

Pine Ridge/Kyle Community Resource Assessment Analysis
June 11, 2014

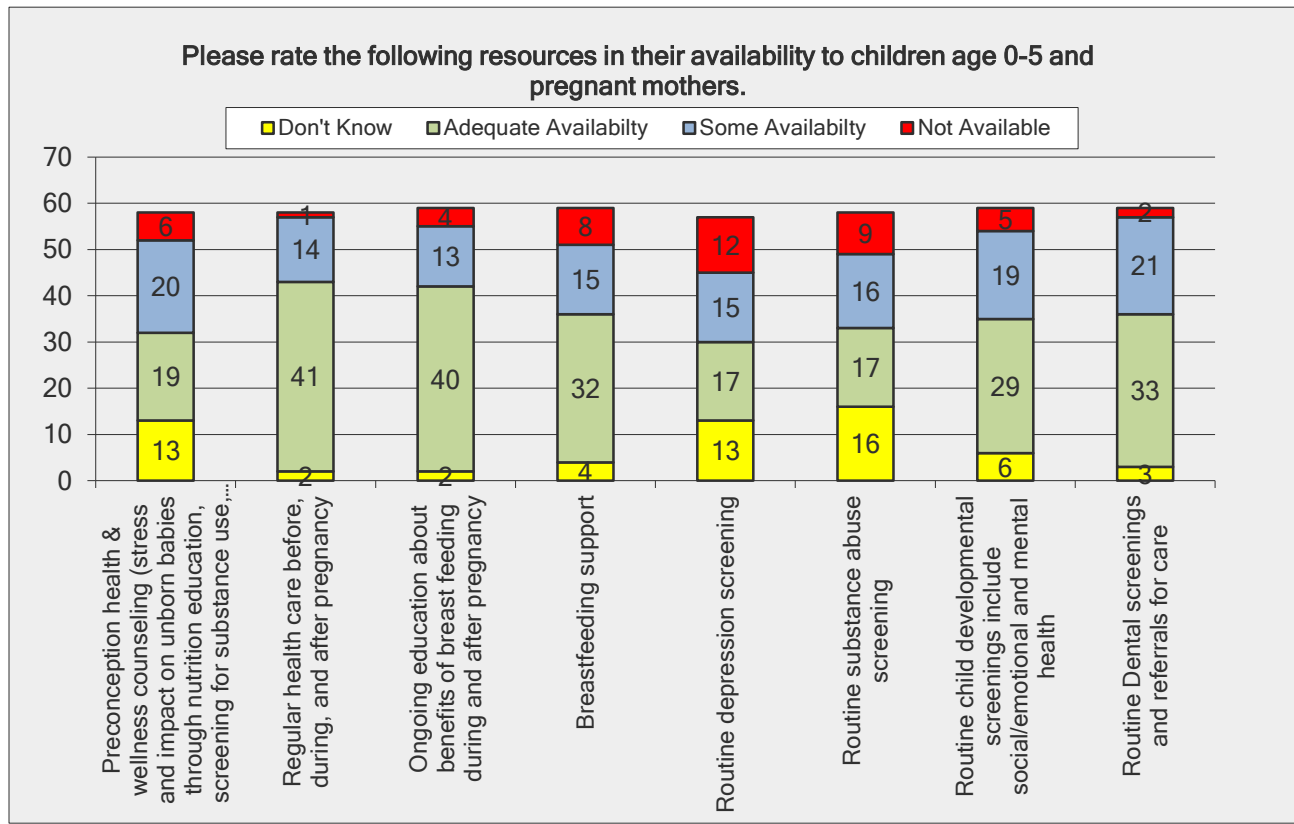
The South Dakota Head Start Association, through contract with the State of SD Department of Health, constructed a survey to assess the resources available to children ages 0-5 and their families, and to determine the importance of resources.

The survey included Pine Ridge and Kyle, one of the areas served by the Bright Start Home Visiting Program. The survey was presented during the Community Resource group's quarterly meeting last March. The following entities were represented: Oglala Sioux Tribe, OLC Head Start/Early Head Start, Indian Health Services (various divisions), Delta Dental, SDSU Extension, WIC, Shannon County Schools, Sanford Safe Passage, Baby FACE, Healthy Families America, Circle of Smiles, University of CO, Pine Ridge Pediatrics, and Bright Start.

There were 62 responses, both paper and through the online link received by the SDHSA office. Most of the respondents answered all questions, many adding additional comments.

The survey was divided into four sections: Health, Family Resources, Mental Health Services, and Pre-School. This analysis will look at each area of questions, using graphs and narrative, and end with a final summation. Findings will be discussed at a Post-Survey Meeting to allow comments and discussions for using the results to address needs identified by the survey.

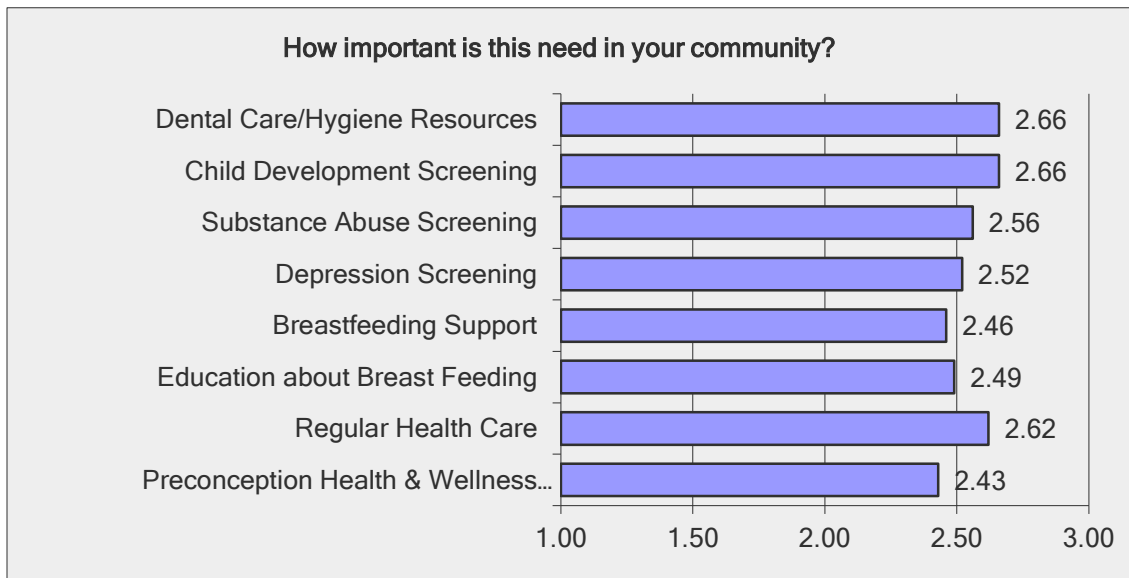
HEALTH



Adequate & Some Availability	39 67%	55 94%	53 90%	47 80%	32 55%	33 56%	48 82%	54 92%
Not Avail. or Don't Know	19 33%	3 5%	6 11%	12 21%	25 43%	25 43%	11 19%	5 9%

The above graph shows the compiled ratings for all questions in this section. The table below the graph combines two ratings each. The top row shows resource availability while the bottom row shows a lack of the resource or knowledge of it. It would appear that most of these resources are available, with all above 50% and areas in green showing high availability. The yellow highlighted sections for depression screening and substance abuse screening should be cause for concern with over 40% ranking the resource as non-existent or they are not aware of it.

Health (cont.)



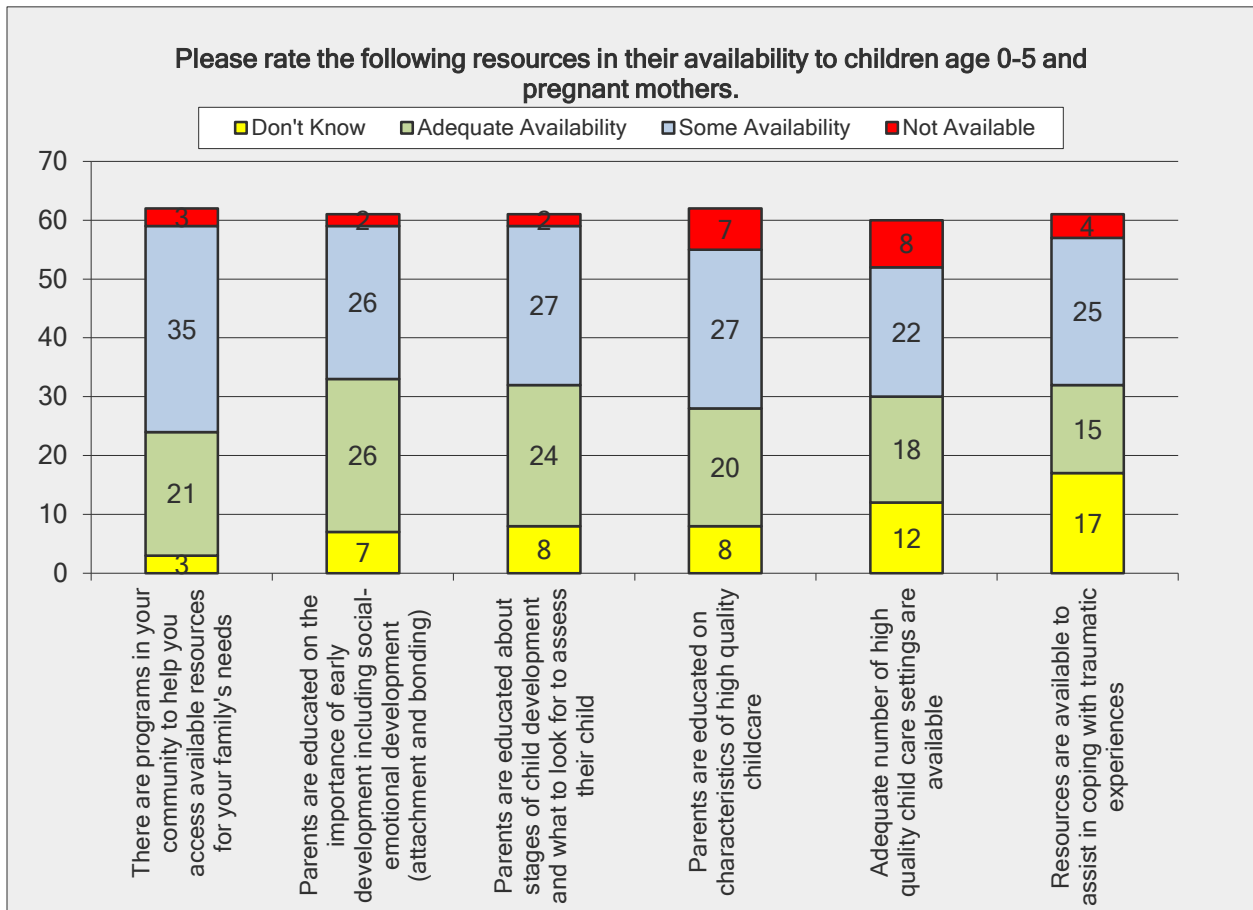
Those taking the survey were asked to rate the importance of needs in their community.

The questioned needs were ranked on a three-point scale –Not Important (1), Important (2), and Very Important (3). The numbers represent an average of the rankings of all respondents.

As this graph shows, all resources were ranked above important (2.0), the highest being Dental care and Child Development Screening. Regular Health Care ranked third in importance for those who completed the survey.

Those items ranked as the least important of these needs are Preconception Health & Wellness, Breastfeeding Support, and Education about Breast Feeding. All of these averaged less than 2.5 on the scale.

FAMILY RESOURCES

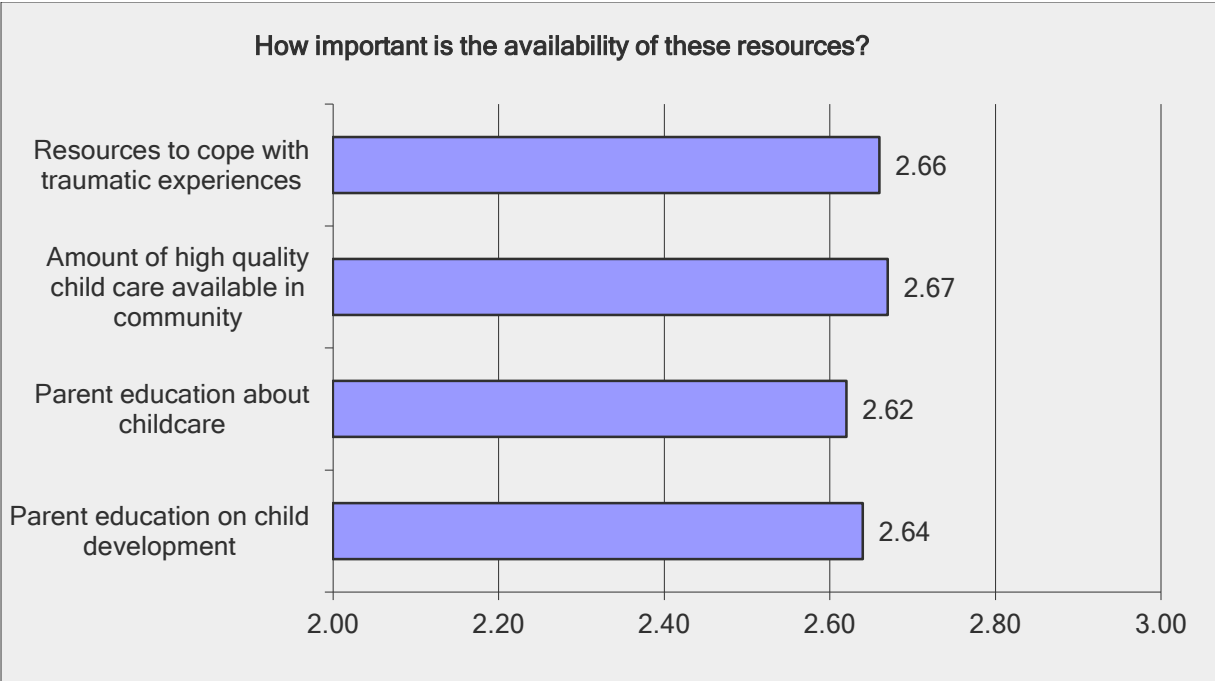


Adequate & Some Availability	56 91%	52 84%	51 83%	47 76%	40 65%	40 65%
Not Avail. or Don't Know	6 10%	9 15%	10 17%	15 25%	20 33%	21 34%

Those taking the survey report that there are programs within the communities to help families get the resources they need.

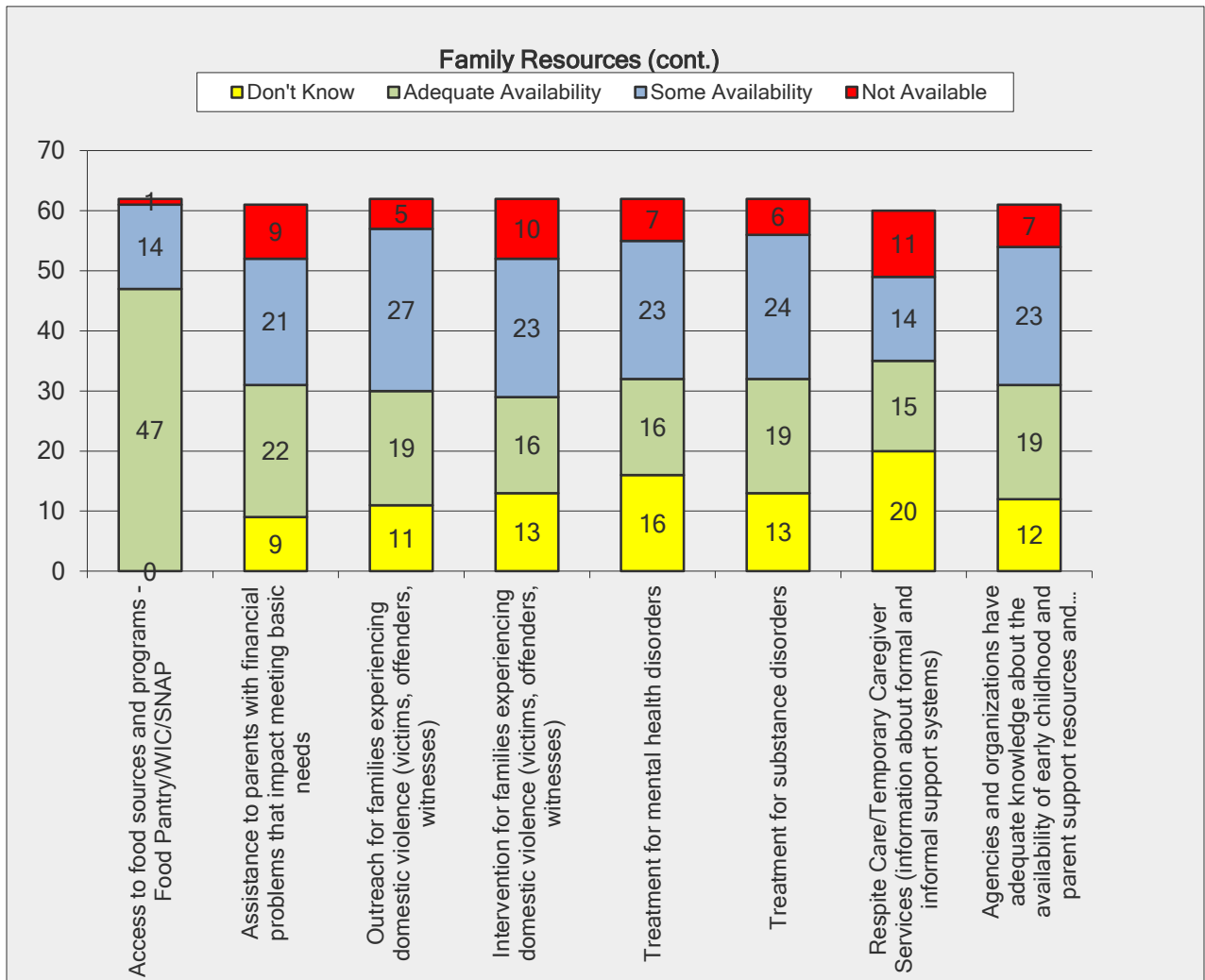
This section of Family Resources shows much higher than average availability of all items surveyed. The percentage of respondents who recognize that programs are available is very high. Respondents also record high availability of education on early childhood development.

Please note that while it is indicated that there are available child care settings, one-third do not recognize their existence. Another one-third does not believe there are enough resources to deal with traumatic experiences.



The above chart is a ranking, again on the three-point scale, of the importance of the mentioned resources.

In ranking the importance of the resources surveyed above, Child care availability was the most important with traumatic experience resources ranked second. All four categories are ranked closely and highly valued.

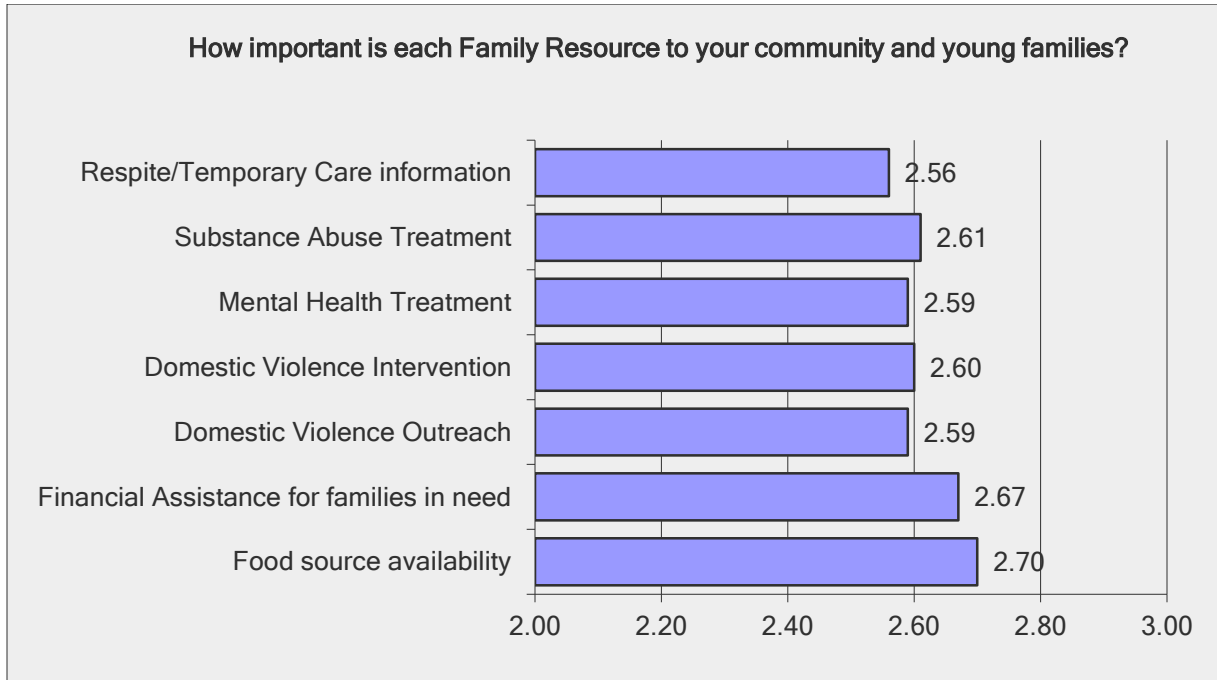


Adequate & Some Availability	61 99%	43 70%	46 75%	39 63%	39 63%	43 70%	29 47%	42 68%
Not Avail. or Don't Know	1 2%	18 29%	16 26%	23 37%	23 37%	19 31%	29 50%	19 31%

In this section of Family Resources availability, nearly 100% of respondents say there are adequate food resources. 75% cite availability to domestic violence outreach while that number drops to 63% for actual intervention resources. While the availability of Respite Care (temporary relief for caregivers) is much lower than the rest of these resources, other areas show enough availability to not be a major concern.

In addition to the Respite Care need identified above, the 37% for Domestic Violence Intervention and for Mental Health Treatment could warrant further discussion to determine if the resource is known to all.

Family Resources (cont.)



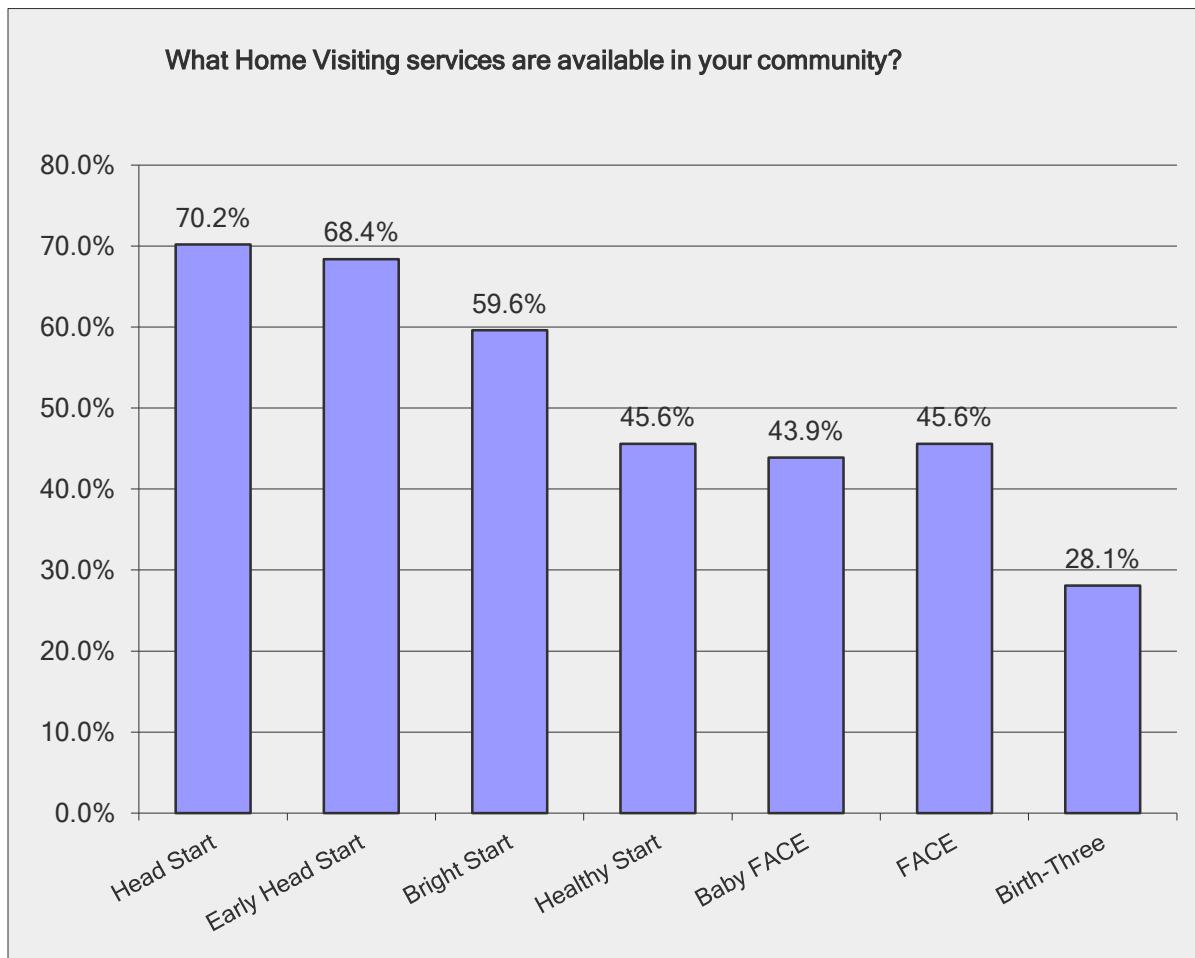
The above needs are ranked on the three-point scale – Not Important (1.0), Important (2.0), Very Important (3.0).

Food Source availability (2.70) is ranked the most important of this set of Family Resources and is highly available. Financial Assistance for families in need is ranked second at 2.67. Substance Abuse Treatment is ranked as the third most important. Both of these show 70% availability as seen in the previous graph. All items are ranked above Important (2.0) and more than mid-way (above 2.5) toward Very Important (3.0)

Are There Barriers to Accessing Services?

This question was presented as an open text box. Respondents entered non-restricted and non-cued comments. Recurring barriers listed by those taking the survey include, in the order of the most frequently cited barrier:

- Transportation - 38% cited transportation problems in accessing services
- Cultural differences
- Communication barriers



The above graph indicates the recognition of available services by those who took the survey. Head Start, Early Head Start, and Bright Start are the services known to the highest percentage.

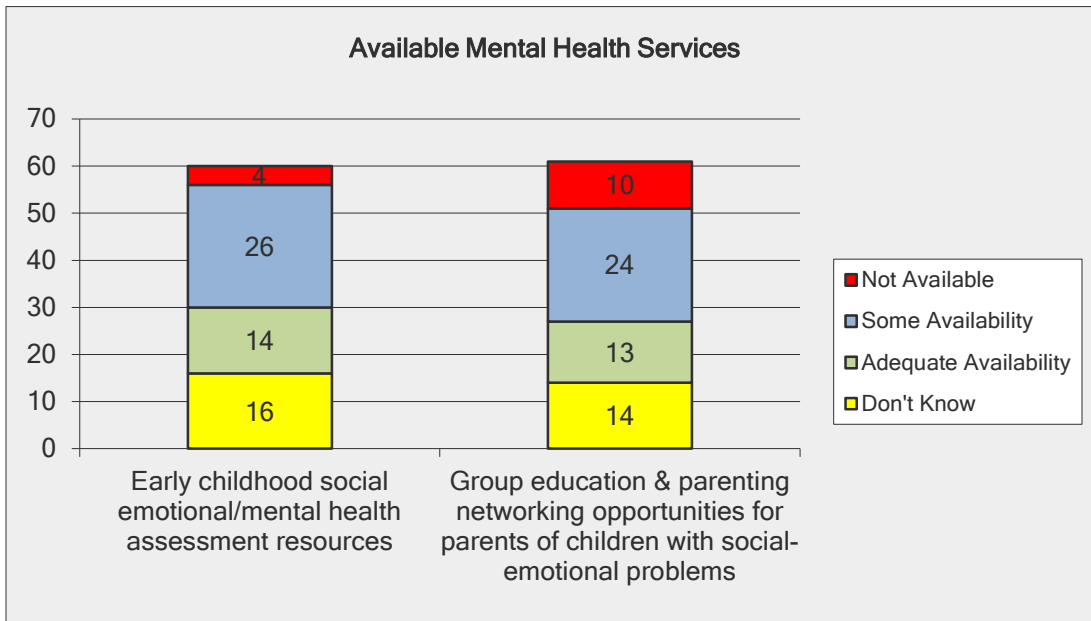
Survey takers were able to check any or all options from the list.

What Informal Neighborhood Resources exist?

This question was an open-ended comment section, with respondents citing other resources and programs in their communities.

Churches were listed as the primary informal neighborhood resource. Youth Works was cited, as was the after school program.

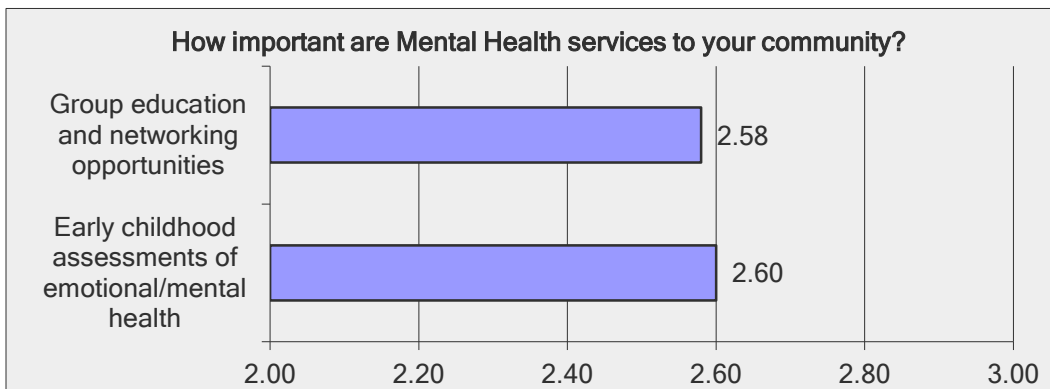
Mental Health Resources



66% (40 people) indicate that there was adequate or some availability to Early childhood social emotional/mental health assessments, while **33%** (20 people) cite that the resource is unavailable or they were unaware of its existence.

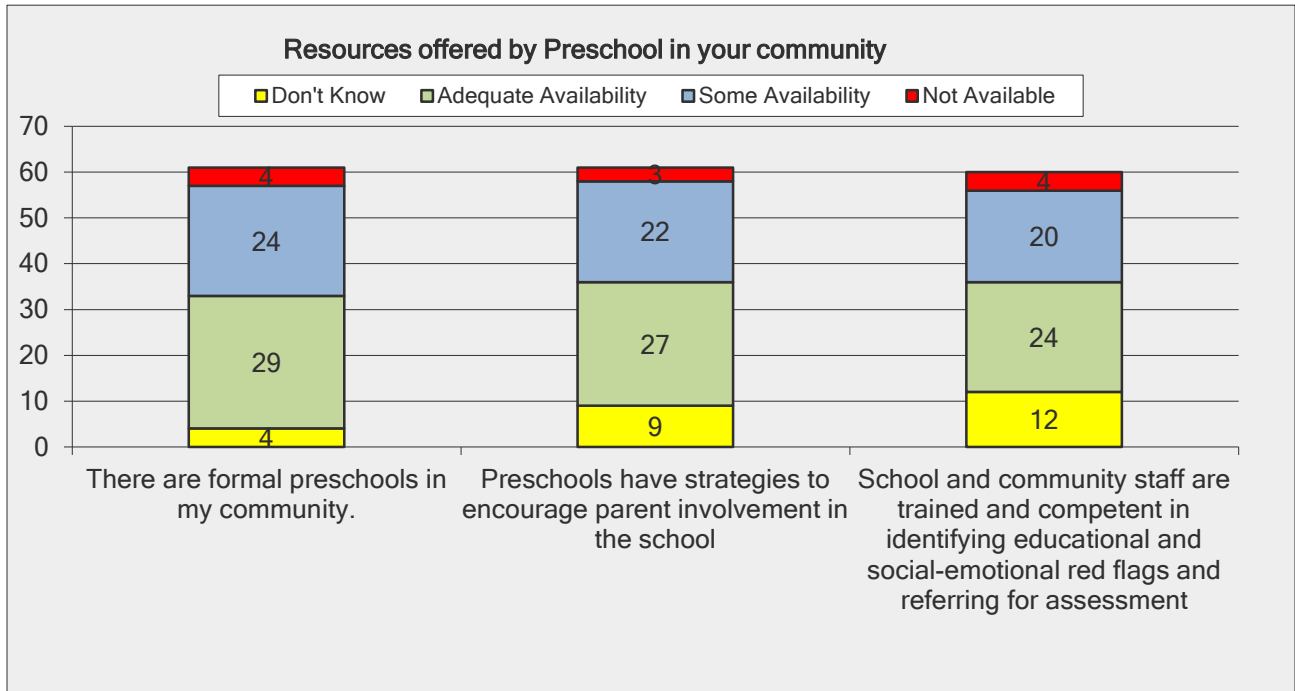
61% (37 people) are aware of networking or group opportunities for parents of children with social-emotional problems. **40%** (24 people) responded that there was no availability or were unaware about the program.

Mental Health Services for the Pine Ridge/Kyle area are good as shown by the ratings of those who took this survey. Group education and parenting networking opportunities is rated a little lower than the assessment area of Early childhood social emotional/mental health, but seems adequate.



Those completing the survey ranked Mental Health services as important (2.0) and higher, with the highest ranking being 3.0 (Very Important). Mental Health services are valued closer to the Very Important category.

Preschool Resources



Adequate & Some Availability	53 / 87%	49 / 81%	44 / 73%
Not Avail. or Don't Know	8 / 14%	12 / 20%	16 / 27%

Preschool opportunities in Pine Ridge/Kyle are available. 31% not knowing or stating no availability could be a cause for concern. Of the preschools that are available, the ratings are very high for parent involvement and staff training/competencies.



The above needs are ranked on the three-point scale – Not Important (1.0), Important (2.0), Very Important (3.0).

All of the above rankings are more than mid-way toward Very Important. All three categories are ranked very closely in importance, which shows a consensus and solidarity in the expectations of Preschool services by the community.

Are There Informal Preschool Resources in Your Community?

This question was an open-ended comment section, with respondents citing other Preschool resources and programs in their communities.

Head Start and Early Head Start were the primary Preschools cited by the 13 respondents answering this question. FACE and Baby FACE were also cited. Other programs cited were Shannon County, Wolf Creek Preschool, Rockyford Preschool, and childcare.

Highest “Adequate” Rankings	
Access to Food Sources - Food Pantry/WIC/SNAP	47
Regular Health Care	41
Breastfeeding Education	40
Routine Dental Screenings	33
Breastfeeding Support	32
Routine Child Development Screenings	31
Formal Preschool Availability	29
Highest “Some Availability” Rankings	
Routine Depression Screening	35
Respite Care/Temporary Caregiver	27
Domestic Violence Intervention	27
Group Networking for Parents with Social/Emotional Child	27
Routine Substance Abuse Screening	26
Financial Assistance for Parents in meeting basic needs	26
Breastfeeding Support	25
Highest “Not Available” Rankings	
Routine Depression Screenings	12
Respite Care/Temporary caregiver	11
Domestic Violence Intervention	10
Group Networking for Parents with Social/Emotional Child	10
Routine Substance Abuse Screening	9
Financial Assistance for Parents in meeting basic needs	9
Breastfeeding Support	8
Highest “Don’t Know” Rankings	
Respite Care/Temporary caregiver	20
Resources for Coping with Traumatic Experiences	17
Routine Substance Abuse Screening	16
Treatment for Mental Disorders	16
Early Childhood Social/Emotional Assessment	16
Group Networking for Parents with Social/Emotional Child	14

Data Summary of Available Community Resources

Identified Strengths:

- Access to Food Sources and Programs
- Programs to Access Family Resources through Referrals
- Preschools Encourage Parent Involvement
- Regular Health Screenings
- Routine Dental Screenings
- Education About the Benefits of Breastfeeding
- School and Community Staff are Trained and Competent in Identifying Red Flags

Identified Weaknesses/Needs:

- Respite Care/Temporary Care-Relief for Primary Caregivers
- Routine Depression Screenings
- Routine Substance Abuse Screening
- Group Education & Networking for Parents with Social/Emotional Child
- Domestic Violence Intervention

Most Important Community Needs Ranking:

- Food Source Availability (2.70)
- Financial Aid for Families to meet needs (2.67)
- Amount of High Quality Childcare (2.67)
- Traumatic Experiences Resources (2.66)
- Child Development Screening (2.66)
- Dental Care/Hygiene Screening (2.66)

Considerations:

Cultural attitudes or shame in admitting the need for services was cited in several comments. That attitude could create an unawareness of services available. Some respondents cited communication as a barrier to receiving services or the willingness to obtain them. It was also cited that although resources are there, they have limited funding and personnel to handle cases. These mindsets could affect the ratings of service availability.

Community Comments/Discussions:

During a Post-Survey meeting held on July 17, 2014 a group of 14 early childhood stakeholders discussed the findings of this survey.

The group discussed Depression Screenings, which were an identified weakness. While one question about depression is asked at IHS during regular health screenings, it is not in-depth nor the correct setting for depression screening. It was recommended that it be part of Well Care Visits. The Well Care Visits are currently being developed and it is felt that they need collaboration with Head Start programs to avoid duplication of services.

The group identified the need for more Childcare as an item that did not stand out from the survey. The survey showed 65% adequate/some availability with 33% not available/don't know. A possible reason for the discrepancy in the ranking could be that some who took the survey may not need childcare, therefore believing it is adequate.

Problems with Transportation were cited by a significant number of respondents (38%) who answered the open-ended question concerning barriers to services. The group discussed this topic and agreed that transportation is a problem and a definite weakness, but that it has improved with an added bus service. Ideas were generated for more resources for transportation and there was sharing about Medicaid reimbursement for travel for medical and dental referrals.

Two other items of concern were raised by the group and information was shared. The first issue was the limited amount of services for Special Needs students in area schools. The second was encountering custody issues by grandparents or other relatives caring for children. Once referred, they cannot receive services without proper permission from the registered legal guardian(s). Discussion and sharing of resources and procedures for obtaining this registration was held.