



Postpartum Depression: A Critical Area for Continuing Social Work Education

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Victim Assistance Service Providers' Training Needs Assessment

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Abstract

The process of creating a victim services training is complex, requiring extensive resources to be successfully completed. This article describes the creation of one southern state's Victim Assistance Academy. This grant funded project provides basic training to victim service providers in a rural southern state. The Training Needs Assessment process is described in detail, and implications for social work policy and practice are discussed.

Victim Assistance Service Providers' Training Needs Assessment

In 2010, the Kentucky Justice and Public Safety Cabinet (JPSC) and Crime Victims Compensation Board (CVCB) partnered with the Western Kentucky University (WKU) Department of Social Work to develop a State Victim Assistance Academy (SVAA). This was funded by the Office for Victims of Crime (OVC), U.S. Department of Justice, for a 3-year planning and implementation grant. SVAA's are intended to provide comprehensive, academically based education and skill-based training for those who assist victims of crime (U.S. Department of Justice, Office of Justice Programs, & Office for Victims of Crime, 2013).

Due to the interdisciplinary nature of the SVAA program, social workers are well suited to provide leadership for efforts such as these. Professionals and paraprofessionals from a multitude of disciplines assist victims of crime. These disciplines include victim assistance providers, victim advocates, criminal justice personnel, and allied health professionals (U.S. Department of Justice, Office of Justice Programs, & Office for Victims of Crime, 2013). The discipline of Social Work is in a unique position to facilitate collaboration among the various professions because social work

practitioners are well versed in leading, collaborating, and crossing disciplinary boundaries. These skills are considered core competencies for the profession (Hepworth, Rooney, Rooney, Strom-Gottfried, & Larsen, 2010). OVC's grant required a three-member partnership consisting of the Victim of Crime Act Assistance (VOCA) administrators, Crime Victim's Compensation Board administrator, and an academic institution.

The Office for Victims of Crime (OVC) grant implementation for SVAA's required several steps. The first was the development of a multidisciplinary steering committee serving to plan the project and offer guidance and support as necessary. An engaged and informed steering committee was key throughout the project, and this group was very effective in achieving the project goals. Other project goals included completing a needs assessment, designing and holding a training academy, and creating a sustainability plan.

In order to design a strong foundational curriculum effective with a multidisciplinary audience (Freeman, Collier, Staniforth, & Smith, 2008), it was important to understand the needs and professional requirements of the unique victim assistance workforce. A statewide training needs assessment was the second step of the grant process and results informed the curriculum development and training design, which was the third step.

The fourth step of the grant process was to develop the Victim Assistance Academy (VAA) event, a five-day face-to-face training with eight hours of pre-work required to be completed prior to attending the training. The basic training topics were appropriate for victim service providers with less than three years of experience in the field. Evaluation was the fifth step of the grant process. Before, during, and after the training, an

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Victim Assistance Service Providers' Training Needs Assessment

evaluation was implemented to determine the success of VAA. This evaluation guided the improvement of future trainings, step six (see Figure 1).

The focus of this paper will be on the Victim Assistance Service Provider's Training Needs Assessment as related to the overall grant process. Following a brief discussion of the initial grant application and steering committee development step, there will be a detailed description of the Training Needs Assessment. Following that, the process of curriculum development and evaluation design will be explored. A discussion of the implications for social work involvement in these types of collaborative initiatives concludes this article.

Initial Grant Application

Previous to VAA, victim advocates received on-the-job training and were able to participate in a number of profession-focused conferences (e.g., domestic violence/sexual assault, prosecutor based). While this was adequate for presentation of topical information overviews, there was no consistent, baseline training available to all practitioners across the areas of professional

focus. Perennially limited local budgets and the need for a consistent knowledge base drove the development of a statewide, intensive academy experience among the applicant agencies.

Needs Assessment

A Training Needs Assessment was required as part of the grant process for the VAA. The needs assessment was crucial to informing the curriculum development. The Victim Assistance Service Provider's Training Needs Assessment online survey development and implementation took place from September 2011 to September 2012 following the establishment of the Steering Committee.

Needs assessment is defined as a process of systematically collecting data for the purposes of planning a program (Rubin & Babbie, 2001, p.585), in this case a victim assistance academy training program. Needs are defined in terms of both demand (what partner agency employees feel they need from training) and normative needs (what society warrants as important). For example, in this needs assessment, the agency administrators, seasoned victim advocates, and new victim advocates may identify certain

important content areas, but they would likely name only familiar topics, not realizing the importance of unknown topics. The larger society, experts in the field, or the victims served may value other content areas. Both demand and normative needs were assessed in this project.

A mix of three typical needs assessment approaches were utilized to create this needs assessment: the key informant, the survey of target groups, and focus groups approaches (Rubin & Babbie, 2001).

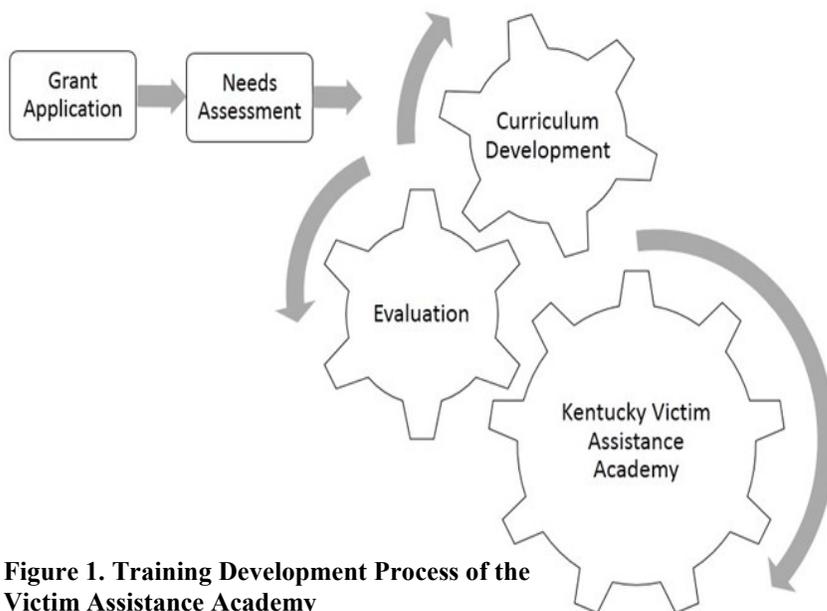


Figure 1. Training Development Process of the Victim Assistance Academy

The key informant approach utilizes questionnaires to obtain information from those presumed to have special knowledge of this subject. In this case, all VOCA agency administrators were surveyed about the training needs of their employees. The survey of target groups approach involves gathering information from all members of the target group. In this case, all VOCA agency employees were surveyed. Last, the focus group approach where a small group of people are brought together to discuss an issue was utilized. Members of the steering committee were brought together early on to assist with the development of the needs assessment instrument, and this included discussions of statewide training needs (Rubin & Babbie, 2001). Specific steps in the needs assessment process include planning, designing the assessment, data analysis, and reporting results (Royse & Staton-Tindall, 2009). Regarding planning, considerations related to the purpose (mandated, voluntary), available resources (budget, time, skills of members, etc.), and ethics related to human subjects must be fully understood. All of these factors will influence the design and the detail level of the analysis and report (Royse & Staton-Tindall, 2009).

As suggested by Rossett (1987), respondent information was gathered regarding optimal performance or knowledge, actual performance or knowledge, feelings of trainees and other stakeholders, and solutions to the training needs. Royse and Staton-Tindall (2009) advocate finding information regarding awareness, availability, accessibility, and acceptability of the current solutions in use regarding the social problem. In the case of this needs assessment, all of these factors were considered in the design. By “gauging the gaps and insufficiencies” (Royse & Staton-Tindall, 2009, p. 3) in the current training available for victim service providers, a comprehensive basic curriculum was created that to meet the needs of victim service providers in the state.

Methodology

Victim Service Training Needs Assessment surveys from the states of Texas (Danis & Bouie, 2010) and Oklahoma (Doshier, 2009) as well as the Victim Services Assessment Project in

Warren County, Kentucky (Desrosiers & Mengo, 2010) were reviewed as part of the development of the Victim Assistance Service Provider’s Training Needs Assessment Survey Instrument. Two steering committee focus groups were held to review selected survey instruments (Danis & Bouie, 2010; Desrosiers & Mengo, 2010; Doshier, 2009) and determine the content areas to be included on the needs assessment instrument. All items were reviewed and approved by the Steering Committee’s Needs Assessment Subcommittee. At a third meeting, the entire Steering Committee approved the Victim Assistance Service Provider’s Training Needs Assessment Survey Instrument (hereafter referred to as the survey). The Steering Committee members were all sent a link to the electronic survey as a pilot test for the survey. Some minor problems were found and corrected prior to full implementation. These included errors in spelling, agency names, and survey settings. Following the pilot test, the link to the electronic survey was distributed to all agencies in the state that were receiving Victims of Crime Act (VOCA) funding by the JPSC. Each agency was encouraged to provide the survey link to all of their administrators, employees, and volunteers for completion.

Sample

The population consisted of all crime victim service providers and administrators receiving Victims of Crime Act (VOCA) funds in this rural southern state. As opposed to random selection, all 65 VOCA grant funded agencies in the state were sent an email with an explanation of the project and a link to the online needs assessment. Additionally, Steering Committee member listservs were used to send out the emails. Listservs from the Domestic Violence Association, Association of Sexual Assault Programs, Mothers Against Drunk Drivers, Office of the Attorney General, Office of Justice and Public Safety, and Department of Corrections were utilized. This allowed victim service professionals from non-VOCA funded agencies across the state to provide input into training needs. A table providing the breakdown of the respondent agencies broken down by governmental status is provided (see Table 1). A

Victim Assistance Service Providers' Training Needs Assessment

Table 1. Respondent Agencies Organized by Governmental Status

Agency	Number	Percentage
Community Non-Profit Programs	105	49.5
Domestic Violence Program	33	15.6
Rape Crisis Center/Program	22	10.4
Other (i.e. immigration services, emergency shelter)	18	8.5
Child Advocacy Center	15	7.1
Victim Advocacy Program	11	5.2
Dual Domestic Violence/ Rape Crisis Center	11	5.2
Court Appointed Special Advocate	8	3.8
Medical Services	3	1.4
Drunk Driving Program	2	0.9
Dual Child Advocacy Center/ Rape Crisis Center	2	0.9
College Campus	1	0.5
Faith Based Program	1	0.5
Government Programs	107	50.5
Prosecution	60	28.3
Victim Advocacy Program	22	10.4
Law Enforcement	12	5.7
Other (i.e. Crime Victims Compensation Board)	7	3.3
Health/Human Services	6	2.8
Corrections/Probation/Parole	3	1.4
Department for Community Based Services	2	0.9
Education	2	0.9

total of 212 respondents completed the needs assessment.

Measures

The Victim Assistance Service Provider's Training Needs Assessment was comprised of multiple choice, short answer and scaled questions. There were multiple choice, short answer, and scaled questions. It included the following sections: demographics, training needs, skills, and knowledge. Demographic information collected included gender, age, years of experience, agency, and victim services provided. The training needs section included the following: hours of training completed over the past year, source of training, topics of training, satisfaction with training, and barriers to attending training. All respondents were asked to rank curriculum topics by importance for beginning victim service providers. Topics queried included basic intervention skills, self-awareness, and self-care

skills. The knowledge sections included questions about specialized knowledge required for the victim service provider's job such as crisis intervention, grant writing, supervision, and trauma-informed practices.

Procedures

Following the Institutional Research Board (IRB) approval, all crime victim service providers and administrators receiving Victims of Crime Act (VOCA) funds in this southern state were queried. As opposed to random selection, this was a convenience sample of all the VOCA grant funded agencies in the state. Potential respondent email addresses were checked for accuracy prior to emailing the survey link. They were given the option to request a paper survey in an invitation email sent one week prior to the survey deployment.

Email survey

An informed consent document was the first page of the web survey. It alerted potential respondents that this was a voluntary process. Respondents were asked to click “Yes” if they agreed to participate, and they were redirected to the survey at that time. If they clicked “No” they were sent to a “thank you” page at the end of the survey. If respondents requested to complete a paper survey, they were asked to provide their initials on the informed consent document to protect confidentiality. Service providers who chose not to participate in the research would benefit from the outcome of the research. It was emphasized to all potential participants that there was no penalty for nonparticipation or early withdrawal from the study. Surveys were collected using Qualtrics survey software (Qualtrics, 2012). The data collection period was for eight weeks between February and March 2012. During that time, five additional reminders were sent to the potential participants at one week intervals in accordance with the Dillman Tailored Design Method (Dillman, 2007). The pre-email was sent one week prior to the launch of the survey.

Data analysis

Following the data collection period, survey data were analyzed using Microsoft Excel 2012 and SPSS 2011 software. The sample was divided into new and experienced service providers. New service providers were defined as having less than five years of experience and made up 33% of this group. Experienced service providers had five or more years of experience and made up 64% of this group. 3% of respondents did not respond to this question.

Statistical analysis included descriptive statistics such as means, standard deviations, and ranges. The Victim Assistance Academy used the results in the development of a needs-based, evidence-informed curriculum. Results of the data analysis are found detailed in the next section.

Needs Assessment Results

A total of 212 completed needs assessments were used in the data analysis for this project. While 276 respondents started the needs

assessment survey process, only those with at least 50% of the questions answered were utilized in the analysis. See Table 1 for a breakdown of the programs by type.

The majority of respondents were female at 88%, with 11% identifying as the male gender. 1% reported “Other” but did not specify their gender. Respondents’ ages ranged from the lowest reported as 24 to the oldest as 72 ($M = 42.9$, $SD = 10.47$). Caucasian/white was the most commonly reported ethnicity (95%), with 3% identifying as African-American, and less than 1% as bi-racial, Hispanic or “other.” The race data indicate a disparity between the race/ethnicity of this southern state’s citizens and the victim services providers. According to the 2010 U.S. Census, 88% of the state’s residents are white, 8% are African-American, and 3.3% of the citizens are Hispanic (United States Census Bureau, 2015). The vast majority of respondents were employed full-time ($n = 192$ or 95%). The most common income range was \$25,000-35,000 yearly ($n = 84$ respondents, 43.5%).

Respondents reported high experience levels with an average of 11 years of experience ($SD = 7.7$ years). The majority of respondents indicated they had completed a 4-year degree (76%). All respondents reported they had a minimum of a high school diploma. Many reported continuing course work towards degrees including nursing, law, social work, and education, among others; however, the majority of the respondents (52%) reported they were not certified or licensed. Of those that were certified or licensed, the most commonly reported license was social work at 12%. Other licenses include Registered Nurse, Licensed Marital and Family Therapist, and Licensed Attorney. The most commonly reported certification was domestic violence advocate at 9%. Other certifications listed were Certified Alcohol and Drugs Counselor, Sexual Assault Nurse Examiner, Peace Officer, and Foster Care Provider.

Of the 65 VOCA funded agencies in this state, 23 identified agencies responded to the needs assessment. Additional respondents included law enforcement officers at the city, county, state and federal level; Commonwealth attorneys; Parole Board members; and Crime Victim Compensation

Victim Assistance Service Providers' Training Needs Assessment

Table 2. Types of Victims Served Listed by Type of Crime Perpetrated

Types of Victims Served	Number	Percentage
Sexual Assault	108	53
Domestic Violence	104	51
Child Abuse	75	37
Dating Violence	75	37
Stalking	70	35
All Victims	63	31
Victims with Disabilities	60	30
Rural Victims	58	29
Human Trafficking	53	26
Elder/Dependent Adult Abuse	40	20
Families of Homicide	30	15
Financial Crime	20	10
Workplace Violence	18	9
Other (i.e. Child endangerment, kidnapping, robbery, etc.)	18	9
Campus Crimes	17	8
Drunk Driving	17	8
Hate Crimes	17	8
Gang Violence	13	6
Terrorism	11	5

Board members. Victim serving state coalitions and religious organizations also responded, bringing the total agency response to 73 agencies serving crime victims. Table 1 represents all respondent agencies, so there are 212 respondents represented.

Victim Services Provided

In this southern state, a variety of crime victims are served. For this item, respondents could have chosen more than one victim type served. The majority (53%) of service providers reported working with victims of sexual abuse and domestic violence. 30% of respondents served the following four categories of victims: child abuse, dating violence, stalking, and all types of victims. Interestingly, only 30% of service providers surveyed reported working with disabled victims when, in fact, most agencies are likely serving victims with disabilities. This may indicate lack of awareness of the types of disabilities that victims may exhibit. See Table 2

for more details.

The providers in this state employ a variety of service techniques as they serve victims of crime. The majority (79%) reported providing advocate services. Over 40% reported providing community education or counseling. Case management services are provided by 37% of respondents, and assessments and psychotherapy services are provided by over 20% of respondent providers. See Table 3 for a listing of services provided by these respondents.

Training Accessibility

The main focus of this survey was on training needs across this rural southern state. One hundred forty-nine respondents (75%) specified that their current agency required job trainings, and 165 respondents (82%) stated they had attended job trainings during the past year. Of those 165 respondents, 32% received 11-20 hours of training while the remaining respondents received 0-10 hours (22%), 21-30 hours (21%),

Table 3. Variety of Services Provided to Victims (N = 212)

Victim Services Provided	N = 212	Percentage
Advocate	159	79
Community education and awareness	92	46
Counseling	85	42
Case Management	74	37
Assessments (legal, social, medical)	52	26
Other (i.e. Program support, referrals, training, etc.)	44	22
Short and/ or Long term therapy service	43	21
Law Enforcement	22	11
Medical	18	9
Legal Representation	10	5
Certified Interpreter	5	2.5
Fire Department	2	1

and 31 or more hours (25%). The majority of training was received at conferences ($n = 127$, 75%), while workshops ($n = 86$, 52%), web-based training ($n = 64$, 39%), and continuing education units ($n = 59$, 36%) were also popular sources of training. Forty respondents (24%) received on the job training and 14 (9%) completed a college course. These trainings were funded predominantly by home agencies ($n = 96$, 58%) with some government sources ($n = 63$, 38%), outside agencies ($n = 16$, 10%), and other sources such as scholarship and grants ($n = 20$, 12%). Employees self-funded ($n = 32$, 19%) their trainings to a significant degree.

One hundred eighty-eight victim service providers did provide some insight into barriers to attending training. The most significant barrier to attending training for these respondents was cost. Sixty-five percent ($n = 124$) of the respondents rated price of training as having a significant effect on their attendance. The location of training was reported by forty-four percent ($n = 82$) to have a significant effect on their ability to attend training. Taking time away from work was a significant barrier for twenty-one percent ($n = 40$) of the respondents. Other reported barriers included unqualified presenters, poor training quality, and lack of CEUs for the offering.

From these results it was determined that a free and centrally located training would be very important. Additionally, the steering committee agreed to focus on building excitement for the

academy to ensure buy-in from government and agency employers who approve leave time to attend the training.

Curriculum Development

Considering that victim service providers work in a variety of settings ranging from law enforcement agencies to domestic violence shelters and other community and faith-based organizations, a multidisciplinary approach to training development made sense. In addition to increased understanding of various disciplinary roles, the interplay between professionals from different fields adds a richness and depth that cannot be otherwise achieved. In a multidisciplinary approach, experts from various disciplines are brought together to create and implement educational offerings (Freeman, Collier, Staniforth, & Smith, 2008; McClelland & Kleinke, 2013).

Implementing a multidisciplinary approach requires identification of the appropriate disciplinary experts. This was determined by a review of the Training Needs Assessment results. More specifically, the knowledge and skill areas identified by respondents served as the beginning place for a search for subject matter experts that could serve as curriculum designers or as trainers. The following section includes a more specific discussion of the identified knowledge and skill areas.

Specialized Training Needs

In the Training Needs Assessment, all respondents were asked: *Looking back, what specialized knowledge do you wish you had when you started in victim services?* Respondents were encouraged to select multiple answers if they were warranted for this question. The largest percentage of respondents ($n = 99$, 48%) reported a need to have specialized knowledge of the legal rights of victims. The criminal justice system ($n = 81$, 40%) and laws ($n = 75$, 37%) were useful for many respondents. Protective orders, financial assistance for crime victims, law enforcement response, and the Violence Against Women Act (VAWA) were considered important by 36% or $n = 73-74$ respondents each. An example of an open response to this question included “better understanding of DV/SA so I could translate that victim’s experience into a better legal case presentation, determining primary aggressor in DV relationships, conflict resolution, mediation, victims with mental illness and legal system.” This response suggests the complexity of issues facing victim service providers in the state. Information from this question was key to the training creation for the target group. See Table 4 for more details.

Basic intervention skill priorities were also assessed. The top five priorities for both new and experienced victim service providers included stress management skills ($n = 93$, 45%), crisis intervention skills ($n = 82$, 40%), awareness of victim recovery indicators ($n = 74$, 36%), prolonged trauma skills ($n = 74$, 36%), and multiple traumas or re-traumatization skills ($n = 71$, 35%).

Interesting differences among the new and experienced advocates exist. Experienced advocates placed more value on knowledge of the military justice system. This may be related to more experienced advocates realizing the challenges faced by victims when their perpetrator is a military professional. It may also be an indicator of the lack of coordination and communication between the military and civilian justice systems. No other knowledge category expressed a 10% or greater difference, but there were other differences.

Ranking differences among basic skill priorities were more frequent with multiple skill categories demonstrating differences. Crisis intervention was a lower priority for experienced advocates, while five categories were rated as more important to experienced advocates. Assessment skills, de-escalation of violence, cultural competency skills, translator skills and services, and computer skills were ranked at least 10% higher by experienced advocates. These priority differences are important to note when creating curriculum for new victim services providers and were taken into account in the curriculum development phase of this project. Table 5 depicts the basic intervention skill priorities for new and experienced victim service providers.

Once the training content priorities were established, subject matter experts were identified by the steering committee. It quickly became evident that not all subject matter experts are willing to teach what they know. The subject matter experts were important in creating the curriculum, and many did choose to instruct during a portion of the academy week. A total of thirty-four trainers (including seasoned victim service providers, victims themselves, actors, and subject matter experts) were utilized in the Basic Academy week, resulting in a rich experience for participants. The results of this multidisciplinary collaboration was the inaugural Victim Assistance Academy held in May 2013.

Discussion

A few likeminded people can create a lot of change. From the development of a federal grant application to the convening and development of a steering committee, the VAA was a joint effort. Through the completion of a Training Needs Assessment, the content and skills for curriculum development were defined leading to the creation of a well-received training program – VAA: Basic Week. Evaluation of the basic academy led to further curricular and training improvements. While overwhelmingly positive, some limitations with the needs assessment exist. After a discussion of these limitations, implications for both this rural southern state’s training and social

Table 4. Knowledge Needed by New Victim Service Providers (N = 205)

Knowledge Categories	New		Experienced		Total	
	N = 70	%	N = 135	%	N = 205	%
Burnout and Compassion Fatigue	33	47	80	59	113	55
Children’s Response to Trauma and Crisis	32	46	71	53	103	50
Trauma Symptoms	36	51	64	47	100	49
Legal Rights of Victims	37	53	61	45	99	48
Vicarious Traumatization	23	33	55	41	78	38
Impact of Trauma on the Brain	25	36	65	48	90	44
Criminal Justice System	27	39	52	39	81	40
Post-Traumatic Stress Disorder	25	36	54	40	79	39
Protective Orders	26	36	48	36	75	37
Violence Against Women Act (VAWA)	23	33	51	38	74	36
Laws	23	33	50	37	73	36
Financial Assistance for Crime Victims	25	37	48	36	73	36
Law Enforcement Response	26	37	46	34	72	35
Juvenile Justice System	20	29	38	28	58	33
Self-Care for the Caregiver	16	23	45	33	62	30
Prosecution/ Role of Prosecutor in the Criminal Justice System	18	25	38	28	56	26
Children’s Rights	23	33	33	24	55	26
Victims of Mentally Ill offenders	17	24	38	28	55	26
Underserved Victims	15	21	39	29	55	26
Substance Abuse	15	21	36	27	52	25
Immigration issues	10	14	36	27	46	22
Civil Legal Remedies	13	19	35	26	48	23
Human Trafficking	9	13	28	21	40	20
Restorative Justice/ Community Justice	11	16	28	21	40	20
Computer Crimes	11	16	27	20	39	19
Victims with Disabilities	12	17	25	19	38	19
Cultural Competency	7	10	22	16	31	15
Identity Theft	10	14	20	15	31	15
Hate and Bias Crimes	6	9	20	15	27	13
Military Justice System	2	3	18	13	20	10
International Issues in Victim Assistance	8	11	10	7	19	10
Tribal Justice System	3	4	7	5	10	5
Other	2	3	4	3	6	3

work policy and practice will be explored.

Limitations

There are some limitations to the Training Needs Assessment findings. Despite the fact that care was taken to ensure that service providers from each county in this rural southern state were

included in the survey, these results are not generalizable. There is no way to determine the total number of victim assistance providers who were eligible to complete this survey, therefore we cannot state that this is a representative sample of the training needs of this field. It is possible that the answers of the actual

respondents differ from potential respondents that were unaware of or chose not to answer the survey.

This particular instrument could be considered neither reliable nor valid at this point. It was developed with the Needs Assessment Subcommittee of the VAA Steering Committee for the purposes of gathering data for this specific project. As training needs are constantly in flux, administration of this survey may be appropriate periodically to assess those changes and the impact of this training initiative in meeting this state's training needs.

Implications for Training

Despite limitations, the Training Needs Assessment suggests implications for training in this rural southern state. Training for victim service providers must be a priority. Victim service providers across the state struggle with access to quality trainings, and their shoestring budget grass roots agencies are often unable to allow time off for them to attend trainings that are available. For these reasons, it is of primary importance that any trainings provided are of a high quality. In general, excitement was created through the needs assessment project.

Stakeholders were highly motivated and willing to provide resources such as time, listserv access, and knowledge to make sure the needs assessment was of highest quality. The needs assessment process increased awareness of the upcoming training, bolstered the morale of the workforce being trained, and brought attention to the needs and importance of victim service provider training. By creating a high quality needs assessment, the quality of the curriculum subsequently increased. This in turn led to an increase in well-trained victim service providers in the state.

Strong training offerings increase the likelihood that knowledge and skills will be retained (Salas, Tannenbaum, Kraiger, & Smith-Jentch, 2012), and increasing the number of well-trained victim service providers in the state will improve services to victims. In a predominantly rural state, there is little opportunity for treatment provider selection in many areas. This means that

each service provider must be of the highest caliber to have a positive impact. Social work as a profession is in a strong position to positively impact the delivery of victim services.

Implications for Social Work Policy and Practice

Social work as a discipline coexists very nicely with victim services. Corcoran (2014) makes the point that "social work practice methods are uniquely appropriate for work with crime victims..." (p. 298). In fact, ideas such as looking outside the person for points of intervention and respecting the self-determination of each person are core values in the profession, and strengths-based and evidence-informed interventions are professional mandates (National Association of Social Workers, 2008). Core competencies such as advancing human rights and social justice, engaging in research informed practice, and assessing, intervening, and evaluating individuals, families, groups, organizations, and communities are standard for social work practice (Council on Social Work Education Commission on Educational Policy, 2015).

Implications for social work policy and practice are clear. Social workers can and should become involved in initiatives such as the grant funded training program described here to increase the quality of interventions provided to vulnerable populations. Victims of crime are particularly vulnerable in terms of experiencing severe physical or psychological trauma as a result of events beyond their control. Re-victimization is common among this population as others around them fail to respond appropriately (Corcoran, 2014). Well trained victim service providers can serve as a protective factor for victims. A well trained victim service provider can ensure that systems of care and protection are trauma-informed and that person-centered evidence-informed practices are used with victims. Social work is in a strong position to provide needed training in these areas.

Social work has a long history of providing accredited educational programming to universities across the country (Council on Social

Table 5. Basic Intervention Skills Required of Victim Services Providers (N = 205)

Basic Skill Categories	New		Experienced		Total	
	N = 70	%	N = 135	%	N = 205	%
Stress Management Skills	29	41	64	47	93	45
Crisis Intervention	32	46	50	37	82	40
Awareness of Victim Recovery Indicators	26	37	48	36	74	36
Prolonged Trauma	23	33	51	38	74	36
Multiple Traumas or Re-Traumatization	21	30	50	37	71	35
Dealing with Grief	25	36	44	33	70	34
Initial Trauma	19	27	49	36	68	33
Behavioral Warning Signs of Perpetrators	23	33	41	30	65	32
Assessment Skills*	17	24	46	34	64	31
Empowerment	21	30	36	27	59	29
Intermediate Trauma	16	26	42	31	59	29
Active Listening Communication Skills	18	26	38	28	57	28
Violence Prevention Education	20	29	36	27	57	28
De-escalation of Violence*	14	20	41	30	56	27
Intake Screenings (Domestic Violence, Substance Abuse, Mental Health)	19	27	31	23	50	24
Case Management Skills	15	21	33	24	49	24
Cultural Competency Skills*	12	17	37	27	49	24
Networking Skills	16	23	30	22	47	23
Suicide Intervention	17	24	25	19	42	20
Dealing with News Media	12	17	27	20	40	20
Your Personal Responsibilities as a Professional	14	20	26	19	40	20
Providing Information and Referral	10	14	29	21	39	19
Public Speaking	14	20	23	17	37	18
Support Group Fundamentals	13	19	26	19	39	19
Physical Injury	12	17	24	18	36	18
Sudden Death	10	14	25	19	35	17
Mandatory Reporting	10	14	25	19	35	17
Written Communication Skills/ Record Keepings Skills	12	17	20	15	32	16
Translator Skills and Services*	4	6	22	16	26	13
Ethical Reasoning	8	11	17	13	25	12
Computer Skills*	2	3	20	15	23	11
Confidentiality/ Privacy Issues	8	11	15	11	23	11
Verbal Communication Skills	7	10	15	11	22	11

Work Education, 2016). Additionally, continuing education is a requirement for the profession with each state licensing board requiring varying amounts of continuing education per renewal period. Social workers possess skills in assessment and evaluation that further increase

their preparation to provide evidence-informed educational offerings. With experiences such as these, social workers are well qualified to meet the educational needs of victim service providers. The interdisciplinary nature of this project was a great match for the social worker serving as

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project manager/academic partner. Through the use of management and leadership strategies, knowledge of educational and curriculum design best practices, and awareness of evidence informed victim service training needs, the social worker led team produced much needed high quality education for victim service providers across the state. This successful project will leave a lasting impact on victim services.

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