Partnering to Increase Service Access: a Project of Advocacy, Inc. and SafePlace, Austin, Texas

Needs Assessment Plan Part I: Deaf Services Plan

Table of Contents

- 1. Introduction
- 2. Vision and Mission Statement
- 3. Perspective
- 4. Goals of Needs Assessment
- 5. Collection of Needs Assessment Data
 - a. Overview
 - b. Data Collection Sites
 - c. Sources of Needs Assessment Information Year I
 - d. Location of Focus Groups and Interviews
 - e. Number of Focus Groups
 - f. Number of Individual Interviews
- 6. Accessibility
- 7. Outreach and Participant Recruitment
- 8. Compensation, Confidentiality, Safety and Benefits
- 9. Consent Protocols
- 10. Moderator and Interviewer Training
- 11. Estimated Timeline for Completing Needs Assessment Activities
- 12. Focus Group and Interview Questions
 - a. Appendix A Informed Consent Protocol
 - b. Appendix B Focus Group and Interview Questions

Partnering to Increase Service Access: A Project of Advocacy, Inc. and SafePlace, Austin, Texas

Needs Assessment Part I: Deaf Services Plan

1. Introduction

The "Partnering to Increase Service Access" initiative was funded in 2006 by the U.S. Department of Justice, Office on Violence Against Women through an Education and Technical Assistance Grant to End Violence Against Women with Disabilities grant program. The collaborative partners involved in this project are Advocacy, Inc. (AI) and SafePlace. AI is the Texas protection and advocacy organization and SafePlace is a local domestic violence and sexual assault service provider. AI has regional or satellite offices in 14 communities across Texas. Both SafePlace and AI's state offices are located in Austin, Texas.

During the first year of the project, the partners are conducting planning activities and will implement the following needs assessment activities:

- In-depth assessment of the partners overlapping areas of interest, presence, and influence related to abuse and violence against people with disabilities and individuals who are D/deaf.
- Conducting a thorough exploration of the opportunities for coordination between the two
 organizations in serving domestic/sexual violence survivors who have disabilities and/or are
 D/deaf.
- Gathering community input on the actual and perceived barriers to people with disabilities and D/deaf individuals accessing needed supports and services related to domestic violence and sexual assault.

SafePlace has initiated the expansion of domestic violence and sexual assault services to the D/deaf community through establishment of a Deaf Services Program. The primary goal of this program is to increase the availability of domestic violence and sexual assault services to individuals in Austin's D/deaf community. Through the needs assessment activities, SafePlace program staff will have the opportunity to more clearly identify the barriers, gaps, and needs for domestic violence and sexual assault services within the D/deaf community.

The partners are prepared to conduct needs assessment activities which include: 1) an internal survey of the gaps and needs within SafePlace in coordinating services and responding to abuse survivors who are D/deaf or have disabilities, and 2) an external assessment of needs through individual interviews and focus groups with key informants including D/deaf Services staff and members of the D/deaf community. Using the information from this need's assessment, the Texas collaborative partners will propose and implement a strategic plan to address the identified needs and barriers.

2. Vision and Mission Statement

The vision of the "Partnering to Increase Service Access" project is that people with disabilities and people who are D/deaf will live as they choose, free from all forms of violence and abuse. To reflect this vision, the following guiding statement was adopted by the collaboration:

We envision that people who are D/deaf or have disabilities live free from domestic and sexual violence and other forms of abuse.*

*This statement does not reflect the world as it is, but rather our values and beliefs about the world as it should be, and our work leads us closer to this...our dream. Our work is about believing in the vision and living the dream....

The partnering agencies also believe that we can work to advance change within our own agencies and communities to ensure that disability and victim services are available to all members of the disability and D/deaf communities. To guide our planning, assessment and implementation activities, the partnering agencies adopted the following mission statement:

To advance policies, practices and services that ensure culturally aware, sensitive and fully accessible responses to members of the disability and D/deaf communities regarding domestic, caregiver and sexual violence.

3. Perspective

For the purposes of this plan and our work, *disability* is a term used to refer to people who experience difficulties or barriers that interfere significantly with communication, intellectual or physical development, mental health, mobility, cognition, perception, and sensory experiences (which may include individuals who are Deaf or have hearing loss or people who are blind or have low vision). Disability can also include people who have conditions that impact daily living yet are not readily apparent to the public (e.g., a heart condition or diabetes).

Many people who are Deaf do not identify as having a disability, but instead identify as members of a culture or community whose primary language is a form of sign language. In respect, we refer to people who are D/deaf with a capital "D" to acknowledge that primary identity, culture and sense of community and with a lower case "d" to represent those persons who identify as having a disability. We will spell D/deaf in this way to be inclusive. We are committed to include the Deaf community and both D/deaf perspectives in our collaborative work because historically, individuals who are D/deaf do not have ready access to domestic violence and rape crisis services due to communication barriers.

4. Overall Goals of Our Work

The following information includes the goals of our work together on this project:

a.) As partnering agencies, AI and SafePlace will focus activities in the city of Austin / Travis County in which we will conduct a needs assessment and pilot activities detailed in a strategic plan based on the needs assessment findings.

Results of Part I of this needs assessment will help us identify opportunities to build partnerships with Austin based deaf / disability service and advocacy agencies and expand the resources and supports available to abuse survivors who are D/deaf or have disabilities in our own organizations. The needs assessment and subsequent strategic plan will help us build the Deaf Services program within SafePlace and identify and institutionalize strategies to ensure that SafePlace is D/deaf friendly.

Al and SafePlace are currently in the process of determining other facets of information gathering to be detailed in Part II of this needs assessment plan. Part II activities will be designed to help Al and SafePlace initiate a plan to 1) coordinate services for survivors who have disabilities or who are D/deaf and 2) identify needs and better prepare Al community integration and intake staff to screen for, respond to and make referrals related to domestic/sexual violence, and 3) identify strategies to conduct targeted outreach to people with disabilities, make accessibility improvements and institutionalize new protocols within SafePlace to ensure abuse survivors with disabilities have a welcoming and accessible experience at SafePlace.

b.) As a result of the Needs Assessment Part I and Part II, the collaboration may identify additional agencies who want to be engaged in this work by making changes within their own organizations and who want to collaborate during Year's II and III of this project. We will be working closely with Vera and OVW staff to determine if SafePlace and AI will be inviting these agencies to engage in this project.

5. Needs Assessment Goals

This project allows us to build the Deaf Services program within SafePlace by identifying what is needed to increase the agency's capacity to conduct outreach and provide domestic/sexual violence services that are D/deaf friendly. This project is multifaceted and Part II of the needs assessment plan is still in development but will allow AI and SafePlace to build and expand upon their previous work together. As a result of this collaboration and needs assessment and implementation activities, AI and SafePlace are committed to the following goals:

- To identify the needs within the D/deaf community related to domestic violence, sexual assault, and stalking.
- To identify the service gaps and barriers experienced by D/deaf service providers when working with D/deaf survivors of domestic violence or sexual assault.
- To explore the role of D/deaf service providers in responding to survivors of domestic violence and sexual assault they serve.
- To identify strategies to enhance outreach to D/deaf community members to increase their access to domestic violence and sexual assault services.
- To identify needs and increase the capacity of SafePlace staff to provide D/deaf friendly domestic violence and sexual assault services.
- Identify opportunities to increase service referrals between D/deaf service providers and SafePlace.

6. Needs Assessment Information

Overview

The needs assessment will focus on identifying the service and support needs and expanding the resources available to domestic and sexual violence survivors who are D/deaf. To accomplish this initiative, information will be gathered from a variety of sources but most directly from focus groups or key informant interviews. Staff from the two partnering organizations will co-facilitate the focus groups.

Sources of Needs Assessment Information

Project staff will recruit participant's representative of the following target groups:

Individuals

- Community members who are D/deaf
- Abuse survivors who are D/deaf

Victim Services

- SafePlace staff
- SANE nurses and hospital accompaniment staff and volunteers

Other Provider Agencies

• Deaf services agency staff

Focus groups and interviews with key informants listed above will be the mainstay in forming an accurate picture of the gaps and barriers in existing services and resources, along with outreach, training and technical assistance needs. From this information, project staff will look within their own organizations to make improvements and identify opportunities to formalize coordination of services between the two partnering agencies.

Number of Focus Groups

- Community members who are D/deaf Three [3] focus groups
- SANE nurses and sexual assault hospital accompaniment providers One [1] focus group
- SafePlace staff Five to seven [5-7] focus groups
 - o 2-3 non-residential services (counseling, hospital advocacy, intake, legal services)
 - o 2-3 residential services (transitional housing, shelter)
 - o 1 administration
- *D/deaf services providers/organizations* Two [2] focus groups

Number of Individual Interviews

- SafePlace Staff Five (5) staff interviews (Directors of direct service programs for adult survivors)
- Survivors who are D/deaf Up to ten [10] interviews

7. Location of Focus Groups and Interviews

The focus groups and interviews will be conducted at the offices of SafePlace, AI, or in a neutral site such as a public library. All focus groups will be conducted in locations that are fully accessible to persons who are D/deaf or have disabilities.

Individual interviews will take place in a location that is convenient, accessible and private. If there are health issues that prevent an individual from leaving their home, interviews will be conducted by telephone. Interviews with staff members of AI from will be conducted by telephone. Overall, 11-13 focus groups and approximately 15 interviews with key informants will be conducted in the course of the needs assessment.

8. Accessibility

All sites where focus groups and individual interviews will be conducted will be accessible. Both partners are fully committed to ensuring access to all activities outlined in this document to people who are D/deaf and people with a broad range of disabilities. Accessible parking will be available and meeting sites will be accessible by public transportation. When participants do not have means to access transportation, bus passes or vouchers for accessible taxi services will be provided. Sites will also be accessible to people who use mobility devices and project staff will ensure that walkways, hallways, doors and entryways are inspected and free of any obstacles prior to meetings. Sign language and other interpreter services, as well as other identified accessibility accommodations will be provided upon request. As the lead agency, SafePlace will pay for these accommodations. Potential participants of focus groups and interviews will be asked during screening to communicate their accessibility needs in advance. Participants will be reimbursed for childcare services if needed.

9. Outreach and Participant Recruitment

We expect to engage D/deaf / disability service organizations and to expand the network of providers available for serving survivors of domestic and sexual violence with who are D/deaf or have disabilities as well as identifying possible future project partners.

SafePlace staff: Focus groups will be scheduled and conducted with SafePlace staff providing direct services including counselors, shelter staff, hotline/intake workers, advocates and transitional housing staff. The staff members will be invited to participate by their Program Director as well as project staff attending program team meetings and posting information in the agency's electronic staff newsletter and bulletin boards. Individual interviews will be conducted with Program Directors of direct service programs that primarily serve adult survivors (e.g., Shelter, Transitional Housing, Counseling).

Deaf services providers: Recruitment from D/deaf service providers will involve contacting a set of specific organizations that regularly provide services to or have contact with people in the Austin D/deaf communities. Those organizations are Travis County Services for the Deaf and Hard of Hearing, Communication Services for the Deaf (CSD), Vaughn House, Communication by Hand, and Texas Department of Assistive and Rehabilitation Services (DARS). Each focus group will include representatives from the various agencies.

Community members who are D/deaf: People who are D/deaf will be recruited through contact with local Deaf service agencies and other community groups that have contact with people in the Austin area D/deaf communities; Austin Deaf Club, Senior Citizens of Austin and listservs frequented by Austin community members who are D/deaf in a similar manner to how individuals with disabilities are recruited (e.g., flyers, contacting agencies, etc.).

Survivors: Recruitment of survivors of domestic, sexual and caregiver violence will occur from within current and former clients of SafePlace who are D/deaf or have disabilities. An information letter about the project and interviews will be provided to SafePlace counselors and advocates to be shared with clients who self-identify as being D/deaf or having disabilities.

The recruitment emails, letters and flyers will outline the purpose, benefits and voluntary nature of the interviews and focus groups as well as provide an invitation to participate. The materials will include contact information for project staff following up with individuals who want to participate and to determine the access needs of all participants.

10. Stipends, Confidentiality, Safety and Benefits

Stipend

Participants from the D/deaf or disability communities will receive a stipend for their participation. A stipend will be given to individual participants at the close of each focus group. Women who have survived abuse and either are D/deaf or have disabilities who participate in an individual interview or focus group will receive a stipend as approved in the project budget. The service providers who participate in a focus group will receive will also receive a small stipend. Snacks or beverages will be provided to focus group participants based upon when the group is held.

Confidentiality

Every effort will be made to maintain confidentiality within the limits of the law, throughout the focus group and interview processes -- although confidentiality can never be absolutely guaranteed. Participants will be informed that no personally identifying information will be recorded unless the participant gives us signed consent to contact them with follow-up questions. Even in those cases, contact information will not be kept with the notes or answers to focus group or interview questions.

Two exceptions to this confidentiality will be when current abuse is disclosed and if a participant discloses a plan to harm herself/himself or someone else. In this case, Texas is a mandatory reporting state and this information must be reported to Adult Protective Services. Should a report to protective services be made, the facilitator will make every effort to involve the participant in that process and will provide step-by-step information about what is likely to happen after a report is made.

Participants will be asked to maintain each other's confidentiality as participants. This includes not disclosing another person's name, their participation, or any of their comments or answers to the focus group questions. The data/information gathered will be stored with no personally identifiable information attached unless the individual participant has given us signed consent to contact her or him with follow-up questions. Even this information will be kept in a file separate from the needs assessment information

gathered. All signed consent forms will be kept in a locked file cabinet and only project staff will be able to access these forms as needed. Information gained from the interviews and focus groups will be shared with project team members. No personally identifiable information about an individual person will be shared.

Results of the focus groups and interviews will be discussed as general thoughts, ideas, patterns and themes. If the project staff use any examples that illustrate findings, those examples will be completely anonymous and will not identify any one participant.

Safety

Physical and psychological safety is a primary consideration for participants willing to talk about domestic and sexual violence. Focus group facilitators and interviewers will make strong efforts to create a safe environment for these conversations. Participants will also be asked about needs in relation to accessing support and services related to abuse and violence. These personal topics could bring up memories and intense feelings in the person that requires immediate support or access to resources. A safe person will be available to talk with any participant as needed.

Participants will be given referral resources, including contact information for crisis hotlines (SafePlace, National Domestic Violence Hotline, Rape Abuse and Incest National Network), local free or low cost counseling services, and intake for advocacy and victim services (Advocacy, Inc. and SafePlace). In addition, participants will be given information about how to contact the interviewer or focus group moderators if they have additional questions or information they want to share after the focus group or individual interview. Every effort will be made to minimize the risks for all participants, and they will be reminded at regular intervals that they can withdraw from the group or interview at any time.

Potential Benefits to Participants

Focus group and individual interview participants will share information that can ultimately help increase the personal safety of people with disabilities and D/deaf individuals and to improve domestic violence, sexual assault and disability-related services for members of these two communities. We can identify no reliable individual benefits to the focus group or individual interview participants.

11. Consent Protocols

Informed Consent

Individuals with disabilities and D/deaf community members participating in needs assessment activities will be given the option of a consent form being sent to their home to thoroughly review the information and make a more fully informed decision about participating in the focus group or individual interview. Each person will also be given the option of reviewing the consent form in-person just before the focus group, especially if the individual identifies that it is not safe to send the consent form in advance.

The document is written so that each sentence is separate (rather than in paragraph format) to make the form easier to read and process for individuals who have limited reading skills. For informed consent from participants with cognitive, intellectual or developmental disabilities will be obtained by reading a detailed

consent form aloud. Participants will be verbally informed that we are going to talk about things related to abuse and violence and that they may feel uncomfortable or upset. If this happens, participants will be informed that they can leave the room and/or talk to a 'safe' person if they want to. The facilitator/moderator or interviewer will point out the safe person during the focus group or interview. Participants will also be given information about mandatory reporting so that any disclosure of abuse will be a fully informed choice. Any persons disclosing will have the option of making their own report and sitting in with the project staff while their report is being made.

Participants will first be asked if they have any questions on the consent form that they want to know or talk more about. Participants will be told that they have a choice and the right to decide whether or not they want to participate and that if they decide not to participate, they will still be given the compensation. Participants will also be told that they have the right to stop anytime and that they can 'pass' on any question they don't want to answer.

The voluntary consent to participate form will be read at the beginning of all focus groups and individual interviews. Individuals who have not yet signed their consent form will do so, and consent forms will be gathered before the focus group or interview activities are initiated. See Appendix A for the voluntary consent to participate form.

Other Consent Process

Professional service providers and staff of AI and SafePlace will be invited to participate by an invitation letter or flyer. Any agency staff member who signs up for a focus group or interview will be reminded that participation is voluntary and that she/he has the right to pass on any question and to stop their participation at any time.

To preserve agency representative anonymity within each agency, consent documentation will not be gathered. Voluntary consent will be evidenced when a professional service provider requests participation and then shows up for a focus group or interview after reading an information flyer that includes all informed consent information detailed in the previous consent section of this document. Focus group participants will also be asked to preserve confidentiality about others who are participating and what is said and discussed by others during the focus groups or interviews.

12. Moderator and Interviewer Training

Moderator and interviewer training occurred on August 16, 2007 in Austin, Texas at SafePlace. The training was coordinated by Vera Institute of Justice and conducted by Mary Oshwald with the Regional Research Institute of Portland State University. Topics included types of focus group questions, steps for conducting focus groups, process guidelines, facilitator/moderator responsibilities, expecting the unexpected, de-briefing, strategies for recording data, important facilitator/moderator characteristics, and recording and storing information collected and data organization and analysis. The purpose of the training was to obtain information on best practices in planning, moderating and documenting focus groups so that the Texas collaboration can develop a consistent approach for facilitation of focus groups.

13. Estimated Timeline for Completing Needs Assessment Activities

The information gathered in this project's focus groups and individual interviews will be essential to the development of a strategic plan that accurately reflects the resources, barriers and opportunities for increasing accessibility to victim and disability services and safety options for people who are D/deaf or have disabilities.

Workgroups were tasked with developing needs assessment goals that represented each of the partner agencies' internal and community based self-interests. These goals were presented and reviewed by the full project team and a final set of goals were selected which are summarized earlier in this document. The focus group and interview questions were developed according to these goals (see p. 2-3).

Following selection of our goals, we outlined a plan for completion of the various activities necessary for conducting the focus groups and individual interviews. A strategic plan will be developed, reviewed by Vera Institute of Justice staff and proposed to OVW for approval based on results of the focus groups and interviews. The approved plan will reflect the partner's recommendations and will guide the remaining project activities. The following chart details our estimated timeline for completing the needs assessment activities.

Month	Activity and Milestones
June 2007	Develop needs assessment goals representing each partner agencies' goals and interests community based self-interests.
July - August 2007	Select teams to develop needs assessment goals. Draft protocol for conducting needs assessment activities and develop focus group and interview questions based on needs assessment goals.
	Participate in training by Vera Associates on Best Practices in Moderating Focus Groups.
September – November 2007	Develop the needs assessment plan and submit to Vera Institute of Justice and OVW for approval.
	Finalize development of informed consent documents and stipend plan for participants.
	Attend OVW/Vera all-site meeting in St. Louis, Missouri.
December 2007 – January, 2008	Pending OVW approval of the needs assessment plan – recruit participants and provide informed consent information.
January 2007 – April 2008	Implement needs assessment protocol; conduct focus groups and individual interviews.
May - June 2008	Organize and compile needs assessment data. Develop findings and integrate with other sources of information (census, agency self-interests, priority setting by collaboration, etc.).
	Submit final report on needs assessment to Vera and OVW for approval. OVW will respond within 5 days of receipt of this report either by email or telephone or by 'no

reponse' which will indicate approval of the report as submitted.
Develop strategic plan based on results of needs assessment data. Submit strategic plan to Vera Institute of Justice staff for review/feedback and then submit to OVW for approval.

14. Focus Group and Interview Questions

See Appendix B for focus group and interview questions.

APPENDIX A

Consent for Participation in a Focus Group or Interview

Date: _____ Focus group or Interview (circle one) participant

I _______ (participant name) agree to be part of a focus group or individual interview and talk about ways that domestic violence and sexual assault services can be improved or made better with people who are D/deaf or people who have disabilities in Austin, Texas.

SafePlace and Advocacy, Inc. also want to make their services better and more available to any person with a disability or who is D/deaf by finding out what they could do differently.

I will be part of this project by answering questions in a small group of people (focus group) or by talking individually with someone from SafePlace or AI.

I know I will be answering questions about domestic, caregiver and sexual abuse.

I am volunteering to participate in the focus group and interview and will be answering these questions.

I know that if I talk about abuse that is personally happening to me, the focus group leader may need to call Adult Protective Services (APS) and let them know about the abuse.

I can also make a report to APS about the abuse myself by calling the APS hotline at 1-800-252-5400.

If Adult Protective Services staff investigates or talks with me about the abuse-- they may offer me services. I have the right to refuse or accept those services or help. I understand that this is the law in Texas.

I can change my mind at any time about participating. I can also say "pass" if there is a question I do not want to answer. Even after the focus group or the interview starts, I can decide at any time to stop and leave.

If I decide to leave or 'pass' on any question, I will still receive compensation for my participation.

If I do stop answering questions or decide to leave, I can talk to a safe person at the focus group or interview. I can also still call Advocacy, Inc. or SafePlace if I need help with abuse. I also know that participation in a focus group or interview does not mean that I am a client of Advocacy, Inc. or SafePlace.

It is OK with me that a project person from SafePlace or AI will be taking notes on what everyone is talking about and the answers that everyone is giving. This person is taking notes to help project staff remember the things we talked about until they can write a report with all of the information from everyone. After this report is written, the notes will be shredded.

After the focus group / interview is over, SafePlace and Advocacy, Inc. are hoping to know more about what they can do to better serve people who are D/deaf or have disabilities and who have been abused in Austin, Texas.

I know the information I give will be put together with information from other people's comments and all of my comments and answers will be confidential.

This means that no one will be told that I gave any of the specific comments / information and no one will be told that I participated in the focus group or that I was interviewed.

I agree that I will keep confidential and not share names of individuals who participate in focus groups or information that other people who are in the focus groups give by not telling anyone after leaving the focus group.

I know that SafePlace cannot guarantee that other people in the focus group will keep my name private, but everyone is being asked to keep each other's names private.

I can ask to meet with someone (a safe person) before, during, or after the focus group or interview to get support and information about where to find more support about anything hurtful or confusing that I thought about or felt during the focus group or interview.

If I have any worries or questions about the focus group or interview I can call _____

_____ Or write by email to: ______

I _______ (my name) agree to be part of this project called "Partnering to Increase Service Access" to help identify how SafePlace and Advocacy, Inc., can improve services in Austin for people with disabilities and people who are D/deaf about issues and needs about domestic, caregiver, and sexual violence and abuse.

Signature ______ (participant)

Date _____

I agree for the facilitators to contact me at the following telephone number or email address after the focus group or interview if they have any other questions.

Telephone: ______

Email address: _____

APPENDIX B

Deaf Service Providers Focus Group Questions

SafePlace Services

1. What do D/deaf people need to feel welcome in a service organization?

Possible Prompts: What policies or procedures could be put in place to support people to feel welcome?

- 2. What barriers are there to the D/deaf community accessing domestic violence and rape crisis services?
- 3. What can hearing organizations do to tell the D/deaf community about available domestic/sexual violence services?

Provider / Service Agencies

4. If a client told you that their partner or spouse was being abusive, what would you do?

Possible Prompts: What is already working well in your agency when clients report abuse? What do you think is needed to do better? Is there training or technical assistance you need in order to respond?

Collaboration

5. How do you see domestic violence, sexual assault and D/deaf service providers working together to respond to abuse against D/deaf people?

Possible Prompts: What type of service coordination do you think needs to be developed? Would your agency be interested in talking in more depth about how changes could be made for recognizing and responding to abuse with Deaf clients?

Outreach

6. Sometimes people who are D/deaf who are experiencing domestic violence, rape or abuse do not reach out for help. Why do you think this is?

Possible Prompts: What would help people reach out for help if they've been abused? What training or policies/procedures could support you/other staff to talk about suspicions that you might have that a client has been abused? What training or policies/procedures could support you/other staff to respond to clients who disclose abuse? What ideas do you have for reducing barriers? What do you think would support D/deaf individuals in requesting support/services related to abuse?

7. What advice do you have for reaching out to the D/deaf community about domestic violence or sexual abuse or rape? What about survivors of sexual abuse or rape?

Possible Prompts: Where and how should the outreach take place? What type of messages should be included? What types of messages would support D/deaf individuals who have been sexually abused in asking for help?

Vision

8. What is your vision for how D/deaf services providers and hearing organization can work better together?

D/deaf Community Members Focus Group Questions

SafePlace Services:

1. What are your thoughts about why Deaf people may not reach out for help when they've been abused?

Possible Prompts: What would help people reach out for help if they've been abused? How comfortable are you in talking about abuse?

2. What ideas do you have for reducing barriers to the D/deaf community accessing domestic violence and rape crisis services?

Possible Prompts: What do you think would support D/deaf individuals in requesting supports and services related to abuse? What would not be supportive?

3. What do you think D/deaf people need to feel welcome in a domestic violence or sexual assault agency?

Possible Prompts: What is your vision of the perfect service provider agency? *Deaf Service Agencies*

4. What are important things that service providers need to know about assisting D/deaf people who have been hurt by abuse?

Possible Prompts: What do providers need to do if a client discloses abuse? What should providers not do?

Confidentiality

5. Some Deaf participants will worry about confidentiality when seeking services from other D/deaf people. What can be done to ensure confidentiality?

Possible Prompts: Do you prefer services by someone D/deaf, hearing but sensitive to Deaf culture, or having the option of both?

Outreach

6. What advice do you have for service providers reaching out to the D/deaf community about domestic violence? What about sexual assault or rape?

Possible Prompts: What messages are important to include in the outreach? What can SafePlace do to tell the D/deaf community about available services? Sexual abuse specifically can be a sensitive topic in the d/Deaf community, how can the messages promote safety in coming forward about sexual abuse?

Vision

7. What is your vision for how SafePlace and D/deaf service providers can work together to meet the needs of the D/deaf community?

* This document is written English format. Yet, during facilitation of focus groups, the questions will be adapted by facilitators to be culturally sensitive and meet the communication needs of the participants.

SafePlace Staff Individual Interview Questions

1. In general, what have been your experiences in working with clients who are D/deaf?

Possible Prompts: What are we doing well? What are the strengths we can build on? What hasn't gone so well or is challenging? How do you think the challenges or any barriers could be addressed? What are the areas that could use more support? What have been your department's experiences in using interpreters (positive and problems)?

2. Are there some strategies that you've thought about in terms of how hearing staff can best work with D/deaf clients who prefer to work with a hearing staff member?

Possible Prompts: What type of technical assistance, consultation or training do staff in your department need to effectively work with Deaf clients? What types of changes do we need to make internally to best serve the Deaf community?

3. From your experience, how are Deaf or disability service agencies or systems responding to people who are D/deaf or have disabilities and are experiencing abuse/violence?

Possible Prompts: What are the problems you or clients have identified? How could service and system response be improved for people who have experienced abuse?

4. How do you see disability, deaf service and domestic violence / sexual assault agencies working together to address abuse against people with disabilities or who are D/deaf?

Possible Prompts: What has it been like for you when you (or staff in your department) have tried to link D/deaf clients to other community resources? What types of legal issues came up when working with D/deaf survivors or survivors with disabilities?* What type of collaboration or agreement with an advocacy agency could improve options for persons who are D/deaf or have disabilities?

5. What is the best practice approach SafePlace should adopt for coordination of services between Deaf Services and other direct service departments?

Possible Prompts: What do you need from the Deaf Services department to make our work successful with the Deaf community?

SafePlace Direct Service Staff Focus Group Questions

1. What are your thoughts about why people who are D/deaf may not reach out for help when they are abused?

Possible Prompts: What would help people reach out for help if they've been abused?

2. What are some of your experiences working with D/deaf clients? *

Follow up questions: What is working well when you serve D/deaf clients? What does not go so well? What have been your experiences in using interpreters (positive and problems)?

Possible Prompts: When do you feel strongest in working with D/deaf people? What barriers do you come up against? Are there any changes in the way we do things that might better support D/deaf clients? What improvements are needed to make sure services are more effective with clients who are D/deaf?

3. What has it been like when you've tried to link D/deaf clients to Deaf or disability related services in the community?

Possible Prompts: What are your ideas for improving services internally? If you could change one thing to improve services for clients who are D/deaf, what would that be? How could we improve coordination of services with deaf service organizations?

- 4. What have been the legal issues that came up in your work with D/deaf survivors?**
- 5. What do you think is most important for other agencies to know when helping survivors who are D/deaf and have been hurt by abuse?

Possible Prompts: How can other service providers improve their response to abuse against individuals who are D/deaf?

6. Are there any kinds of training or consultation that would support your own work with D/deaf clients? *

Possible Prompts: What types of changes do we need to make internally to best serve the Deaf community? Do you need information/training on different technology options for working with Deaf clients?

7. What is your vision for how we can better serve survivors who are D/deaf? *

Possible Prompts: What best practice approach should SafePlace adopt for coordination of services between Deaf Services and other direct service programs? Possible Prompts: What do you need from the Deaf Services department to make our work successful with the Deaf community?

*These questions will specifically be asked during the focus group with administrative staff.

** This question will be asked to assess needs for developing a Memorandum of Understanding between Advocacy, Inc. and SafePlace for cross-referrals and service coordination.

Survivors of Domestic or Sexual Violence or Stalking Individual Interview Questions

1. What are your thoughts about why people who are D/deaf may not reach out for help when they are abused?

Prompt: What can we do so that more of the D/deaf community will reach out for help when they are abused?

2. What are the important things that disability or deaf service providers need to know to help people hurt by abuse?

Possible Prompts: What would you want service providers to know about helping people hurt by abuse? What do you think service providers should do if they think someone is being abused? What could service providers do to better help someone who tells them about abuse? What should they not do?

3. What are the important things that domestic violence and rape crisis workers (hearing or Deaf) need to know to help people hurt by abuse?

Possible Prompts: How can SafePlace be more welcoming to D/deaf individuals?

4. What do you know about SafePlace?

Possible Prompts: How can SafePlace improve their services and be more welcoming to people who are D/deaf?

5. What was helpful about the domestic/sexual services you received?

Possible Prompts: Was there anything that was not helpful? If so, what would have made it better?

6. What advice do you have for other women who are D/deaf and are being hurt by abuse?

Follow up questions: What advice do you have for women who are D/deaf who decide to reach out for help? Do you have any advice for the person they reach out to?

Sexual Assault Nurse Examiner (SANE) and Hospital Advocates Focus Group Questions

1. What are your thoughts about why people with disabilities or who are D/deaf don't reach out for help when they experience rape or sexual assault?

Possible Prompts: What do you think might help?

2. What have been your experiences in working with D/deaf individuals or people with disabilities?

Possible Prompts: What went really well? What didn't go so well? What could be done to better support your work with people with disabilities or who are D/deaf? Do you have ideas for what could help to increase rapport (if necessary)?

3. What have been your experiences in working with sign language interpreters during exams?

Possible Prompts: How long do you usually have to wait for an interpreter? How could the process of a forensic interview be streamlined for a d/Deaf survivor when interpreters are needed? What organizations do you think could help streamline that process?

4. What is the protocol for conducting a forensic exam with a survivor who is D/deaf or has a disability? How do you determine if the survivor has a disability?

Possible Prompts: Is there anything you would like to change about the protocol to better support the survivor or your own work during the SANE?

5. What kinds of training or technical assistance would be useful related to working with survivors who have disabilities and D/deaf survivors?

Possible Prompts: Do you have contacts or relationships with disability or Deaf service providers?