similarities among sites.

4. Data reported by member programs of the Kansas Coalition Against Sexual and Domestic Violence (KCSDV) that gives us numbers on reported incidents of sexual assault and domestic violence in Kansas. These data will inform us on the numbers and distribution of survivors with disabilities. The data also will provide information on the scope of other populations, inform the recruitment strategies, and help identify similarities in sites.

5. The 2005 report from the Kansas Governors Office of Federal Grants on individual survivors of sexual or domestic violence who self-identified as having a physical or mental disability. These data will inform us on the numbers, age and gender of survivors with disabilities, provide information on the scope of other populations, inform the recruitment strategies, and help identify similarities in sites.

Methodology

The methodology to be used in implementing the needs assessment will have some similarities across the target sites. The organizations and individuals within organizations will be the same, that is, SA/DV programs and CILs and their board members and staff will be included; the kind of tools used, but not the content, will be the same, e.g., focus groups will be

used at all three sites; and the format of conducting interviews and focus groups will be the same across both sites.

A. Organizations

The RFA process which was used to identify the target sites required the application to be signed by all organizations who have agreed to be part of the collaboration. In Wichita we will be working with Harbor House, a domestic violence program, the Independent Living Resource Center (ILRC), the independent living center, and the Wichita Area Sexual Assault Center (WASAC), the sexual assault center. In Salina we will be working with the Domestic Violence Association of Central Kansas (DVACK), a domestic violence and sexual assault crisis center, and Independent Connection, the independent living center. These are the primary organizations with whom we will work to implement the needs assessment.

B. Populations and Tools.

The needs assessment will focus on services to survivors with disabilities, and, therefore, will focus on SA/DV and CIL services. Target sites have committed to the needs assessment and understand what groups of individuals will participate. Four groups of individuals from SA/DV and CIL organizations can provide information that is useful to the needs assessment.

1. Boards of Directors. Boards of Directors are key to providing the policy support and commitment of resources that are necessary for sustaining change. A paper or electronic survey will be sent to all members of boards of directors of the SA/DV program and the CIL. The survey focus will be to assess current service capacity, barriers and supports to systems change, gaps in services and access points.

2. Executive Directors. The Executive Director's leadership is crucial to creating and sustaining systems change within an organization. Personal interviews will be conducted with the executive director of each organization. The interview focus will be to assess current service capacity, barriers and supports to systems change, gaps in services and access points.

3. CIL Staff and SA/DV Advocates. Direct service staff and advocates are the critical source to understand gaps between policy and practice. Direct service staff and advocates will be invited to participate in focus groups to assess points of access, comfort levels and gaps in service. Separate focus groups will be held for CIL staff and SA/DV Advocates.

4. People with Disabilities. People with disabilities are the most important source of information in evaluating current advocacy and in conceiving of services that fully address safety and accessibility. Focus groups will be held for people with disabilities, with a brief check-in for each individual at the beginning of the group session.

To the extent that the focus group maximum of 8 persons limits the diversity of survivors, the number of staff and advocates who are willing to participate, or the inclusion of other community agencies, additional focus groups will be organized and facilitated.

The minimum projected number of participants for each population are:

Population	Minimum Participants at each Target Site	
	Wichita	Salina
Boards of Directors	3 survey groups WASAC: 10 Harbor House: 10 ILRC: 15	2 survey groups DVACK: 8 Independent Connection: 12
Executive Directors	3 interviews WASAC Harbor House ILRC	2 interviews DVACK: Independent Connection
Staff & Advocates	3+ focus groups WASAC: 8 Harbor House: 8 ILRC: 8	2+ focus groups DVACK: 8 Independent Connection: 8
PWD	20+ participants	20+ participants including at least one in rural Cloud County

To the extent that CIL staff, SA/DV advocates, survivors and people with disabilities wish to contribute but are hesitant or unable to participate in a focus group, we will accommodate them with an interview process.

C. Recruitment

As stated, organizational willingness to participate with needs assessment activities was demonstrated by programs through the RFA process. Recruitment for specific groups is as follows:

1. Boards of Directors
   The Executive Directors of the target site CIL and SA/DV programs will be asked to identify the individuals to receive the survey. Board members will receive the survey with an explanation of the purpose and how their participation will inform the process.

2. Executive Directors
   The Executive Directors of the target site CILs and SA/DV programs will participate in an interview. The scheduling call will explain the purpose of the interview and how it will inform the process.

3. CIL Staff and SA/DV Advocates
   The local CIL and SA/DV programs will be asked to issue information to staff and advocates about participating in the focus groups. There will be a minimum of two focus groups, one each for CIL staff and SA/DV advocates. Depending on response and timing, several groups could be held for both CIL staff and SA/DV advocates. A local program primary contact will collect RSVPs from interested staff and advocates and submit to Just ASK.

4. People with disabilities
   - Recruiting for the people with disabilities focus group will be a cooperative effort between Just ASK and the target site programs. The primary recruitment strategy will be direct invitations from CIL and SA/DV program staff to people with disabilities. CIL and SA/DV program staff will share information regarding the focus group and collect RSVPs from interested individuals.
   - A secondary strategy will be notification via more informal existing networks as they are identified by local CIL and SA/DV program

staff. Those existing networks may include publication in newsletters and email listservs to announce the formation of the focus groups and how individuals can get involved. We will not be using flyers.

- RSVP's (see Appendices C.3 and D.6) will be requested to allow us to prepare for alternative formats, interpreters, transportation, childcare or other needs. RSVPs will be directed to the local CILs and SA/DV programs. The form for taking RSVP information will be furnished to the local programs. The staff will then funnel the RSVPs to Just ASK to make the needed arrangements.

D. Survey, Interviews and Focus Group Facilitation

Data to be gathered for use in strategic planning with the target sites will come from the sources as described above. The data collection process of surveys, interviews and focus groups will be facilitated as described in this section. Any needs assessment plan must reflect issues of confidentiality, safety needs and accessibility needs. Just ASK has created a plan that accounts for these issues on an individual basis as well as in the structure of tools and facilitator roles. Participation in a needs assessment carries certain risks for both organizations and for individuals. Just ASK will collect information in ways which respect confidentiality for individuals and target sites. We will also ensure a process that respects the reputation of the community and creates an environment conducive to change.

1. Boards of Directors Survey

The survey for the Boards of Directors will be administered to the board members of the target site CILs and SA/DV organizations with the assistance of the Executive Directors. The survey will be offered in paper, electronic or other alternative format as requested. The needs assessment facilitators will confer with the Executive Directors of each organization about the most efficient manner in which to contact them, i.e., electronically or other method.

A cover letter (see appendix B.1) explaining the program and the purpose will accompany the survey. The electronic survey will be checked for accessibility and its compatibility with screen readers. The electronic version will be submitted electronically to the needs assessment facilitators; the Executive Directors will facilitate submission of the survey in other

formats to Just ASK. It is anticipated that the survey will take 10 to 15 minutes to complete.

2. Executive Director Interviews.

The Executive Directors of the target sites CILs and SA/DV programs will be invited to participate in an interview. The needs assessment facilitators will issue the invitation by telephone with an explanation of the purpose, the time involved and the importance of their participation. A date and time for the interview that is mutually acceptable will be scheduled during the call. The interview will be conducted by one or more of the three Co-Directors at the Executive Director's office or other location preferred by the Executive Director. It is anticipated that the interview will take 1 to 1 ½ hours.

3. Facilitation of Focus Groups

Focus groups will be conducted for direct service advocates and staff at CILs and SA/DV programs. We will also conduct focus groups of survivors/people with disabilities. Our structure will be largely consistent across each type of focus group.

We will ensure universal access to focus groups and surveys, including groups being scent free, and attend to each participant's need for safety. We also will ensure that groups represent the diversity of the target communities. Our commitment to confidentiality will be stressed at the start of each group. Every focus group participant will get a copy of our confidentiality statement and the statement will be displayed on a wall in the room.

Each focus group will be facilitated by the three Just ASK co-directors. The roles of the facilitators for the focus groups will be divided as follows:

> **Moderator.** The moderator will facilitate the large group discussion and attend to the environment of the group. This includes opening and closing the group and maintaining the focus of the discussion. The moderator is also responsible for maintaining a space where all participants have a true opportunity to contribute. This is especially crucial in a group where the topics may be difficult to discuss and group members may utilize

different modes of communication. The KACIL co-director will be the moderator. Her expertise comes from conducting focus groups discussing difficult topics such as disability, moderating training sessions, teaching at a post-secondary level, and providing direct service to people with disabilities and survivors.

Recorder. The recorder will take notes, recording responses as accurately as possible. The recorder will not only record spoken comments but will also note observed communication such as topics which present particular frustration or hesitancy. All participants will be informed that while direct quotes may be utilized in the report, no participant will be identified in any way (confidentiality, section F). The KDHE co-director will be the recorder. Her expertise is based in a thorough understanding of the need for accuracy and gathering focus group information as objectively as possible if it is to be of use in informing the needs assessment report and the strategic plan.

Floater. The third facilitator's primary role is to be responsive in the face of a participant's crisis or distress. If a participant begins to feel overwhelmed, wishes to talk individually or needs to leave, the floater will check-in with them in a private space. The floater has a secondary role as assisting with large group facilitation if no one presents an individual need. The KCSDV co-director will be the floater. Her experience as a direct service advocate for DV/SA survivors gives her the expertise be responsive to a participant's crisis or distress.

Each group will be limited to 8 participants. This small number will enhance our ability to create space for all participants and will ensure that individual needs can be addressed.

The groups will be specifically tailored for each audience as detailed below.

Staff/Direct Service Advocates Group

As they arrive, participants in the staff and direct service advocates group will be given a brief demographic survey (Appendix C.1) to complete as well as a list of the discussion questions for their reference. Demographic information is being gathered to ensure equal representation of advocates

across programs (SA outreach, DV outreach, CIL outreach). All demographic information will be destroyed no later than 3 months following the completion of the strategic plan. The moderator will conduct a 60 minute (approx.) discussion focusing on specific questions (Appendix C.2). The final 10 minutes of the group will be question and answer (Q&A) and wrap-up. At the conclusion of the focus group, a box will be available for participants to anonymously contribute program and demographic surveys. Staff and advocates may have safety needs that impact their participation. We will offer individual interviews for staff and advocates who feel unsafe or uncomfortable participating in a group setting. Facilitators are also available after the group for anyone who has an emerging safety concern.

People with Disabilities Group

The focus groups for people with disabilities will include a brief check-in with each individual before the beginning of the group. All three facilitators will participate in the check-in procedure. The check-in will be used to explain who we are, expectations about the focus group, inquire about the individual's level of comfort and safety in participating, confidentiality expectations, and the demographic information to be gathered. Demographic information is being gathered to ensure equal representation of across programs (main office, satellite office). All demographic information will be destroyed no later than 3 months following the completion of the strategic plan.

a. Each focus group will have a 20 minute check-in period for 5 minute individual interviews, a 60 minutes group discussion, and a 10 minutes question and answer (Q&A) and wrap up.
b. During check-in, each participant will receive a demographics survey form (Appendix D.1), a confidentiality statement (Appendix E), a statement of our role/purpose (Appendix D.2), discussion questions for the focus group (Appendix D.4), and contact information for local CIL and DV/SA organizations. Participants also receive a SASE to the KDHE co-director, which will have no reference to SA or DV, in which they can mail in additional thoughts after the discussion.
c. Each participant will be given a stipend for their attendance.
d. Facilitators will take a brief moment after initial interviews to check in with each other. Participants will use this time to get comfortable, have a cup of coffee, look over discussion questions, jot down ideas, etc.
e. At the conclusion of the focus group, a box will be available for participants to anonymously contribute the demographic surveys.

f. Each participant will have an opportunity to check-in individually at the conclusion of the group to address any emerging needs.

4. Facilitation of Interviews with Individuals Unable to Participate in Focus Groups.

Individuals may be interested in participating in focus groups or contributing to the process but are unable to participate because of schedules, preferring to communicate individually, safety concerns or other reasons. Interviews will be arranged with these individuals at an agreed upon date and time. If at all possible, the interviews will be arranged while the facilitators are at the target site. The interview process is anticipated to take 45 minutes to 1 hour, and will use the focus group discussion questions. All facilitators will be scent-free for the interviews.

E. Research Tools

1. Tool development

Just ASK developed several tools that will be used in the needs assessment process to collect and record the data as described in the methodology section. The specific tools are contained in the appendices (see Appendices Table of Contents, p. 18). They will be used with different target groups as follows:

- Survey (paper, electronic and other alternative formats): Members of the Board of target site CILs and SA/DV organizations.
- Interviews: Executive Directors of target site CILs and SA/DV organizations; staff, advocates, and people with disabilities who are unable to schedule participating in focus groups.
- Demographic survey: target site CIL staff and SA/DV advocate focus groups or individual interviews, and people with disabilities focus groups or individual interviews.
- Focus group questions: target site CIL staff, SA/DV advocates, and people with disabilities focus groups.

Additional documents to be used with the groups include a confidentiality statement, a Just ASK statement of purpose and roles, a cover letter for members of the Boards of Directors of each organization explaining the purpose of the survey, and an RSVP form.

Facilitation of the needs assessment is explained in Section D of this plan. All documents will be in accessible formats as needed. Appropriate support will be available for focus group participants who do not read or process written language. See full safety and accessibility protocols on pp. 13 – 16.

F. Confidentiality

Just ASK is highly committed to maintaining confidentiality for participants in our needs assessment. Just ASK co-directors are not mandatory reporters according to Kansas Statutes. We have crafted a confidentiality statement (Appendix E) to ensure that all participants understand our confidentiality protections. This statement also outlines potential risks participants may still face if disclosing (such as a fellow focus group member not maintaining confidentiality). We have structured multiple ways to emphasize confidentiality and to explain our expectations and limits. We will:

- Discuss confidentiality with each individual at brief one-on-one interviews before each focus group;
- Explain the confidentiality statement to the group;
- Have a large copy of the confidentiality statement on the wall so it is present in the room during the group; and
- Provide a copy of the statement in the participant's desired format so it can be reviewed later if there are concerns.

To help limit potential risks, we are also giving any focus group participant private and/or anonymous ways of communicating with us. These include the brief one-on-one meetings before group, a box for collection of demographic survey information, the opportunity to meet with a facilitator privately after group, or to schedule a private interview instead of participating in a group.

We are also attending to a high level of confidentiality within Just ASK. No identifying information will be revealed in the needs assessment report about individual focus group or interview participants. Any politically sensitive information about organizations gathered during the needs assessment will be held strictly confidential and used only for strategic planning purposes. All documents used to record information will be destroyed no later than 3 months following the completion of the strategic

plan. All data will be stored at a secure site within KDHE. Only Just ASK co-directors will have access to this information.

Safety Planning and Accessibility Protocols

A. Safety Planning

People with disabilities who are survivors of sexual assault or domestic violence may face a variety of potential risks in participating in this needs assessment. Just ASK recognizes that safety for survivors of violence requires consideration of risks a survivor faces by virtue of social/cultural factors, as well as risks presented by a perpetrator. A survivor may face risks from a community that stigmatizes people with psychiatric disabilities. That same survivor may also face risks from a perpetrator who hides her medication. The methodology for the needs assessment was carefully crafted to minimize safety risks; however Just ASK recognizes that no amount of planning can eliminate all the potential risks a needs assessment participant may face.

Given the potential risks, Just ASK is relying on a three dimensional safety strategy. We will disclose possible risks to every participant, present options to manage these risks and, most importantly, we will listen to the survivor. She is in the best position to assess her own safety or comfort level and make a decision about participation.

It is our plan to create an environment that addresses common risks survivors may face. We will also create space for one-on-one safety planning to respond to individualized risks survivors may face. Key to this plan is to offer a choice in how individuals participate—via individual interview or through a focus group. It is our hope that this combination of generalized planning for safety and individualized response will minimize potential harm for participants.

Just ASK will work with local programs to ensure the location of the focus group contributes to a feeling of safety for participants. We recognize

that additional risks may be faced by individual participants. Our strategies to enhance safety include the following:

- Risks may be present for staff/advocates or consumers/survivors in disclosing unflattering information about the local agency. Strict adherence to confidentiality will reduce this risk. Just ASK will work with the local agencies on the intent and purpose behind the needs assessment. This will hopefully facilitate an environment welcoming of critical feedback and minimize the potential risk.
- Survivors may face risks to their emotional safety by participating in a discussion that addresses violence. The individual interviews before the group begins will help prepare survivors for their participation in the group. We will help survivors assess their safety level in sharing with the group and identify resources available if additional support is needed after group.
- Survivors may be in immediate danger from a perpetrator. Again, individual interviews will include safety planning of risks. If a survivor reveals s/he is in immediate danger, the "floater" facilitator will respond with safety planning and offer immediate connection to local resources.
- A survivor living in a group environment (shelter or otherwise) may face risks in disclosing an active addiction or psychiatric disability. Confidentiality and safety planning during the interview will provide a level of protection for a survivor making such a disclosure.
- A survivor may attend the focus group with a personal care attendant (PCA) and feel unsafe disclosing because of the PCA's presence either because of concerns about confidentiality or because the PCA is the abuser. Just ASK will offer to provide alternate PCAs. Because this option may be restricted by an abuser, we emphasize that a survivor can choose not to answer or respond to any questions that make them uncomfortable. To address concerns about privacy all PCAs who are present at the focus group or interviews will be asked to sign a confidentiality agreement.
- A survivor/person with a disability may be concerned about transportation to or from the focus group. Just ASK will

coordinate with local programs to ensure transportation is available to participants.

- A survivor/person with a disability who is a parent may be concerned about the care of their children while they attend the focus group. Just ASK will coordinate with local programs to provide childcare parallel to the focus group.
- Some survivors may face risks from a perpetrator if they were to return home with unexplained money or giftcards. Just ASK will have stamped envelopes available to mail the stipend to a safe mailing address for any survivors who are unsafe bringing the stipend home.

B. Accessibility

Just ASK collaboration is committed to full accessibility for survivors with a disability.

- Needs Assessment Tools: Just ASK will ensure alternative formats are available for all of our tools. Our survey, interview and focus group tools will undergo review with a committee of disability experts to check for readability and appropriate language use. The survey for board members will be available in hard copy in a variety of formats as well as available on-line in a survey compatible with screen readers. Focus group participants will be asked to identify accessibility needs prior to the meeting. Just ASK will coordinate with the local programs to ensure the availability of a wide range of alternative formats.
- Accessible Communication: Just ASK will coordinate with local programs to ensure documents are translated into appropriate languages and to ensure that interpreters are available as requested.
- Location of the focus group: Just ASK will solicit recommendations for focus group locations from the local programs. We will also conduct site visits to ensure the room is easy to access for all people (checking the level of strength required to navigate the doors, the ease with which a participant could go from the front door to the room or to the bathroom, sufficient accessible parking, etc.).
- Chemical sensitivity concerns: Just ASK will strive to ensure that the focus groups are scent-free. The interviews will be scent-free.

Compile and analyze data

Once the needs assessments have been completed with the three sites, Just ASK coordinators will compile the data for each site. Using all the data collected from existing data sources and the needs assessments, the coordinators will identify issues that are common across the target sites and issues that are specific to individual sites.

The full collaborative will then use the analyses to prioritize issues to be addressed across sites. A needs assessment report will be developed from the collaborative consensus which will be used to inform the strategic plan. The strategic plan will be developed from the report of prioritized issues. The collaborative also will provide reports to the target sites that identify issues, both specific to a site and across sites, that need to be addressed by the sites.

Timeline & Workplan

January 2008

- Submit RFA to OVW for final approval
- Continue work on needs assessment plan with support from Vera

February 2008

- Receive approval of Charter and RFA from OVW
- Submit RFA to KDHE for approval
- Continue work on needs assessment plan with support from Vera
- Distribute RFA to member programs

March 2008

- Continue work on needs assessment plan with support from Vera
- Select and notify target sites

April 2008

- Submit needs assessment plan and tools to OVW for approval
- Coordinate focus groups
- Orient target sites to the program and collaboration-building process

May 2008

- Conduct focus groups and interviews (work with local projects to recruit pwd and survivors; work with local sites to find locations that are safe and accessible; work with local sites to ensure universal access of focus group tools, etc.)
- Conduct surveys
- Review other data sources (organization policy, etc.)
- Write needs assessment report with input from Vera

June 2008

- Complete needs assessment report
- Submit needs assessment report to OVW

July 2008

- Site visit from Vera to begin strategic plan process
- Submit strategic plan to OVW for approval
- Begin implementation of strategic plan

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Appendix D:
1. Survivor/People with Disabilities Demographics Information Form
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3. Check-in Checklist
4. Focus Group Questions for Survivor/ People With Disabilities
5. Focus Group Invitation
6. RSVP card and response form

Appendix E: Focus Group Confidentiality Statement

Appendix F: PCA Confidentiality Agreement

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Appendix A

Definitions

The definitions in this appendix are for readers of the needs assessment plan and will not be used with individuals or groups participating in the needs assessment.

- **Accessibility:** People with disabilities have the right to an equal opportunity to participate in the community including employment, accessing government programs, public accommodations, transportation and communication. Accessibility means that disability is accounted for in all aspects of life and that structures, processes and environments are designed to maximize inclusivity.
- **Advocacy:** Broad term to describe actions directed by and on behalf of marginalized individuals to support their autonomy, to influence systems and to educate communities. Survivor-centered advocacy uses a framework that is responsive to the survivor as a whole person by acknowledging risks generated by the perpetrator, systems and society. It includes a philosophy where survivors are valued as the experts, where each survivor's individual experience is the starting place for action. When using the term "advocacy", Just ASK includes wide ranging activities such as intakes, telephone calls, in-person support, information sharing, referrals, peer-support, safety planning and transportation.
- **Autonomy:** Every individual's inherent human right to direct their own destiny, make choices and to define their own experiences.
- **Collaboration:** A conscious and dynamic relationship made by two or more organizations with formalized agreements to share influence and resources in order to achieve mutually beneficial results they could not achieve individually. (This definition is based heavily on work by the Fieldstone Alliance.)
- **Confidentiality:** Creating deliberate protections for information that is given to an individual or to an organization with the expectation that the information is not shared without specific permission from the individual who owns the information.

- **Disability:** To meet the ADA definition of disability a person must have a physical or mental impairment that substantially limits a major life activity, has a record of such an impairment or is regarded as having such an impairment. An emerging definition of disability focuses on the environment as a barrier, rather than a person's functional limitations. This environment can include the social/political, informational, communication as well as the physical environment. People with disabilities are also a cultural group and constitute the nation's largest minority. This group is simultaneously inclusive and diverse crossing all ages, religions and ethnic groups, socioeconomic levels, genders and sexual orientations.
- **Diversity:** A recognition of the infinite number of ways there are to be human and to move through the world. Diversity is an acknowledgement of differences in identity, background, history, experiences and options. There is often a focus on gender, disability, race, economic background, religion, sexual orientation or rural/urban issues. This collaborative's definition includes these but also other elements and recognizes the multiple ways people can identify within each group.
- **Domestic violence** is a pattern of abusive and coercive behavior used to establish power and control over another person through fear and intimidation. Domestic violence occurs within intimate relationships, and abusers can be spouses, partners, boyfriends/girlfriends, family members, or caregivers. Batterers take away the victim's fundamental right to maintain control over their own lives. They do this by using various abusive tactics including use of violence and threats of violence, controlling the victim's mobility, isolating the victim, threats to hurt the victim and the victim's family, controlling the victim's money and using fear, intimidation and shame to silence the victim.
- **Points of Access:** Any place, contact, document or information which leads a survivor or person with a disability directly to services from a CIL or SA/DV program. Points of access may include a variety of opportunities for contact between an individual and the organization such as outreach materials, a person in the community who recommends an advocate, a website, a community event that highlights services or heightens awareness, a mechanism in an allied system that makes automatic referrals, etc. The survivor or person with a disability may make contact via telephone, in-person, attend a group meeting, email, etc.

- **Safety:** An environment that attends to the physical, emotional and spiritual needs of each individual, thereby allowing them to exercise their autonomy.
- **Sexual Assault:** Any type of sexual activity to which a person has not freely consented. It is a form of violence that uses sex and sexuality to humiliate, intimidate, control or instill fear in another person. Sexual assault can be committed by the use or threat of force or under circumstances where a person is incapable of consenting. It ranges from intimidation to inappropriate touching to penetration or intercourse. It also can be verbal, visual, audio, or any other form which forces a person to participate in unwanted sexual contact or attention. Sexual assault includes rape and attempted rape, child molestation, voyeurism, exhibitionism, incest, and sexual harassment. It can happen in different situations, such as date rape, personal assistant or domestic or intimate partner violence, or by a stranger.
- **Systems Change:** A method of impacting the culture of an organization by focusing on the structures, policies and procedures of the organization. This results in a sustainable shift in attitudes, practices and services provided by that institution.
- **Technical Assistance:** The proactive provision of prescribed or requested specialized support, help and information on specific topics or activities. It may be delivered in-person, by telephone, electronically or in writing. The assistance is provided in a timely, specific, respectful and thorough manner.

Just ASK Needs Assessment Plan

Appendix B.1

Survey Cover Letter for Board Members

Dear (Name):

Thank you for participating in the needs assessment survey about the services your organization provides to people with disabilities who are survivors of domestic or sexual violence. As you know, your organization is part of a local collaboration that was chosen as a target site to be part of a grant to enhance and increase services to survivors with disabilities through systems change. Your collaboration was chosen, in part, because of the commitment to change and the willingness to participate in all phases of the change process. The grant provides a variety of benefits to your collaboration that will be provided by Just ASK, a collaboration of the Kansas Association of Centers for Independent Living (KACIL), the Kansas Coalition Against Sexual and Domestic Violence (KCSDV), and the Kansas Department of Health and Environment (KDHE). One of the first benefits to your community collaboration is a needs assessment.

Your participation as a board member in the needs assessment board survey is very important to the process. You are in a unique position to provide a broader view of the community, your organization and its resources. You are also key to providing the policy support and commitment of resources that are necessary for sustaining change that increases services to survivors with disabilities. Once the needs assessment is complete, we will furnish you with a report, and your community will participate in a strategic planning process that will map out how Just ASK will provide technical assistance in your community.

Thank you for your participation in the needs assessment process. If there are any questions, please contact one of the Just ASK coordinators by phone or email.

Sincerely,

Jehan Faisal	Ann Branden	Stephanie Sanford
Co-Director	Co-Director	Co-Director
Just ASK KCSDV	Just ASK KDHE	Just ASK KACIL
634 SW Harrison	1000 SW Jackson	214 SW 6th Street
Topeka, KS 66603	Topeka, KS 66612	Topeka, KS 66603
785-232-9784	785-296-7818	785-550-4808
jfaisal@kcsdv.org	abranden@kdhe.state.ks.us	ssanford@pilr.org

Just ASK Needs Assessment Plan

Appendix B.2

Board of Directors Survey
_____ *(insert program name)*

Instructions: Please check the appropriate box to answer questions 1-5. Questions 6 and 7 are short answer format.

1. How would you assess your agency's current capacity to serve people with disabilities who are experiencing domestic or sexual violence? Consider policies, procedures, attitudes, equipment, knowledge, skills, funds and training.
   - ❑ We currently have a high level of capacity.
   - ❑ We currently have a good level of capacity.
   - ❑ I'm not sure
   - ❑ We currently have a limited level of capacity.
   - ❑ We currently have a low level of capacity.

   Please explain: _____

2. Do you see work to end violence against survivors with disabilities as crucial to your organization's mission statement?
   - ❑ Yes
   - ❑ I'm not sure
   - ❑ No

   Please explain: _____

3. Do you believe current policies and procedures are consistent with providing effective service to survivors with disabilities?
   - ❑ Yes
   - ❑ I'm not sure
   - ❑ No

   Please explain: _____

4. What are the three most critical areas in which change is needed? *(check only three)*

- ❑ Budget line items for safety & accessibility needs
- ❑ Effective outreach
- ❑ Intake procedures
- ❑ Offer of accommodations re: disability
- ❑ Physical structures
- ❑ Policies re: batterer's interference with services to a survivor (such as cancelling transportation)
- ❑ Policies re: drug or alcohol use by survivors/consumers
- ❑ Policies re: personal care attendants in shelter
- ❑ Policies re: prescription medications
- ❑ Policies re: service animals
- ❑ Protocol for disclosures of violence
- ❑ Protocols for utilizing interpreters/translators
- ❑ Protocols when both a victim and a perpetrator are receiving services (for example, attending a community event)
- ❑ Provision of alternative formats
- ❑ Provision/use of assistive technology (TTY, screen readers, shower chairs etc.)
- ❑ Referral protocols
- ❑ Screening for sexual assault/domestic violence
- ❑ Staff development protocols
- ❑ Workplace violence policy

❑ Other (please specify) _____

5. Which areas do you consider the most likely in which change to improve service for survivors with disabilities could be successfully made and sustained?
(check all that apply)

- ❑ Budget line items for safety & accessibility needs
- ❑ Effective outreach
- ❑ Intake procedures
- ❑ Offer of accommodations re: disability
- ❑ Physical structures
- ❑ Policies re: batterer's interference with services to a survivor (such as cancelling transportation)
- ❑ Policies re: drug or alcohol use by survivors/consumers
- ❑ Policies re: personal care attendants in shelter
- ❑ Policies re: prescription medications
- ❑ Policies re: service animals
- ❑ Protocol for disclosures of violence
- ❑ Protocols for utilizing interpreters/translators

- ❑ Protocols when both a victim and a perpetrator are receiving services (for example, attending a community event)
- ❑ Provision of alternative formats
- ❑ Provision/use of assistive technology (TTY, screen readers, shower chairs etc.)
- ❑ Referral protocols
- ❑ Screening for sexual assault/domestic violence
- ❑ Staff development protocols
- ❑ Workplace violence policy
- ❑ Other (please specify) _____

Please answer questions 6 and 7 with 2-3 sentences each.

6. What challenges do you see to implementing change in the above areas?

7. What allies, partnerships or board member affiliations are available to your organization to assist in developing or expanding services to survivors with disabilities?

8. What would you consider "success" in your agency's ability to serve survivors with disabilities? What are your benchmarks to know when you have been successful?

Just ASK Needs Assessment Plan

Appendix B.3

Executive Director Interview Questions

1. What are some strengths of your organization and your community?

2. What key community resources do you utilize when addressing the issue of violence against women with disabilities?

3. Tell us about a policy change you implemented at this organization that was very successful. What did your leadership look like? Were there challenges and, if so, how did you overcome them? How did you evaluate the change? What sustained it?

4. Do you have a policy about reasonable accommodations or responding to violence? What is your organization's philosophy or value statement regarding your work with survivors with disabilities?

5. What strategies do you use to respond when key systems/allies are either inaccessible or present safety risks to survivors with disabilities?

6. What strategies does your organization use to reach survivors with disabilities?

7. What services to survivors with disabilities do you think could be successfully improved and the changes sustained?

8. What are the three most critical areas in which change is needed?

9. Identify key resources your organization would need in order to better serve survivors with disabilities. Consider policies, procedures, attitudes, equipment, skills, budgets for accessibility and safety needs, knowledge and training

10. What do you need in order to provide excellent leadership in addressing safety and accessibility for survivors with disabilities? (such as resources, model policies, networking opportunities with other EDs, education etc.)

Just ASK Needs Assessment Plan

Appendix C.1

Staff/Advocates Demographic Information

Instructions: Please provide the information requested and put the form in the box provided on the table when you leave the focus group. None of this information will be used to identify you in any way. Please do not put your name on the form so that you can remain anonymous. This information is being gathered to ensure equal representation of advocates across programs (SA outreach, DV outreach, CIL outreach). All demographic information will be destroyed no later than 3 months following the completion of the strategic plan.

Organization: _____

Position: _____

City where most work is done: _____

Just ASK Needs Assessment Plan

Appendix C.2

CIL Staff and SA/DV Advocate Focus Group Questions

1. Tell us about a positive experience advocating for a survivor with a disability. *(follow up: What was comfortable about that experience?)*

2. Tell us about a less positive experience advocating for a survivor with a disability.*(follow up: What was uncomfortable about that experience?)*

3. What are some of the ways survivors with disabilities find out about your services? *(follow up: Do folks come as survivors/people with disabilities or do you find out later that they are experiencing violence/have a disability? What do you think makes someone feel safe and comfortable enough to disclose violence to you/ discuss their disability with you? When folks come to you through word-of-mouth, are there particular services they're interested in?)*

4. What are some primary barriers and supports when a survivor is disclosing violence or talking with you about her disability? *(follow up: What are barriers/supports within your own organization? How do differences between policy and practice impact your advocacy? Consider advocacy interactions with other systems.)*

5. What are some gaps in services in your community for survivors with disabilities? *(follow up: Consider gaps in terms of accessibility e.g., attitudinal, physical, communication, etc.. Consider gaps in terms of safety: emotional safety as well as immediate, physical safety.)*

6. In light of existing gaps in the community, how have you or your organization been able to provide services to survivors with disabilities? *(follow up: What connections have you already made? What does advocacy for survivors with disabilities look like in your organization? Have you used co-advocacy in providing services to survivors with disabilities?)*

7. What would you need in order to provide excellent advocacy for a survivor with a disability? *(follow up: What do you need from your board, your ED, your co-workers, your agency's structure, technical assistance. . .? What do you need from yourself?)*

Just ASK Needs Assessment Plan

Appendix C.3

Direct Service Advocates
Focus Group RSVP Form

If you are attending a focus group or would like to have an interview, please return this card to the primary contact at your organization (include names) or call (telephone numbers) to let us know how we can make the focus group accessible for you. ***All*** *information provided is confidential.*

Name: _____

City: _____

Organization or City where you provide services:_____

I prefer to participate in a (please check one box)

Focus Group (please select date/time)

☐ _____ *(date/time will be specified)*
☐ _____ *(date/time will be specified)*

Individual Interview

☐ _____ *(date/time will be specified)*
☐ _____ *(date/time will be specified)*

I request the following accommodations (*check all that apply*):
Just ASK will ensure that arrangements for accommodations are made.

- ☐ ASL interpreter
- ☐ Other language interpreter Please specify: _____
- ☐ Alternate format for materials Please check all that apply.
  - ☐ Braille
  - ☐ Large print
  - ☐ Other Please specify: _____
- ☐ Dietary concerns for snacks. Please specify: _____
- ☐ Other Please specify: _____

Just ASK Needs Assessment Plan

Appendix D.1

People with Disabilities Demographic Information

Instructions: Please provide the information requested and put the form in the box provided on the table when you leave the focus group. None of this information will be used to identify you in any way. Please do not put your name on the form so that you can remain anonymous. Demographic information is being gathered to ensure equal representation across programs (main office, satellite office) and will be destroyed no later than 3 months following the completion of the strategic plan.

I am: ☐ A survivor ☐ A person with a disability ☐ Both

I live in

- ❑ A rural area (such as Concordia or Ada)
- ❑ A semi-urban area (such as Salina)
- ❑ An urban area (such as Wichita)

I access services at: _____
(organization or city)

Just ASK Needs Assessment Plan
Appendix D.2

Statement of Purpose

Thank you for coming to the Just ASK focus group or interview.
Just ASK: Autonomy and Safety of Kansas is a group made up of three agencies that work statewide.

- Stephanie works for the Kansas Association of Centers for Independent Living, also called KACIL. KACIL works with independent living centers from all over the state.
- Jehan works for the Kansas Coalition Against Sexual and Domestic Violence, also called KCSDV. KCSDV works with rape crisis centers and domestic violence programs from all over the state.
- Ann works for the Kansas Department of Health and Environment, also called KDHE. KDHE works to promote the health and well being of all Kansans.

We work all over the state and so we do often work with the _____ (name of CIL) and _____ (name of SA/DV program.) We do not work for them but are here to help them find ways of improving their services. Your input will help us do that. The things you tell us will stay confidential. We will tell them about the things discussed in the group but will not tell them who attended or what they said.

This meeting is so we can learn more ways to help people with disabilities and survivors of violence.

We will listen to you carefully. You know the community best and know the most about what things need to change.

It is okay to tell us about what services work well in your community and what has not worked well. It is also okay if there are things you don't want to tell us.

If you know of a complaint about a local program, it is okay to tell us. We cannot fix the situation but hearing about it may help us understand problems that happen all across Kansas.

Your knowledge is very important. Thank you for sharing it with us.

Stephanie, Jehan and Ann

Just ASK Needs Assessment Plan
Appendix D.3

Check-in Checklist

- Welcome and thank the individual for participating
- Hand the individual the stipend
- Confirm universal access of focus group or interview
    - On your RSVP you stated we should have _____ (Braille, large print, interpreter, childcare, etc.) Does what we have meet your needs? Is there anything else that might make you more comfortable participating?
- Explain who Just ASK is
    - Stephanie, Jehan and Ann do not work for the local programs and will not share identifying information with them. The local programs will get a copy of a report at the end of the needs assessment.
    - Stephanie, Jehan and Ann do not make reports to SRS.
    - Jehan is available during the meeting if you want to stop the interview or take a break from the focus group to talk one-on-one.
    - *Hand participant the statement of purpose.*
- Explain confidentiality and its limits
    - Stephanie, Jehan and Ann do not make reports to SRS
    - We ask everyone to keep the discussion private
    - We cannot guarantee everyone will keep your confidentiality
    - If you are worried that something you say will jeopardize your safety, well-being, a job, your housing, etc., you can either talk to us privately or just not bring it up. Your safety is the most important thing, and it is okay if you decide not to share certain things.
    - *Hand participant the confidentiality agreement*.
- Review the discussion topics and ask if there are any safety concerns
    - Here is the list of questions we're starting with for the group today. We are asking questions to improve services for people with disabilities who experience sexual assault or domestic violence. We will be talking about disability and safety and how agencies can be more helpful. These topics sometimes

bring up memories or feelings if something is or has happened in your life. In the focus group we will be focusing on how to improve services and we will not ask about anyone's personal experiences with violence. If you are currently feeling unsafe because of something that is going on now or has happened in the past, please feel free to talk with me now. Jehan is available all through the meeting today and here is information on the local CIL and SA/DV center if something comes up after we've gone. You can always step out if the discussion becomes too intense or if you want to talk with us individually. Do you have any safety concerns that you would like to talk about now?
    - *Hand participant local CIL and SA/DV contact information.*
    - *Hand participants the list of focus group questions.*
- Review the demographics survey and how information will be used
    - We are collecting statistics on each person who participates. We are doing this to make sure we have people with different life experiences participating in the groups. I'd like to read this form and then we can fill it out together or you can fill it out and drop it in a box after the group. Your name will not be attached to it.
    - *Hand participant demographics form*

Just ASK Needs Assessment Plan
Appendix D.4

People with Disabilities Focus Group Questions

1. Can you tell us about a time you received excellent advocacy assistance? *(follow up: from a CIL, SA/DV program, others in the community etc. What made the advocacy excellent?)*

2. When you think about disability, how would you describe it or how do you think about it? *(follow up: What are some reasons why someone would identify with the word "disability"? What are some reasons why someone would not identify with the word "disability?")*

3. When you think about domestic or sexual violence, how would you describe it or how do you think about it? *(follow up: If you are worried that a friend may be experiencing violence, what are things that make you think there may be abuse? What does that abuse look like?)*

4. Many people have experienced domestic violence or sexual assault at some point in their lives. You may know someone who has experienced this. When someone is working with an advocate or service provider what makes it hard to talk about abuse or try to get help? *(follow up: What have you seen or heard about? What kinds of help does someone get? How are they treated? What might make it easier or encourage someone to talk about it?)*

5. We often hear that it is hard to get help from service providers because they don't seem to understand the violence or the disability. What would be the best way for service providers to help a person with a disability that has experienced sexual assault or domestic violence? *(follow up: What do service providers need to do, to avoid, to do differently or to know in order to understand violence or disability)*

6. What are some ways that people find out about services? What things make it easier or harder to contact and use services such as a CIL or an SA/DV center? Are there services that are hard to find or simply unavailable here in _____ (town name)? *(What supports or services are utilized the most in your community?)*

7. What would ideal services, advocacy, programs look like? What would you tell service providers and advocates about providing excellent advocacy?

Just ASK Needs Assessment Plan
Appendix D.5

Invitation to the
Individuals with Disabilities
Focus Group

Possible language for CIL or SA/DV Advocate when extending an invitation to a consumer/survivor

We're going to be working with our local *(Center for Independent Living or Sexual Assault/Domestic Violence organization)* to find survivors and people with disabilities to participate in focus groups. We want to find out how we can better provide services to survivors with disabilities. I thought you might be interested in helping us.

The focus group will be on *(date)* at *(time)* and last about 90 minutes. We can help with several things - transportation, childcare, interpreters, or other accommodations. We'll just need to know a little ahead of time. Various focus group and interview times are available. Please check the time/date most convenient for you.

Here's an RSVP form and an envelope to return it if you choose to participate or you can just call me and we can fill the form out together. If you have any questions, please let me know.

Please see the following if an individual requests any accommodations or information.

Information on transportation: (will be community specific)
Just ASK has purchased bus tokens/ transit vouchers. They are available at the CIL or SA/DV office for staff to give to potential focus group participants.

Information on childcare: (will be community specific)

Volunteers from_____ will be in a room next door to the focus group location. They will be playing a movie and have crafts & games available.

Commonly requested accommodations

Information on alternate PCAs: (will be community specific)
Alternate PCAs are being provided through _____. We request specific information about the kinds of PCA services needed to ensure we have a qualified PCA acting as an alternate. Examples of services needed might include scribe or assistance toileting.

ASL - American Sign Language for people who are deaf or hard of hearing and use ASL as their language

OTHERS - Foreign languages, SEE/ Sign Exact English (some mainstream school systems use this for students who sign), languages for people who are deaf/blind

BRAILLE - for people with visual impairments or are blind, tactile format

LARGE PRINT - for people with low vision

AUDIOTAPE - for individuals who prefer to read through the use of recorded audiotaped information

CD - for individuals who prefer to review text documents via computer

PERSONAL CARE ATTENDANT - an individual that assists a person with a disability perform tasks where assistance is required

CHEMICAL SENSITIVITY - awareness that the presence of chemicals in the environment may present significant barriers to some individuals resulting in a commitment to be as scent-free as possible

PHYSICAL ACCESS - this relates to the architectural access of a building or room and is in reference to individuals with disabilities related to mobility (for example, someone who uses a wheelchair, a walker, a cane)

DIETARY CONCERNS - some individuals may have food allergies. Other considerations may include low sodium, low sugar, gluten-free, etc.

Just ASK Needs Assessment Plan
Appendix D.6

Individuals with Disabilities
Focus Group RSVP Form

If you are attending a focus group or would like to have an interview, please return this card to your local center for independent living at (actual name and address) or SA/DV organization at (actual name and address) or call (telephone numbers) to let us know how we can make the focus group accessible for you. ***All*** *information provided is confidential.*

Name: _____

City: _____

Organization or City where you receive services:_____

I prefer to participate in a (please check one box)

Focus Group (please select date/time)

☐ _____ *(date/time will be specified)*
☐ _____ *(date/time will be specified)*

Individual Interview

☐ _____ *(date/time will be specified)*
☐ _____ *(date/time will be specified)*

Just ASK will ensure accommodations are available at focus groups & interviews. Please let us know what services you request (*check all that apply*):

☐ Transportation
☐ Child care Number of children and ages: _____
☐ ASL interpreter
☐ Other language interpreter Please specify: _____
☐ Alternate format for materials (*check one*)
  ☐ Braille

- ☐ Large print
- ☐ Other Please specify: _____

☐ Alternate Personal Care Attendant

Please specify needs:_____

☐ I will have my own Personal Care Attendant

☐ Dietary concerns for snacks. Please specify:_____

☐ Other Please specify: _____

Just ASK Needs Assessment Plan

Appendix E

Focus Group Confidentiality Statement

The following statements about confidentiality will be the guidance for the operation of the focus group. Safety of the focus group participants is of primary importance.

1. Stephanie, Jehan and Ann will keep your information private. If you say you will hurt someone or yourself, we cannot keep that private, but everything else will be kept private. Stephanie, Jehan and Ann are not mandatory reporters.

2. Although the moderators are the only members of the group who are bound by confidentiality requirements, we strongly encourage all members of the group to keep the information shared and discussed during the session confidential based on mutual trust, safety concerns and respect for other members of the group.

3. Sometimes it is hard to share your story or ask a question about your situation because you are afraid of being reported to a watchguard agency. If you are uncomfortable talking about yourself, we suggest that you begin your remarks with a statement similar to: "A friend of mine is having this problem." or "Suppose there were a situation like this: . . ." Then share the story or ask the question. Stephanie, Jehan and Ann are not mandatory reporters.

4. If you chose to privately discuss your situation with a moderator, we want you to know that private discussions with moderators will be held confidential.

5. All information presented and discussed by the group will be used only to plan better services for survivors.

6. No information that can personally identify you will be used in planning; however, we may identify your town in the planning process.

Just ASK Needs Assessment Plan

Appendix F

Confidentiality Agreement for Personal Care Attendants

Focus group participants are entitled to confidential space. I will protect the privacy of all participants by not sharing any information about who attended the group or what was said.

_____
(Signature)

_____
(Printed Name)

_____
(Date)