Reducing the Justice Gap and Improving Health through Medical-Legal Partnerships Danya E Keene PhD¹, Sascha Murillo², Emily A Benfer JD³, Alice Rosenthal JD⁴ and Ada M Fenick² Vale Center for Advocacy 1 Yale School of Public Health, 2 Yale School of Medicine, 3 Columbia Law School, 4 Connecticut Center for Children's Advocacy

Background

- 71% of low-income US households experienced at least one civil legal problem in the last year and 86% of legal needs reported by lowincome Americans received inadequate or no legal help (Legal Services Corporation, 2017).
- The "justice gap," the disparity between civil legal needs and resources available to meet those needs, is directly related to critical social determinants of health including education, housing, and benefits.
- The Medical-Legal Partnership model may uniquely address barriers to legal access that contribute to this justice gap.

Objective

This qualitative study draws on interview data to identify barriers to legal access and examine how the MLP model uniquely addresses those barriers.

Method

- We conducted semi-structured interviews with 20 parents and guardians (see table 1) who had received services from one pediatric MLP located within the children's hospital at an academic medical center in New Haven, CT.
- Our interview guide asked about experiences with the MLP, child and parent health, provider relationships, and prior experience with the legal system.
- Interviews were recorded and transcribed verbatim.
- Analysis followed an iterative and inductive coding approach
- A final codebook was applied to all transcripts using Dedoose software.

Table 1: Participant Characteristics (N=20)		
Presenting Issue Housing Utilities Education Guardianship Benefits (SSI, SNAP)	30% 15% 35% 5% 15%	Time Since MLP Interaction Average Shortest Longest
Ethnicity Black Hispanic Other/Refused	70% 25% 5%	Language English Spanish
Guardian type Parent Grandparent	90% 10%	Female Average Age

Results*

27 mos 1 month 64 mos

90% 10%

100%

40 yrs

Our interviews suggest that the pediatric MLP addressed multiple barriers to attainment of legal advice and/or representation, including:

1. Identifying legal needs and creating awareness of legal rights

Several participants were unaware that their problems had legal remedies prior to engagement with the MLP. By enhancing awareness of legal rights among medical staff, the MLP was able to identify and serve patients who otherwise would not have sought legal services.

- Sara, who was facing an impending eviction, noted: "I didn't know my options before [the MLP lawyer] got involved....after that, I knew."
- God forbid, it happens again... I know my rights and I know what I'm entitled to."

"I know my rights and I know what I'm entitled to." -Nia

2. Providing an easy access point to legal assistance and services that were often difficult to locate, navigate and obtain.

Some participants were too overwhelmed by the challenges they were facing to reach out for legal help. The MLP brought services to them.

- You don't know where to start."
- then I feel like I'm alone. Then I forgot that I could reach out and talk to this person."

3. Facilitating early access for future needs through ongoing relationships.

The MLP created ongoing relationships between lawyers and participants. Some participants described regular contact with the lawyer similar to the contact they had with the pediatrician.

Sylvia had regular contact with the MLP and over many years had multiple issues addressed. She 🧹 noted "I've been six years with [the MLP lawyer] and I still call her sometimes... If I'm at the hospital I'll stop and see her, she see the kids..."

4. Improving trust and confidence in the legal system.

Experiences with MLP served to counter negative beliefs about the legal system and gave participants confidence that this system could work on their behalf. Nia explained, "with legal services in general I feel that now that I have an understanding I wouldn't feel like it's an enemy. I feel like more it's more of a resource."

Nia was also unaware that she had legal recourse to resolve her impending eviction. The MLP informed her of her legal rights and helped her stay in her home. She explained, "If,

Tiana explained, "It's like, trying to do it on your own, you don't know which way to go.

Jessie explained. "Sometimes my mind closes, I have a lot going on. My brain closes and

"I've been six years with [the MLP lawyer]"-Sylvia

Several participants were often reluctant to share information about their challenges. The MLP helped them feel more comfortable asking for help. • Sara explained, "I was really worried that the doctors might call [child protective services]...[the lawyer] was like, 'No that is not going to happen.' She reassured me a lot. That's why I'm more comfortable now to ask for help."

By providing no-cost services, the MLP also addressed affordability concerns that prevented many participants from considering the possibility of legal interventions.

"She always reassured me that these services were free...'cause that was one of my biggest fears" -Sequoia



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Yale NewHaven Health

Results (continued)

5. Addressing affordability concerns

Tiana explained, "Most of the parents don't have the finances to afford a lawyer. And to have someone that's able to help you and you don't have to worry about the cost, it's [the MLP] a blessing. Because that's what stops most of us from reaching out to get legal help."

Sequoia noted that the MLP offered frequent reassurance regarding cost. "And she always reassured me that these services were free

through the health care. 'Cause that was one of my biggest fears."

*We use pseudonyms for participants

Discussion

Our study extends conversations about the justice gap that have primarily focused on interventions within the courthouse. Many of these traditional justice gap initiatives are unable to address barriers that exist before the courthouse door including lack of awareness of legal rights and trust in the legal system. MLP is one intervention with potential to overcome these challenges.

Our findings can also inform MLP best practices: they highlight the importance of on-going relationships that result from locating a fulltime lawyer within a clinic setting.

Our study is based on only one MLP and some findings may not be transferable to other MLP settings. Additional qualitative work at additional MLP sites is needed to deepen our understanding of how the MLP model may address the justice gap.

Despite this limitation our study provides novel insight into the ways that MLPs can uniquely address barriers to legal services and ultimately improve critical social determinants of health.