



Strengths Weaknesses Opportunities and Threats (SWOT) Analysis

9/22/2015

Overview

The SW FYSPT held a SWOT Analysis training on September 22, 2015, the training was presented by Jeanette Barnes and organized by SW FYSPT Tri-leads and Jill McCormick from PAVE. After the training objectives were met, the SW FYSPT participants completed a SWOT Analysis for the Clark and Skamania County Region. The list of ideas was generated in small groups, and each small group presented their ideas to the entire group and held a large group discussion for each section. Each section was discussed in turn, beginning with Strengths. Once the group moved down to weaknesses and threats, everyone had the opportunity to prioritize the top weaknesses and threats that were identified in our community. Another discussion was held in order to choose the top three (3) or four (4) threats that the FYSPT wanted to work on tackling before moving on to the next prioritized points. The SWOT Analysis was the SW FYSPT's identified method of completing a needs assessment. The SW FYSPT was still in the developing stages when this training and analysis was completed. This document will be utilized and updated by the SW FYSPT in identifying areas of need within the community. This document was reviewed on February 22, 2016 and updated on March 21, 2016 to reflect the community's input.

SWOT Analysis

Strengths

Group 1:

- Community is supportive of wraparound/supports and family voice
- Diversity in organizations within group-new attendees
- FYSPT is expanding
- Support from SWBH-RSN
- Accountability by leaders is derived through the TR lawsuit (WISe)
- Strong community of peer support
- Funding
- Dual roles
- Natural conversations - equity
- Curiosity on how to make it better
- Inclusive
- Increased commitment/empathy



Group 2:

- Good support from the RSN
- Wide variety of community members
- Core group of committed people
- We are filling the gaps for a community need
- Long term commitment
- Lots of passion within the community
- A needed service
- Ready for change
- Opportunistic time
- Over 50% of members have a child with special needs
- Momentum
- Compassionate members
- Members have both professional and lived experience
- Leaders are driven
- Huge community support (ie; CUP-MCO's, Clark County etc.)
- Potential for growth in our community
- Strong start
- Using strong historical relationships to build FYSPT
- Developing a strong FYSPT to replicate
- Already done a lot of outreach and collaboration
- Balanced focus between professional and family voice

Weaknesses

Group 1:

- Time constraints
- Challenging to get youth at the table
- Need to educate the community about what a FYSPT is
- Need to recruit more members to help
- Uninformed community
- Need to get the word out
- Missing key players; DCFS, Catholic community service ,MH agencies
- Retaining members
- Improve/expand outreach
- Minimal diversity of culture (i.e.: Russian, Latino, Tribal, and The Black Community)

Group 2:

- Need for more youth involvement; need a youth Tri-lead
- Time constraints, deliverables, planning, outreach, ability to attend/participate
- Lack of cultural diversity
- Having to explain purpose- marketing, education
- Lack of understanding of systems, language, jargon
- Knowing available resources
- Person-first language
- Need for Comfort Agreement

Top Prioritized Weaknesses:

1. Improve/expand outreach by utilizing local resources (i.e. The Columbian and marketing items to hand out)
2. Getting youth and families to the table
3. Diversity of culture

Opportunities

Group 1:

- List serves/distribution lists
- Networking- finding and utilizing current members (YWCA, special ed. teachers, schools, PAVE and Innovative services, etc.)
- Start a member ship committee and other subcommittees
- Retention/outreach pamphlet
- “ Vehicle of change”- community owns and can influence change in systems of care
- Follow up with people who come
- Facilitators/Mediators.....make sure all voices are heard

Group 2:

- Good support from RSN/MCOs
- There is some funding available; incentives, food, training, workshops
- Outreach opportunities ; i.e. Community events, fairs
- Events that support our work
- Family resource centers in the schools
- Website/social media
- Word of mouth
- Untapped resources; communities cultures



- Other groups with same or similar purpose
- Places that could use our resources, (i.e. hospitals, treatment agencies, mental health agencies, Department of corrections, Children's administration, Health Care Administration)
- Medicaid integration

Threats

Group 1:

- People falling through the cracks during the Medicaid changes
- Continuity of care disruption
- Stigma re: mental health
- Confusion around systems
- Fear of change- people who have struggled to get where they are losing what they have
- Lack of collaboration, transitions have not been seamless
- Agency/institution-focused policies, not person-centered (i.e. case notes and SSI)
- Burnout among active FYSRT members
- Cultural barriers when reaching out for diversity

Group 2:

- Apathy
- Not my problem
- Stigma & judgment
- Leave it to the experts
- Understanding recovery
- Limited funding
- Discouragement/ burnout
- Uncertainty
- Duplication of services
- Red tape/bureaucracy
- Time constraints

Top Prioritized Threats:

1. Continuity of care/change
2. Agency/institutional focus
3. Stigma
4. Discouragement/burnout