

Expressed vs. Assessed Needs: A Comparison of Female Clients In Two Residential Treatment Programs at One Agency

Melinda Hohman, Ph.D.

School of Social Work, San Diego State University

Rosalind Corbett, M.A.

North County Serenity House, First Phase to Recovery, Escondido, CA

Background

- Clients whose needs and expectations for treatment are met have better treatment outcomes (Brown & Miller, 1993; Miller, Amerhein, Yahne, no date)
- A factor analysis of a shortened "What I Want from Treatment" measure given to clients in alcoholism treatment found four factors: Interpersonal, intrapersonal, affective concerns, and external demands—indicating that clients have many needs and expectations beyond reducing alcohol or drug use (Forcehimes, Steele, Tonigan, & Miller, no date).
- Few studies have examined whether clients' expressed needs at the beginning of treatment are different from needs assessed by counselors or standardized measures.

Research Questions

- 1) How do two client groups (Women who are Homeless with Co-Occurring Disorders and Pregnant/Parenting Women) compare on demographic and drug use variables?
- 2) How do the two client groups compare on self-identified or Expressed Needs at the beginning of residential treatment?
- 3) How do the two client groups compare on assessed needs?
- 4) Are the Expressed Needs/motivation of clients different from the Assessed Needs in the homeless women?

Method/Sample/Measures

Evaluation Site:

North County Serenity House, Escondido, CA. All data collected at Intake/Assessment as part of evaluation.

Sample:

All clients admitted to 2 SAMHSA-funded residential programs: First Phase Program for Homeless Women (FP) (n=191) and Pregnant/Parenting Women (PPW) (n=142) from 10/1/2004 to 12/31/2007

Measures:

- Demographic, drug use, and treatment history from state data (CalOMS)
- "What I Want from Treatment" (Miller & Brown, 1994)
 - 69-Item Likert scale, 0=No to 3=YES!
 - 4 indices developed by grouping like items; Trauma index based on items from Trauma Symptom Checklist (Briere & Runtz, 1989)
- Addiction Severity Index, Multimedia Version (Inflexion, 2002)
 - Computer-assisted interview
 - Measures 7 domains: Medical, Occupational, Alcohol, Drugs, Legal, Family/Social, Psychiatric
 - Severity scores calculated by computer (range 0-9). Severity scores are used by clinicians in treatment planning to determine extent to which treatment is needed: 0-1=No real problem; 2-3=Slight problem; 4-5=Moderate problem; 6-7=Considerable problem; 8-9=Extreme problem

Created Indices

Psychosocial Needs $\alpha=.62$ (n=7 items)

- I need to fulfill the requirements of the courts.
- I want help with legal problems
- I would like help to find a place to live.
- I could use some help finding a job.
- I want help with some health problems

AOD Treatment Needs $\alpha=.71$ (n=8 items)

- I want to stop drinking alcohol completely.
- I was to decrease my drinking.
- I want help to stop using drugs.
- I want to learn some skills to keep from returning to alcohol or other drugs.
- I would like to learn more about 12 Step programs.

Trauma Needs $\alpha=.88$ (n=16 items)

- I want help to decrease my stress and tension.
- I want help with depression or moodiness.
- I want help with angry feelings.
- I want help to overcome feelings of loneliness.
- I want to discuss having been physically abused.

Counseling Expectations $\alpha=.75$ (n=12 items)

- I want to learn how to solve problems in my life.
- I want someone to listen to me.
- I need help in getting motivated to change.
- I would like to be in a group with people who are dealing with problems similar to my own.
- I would like to talk about some personal problems.

Results

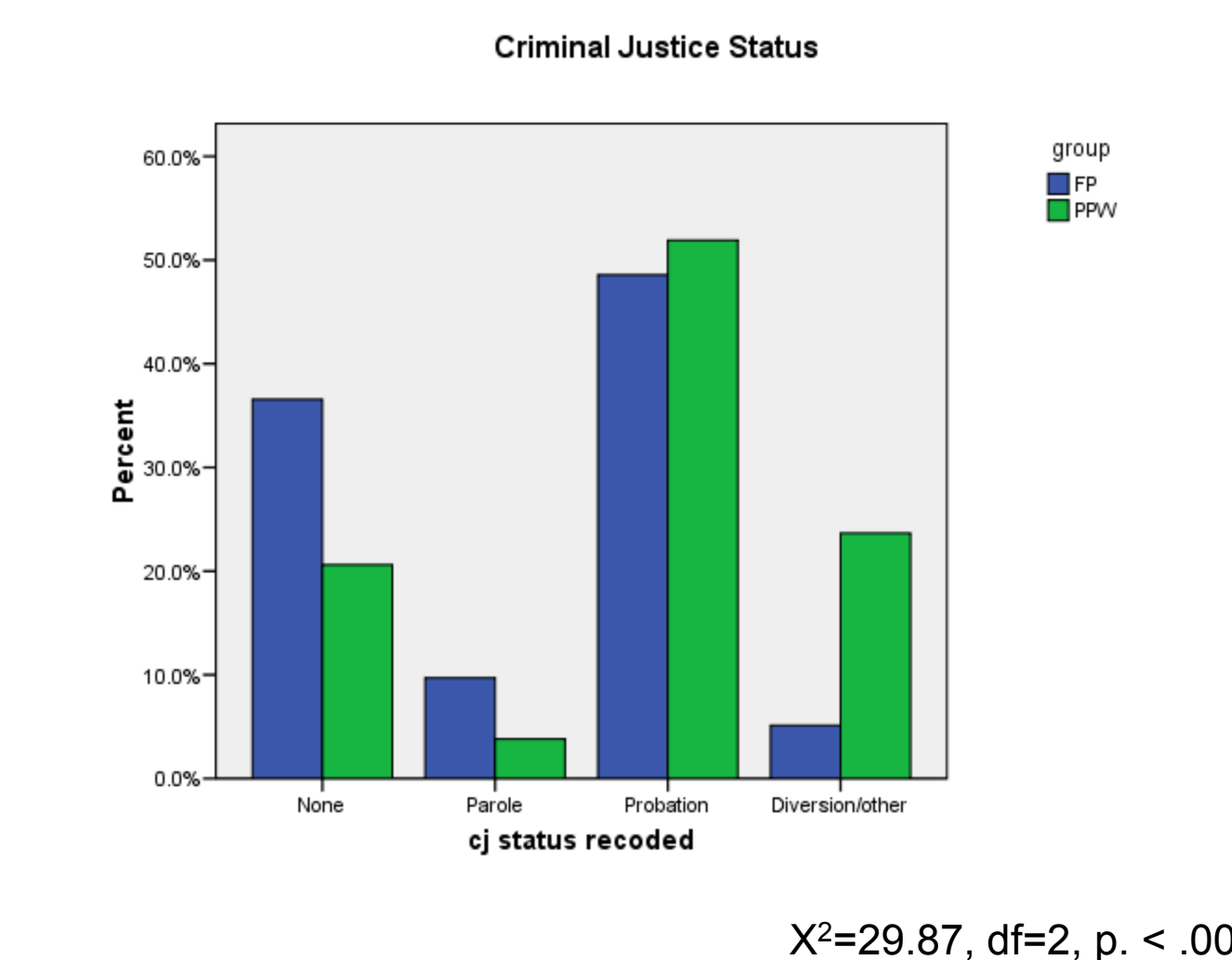
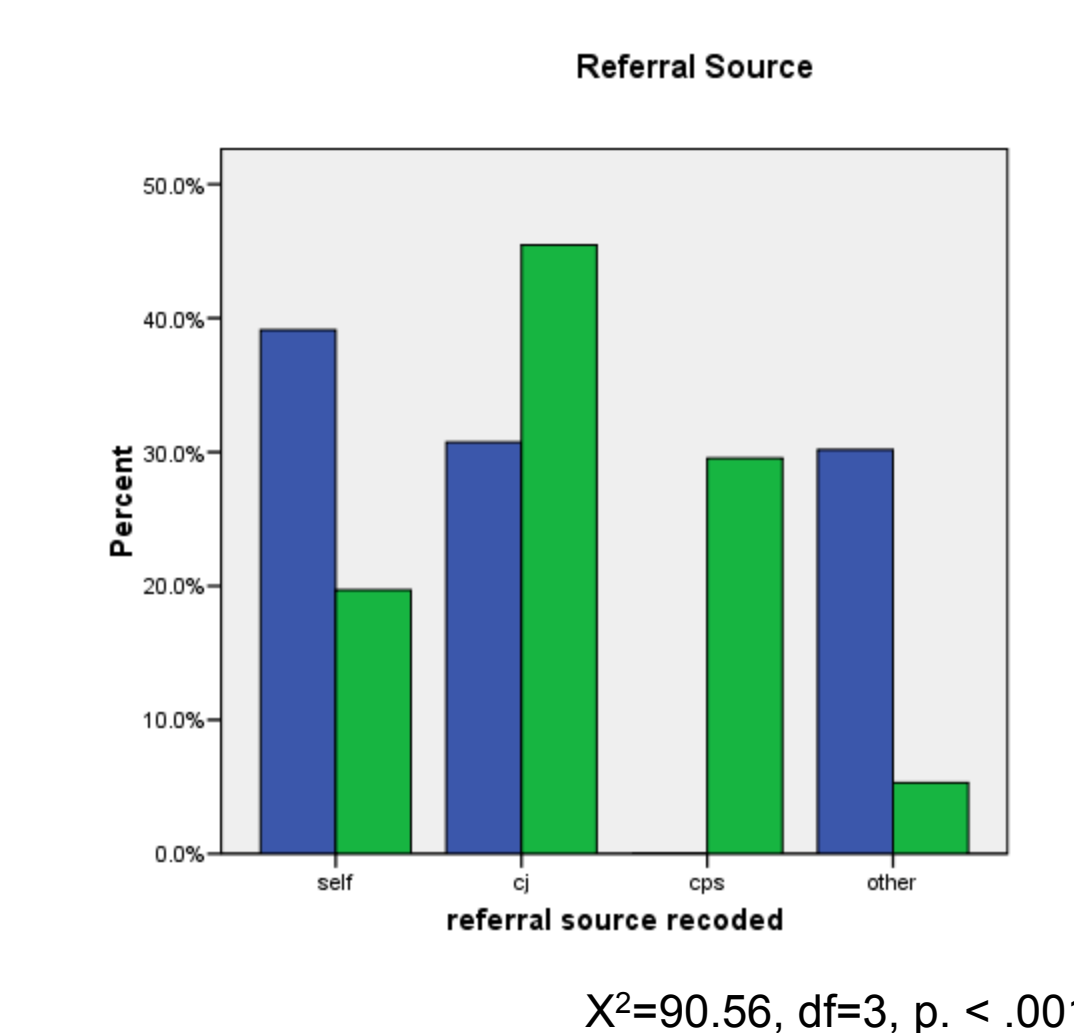
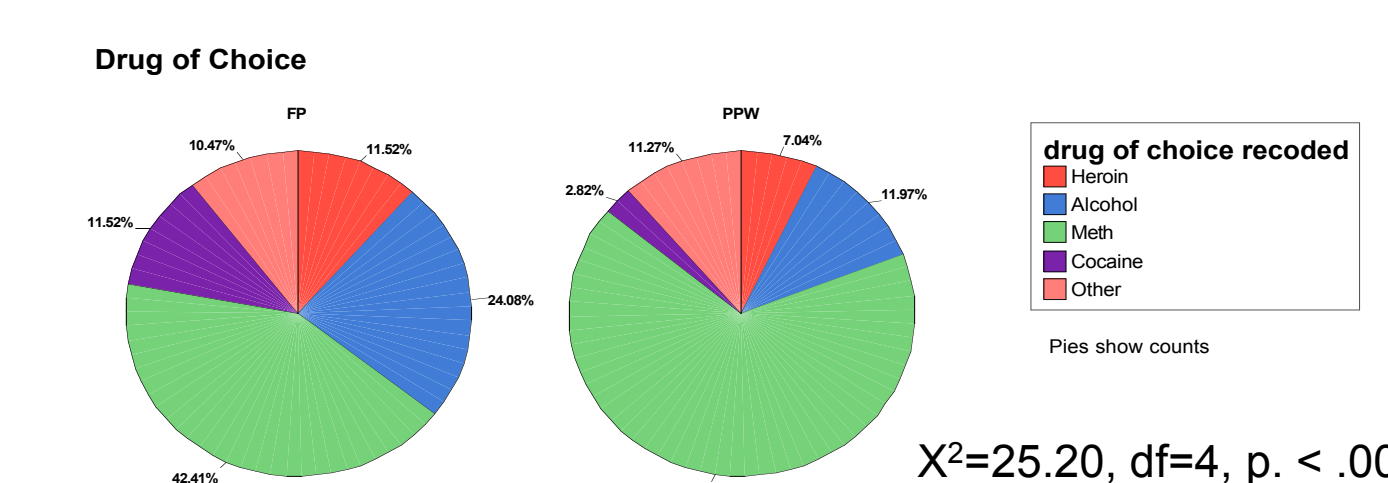
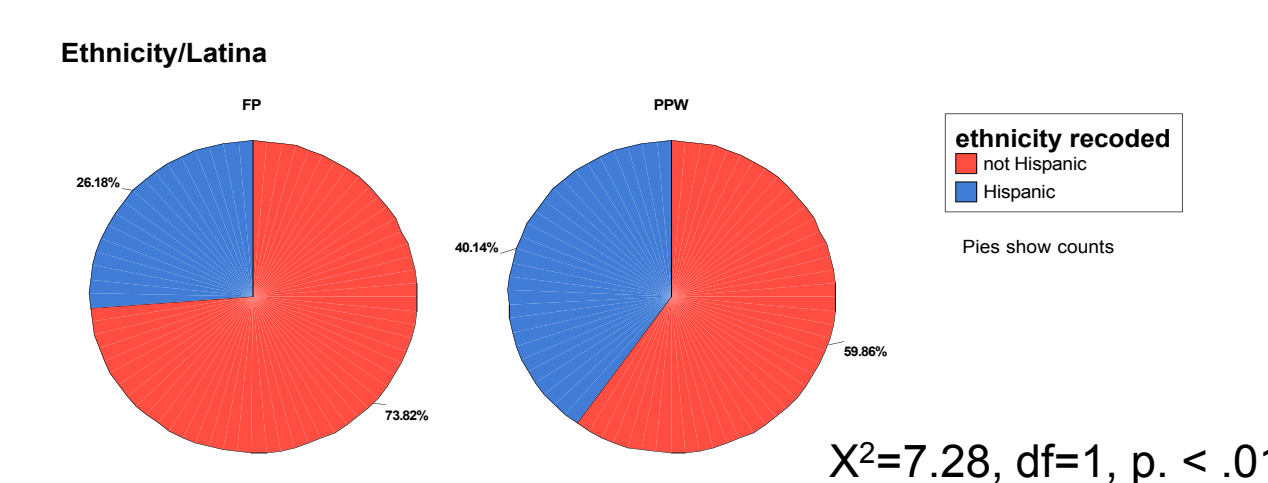


Table 1: Mean Scores of Expressed Needs and Assessed Needs by Group

Group	Homeless Women		Parenting Women	
	M	SD	M	SD
Expressed Needs				
Psychosocial**	1.73	.69	1.48	.68
AOD Treatment	2.17	.59	2.02	.77
Trauma Symptoms**	1.56	.66	1.30	.63
Counseling Needs**	1.78	.54	1.53	.52
ASI Assessed Needs				
Medical*	2.98	2.36	2.38	2.13
Occupational	3.93	2.02	3.58	2.17
Alcohol*	3.46	2.87	2.75	2.79
Drugs	6.24	2.14	6.25	1.98
Legal	3.57	2.48	3.75	2.42
Family/Social	3.46	2.11	3.42	2.34
Psychiatric	4.20	2.48	3.79	2.43

*p < .05; **p < .01

Table 2. Correlation Matrix of Expressed Needs Indices and ASI Severity Scores for Homeless Women (n=191)

	2	3	4	5	6	7	8	9	10	11
ASI Domains										
1. Medical	.18*	.11	.10	.03	.06	.35**	.04	.02	.14	.09
2. Occupational		.09	.18*	.25**	.26**	.17*	-.03	-.07	.05	.03
3. Alcohol			-.04	-.11	.19*	.20*	-.08	.11	-.09	-.06
4. Drugs				.11	.27**	.12	.05	.09	.14	.11
5. Legal					.17*	.02	.12	.02	-.05	.07
6. Family/Social						.35**	.12	-.02	.11	.06
7. Psychiatric							.04	-.02	.10	.09
Expressed Needs										
8. Psychosocial								.26**	.54**	.50**
9. Alcohol/drug issues									.38**	.37**
10. Trauma										.77**
11. Counseling needs										

Conclusion & Implications

- This study found that there were differences in the two client groups, with the homeless women being older, having a more varied drug use pattern, and more treatment experiences. They were also significantly different on the ASI medical and alcohol severity scores.
- The pregnant/parenting women were more likely to be Latina and cite methamphetamine as their primary drug.
- Indices analyses indicate that the What I Want from Treatment may provide a subtle way to assess trauma and client motivation to address trauma and other concerns.
- The homeless women were more motivated/open to various treatment services as indicated by their higher scores on Expressed Needs. This may be due to their longer use of drugs, housing instability and concomitant trauma history, and exposure to treatment in the past.
- That the Expressed Needs did not correlate with the Assessed Needs may indicate that the constructs being measured differ from one another. For instance, motivation to address drug use may not be related to actually having had drug use problems.
- The high correlation of trauma with counseling needs indicates that homeless women in this sample who were wanting help with trauma symptoms were also interested in general counseling needs.
- Treatment services need to be geared to the individual needs of clients and client groups. Assessing clients' needs and motivation to work on various treatment areas may help counselors write realistic treatment plans and more fully engage clients.