

One Size Implications



A Publication of the
Sexual Assault Prevention Resource Center
The Washington Coalition of Sexual Assault Programs



ONE SIZE DOES NOT FIT ALL...

OVERVIEW

This tool is designed to assist sexual assault programs in evaluating their current service delivery structure and its ability to provide services to the diverse constituencies which exist within their community. Sexual assault services have been delivered in a variety of formats to diverse constituencies. Rape crisis centers started as grass roots initiatives focused on developing tools to assist individuals impacted by sexual assault as well educate their communities. Over time specific services emerged as best practices. These services were accessible to large segments of the populations and generally cost effective to provide. This process could be considered a de facto standardization of services

In 1994 the Washington State Sexual Assault Services Advisory Committee was convened. This committee consisted of rape crisis centers, victim service agencies, community members and sexual assault funding sources. The goal of the committee was to create “high quality and consistent service standards for victims of sexual abuse/assault, which include the availability of appropriate services for all victims in the state”¹. The committee developed a plan which became the basis for accreditation, the defining of core services and our current funding allocations. This constituted a formal standardization of services.



¹ Final Report, Washington State Sexual Assault Services Advisory Committee June 1995

BUT IT MAY FIT MOST

Over the past decade we have become more proficient in the provision of standard sexual assault services. A predictable but unintended consequence of any standardization process is that the services created will not work as well, if at all, for those who exist outside the norm. Providing a full complement of culturally relevant services is our next step in reaching the committee's original goal of providing appropriate sexual assault services for all victims throughout Washington state.

The challenge for the next decade is to evaluate:

what we're doing well...

and keep doing it

what we could do better...

and develop the partnerships necessary to do it better

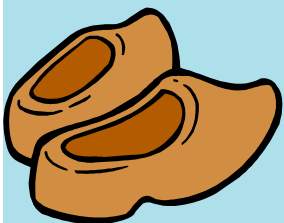


STANDARDIZATION OF SERVICES -

The concept of standardization is not specific to sexual assault services or even social services in general. Many of us are familiar with the concept of standardization from a manufacturing standpoint or with concepts such as grading on the bell (also known as normal) curve from an academic standpoint. These theories are inherent in our efforts to standardize services.

Let's use buying a pair of shoes as a metaphor.

A system has been created in which shoes come in sizes. There are standard sizes and standard widths. These sizes work well for most of us. In general most of us can find a shoe store which will provide the style and size of shoe we need. However, there are those of us whose feet are longer than most, or wider than most or perhaps we need a shoe of a specific color or for a specific task. Our choices become much more limited and our local shoe store may not have what we need. There may be many beautiful shoes but nothing may fit quite right. Some of us may be able to "make do" with a shoe that is close. Some of us may be able to add a foot pad or put an extra hole in the strap to make the shoe fit properly. But some of us may need to go to another shoe store or special order a pair.



A LITTLE THEORY

The fact we can't find the shoe we need is not an indictment on the shoe industry. We didn't purposely create shoe sizes to leave people out. The shoe industry had good intent, provide shoes for as many people as possible at a cost which they can afford. In fact the system designed the sizes to accommodate most people. Someone figured out what the average length and width of a human foot was and set up sizes based upon that. Someone also figured out which activities we generally needed shoes for and what colors most people wanted. They used the concept of normal distribution to take into accounts all this information to design shoes which work for most us. However, by definition the normal distribution is not inclusive of those who are not in the middle. The beauty of creating things which are effective for the norm is that we no longer have to make each individual item we can serve the needs of many with a single item. The tragedy is that **someone's need is always unmet if we only produce items which are based on the norm.**

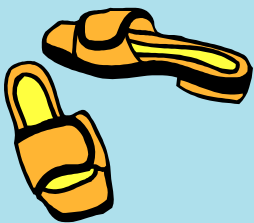
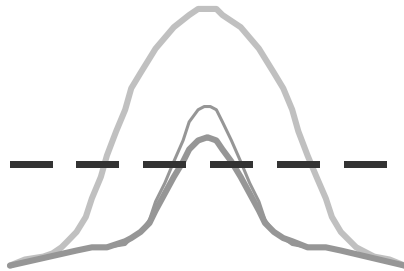


DEFINITIONS

Norm: A standard model or pattern for a group, generally the standard of achievement as represented by the median or average achievement of a large group

Bell Curve: A normal distribution is a mathematical concept. Normal distributions are a family of distributions that have the same general shape. They are symmetric with scores more concentrated in the middle than in the tails. Normal distributions are sometimes described as bell shaped or bell curves.

Examples of Bell Curves



WHY ARE THESE DEFINITIONS IMPORTANT?

Look at the diagram to the left and consider the definitions. The dotted line represents the delineation between whom the standardized service will work for and who it will not. Based on the size and shape of the bell curve it becomes apparent that although all bell curves leave out a certain percentage of people. Some are more inclusive than others. The challenge becomes how to design a system which serves the need of as many as possible and then to complement that system with individualized options for those with unmet needs.

In my explanation of the shoe metaphor I did not mention the fact that shoe companies good intent is profit driven. They want to make the process of providing shoes cost effective to make more money. We want to make the process of providing sexual assault services more cost effective in order to provide services to more survivors. The fact that we are not motivated by profit but by the greater goal of providing services to all survivors means we have a moral imperative to attempt to serve those who are not within the norm.

Hopefully this tool helps you begin the process of helping each survivor's foot find the appropriate shoe.



EVALUATE YOUR CURRENT SERVICE DELIVERY STRUCTURE

Worksheet 1

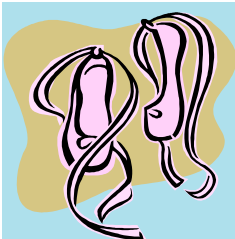
Step 1: Start in column one in each box list and describe a current service

Step 2: Move across the sheet in rows and look and evaluate for each service you have listed: the goal of that service, the populations it was designed to address, the unintended consequences and finally the efficacy.

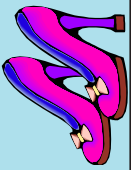
Notes:

Unintentional consequences are those things you didn't mean to happen but have been outcomes of your service, they can be positive and negative.

Efficacy is specifically looking at how effective you have been at reaching the goals with your target populations. The service may have been accomplished things you didn't plan on...but now we want to look at its original goals and targets.



Description of Service: A brief description of the service including the delivery method.	Goal/Intent of Service: What issue(s) was this service designed specifically & the desired outcome?	Target Population: This service was designed to meet the needs of which populations?	Unintentional Outcomes: What have been unexpected outcomes (+ and -) in delivering this service?	Efficacy: Has this service been effective in attaining its goals/intents in the target population?



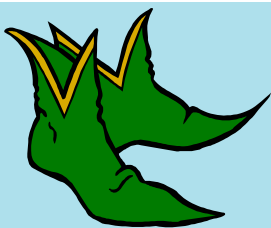
ACCESSING YOUR SERVICE POPULATION

Worksheet 2

Step 1: Review worksheet one, particularly the shaded columns. These two columns together should help you determine which populations are currently receiving effective service. List these in column one

Step 2: Find out the demographics of your service area. What communities and populations are represented. It's helpful to look at use formal estimates (census data) and informal estimates (interviewing social service providers in your area) to be as inclusive as possible.

Step 3. Compare columns one and two. Which populations in column two are not represented in column one. List them in column three. These are the populations that are likely to be underserved in your region.



IDENTIFYING NEEDS, RESOURCES, AND PARTNERS

Worksheet 3

Step 1: Transfer the populations listed in column three of the last worksheet into column 1. Now we can start to figure out a service delivery plan for these populations

Step 2: Move across the sheet in rows and look and evaluate for each population you have listed what resources can be obtained or reallocated in order to provide equity amongst the populations served. (staff time, space, funding etc.) and what agencies and/or individuals are currently working with population.

Step 3. Prioritize. Start with number one and give each populations a priority. Every underserved population is important but every journey starts with one step.

Step 4. This worksheet will have helped you identify some communities in which to collaborate, the resources you have to contribute to those collaboration and your possible partners. The next step and the most important step is to start with the community you have prioritized as number one a to convene a program planning process. Pages 14 & 15 list possible topics and suggestions for agenda items for an initial planning meeting.



Underserved Populations in Your Service: Insert information from in worksheet one	Identify Resources to be Allocated: What resources can be obtained or reallocated in order to provide equity amongst the populations served.	Identify Agencies/Individuals Currently Working with Populations: To leverage strengths, it's best to work with agencies currently investing resources.	Prioritize in which community you would like to begin



PLANNING PROCESS

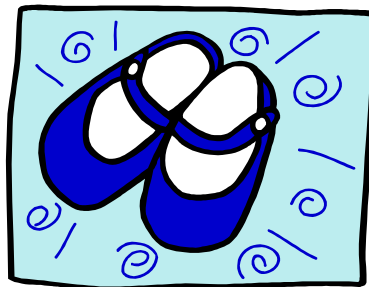
This is a list of questions/topics that would need to be discussed in a program design meeting. Ideally, this meeting should include all stakeholders (individuals who are part of the underserved populations, as well as service providers):

- 1. Define the community*
- 2. Is there a general consensus that there is a need for services in this community?*
- 3. How does the need for services manifest itself in this community?*
- 4. What would be our goal in providing services?*
- 5. Is there an agency that would be identified as the most appropriate lead agency? Do they have the capacity to develop and implement a new/enhanced service?*
- 6. What agency/individuals would be most appropriate to include in the program development process?*
- 7. Do these agencies/individuals have the resources to contribute to the process? If so, what are they?*
- 8. Is there a multidisciplinary workgroup of individuals that can commit to participating in the design process?*



CONCLUSION

This goal of this publication has been to provide a simple tool to determine which populations may be underserved in your community and to identify community specific needs, resources and partners that can be utilized to improve service delivery to these populations. Partnerships and collaborations are the fundamental to this process. Almost everyone has had the experience of wearing a pair of shoes that didn't right and can remember how difficult it was to walk in those shoes. Hopefully we can all work together expand our shoe selection so that every survivor has the right shoes to wear on their journey to healing.



Lydia Guy
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