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*Children and Opioids in State Courts Project*

# Targeted Resource Mapping Toolkit:

Mapping Resources Along a Continuum of  
Services to Address Substance Use Disorders





The National Council of Juvenile and Family Court Judges® (NCJFCJ) provides cutting-edge training, wide-ranging technical assistance, and research to help the nation’s courts, judges, and staff in their important work. Since its founding in 1937 by a group of judges dedicated to improving the effectiveness of the nation’s juvenile courts, the NCJFCJ has pursued a mission to improve courts and systems practice and raise awareness of the core issues that touch the lives of many of our nation’s children and families.

For more information about the NCJFCJ or this document, please contact:

National Council of Juvenile and Family Court Judges

P.O. Box 8970

Reno, Nevada 89507

[www.ncjfcj.org](http://www.ncjfcj.org)

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NCJFCJ's Contributing Authors: Mark Funkhouser, Site Manager; Adrea Korthase, JD, Senior Program Manager; Wendy Schiller, MPM, Senior Program Manager; and Andrew Wachter, MS, Site Manager.

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# Introduction and Background

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In 2019, the National Council of Juvenile and Family Court Judges (NCJFCJ) received funding support from the State Justice Institute (SJI) to manage the Children and Opioids in State Courts Project. The project design included providing training and technical assistance to juvenile and family courts across the country to address the effects of opioid use disorders (OUDs) and other substance use disorders (SUDs) on children and families.

A large component of the project involved recruiting judicially-led court sites to engage in Targeted Resource Mapping to document the continuum of services available for children and families affected by OUDs and other SUDs. The project had two primary, interrelated goals for the sites to: 1) gain knowledge of existing services on a local level; and 2) identify and address service gaps in an effort to ensure a healthy and effective continuum of services. As a result of that work, the NCJFCJ developed the Targeted Resource Mapping Toolkit (Mapping Toolkit). The Mapping Toolkit includes templates to develop a Targeted Resource Map (resource map), Targeted Resource Directory (resource directory) and Targeted Resource Mapping Action Plan (action plan).<sup>1</sup>

The Mapping Toolkit is intended to encourage and provide guidance to courts that are seeking to better understand existing resources, identify and address service gaps, and build relationships with providers in their community.

## Key Definitions and Distinctions

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Resource mapping is not a new strategy or process, as it has been in use for many years in varying forms and in various areas of practice. Resource mapping, also known as asset mapping or environmental scanning, in its simplest form is the process of identifying specific resources available in your community and developing strategies to use those resources. The process acknowledges that individuals, organizations, and local institutions all have the capacity to create real change in their area. Resource mapping also helps individuals realize their work is part of a larger community effort working together toward common goals.

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<sup>1</sup> Templates are located in the Appendix.

For our purposes, Targeted Resource Mapping is a collaborative process among courts and their stakeholders to identify existing resources and service providers in the community for children and families affected by OUDs and other SUDs. The resource map in the Mapping Toolkit guides conversation and can be seen as a means to an end. It is the first step toward building the companion resource directory. While the resource map identifies the name of the service provider or resource, the resource directory contains more detailed information, such as contact information, program specifics, and referral information that is necessary to connect children and families with the appropriate services.

Combined, the resource map and the resource directory can help communities accomplish a number of goals, including:

- Identifying existing resources for those affected by OUDs and other SUDs;
- Identifying gaps in resources and strategies to fill them;
- Ensuring a healthy and effective continuum of substance use services in the community;
- Encouraging collaboration and cultivating new partnerships and relationships between courts and service providers; and
- Developing a centralized source of information on substance use service providers to share across agencies that work with children and families involved in court.

The NCJFCJ developed the resource map, resource directory and action plan templates provided in this Mapping Toolkit. These templates have been used successfully in many jurisdictions across the country to identify and document resources and service providers in the community for children and families affected by OUDs and other SUDs. Given that jurisdictions vary in size, structure, and needs, it is important to view these tools as guides that are flexible based on the uniqueness of the court and community. For example, some jurisdictions have added space to document

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**Download and read *Children and Opioids in State Courts Project: Lessons Learned in Targeted Resource Mapping* to better understand the challenges and solutions that other jurisdictions encountered during targeted resource mapping.**

services that are specifically trauma-informed or evidence-based or targeted towards specific populations based on race and ethnicity, gender or sexual orientation. To be the most relevant, useful and effective, the resource map and resource directory should capture the services and resources necessary to ensure a healthy continuum of services from prevention to recovery that meets the unique needs of your community. This toolkit follows a five-step process that guides collaborative teams through the mapping process.

## Five-Step Mapping Process

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### ● **Step 1:**

#### ○ **Build a Targeted Resource Mapping Team**

○ Building a collaborative team is the first and most important step to successfully mapping the existing services in your community and developing a plan to sustain the companion resource directory. Therefore, it is very important to begin with a multi-disciplinary, committed team. The team should be judicially led and composed of various court stakeholder agencies and others who are familiar with the landscape of OUD and other SUD services across the continuum from prevention to recovery.

To ensure that the workload is not placed on just a few shoulders, the ideal team should be composed of five to seven members including a:

- Judicial officer
- Parent attorney
- Child welfare agency representative
- Medical/health care representative familiar with substance use disorder services
- Substance use disorder service provider

Consider adding members to your team who might help identify services for diverse populations that make up your community based on race,

ethnicity, culture, languages spoken, sexual orientation, etc.

When recruiting team members, be upfront and realistic about the amount of time, effort, and commitment each person will be expected to contribute as a member of the team. Developing and sustaining a resource map and directory is an ongoing process that will take continued innovation, work, and dedication which requires additional time to complete tasks outside of scheduled meetings. Setting expectations early will help team members manage their existing work commitments.

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## ● Step 2.

### ● Develop a Targeted Resource Map

○ The resource map is designed to engage your team in conversations about the availability of services along the continuum of services from prevention to recovery. The six service categories targeting SUDs include cultural equity, prevention, treatment and intervention, harm reduction, reducing overdose and death, along with recovery. Each service category includes many different service types. These service types help to identify specific types of services within each category. For example, in the prevention service category, school and college prevention programs as well as pill disposal programs are specific service types.

It is important to note that the resource map includes both services and resources that address OUDs and other SUDs. The term services include providers, programs and interventions to which children and families can be referred. Resources include programs or practices that address SUDs on a broader community level. For example, the template identifies prescription monitoring programs, pill disposal programs, and Good Samaritan laws as resources that support a comprehensive continuum of services.

- **Cultural Equity** – Before documenting specific service providers on the resource map, it is important to have focused conversations regarding your community’s unique needs and availability and access to services for marginalized populations. These conversations can help ensure the resource map and companion directory include

services that are culturally responsive and inclusive. The cultural equity column on the resource map contains prompts to identify your community's unique needs based on sex, race/ethnicity, sexual orientation and gender identity, along with disparities in service provisions for these groups and services that may specifically address their unique needs.

- **Prevention** – Prevention strategies aim to educate and support individuals and communities to prevent the use and misuse of drugs and stop the progression from use to a SUD.<sup>2</sup> Prevention strategies may have different areas of focus and can be implemented in a variety of settings and can involve the family, school, and community. Prevention efforts are often directed at younger populations in hopes of preventing or delaying the onset of substance use and avoiding the devastating long-term consequences to the individual as well as communities.
- **Treatment and Intervention** – Treatment and intervention strategies include an array of services and interventions with a primary focus on treating OUDs and other SUDs, providing both acute stabilization and ongoing treatment.<sup>3</sup>
- **Harm Reduction** – Harm reduction efforts are directed toward individuals or groups to reduce the harms associated with substance use. Harm reduction strategies often focus on safer use, managed use, abstinence, and meeting people who use drugs where they are.<sup>4</sup>
- **Reducing Opioid Overdose and Death** – These strategies are specifically designed to prevent overdose and death and include access to Narcan, Good Samaritan Laws, opioid prescription monitoring programs, and overdose fatality review boards.
- **Recovery** – Recovery-oriented care and support help people with mental and substance use disorders manage their conditions

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2 Prevention of Substance Use and Mental Disorders. (n.d.). Retrieved March 22, 2021, from <https://www.samhsa.gov/find-help/prevention>.

3 Center for Substance Abuse Treatment. Substance Abuse Treatment for Persons with Co-Occurring Disorders. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2005. (Treatment Improvement Protocol (TIP) Series, No. 42.) Appendix C: Glossary of Terms. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK64200/>.

4 The Harm Reduction Movement. (n.d.). Retrieved March 13, 2021, from <https://harmreduction.org/movement/>.

successfully by improving their health and wellness, helping them live self-directed lives and guiding them to reach their full potential.<sup>5</sup>

The team should develop a schedule of meetings to ensure progress is made in a timely manner. In the initial meeting, the team should review the tools and ensure members are aware of the purpose and intended use of the tools. It is also a great time to make sure the team has sufficient representation from the community to identify the service types in each column of the resource map. During the initial meeting, it is also important to define the geographical boundaries within which you will identify services. This may be based on city or county boundaries depending on the size of the jurisdiction or based on what is a reasonable amount of time that children and families can be expected to travel for needed services.

<b>Meeting</b>	<b>Focus</b>
<b>Meeting 1</b>	Team member introductions; review resource map, resource directory and action plan tools; identify community culture considerations; and identify existing directories that may be helpful. Develop sustainability plan.
<b>Meetings 2-3</b>	Document existing resources on resource map. Use existing directories as a starting place.
<b>Meetings 4-5</b>	Gather program and provider details to complete resource directory.
<b>Meeting 6</b>	Identify service gaps and develop action plan to address gaps.
<b>Meeting 7</b>	Finalize resource directory. Develop versions for posting on website (Excel) and sharing with stakeholders (PDF).
<b>Ongoing Meetings</b>	Monitor progress on action plan to address service gaps and sustainability efforts. Implement and monitor sustainability plan to ensure routine updates of the resource map and resource directory.

5 Recovery and Recovery Support. (n.d). Retrieved February 13, 2021, from <https://www.samhsa.gov/find-help/recovery>.



Over the course of several meetings, the team should engage in conversations around the availability of service types within each service category and document the name of the provider in each row. It is important to focus on the actual service provider name while completing the map, as many providers offer numerous separate programs. For example, the Hope House (provider) may offer Horizons (a SUD treatment program) and Pathways (a peer recovery program). The companion resource directory will help distinguish between providers and specific programs. The following meeting schedule may be helpful to your team in making progress and is flexible based upon the size of your community (i.e., you may need more or fewer meetings to complete tasks).

While developing the resource map, it is common for the team to be unsure if a service type exists in their community or what the name of a provider is. When there are uncertainties, it is best to assign follow-up tasks to team members to answer these questions. During the next meeting, team members can report out on their findings and fill in areas of the resource map as appropriate.

It is likely that your team will identify gaps where no services could be identified in the community for certain service types. This is one of the purposes of engaging in Targeted Resource Mapping. It is useful to be aware of service gaps and develop a plan on how to respond. Once your team has completed the resource map, it is time to develop the resource directory.

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## ● Step 3.

### ● Develop the Resource Directory

- The resource directory provides more useful information about each of the service providers identified on the resource map. The resource directory is the final product of the team's effort to map and identify substance use services for families involved in juvenile and family courts.
- The resource directory includes contact information for each service provider and other important information to help select the most appropriate services(s) for youth and families. Remember, the resource directory template provided is flexible and your team can add additional

details for each program that may be helpful and informative to users of the resource directory. It may be helpful to have two forms of the final resource directory: an internal version in Excel that makes it easy to sort and find particular services and a version for disseminating that is completed in Word or PDF.

Most of the work to complete the resource directory will be done outside of the team meetings as it requires a lot of searching for and documenting provider and program details. The most common way to gather this information is through a combination of existing information, internet searches and phone calls to the providers. In many cases, team members have access to or are aware of other types of directories that may include information on existing substance use resources in the community, which can help save time completing the directory. Simple internet searches often reveal important contact and program details that are helpful, and a brief phone call to the provider can help collect additional information. Other innovative approaches to gathering this information include creating a survey that asks all the questions from the resource directory and sending it to each provider to fill out. The survey responses can quickly be exported to create a resource directory.

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## ● Step 4.

### ● Identify and Target Service Gaps

- One of the goals of engaging in Targeted Resource Mapping is to identify service gaps along the continuum from prevention to recovery.
- Service gaps are common as most courts and communities struggle with a lack of services or resources for those affected by OUDs and other SUDs. Gaps may exist because the service type does not exist at all or there are not enough providers in that space to adequately meet the needs of children and families. As you work to complete the resource map, pay attention to areas that are left blank or that have few resources identified. In addition, engage your team in conversations about service gaps from their perspective or additional barriers to accessing existing services. To help identify service gaps and barriers to existing services, consider the following questions:
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- Were there any blanks in our resource map indicating a missing service?
- Does eligibility criteria limit services to those in need of services in the community?
- Do we have sufficient services for a particular high need area (e.g., inpatient substance use treatment)?
- Do we have services to respond to the unique needs of our population based on race, ethnicity, sexual orientation and gender identity, abilities, etc.?
- Are there long wait times to get into a service? What is the current capacity of services?
- Are there barriers to receiving services due to transportation, costs, types of payments accepted, etc.?
- Are the services evidence-based and trauma-informed? Can they provide outcome data?

Once gaps have been identified during the mapping process, it is important to begin efforts to address and attempt to fill them. Your team should develop an action plan that identifies clear goals and action steps to help reduce service gaps and meet regularly to monitor progress of the plan. Depending on the number of gaps identified, you may need to prioritize which gaps to target first based on achievability, amount of effort necessary and community needs. Common goals or strategies that may help address service gaps include:

- Expanding your search efforts beyond the team members to double-check for specific service types. It is possible they exist but your team is not familiar with them.
- Exploring funding opportunities that may expand current services or help start new services.
- Engaging current service providers to see if they are able to fill identified gaps.



## ● **Step 5.**

# ● **Using and Sustaining Your Resource Directory**

● Engaging in Targeted Resource Mapping and developing a companion resource directory helps take valuable knowledge on community resources and services from individual silos and document it in a centralized resource. This information can be viewed, shared, and used by the court and its stakeholders in an effort to improve the lives of children and families. The resource directory is a valuable tool to help judges, attorneys, child welfare agencies, advocates and other stakeholders become more aware and knowledgeable of the nature and types of services and resources available for those with OUDs and other SUDs. The resource directory is also a valuable tool to help identify appropriate services to refer children and families. Below are some unique ways individual stakeholders can use the directory.

### **Judicial Officers**

- Convene stakeholders and providers to build relationships
- Advocate for necessary services in the community to address gaps
- Advocate for use of evidence-based programs and practices

### **Parent and Child Attorneys**

- Engage children and families regarding available services to encourage voice and choice in services
- Advocate for treatment options for clients rather than strictly punitive measures

### **Caseworkers**

- Identify services and resources to include in case plans that meet the unique needs of youth and families
- Build awareness of all services and resources that support children and families to support effective case planning

When combined with a bit of motivation, passion, and creativity, the uses of the resource map and directory are nearly endless. For example, using the address and zip codes of service providers, resources can be mapped geographically to identify their proximity to clients, courts, public transportation options, and identify underserved areas of the community. When combined with other community data sources on crime, housing, education, poverty etc., the resource map and resource directory can be used to help paint a bigger picture of the community as a whole.

Creating these tools is not the end of the team's work, rather it is the beginning of a process to build valuable relationships and partnerships and develop systemic ways to sustain the quality and accuracy of the information contained in the map and directory. One of the challenges with creating resource directories is that it can become outdated very quickly. Therefore, it is important to use and share the directory broadly as this will help sustain the team's efforts and keep the directory up to date. The more the directory is used, the more likely it will be updated regularly. The team should develop a plan to help sustain the resource directory that focuses on:

- Identifying a champion on the team to lead dissemination and sustainment efforts;
- Identifying a website (i.e., court website) to house the resource directory and make it easily sharable;
- Disseminating a printed version of the resource directory broadly to court stakeholders and service providers in the community;
- Holding semi-annual provider meetings to encourage networking, awareness, and collaboration among service providers and the courts; and
- Developing a protocol for updating the resource map and resource directory. Consider enlisting the help of the providers to update their service information.

# Summary

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Juvenile and family courts serve some of our nation’s most vulnerable people, including children and families affected by opioids and other substance use disorders. A robust continuum of services and resources that address substance use disorders is necessary to ensure children and families receive treatment and support. Courts and their stakeholders have a responsibility to ensure adequate services and resources are available to meet the needs of children and families who come to court. A judicially-led approach to Targeted Resource Mapping can help document existing services and identify additional services that can help improve the lives of children and families affected by opioids and other substance use disorders.

# Appendix

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- [Targeted Resource Mapping Action Plan \(PDF\)](#)
- [Targeted Resource Map and Directory \(Excel worksheet, fillable\)](#)

**TARGETED RESOURCE MAPPING  
ACTION PLAN**

	GOAL	ACTION STEPS	EXPECTED RESULTS OF THE CHANGE	ANTICIPATED BARRIERS	RESPONSIBLE PARTIES AND TARGET DATE
Prevention					<ul style="list-style-type: none"> <li>• Owner:</li> <li>• Next Steps:</li> <li>• Target Date:</li> </ul>
Treatment Intervention					<ul style="list-style-type: none"> <li>• Owner:</li> <li>• Next Steps:</li> <li>• Target Date:</li> </ul>
Harm Reduction					<ul style="list-style-type: none"> <li>• Owner:</li> <li>• Next Steps:</li> <li>• Target Date:</li> </ul>
Reducing Overdose/Death					<ul style="list-style-type: none"> <li>• Owner:</li> <li>• Next Steps:</li> <li>• Target Date:</li> </ul>
Recovery					<ul style="list-style-type: none"> <li>• Owner:</li> <li>• Next Steps:</li> <li>• Target Date:</li> </ul>



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