Needs and Services

One of the most important skills to have in facilitating child family teams is to understand the difference between *needs* and *services*.

*Needs* describe what it will take for the family to achieve their family vision…their long-term goal. Needs are also based on the life domains (family, safety, legal, mental health, educational/vocational, recreational, medical, spiritual/religious, cultural, housing, financial, transitional planning).

*Services* are a type of strategy to meet a need.

One of the most common mistakes made when implementing wraparound is jumping immediately to services. It is most commonly seen in statements such as *the child “needs” a mentor or the family “needs” therapy.*

There are other examples of services that are commonly identified as “needs.” Some of the other ones are medication monitoring, residential, behavioral assistance, tutoring, hospitalization, partial hospitalization, and psychological/psychiatric evaluations. **None of these are needs. They are all strategies to meet needs.**

When that happens (and it will!), keep in mind that a step has been skipped. We are already identifying strategies before the underlying need has been established. We are missing “why” the service is “needed.”

**In order to get a true need statement, take the service that has been suggested and plug it in to any or all of the following questions.**

- **What is it you hope to get out of ______________________?**
- **How will ____________________________ help you?**
- **What type of concerns do you want _______________ to address?**
- **What does the child/family need help with that _____________ will address?**

By answering these questions, you will then have a better understanding of what the underlying need is. In one of the previous examples, perhaps the “need” for a mentor reflected an underlying need for the child to have access to safe recreational activities in the community. Now when the team is searching for strategies, it does not have to limit itself to just looking for a mentor. The team can go back to the strengths list to brainstorm a number of different natural, normalized strategies to meet the underlying need.
Be careful with the following phrases. They do not identify specific services but also do not provide very much detail as far as what the need is…

- **The youth needs a role model.**
  The use of the phrase “role model” is often times another way of saying the youth “needs a mentor.” Plug “role model” into the questions listed on the previous page. The answers should give you a better understanding of the underlying need.

- **The child needs someone to talk to about her feelings.**
  The first concern with this statement is that it is generally code for saying the child needs therapy and as it has been previously established, therapy is not a need. The second concern with this statement is that it makes a very big assumption. The assumption is that by getting things “off their chest” and talking about feelings, kids will naturally feel better. That may be true for some of our youth but not for all of them. Though well intentioned, placing an emphasis on talking about their feelings with vulnerable children with limited coping skills may end up making them feel much worse. In fact, with many types of effective therapy with kids (for example, art therapy and play therapy) talking is not the primary focus. If the “need” to talk to someone is brought up, the team should have a thorough discussion to ensure that this truly reflects the individualized need of the youth.