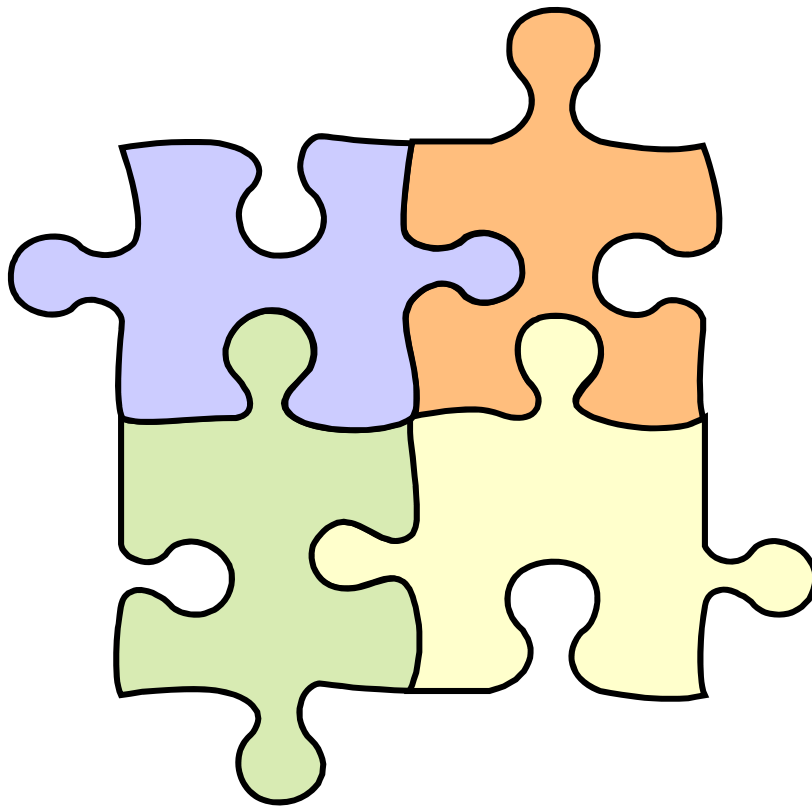


# **DHHS-DBH 2011 Behavioral Health Consumer Survey**

## **Summary of Results**



**Nebraska Department of Health and Human Services  
Division of Behavioral Health  
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## Table of Contents

	Page
<b>Introduction</b>	3
<b>Methodology and Sample</b>	3
<b>Survey Results:</b>	
<b>Adult Survey</b>	
Summary of Results	4
Mental Health versus Substance Abuse Services	6
Behavioral Health Region/Metro – Non-Metro Service Providers	7
Length of Time Receiving Services	7
Scale Summaries – 2006-2011	8
Physical Health Status of Adult Behavioral Health Consumers	8
<b>Youth Survey</b>	
Summary of Results	11
Physical Health Status of Youth Behavioral Health Consumers	12
<b>Respect and Dignity, Treatment Goals and Quality of Life</b>	12
<b>Survey Sample and Response Rates 2005-2011</b>	14
<b>Summary</b>	15
<b>Appendix A – Survey Scales and Calculation of Scale Scores</b>	17
<b>Appendix B</b>	
Table 9 – 2011 Adult Consumer Survey – Summary of Results	21
Table 10 – 2011 Adults Consumer Surveys – Positive Response by Region	22
Table 11 – 2010 and 2011 Adults Consumer Surveys – Confidence Intervals	23
Table 12 – 2011 Youth Consumer Survey – Summary of Results	24
Table 13 – 2010 and 2011 Youth Consumer Surveys – Confidence Intervals	25

## DHHS-DBH 2011 Behavioral Health Consumer Survey Summary of Results

### Introduction

The Department of Health and Human Services' (DHHS) Division of Behavioral Health (DBH) provides funding, oversight and technical assistance to the six Behavioral Health Regions across Nebraska. The Regions contract with local programs to provide public inpatient, outpatient, and emergency services and community mental health, substance abuse and gambling services. During the spring and summer of 2011, the DBH conducted the annual Behavioral Health Consumer Survey. The purpose of the survey was to solicit input from persons receiving mental health and/or substance abuse services from the publicly funded, community-based behavioral health system in Nebraska on the quality and impact of services received. The survey instruments used were:

- a) **28-Item Mental Health Statistics Improvement Program (MHSIP) Consumer Satisfaction Survey** (augmented with 11 questions on improved functioning and social connectedness and one question on quality of life)
- b) **MHSIP Youth Services Survey (YSS)**
- c) **MHSIP Youth Services Survey for Families (YSS-F)**

[Note: These survey instruments have been designated by the Federal Center for Mental Health Services to meet the Federal Community Mental Health Services Block Grant, Uniform Reporting System requirements for Table 9: Social Connectedness & Improved Functioning and Table 11: Summary Profile of Client Evaluation of Care.]

### Methodology and Sample

The DBH contracted with the University of Nebraska Medical Center - College of Public Health (UNMC) to conduct the 2011 Behavioral Health Consumer Survey.<sup>1</sup>

The sample for the survey included behavioral health consumers receiving mental health and/or substance abuse services from the DBH Community-based System in Nebraska. Magellan Behavioral Health supplied a list of names, addresses and phone numbers of current behavioral health consumers to UNMC. UNMC conducted the telephone interviews and entered responses from the phone and mail surveys into the survey database. Data from the surveys were compiled and analyzed by the DBH.

A letter to the consumer was prepared by the DBH which introduced the survey and explained how the UNMC would be contacting them by phone to solicit their participation in the survey. The letter was sent to the consumers in the sample, providing them with three options: 1) to be interviewed over the telephone by a professional interviewer; 2) to be sent a mail survey; or 3) to decline participation in the survey. The consumer was given a toll-free number to indicate

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<sup>1</sup> Questions regarding the 2011 Behavioral Health Consumer Survey should be directed to Jim Harvey, Department of Health and Human Services, Division of Behavioral Health at: 402-471-7824 or email: jim.harvey@nebraska.gov.

their choice to participate, by phone or mail, or to decline participation. If the consumer did not respond to the letter, they were contacted by phone, where they were again given an opportunity to decline participation. Interviewers for the Behavioral Risk Factor Surveillance System (BRFSS) conducted the telephone interviews. Consumers electing to receive a mail survey were sent a survey. If they did not respond within the designated time, they were sent a follow-up survey.

Of the 5,773 consumers in the adult sample, an incorrect or non-working telephone number, or an incorrect address, had been provided for some consumers (n=2,516), preventing a successful contact. With the remaining sample, 1,853 respondents chose not to participate. In all, 1404 adult consumer surveys were completed, a 25% increase over 2010. Of the 353 youth in the sample, 161 completed the survey.

Again, in 2011, the DBH incorporated questions from the Behavioral Health Risk Factor Surveillance System (BRFSS)<sup>2</sup>, a national survey of adults in all 50 states, into the consumer survey. These questions were added to gauge the physical health status of behavioral health consumers.

Survey data were analyzed by race, gender, age, type of services received, and service location (metro vs. non-metro). In addition, the responses to multiple survey questions were combined into the following seven scales or “domains” (see Appendix A for the questions included in each scale, an explanation of the calculation of scale scores and information on scale reliability):

- Access
- Quality and Appropriateness of Services
- Outcomes
- Participation in Treatment Planning
- General Satisfaction
- Functioning
- Social Connectedness

## Survey Results

### *Adult Survey – Summary of Results*

Just over half (51.9%) of the adult consumers in 2011 were female. The consumers ranged in age from 18 to 86, with an average age of 41.8 years. Most (84.0%) were white, 4.8% were black and 1.9% were American Indian. About 5.9% were Hispanic or Latino.

Generally speaking, consumers reported being satisfied with the services they received from community mental health and/or substance abuse programs funded by DBH. In the area of **General Satisfaction**, most adult consumers (83.6%) were satisfied with services (Table 1).

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<sup>2</sup>The Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing telephone health survey of adults ages 18 and over which has collected information on health conditions, health risk behaviors, preventive health practices and health care access in the U.S. since 1984. The BRFSS is used in all 50 states, the District of Columbia, Puerto Rico, Guam and the Virgin Islands. Over 350,000 persons are interviewed by the BRFSS each year, making it the largest telephone survey in the world.

About 8.0% were dissatisfied with services, and 8.4% were neutral. More than three-fourths (79.9%) were satisfied with their level of involvement in treatment planning. Three-fourths (74.5%) responded positively to questions on the **Outcomes** scale. Most (86.3%) responded positively to the questions related to the **Quality and Appropriateness** of services, and 80.3% thought that the services were **Accessible**. Most consumers felt that the services they received improve their level of **Functioning** (77.0%) and **Social Connectedness** (77.7%).

While females tended to respond more positively than males on several of the scales (**Outcomes, General Satisfaction, Participation in Treatment Planning** and **Quality/Appropriateness**), none of the differences were statistically significant. Both males and females responded significantly more positively to questions in the **Quality/Appropriateness** domain than to questions in the **Outcomes, Participation in Treatment Planning, Functioning** and **Social Connectedness** domains.

Consumers aged 19 to 24 tended to respond more positively than all other age groups (25-44, 45-64, 65+) on questions of **Social Connectedness**. Consumers aged 65 and over responded less positively on questions concerning **Quality and Appropriateness** of services. Consumers aged 45 and over reported higher levels of **General Satisfaction** compared to consumers who are 44 years of age and under.

There were no significant differences between responses for consumers who are white, non-Hispanic adults versus those consumers who are non-white or Hispanic adults. Within the consumers who are white, non-Hispanic the questions regarding **Quality/Appropriateness** of services received significantly more positive responses than questions regarding **Access, Outcomes, Participation in Treatment Planning, Functioning,** and **Social Connectedness**. Additionally, significant differences are observed among the scales for consumers who are non-white or Hispanic. Non-white or Hispanic consumers responded significantly more positively to questions within the **Quality/Appropriateness** domain compared to **Outcomes** and **Participation in Treatment Planning** questions.

**TABLE 1: Agreement Rates by Consumer Characteristics**

	Access	Quality/ Approp	Outcomes	Participation Tx Planning	Gen Satis	Func	Soc Conn
<b>All Adult Consumers</b>	<b>80.3%</b>	<b>86.3%</b>	<b>74.5%</b>	<b>79.9%</b>	<b>83.6%</b>	<b>77.0%</b>	<b>77.7%</b>
<b>Gender</b>							
Male	80.7%	85.6%	73.7%	78.0%	81.6%	77.1%	77.8%
Female	79.9%	86.9%	75.2%	81.6%	85.5%	76.9%	77.7%
<b>Age</b>							
19-24 years	76.2%	83.2%	77.6%	75.4%	76.4%	81.5%	90.6%
25-44 years	81.4%	88.6%	76.6%	83.1%	81.7%	79.1%	78.7%
45-64 years	80.5%	86.5%	73.0%	78.4%	87.5%	74.1%	74.4%
65+ years	86.3%	69.2%	70.8%	79.2%	88.2%	77.6%	76.9%
<b>Race/Ethnicity:</b>							
White, non-Hispanic	81.0%	86.7%	74.6%	80.0%	83.8%	77.2%	78.1%
Non-white or Hispanic	77.9%	84.8%	75.2%	79.5%	83.4%	77.7%	76.8%

**Mental Health Versus Substance Abuse Services**

Consumers were asked about the type of services they had received in the last 12 months. Those only receiving substance abuse services in the last 12 months tended to respond more positively on all seven scales than consumers receiving mental health services only (Table 2).

In addition, consumers only receiving substance abuse services indicated higher positive attitudes on **Quality/Appropriateness, Functioning, and Social Connectedness** compared to other domains. Consumers only receiving mental health services reported lower positive feelings on **Outcomes, Functioning and Social Connectedness** compared to other domains.

There were also some significant differences for individual survey questions. For example, consumers receiving substance abuse services responded significantly more positively than consumers receiving mental health services to the following questions:

*As a result of the services received:*

- 10. Staff at \_\_\_\_\_ believe that I can grow, change and recover.
- 25. I am better able to deal with crisis.
- 26. I am getting along better with my family.
- 27. I do better in social situations.
- 28. I do better in school and/or work.
- 29. My housing situation has improved.
- 30. My symptoms are not bothering me as much.
- 31. I do things that are more meaningful to me.
- 32. I am better able to take care of my needs.
- 33. I am better able to handle things when they go wrong.
- 34. I am better able to do things that I want to do.
- 36. I am happy with the friendships I have.
- 37. I have people with whom I can do enjoyable things.
- 38. I feel I belong in my community.
- 39. In a crisis, I would have the support I need from my family or friends.

No questions were significantly more positive for consumers receiving mental health services versus those receiving substance abuse services.

**TABLE 2: Agreement Rates by Type of Services Received in Last 12 Months**

	Access	Quality/ Approp	Outcomes	Participation Tx Planning	Gen Satis	Func	Soc Conn
<b>Services Received Last 12 Months:</b>							
MH Only	82.2%	87.6%	71.1%	80.6%	86.4%	72.4%	73.1%
SA Only	82.9%	94.5%	86.8%	84.4%	87.2%	91.0%	91.2%
Both MH and SA	75.0%	86.6%	78.0%	80.9%	81.3%	79.4%	85.0%
No Services	78.9%	82.6%	73.8%	77.7%	80.5%	77.2%	77.0%

**Behavioral Health Region/Metro – Non-Metro Service Providers**

There did not appear to be any significant differences across the six Regions on any of the seven scales; however, there appeared to be some significant differences among the seven scales *within* some Regions. For example, in Region 5, consumers responded significantly more positively to questions about **General Satisfaction** with services than to questions about **Functioning, Outcomes, and Participation in Treatment Planning**. Among others, in Region 3, 4, and 6, consumers responded significantly more positively to questions about the **Quality/Appropriateness** of services than to questions about **Outcomes, Social Connectedness** and **Participation in Treatment Planning**.

Responses from metro providers (those located in the Omaha/Lincoln metro areas) were compared to responses from non-metro providers (those outside the Omaha/Lincoln metro areas). Consumers receiving services from non-metro providers responded more positively than consumers receiving services from metro providers to questions on six of the seven scales, although none of the differences were statistically significant (Table 3). Additionally, the percent of positive responses to questions in the adult survey for each region can be found in Appendix B, Table 10.

**TABLE 3: Agreement Rates by Location of Service Provider**

	n	Access	Quality/ Approp	Outcomes	Participation Tx Planning	Gen Satis	Func	Soc Conn
<b>Provider Location:</b>								
Metro	710	79.5%	85.1%	74.0%	81.4%	82.7%	75.4%	77.0%
Non-Metro	694	81.1%	87.4%	75.0%	78.3%	84.5%	78.6%	78.5%
Region 1	62	75.8%	82.3%	74.6%	67.8%	82.3%	80.0%	79.0%
Region 2	101	68.0%	85.9%	73.2%	82.1%	81.2%	77.1%	79.2%
Region 3	232	82.5%	90.2%	76.9%	78.0%	87.5%	80.4%	78.1%
Region 4	158	84.7%	86.5%	74.0%	76.3%	80.9%	78.1%	75.6%
Region 5	429	83.8%	84.6%	73.3%	80.8%	83.9%	76.1%	78.6%
Region 6	422	84.7%	86.5%	74.0%	76.3%	80.9%	78.1%	75.6%

**Length of Time Receiving Services**

The length of time a person received services had an effect on their overall satisfaction with services. Consumers who had received services for a year or more responded significantly more positively to the questions about **Access** and **General Satisfaction**; however, they responded significantly **less** positively to questions about **Social Connectedness**. No significant differences were observed between service type and length of stay.

**Scale Summaries – 2006-2011**

Table 4 compares the responses from the 2006 to 2011 adult surveys for each of the seven MHSIP domains (scales). Positive attitudes in 2011 have decreased slightly from 2010 rates across all domains. In 2010, positive attitudes were observed at their highest rates of the last 6 years for 5 of 7 domains. In the last 2 years, positive attitudes are observed to be higher than the 6-year average for 6 of 7 domains. **Social Connectedness** remained below its 6-year average for 2 of the last 3 years.

**TABLE 4: Agreement Rate by Scale – 2006-2011**

	2006	2007	2008	2009	2010	2011
<b>Access</b>	77.1%	81.4%	76.3%	82.1%	82.4%	80.3%
<b>Quality/Appropriateness</b>	82.2%	84.9%	81.9%	87.8%	88.7%	86.3%
<b>Outcomes</b>	68.4%	72.9%	72.0%	71.5%	75.6%	74.5%
<b>General Satisfaction</b>	78.6%	81.1%	75.9%	86.3%	84.8%	83.6%
<b>Participation in Treatment Planning</b>	73.0%	78.1%	73.1%	79.8%	80.3%	79.9%
<b>Functioning</b>	71.4%	77.4%	80.4%	73.7%	78.5%	77.0%
<b>Social Connectedness</b>	87.7%	74.5%	76.3%	75.2%	81.6%	77.7%

A summary of the responses to the MHSIP survey for adults for 2011, plus the eight questions related to improved Functioning and Social Connectedness, can be found in Appendix B.

***Physical Health Status of Adult Behavioral Health Consumers***

Responses to the health questions on the consumer survey were compared to responses to the BRFSS for the general adult population in Nebraska for the latest year available - data from 2010. Those comparisons are shown in Table 5.

To measure the presence of chronic physical health conditions among behavioral health consumers, four questions from the Behavioral Health Risk Factor Surveillance System (BRFSS) were included on the consumer survey in 2011:

- Has a doctor, nurse, or other health professional ever told you that:*
- a) *you had a heart attack (also called a myocardial infarction)?*
  - b) *you had angina or coronary heart disease?*
  - c) *you had a stroke?*
  - d) *you had diabetes?*

The most common chronic health condition among behavioral health consumers is diabetes. More than one in seven (14.7%) mental health consumers have reported a diabetes diagnosis.



Furthermore, mental health consumers also report having a stroke in their lifetime at twice the rate of the general population. The proportion of existing chronic health conditions for substance abuse consumers is near the general population averages for each condition.

When asked whether they smoke cigarettes, over half (53.2%) of mental health consumers indicate that they smoke every day (44.8%) or some days (8.4%). Likewise, 72.7% of substance abuse consumers report smoking every day (64.5%) or some days (8.2%). However, only 14% of the general population report smoking every day, while 80.8% report that they do not smoke at all.

When asked to assess their general health, just under one-third (28.5%) of mental health consumers rate their general health as excellent or very good, while 11.8% rate their general health as poor. Similarly, 36.5% of substance abuse consumers rate their general health as excellent or very good, and 6.7% rate their general health as poor. More than half (57.1%) of the general population rate their general health as excellent or very good, and only 2.8% rate their general health as poor.

Adult consumers were then asked two questions about the number of days in the previous 30 days that their physical or mental health was not good:

- 1) *Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?*
- 2) *Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?*

Mental health consumers report an average of 7.1 days in the previous 30 days that their physical health was not good, compared to 5.0 days for substance abuse consumers and 2.8 days for the general population. Consumers of mental health services indicate an average of 9.8 days in the previous 30 days that their mental health was not good, compared to 6.1 days for substance abuse consumers and 2.5 days for the general population.

Consumers were then asked how many days during the past 30 days that poor physical or mental health kept them from doing their usual activities. Consumers of mental health services reported an average of 8.7 days in the previous 30 days that their poor health prevented usual activities compared to 6.4 days for substance abuse consumers and 3.3 days for the general population. Over one-fourth (28%) of all consumers reported that there were no days in the past 30 days when poor physical or mental health kept them from doing their usual activities.

Consumers receiving mental health services were twice as likely as consumers receiving substance abuse services to report having diabetes or a stroke episode in their lifetime. Consumers receiving mental health services reported more days when their physical health and mental health were not good, and more days when poor physical or mental health kept them from doing their usual activities. Consumers receiving mental health services were more likely than consumers receiving substance abuse services to be obese (42.2% vs. 30.9%, respectively). Conversely, consumers receiving substance abuse services were more likely to be overweight (39.8%) compared to consumers of mental health services (30.7%). Consumers receiving

substance abuse services were more likely to report that they smoke every day and to report their general health status as good or very good.

In summary, behavioral health consumers were more likely than the general adult population to report having diabetes. Mental health consumers were about twice as likely as the general population to report having diabetes. Behavioral health consumers, especially those receiving substance abuse services, were much more likely than the general population to report smoking cigarettes on a daily basis. The general population rated their health status significantly better than the behavioral health consumers. Behavioral health consumers experienced significantly more days in the past 30 days when their physical and/or mental health were not good, as compared to the general population.

**TABLE 5: Differences on BRFSS Questions between Consumers Receiving Mental Health Versus Substance Abuse Services and the General Adult Population in Nebraska**

	Primary Reason for Admission		2010 Nebraska General Population
	MH	SA	
<b>Physical Health Conditions:</b>			
Heart Attack or Myocardial Infarction	5.5%	3.5%	<b>3.9%</b>
Angina or Coronary Heart Disease	5.1%	3.2%	<b>4.0%</b>
Stroke	4.4%	2.5%	<b>2.4%</b>
Diabetes	14.7%	7.8%	<b>7.4%</b>
<b>Cigarette Smoking:</b>			
Every Day	44.8%	64.5%	<b>14.0%</b>
Some Days	8.4%	8.2%	<b>5.2%</b>
Does Not Smoke	46.7%	27.3%	<b>80.8%</b>
<b>General Health Status:</b>			
Excellent	9.2%	8.5%	<b>20.5%</b>
Very Good	19.3%	28.0%	<b>36.6%</b>
Good	37.9%	42.2%	<b>30.9%</b>
Fair	21.8%	14.5%	<b>9.2%</b>
Poor	11.8%	6.7%	<b>2.8%</b>
<b>In the Past 30 Days:</b>			
Average Days Physical Health Not Good	7.1	5.0	<b>2.8</b>
Average Days Mental Health Not Good	9.8	6.1	<b>2.5</b>
Average Days Poor Health Prevented Usual Activities	8.7	6.4	<b>3.3</b>
Average Days of Binge Drinking	0.8	1.6	<b>NA</b>
<b>Body Mass Index Category:</b>			
Obese	42.2%	30.9%	<b>27.3%</b>
Overweight	30.7%	39.8%	<b>37.0%</b>
Normal Weight/Underweight	27.1%	29.4%	<b>35.7%</b>

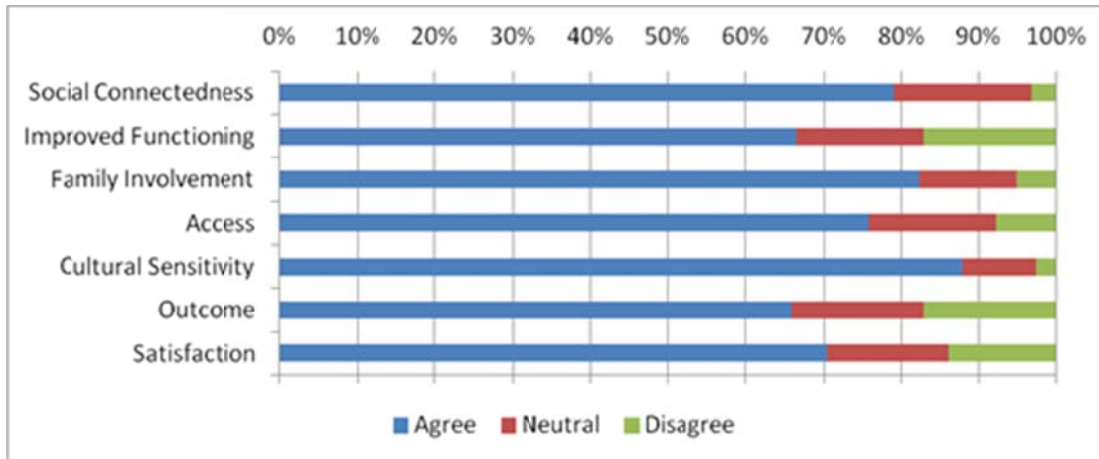
*\*Most recent data for Nebraska general population is from 2010.*

**Youth Survey – Summary of Results<sup>3</sup>**

A total of 161 out of 243 MHSIP youth surveys were completed in 2011, down from 232 out of 410 in 2010. A parent or guardian responded on behalf of the child receiving services. More surveys were completed for boys (63.4%) than for girls (36.6%). The youths’ ages ranged from 6 years to 19 years, with an average age of 14.6 years. Most of the consumers were white, non-Hispanic (74.4%); 25.6% were non-white or Hispanic. Over a third (37.9%) had Medicaid coverage. About half (55.3%) had not received services in the past 12 months; 34.8% had received community mental health services in the past 12 months, and 8.0% had received community alcohol or drug abuse services in the past 12 months.

For the Youth Survey, responses for multiple questions were combined into the following seven scales or “domains” (see Appendix A for the questions included in each): Social Connectedness, Improved Functioning, Family Involvement, Access, Cultural Sensitivity, Outcome, and Satisfaction.

**Figure 1**  
**Statewide Summary – MHSIP Scales – Youth**



Most of the consumers (70.4%) in the Youth Survey indicated that they were satisfied with the services their child received (Figure 1). Fifteen percent (15.7%) were dissatisfied with the services their child received, and similarly 13.8% were neutral. The most positive responses were in the **Cultural Sensitivity** domain – 87.9% responded positively. The responses to the 2011 survey were less positive than responses to the 2010 survey on four domains: **Satisfaction**, **Cultural Sensitivity**, **Access**, and **Social Connectedness**. Positive response rates for the other domains remain relatively unchanged compared to 2010.

A summary of the responses to the MHSIP survey for youth for 2011 can be found in Appendix B, Table 11.

<sup>3</sup> Because of the small sample size, and the large confidence interval (+/-7.38%), caution should be exercised in interpreting the results of the Youth Survey.

### ***Physical Health Status of Youth Behavioral Health Consumers***

The youth/parents were asked some of the same health questions from the BRFSS as the adults. When asked to rate the youths' general health, about one-third (34.8%) rated their general health as excellent, 24.2% rated their general health as very good, and 31.1% rated their general health as good. One in eleven (9.3%) rated their children's general health as either fair or poor. The percentage of youth consumers who rated their general health as excellent or poor remain unchanged compared to 2010 (32.3% for excellent and 9.5% for poor, respectively). A decrease of 6.3% for those who rated their general health as very good was observed from 2010 to 2011.

The youth reported an average of 1 day in the past 30 days that their physical health was not good, 7.4 days when their mental health was not good, and 3.6 days when poor physical or mental health kept them from doing their usual activities. When asked whether the child, in the past 30 days, participated in any physical activity or exercises such as running, sports, swimming, PE or walking for exercise, 86.3% said yes, 11.8% said no, and 1.2% weren't sure.

The youths' weight, height, gender, and age were used to determine their weight status. In looking at the entire youth sample, 4.4% are considered underweight compared to 3.0% in 2010; over half (55.1%) are considered to have a healthy weight range compared to 56.5% in 2010, 17.6% are characterized as overweight compared to 15.5% in 2010, while 22.7% are obese compared to 25.0% in 2010.

### ***Respect and Dignity, Treatment Goals, and Quality of Life Questions***

Two questions were added to the 2011 consumer survey to gauge the quality of interactions between consumers and service providers, based on the recommendation from the DBH Statewide Quality Improvement Team.

- 1) *Staff treated me with respect and dignity.*
- 2) *My treatment (or service) goals were based on my strengths and needs.*

Most adult consumers (90.6%) responded positively to the Respect and Dignity question. Similarly, 88.3% responded positively to the Treatment Goal question. Narrow differences between treatment and demographic groups can be observed with respect to the new questions. Nevertheless, white, non-Hispanics, and consumers who receive substance abuse services appear to respond more favorably towards the Treatment Goal question.

One question was added, beginning in the 2010 surveys, to examine the impact of services on the quality of life for consumers.

- 1) *The services you received at [Provider Name] has improved your quality of life. (ADULT SURVEY)*
- 2) *The services your child received at [Provider Name] has improved his/her quality of life. (YOUTH SURVEY)*

Most adult consumers (80.7%) responded positively to the QOL (Quality of Life) question, and over two-thirds (71.5%) of the youth consumers responded positively to this question. Adult

consumers receiving only substance abuse services responded more positively to this question than adults consumers receiving only mental health services or both substance abuse services and mental health services. Youth and adult consumers receiving services for a year or more also responded more positively to this question than those receiving services for less than one year. For the adult consumers, positive responses increased with age. For youth, the opposite trend was observed, in that positive responses decreased as age increased. In 2011, adult consumers responded significantly less positively to the QOL question than in 2010.

Table 6 provides a summary of the responses to these questions for the adult and youth surveys.

**TABLE 6: Summary of Responses to the Quality of Life Question, Respect and Dignity, and Treatment Goals**

	Quality of Life		Respect and Dignity	Treatment Goal
	Adult Survey	Youth Survey	Adult Survey	Adult Survey
<b>All Consumers</b>	<b>80.7%</b>	<b>71.5%</b>	<b>90.6%</b>	<b>88.3%</b>
<b>Type of Services Received:</b>				
Mental Health Services Only	82.6%	74.0%	92.0%	89.2%
Substance Abuse Services Only	85.7%	55.6%	93.9%	95.1%
Both MH and SA Services	80.6%	25.0%	87.2%	86.5%
No Services Last 12 Months	77.4%	73.7%	89.2%	86.0%
<b>Length of Time Receiving Services:</b>				
Less Than One Year	76.6%	67.5%	89.7%	87.2%
One Year or More	83.5%	74.4%	91.6%	89.6%
<b>Gender:</b>				
Male	80.8%	66.7%	89.4%	87.4%
Female	80.5%	80.4%	91.7%	89.1%
<b>Race/Hispanic Origin:</b>				
White, non-Hispanic	81.1%	66.7%	91.0%	89.0%
Non-white or Hispanic	78.9%	85.0%	89.6%	85.5%
<b>Age:</b>				
< 6 Years	NA	100%	NA	NA
6-9 Years	NA	84.6%	NA	NA
10-14 Years	NA	78.4%	NA	NA
15-18 Years	NA	67.4%	NA	NA
19-24 Years	75.2%	NA	87.5%	87.9%
25-44 Years	80.2%	NA	91.7%	89.4%
45-64 Years	82.5%	NA	90.6%	88.3%
65+ Years	87.8%	NA	90.4%	84.3%

**Survey Sample and Response Rates**

Table 7 shows a summary of sample size and response rates for the last seven years. The response rate for the Adult Survey increased from 37% in 2010 to 43% in 2011. For the Youth Survey, the response rate increased from 57% in 2010 to 66% in 2011.

**TABLE 7: Survey Sample Size and Response Rates – 2005-2011**

Adult Survey	2005	2006	2007	2008	2009	2010	2011
a. How many surveys were attempted (sent out or calls initiated)?	4,821	3,592	5,198	5,980	8,407	5,790	5773
b. How many survey contacts were made? (surveys to valid phone numbers or addresses)	1,567	1,471	2,145	3,238	3,748	3,001	3257
c. How many surveys were completed? (survey forms returned or calls completed)	749	795	1,173	1,019	1,090	1,124	1404
d. What was your response rate? (number of completed surveys divided by number of contacts)	48%	54%	55%	31%	29%	37%	43%
Youth Survey	2005	2006	2007	2008	2009	2010	2011
a. How many surveys were attempted (sent out or calls initiated)?	768	1,567	1,037	784	928	701	353
b. How many survey contacts were made? (surveys to valid phone numbers or addresses)	497	880	537	306	423	410	243
c. How many surveys were completed? (survey forms returned or calls completed)	235	465	254	128	135	232	161
d. What was your response rate? (number of completed surveys divided by number of contacts)	47%	53%	47%	42%	32%	57%	66%

Table 8 shows a summary of the data reported by the DBH to the Center for Mental Health Services for the Federal Community Mental Health Services Block Grant, Summary Profile of Client Evaluation of Care for 2009 through 2011 (Uniform Reporting System Table 11).

For the Adult Survey the responses in 2011 were less positive than responses in 2010 for all five domains. However, the decrease in positive response rates is marginal for three domains: **Outcomes, Participation in Treatment Planning** and **General Satisfaction**. Positive response rate for **Participation in Treatment Planning** remain relatively stable and has shown the least amount of variation over the last three years compared to other domains. **General Satisfaction** is the only domain where the positive response rate has been slightly decreasing every year since 2009.

For the Youth Survey, **Outcomes** is the only domain in which the rate of positive responses has increased every year since 2009. Rates for the remaining domains have decreased from their 2010 levels. Decreases are most noticeable for **Access, General Satisfaction**, and **Cultural Sensitivity**.

**TABLE 8: Summary Profile of Client Evaluation of Care/DHHS-DBH Consumer Survey Results (URS Table 11)**

Report Year (Year Survey was Conducted)	2009			2010			2011		
	Positive Responses	Responses	Percent	Positive Responses	Responses	Percent	Positive Responses	Responses	Percent
<b>Adult Consumer Survey Results:</b>									
1. Percent Reporting Positively About <b>Access</b> .	870	1,060	82.1%	918	1,114	82.4%	1111	1384	80.3%
2. Percent Reporting Positively About <b>Quality and Appropriateness</b> for Adults.	918	1,046	87.8%	978	1,102	88.7%	1182	1370	86.3%
3. Percent Reporting Positively About <b>Outcomes</b> .	739	1,033	71.5%	822	1,087	75.6%	1019	1368	74.5%
4. Percent of Adults Reporting on <b>Participation in Treatment Planning</b> .	788	988	79.8%	849	1,057	80.3%	1049	1313	79.9%
5. Percent of Adults Reporting Positively about <b>General Satisfaction</b> with Services.	928	1,075	86.3%	951	1,122	84.8%	1167	1396	83.6%
<b>Youth Consumer Survey Results:</b>									
1. Percent Reporting Positively About <b>Access</b> .	101	135	74.8%	190	230	82.6%	120	158	75.9%
2. Percent Reporting Positively About <b>General Satisfaction</b> for Children.	98	134	73.1%	180	231	77.9%	112	159	70.4%
3. Percent Reporting Positively About <b>Outcomes</b> for Children.	80	132	60.6%	143	228	62.7%	104	158	65.8%
4. Percent of Family Members Reporting on <b>Participation in Treatment Planning</b> For Their Children.	100	134	74.6%	188	228	82.5%	131	159	82.4%
5. Percent of Family Members Reporting High <b>Cultural Sensitivity</b> of Staff. (Optional)	115	134	85.8%	211	223	94.6%	138	157	87.9%

**Summary**

There were a number of areas of improvement in 2011. For example, survey response rates in 2011 were higher than in 2010 for both adult and youth surveys.

The confidence interval for the adult surveys was +/- 2.53% at the 95% confidence level in 2011, about the same as in 2010; although, the confidence interval for the youth surveys was +/-7.38% in 2011, compared to +/- 6.21% in 2010, a reflection of the smaller sample size in 2011.

Results from the Youth Survey indicate that positive attitudes on treatment outcomes have increased every year for the last three years. Remaining domains, including Treatment Access, General Satisfaction, and Cultural Sensitivity, have decreased in positive attitudes from 2010. When examining overall physical health, a similar proportion of youth consumers, compared to 2010, reported participating in physical exercise, though youth consumers rated their general

health condition as slightly worse in 2011. A higher proportion of youth reported being overweight and obese in 2011 compared to 2010. Youth consumers experienced at least 1 additional day on average, per month, for which mental health status kept them from doing their usual activities, compared to reports from 2010. However, each youth age group (<6, 6-9, 10-14, 15-18) responded more positively to the Quality of Life question in 2011 than 2010.

For the adult survey, responses to all domains on the survey were less positive in 2011 than in 2010. Nevertheless, an upward trend is still present, as positive attitudes of the last 2 years are higher than their 6 year average for 6 of 7 domains. Positive responses to the **Outcomes** domain continue to be the lowest of the seven domains, on average, followed by **Functioning**. **Quality and Appropriateness** remains to have the highest percent of positive responses of all seven domains. Overall, no significant differences are noted for individual question responses, except for the Quality of Life question, to the adult survey in 2011 compared to 2010.

The physical health condition for adult consumers regressed in 2011 compared to 2010. For example, a higher proportion of mental health consumers in 2011 reported having had a heart attack, angina, stroke, or diabetes diagnosis in their lifetime than did consumers in 2010. More consumers reported smoking cigarettes on a daily basis in 2011 than in 2010. Additionally, a greater proportion of substance abuse consumers are considered to be overweight compared to 2010.

In general, consumers reported that the services they received from community-based mental health and/or substance abuse programs had improved the quality of their lives. This was true especially for consumers who received substance abuse services. Results reported in Table 2, suggested mixed attitudes when treating consumers having comorbid mental health and substance abuse diagnoses. Within some domains, consumers receiving only mental health services reported higher levels of positive attitudes compared to consumers receiving both mental health and substance abuse services, while other domains suggested lower positive attitudes for consumers of mental health services only. Across all domains, consumers of substance abuse services reported higher positive attitudes than consumers of both mental health and substance abuse services.



## Appendix A

### Adult Survey Questions<sup>1</sup> and MHSIP Scales

The 28 items on the MHSIP Adult Survey were grouped into five scales. The grouping of the items into the five scales is consistent with the groupings required for the national Center for Mental Health Services' Uniform Reporting System. Below are the five scales and the survey questions included in each scale.

#### Access:

1. The location of services was convenient (parking, public transportation, distance, etc.).
2. Staff were willing to see me as often as I felt it was necessary.
3. Staff returned my call in 24 hours.
4. Services were available at times that were good for me.
5. I was able to get all the services I thought I needed.
6. I was able to see a psychiatrist when I wanted to.

#### Quality and Appropriateness:

1. I felt free to complain.
2. I was given information about my rights.
3. Staff encouraged me to take responsibility for how I live my life.
4. Staff told me what side effects to watch out for.
5. Staff respected my wishes about who is and who is not to be given information about my treatment.
6. Staff here believe that I can grow, change and recover.
7. Staff were sensitive to my cultural background (race, religion, language, etc.).
8. Staff helped me obtain the information I needed so that I could take charge of managing my illness.
9. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).

#### Outcomes:

As a Direct Result of Services I Received:

1. I deal more effectively with daily problems.
2. I am better able to control my life.
3. I am better able to deal with crisis.
4. I am getting along better with my family.
5. I do better in social situations.
6. I do better in school and/or work.
7. My housing situation has improved.
8. My symptoms are not bothering me as much.

#### Participation in Treatment Planning:

1. I felt comfortable asking questions about my treatment and medication.
2. I, not staff, decided my treatment goals.

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<sup>1</sup> Possible Responses: Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree

**General Satisfaction:**

1. I like the services that I received here.
2. If I had other choices, I would still get services from this agency.
3. I would recommend this agency to a friend or family member.

Two additional scales (and the questions included in each) were included in the 2011 survey.

**Functioning:**

As a Direct Result of Services I Received:

1. My symptoms are not bothering me as much.
2. I do things that are more meaningful to me.
3. I am better able to take care of my needs.
4. I am better able to handle things when they go wrong.
5. I am better able to do the things that I want to do.

**Social Connectedness:**

1. I am happy with the friendships I have.
2. I have people with whom I can do enjoyable things.
3. I feel I belong to my community.
4. In a crisis, I would have the support I need from family or friends.

**Youth Survey Questions and MHSIP Scales**

The Youth survey questions and MHSIP scales were:

**Satisfaction:**

1. Overall I am satisfied with the services my child received.
2. The people helping my child stuck with us no matter what.
3. I felt my child had someone to talk to when he/she was troubled.
4. The services my child and/or family received were right for us.
5. My family got the help we wanted for my child.
6. My family got as much help as we needed for my child.

**Positive Outcome:**

As a result of the services my child and/or family received:

1. My child is better at handling daily life.
2. My child gets along better with family members.
3. My child gets along better with friends and other people.
4. My child is doing better in school and/or work.
5. My child is better able to cope when things go wrong.
6. I am satisfied with our family life right now.

**Cultural Sensitivity:**

1. Staff treated me with respect.
2. Staff respected my family's religious/spiritual beliefs.
3. Staff spoke with me in a way that I understood.
4. Staff were sensitive to my cultural/ethnic background.

**Access:**

1. The location of services was convenient for us.
2. Services were available at times that were convenient for us.

**Family Involvement:**

1. I helped to choose my child's services.
2. I helped to choose my child's treatment goals.
3. I participated in my child's treatment.

**Improved Functioning:**

As a result of the services my child and/or family received:

1. My child is better at handling daily life.
2. My child gets along better with family members.
3. My child gets along better with friends and other people.
4. My child is doing better in school and/or work.
5. My child is better able to cope when things go wrong.
6. My child is better able to do things he or she wants to do.

**Social Connectedness:**

1. I know people who will listen and understand me when I need to talk.
2. I have people that I am comfortable talking with about my child's problems.
3. In a crisis, I have the support I need from family or friends.
4. I have people with whom I can do enjoyable things.

***Calculation of Survey Scale Scores***

The following methodology was used to calculate the survey scale scores:

1. Respondents with more than one third of the items in the scale either missing or marked "not applicable" were excluded.
2. For those respondents remaining, an average score for all items in the scale was calculated.
3. For each scale, the number of average scores from Step 2 that were 2.49 or lower were counted (scores that, when rounded, represent "Agree" or "Strongly Agree" responses).
4. For each scale, the count from Step 3 was divided by the count of "remaining" records from Step 1 to obtain a percent of positive responses.

For example:

1. Of the 1,404 adult surveys, 20 had more than one third of the items in the **Access** scale either missing or marked not applicable. Those 20 surveys were excluded from the calculation of the **Access** scale, leaving 1,384 surveys to be included in the calculation.
2. Average scale scores were calculated for each of the 1,384 surveys.
3. Of the 1,384 remaining surveys:  
1,111 had average scores of 2.49 or lower (Agree/Strongly Agree)  
211 had average scores between 2.50 and 3.49 (Neutral)

- 62 had average scores of 3.50 or higher (Disagree/Strongly Disagree)
4. The percent of “positive” responses for the **Access** scale was 1111 (from Step 3) divided by 1,384 (from Step 1) = **80.3**

**Scale Reliability**

Cronbach’s alpha was used to measure internal consistency among the items in each scale. The results show consistency in measurement (reliability) among the items included in each scale.

<b>Adult Scales (# of Items)</b>	<b>Alphas</b>
Access (6)	.861
Quality and Appropriateness (9)	.914
Outcomes (8)	.937
Participation in Treatment Planning (2)	.710
General Satisfaction (3)	.914

<b>Additional Adult Scales (# of Items)</b>	<b>Alphas</b>
Improved Functioning (5)	.922
Social Connectedness (4)	.849

<b>Youth Scales (# of Items)</b>	<b>Alphas</b>
Satisfaction (6)	.950
Positive Outcome (6)	.941
Cultural Sensitivity (4)	.888
Access (2)	.758
Family Involvement (3)	.826

<b>Additional Youth Scales (# of Items)</b>	<b>Alphas</b>
Improved Functioning (6)	.949
Social Connectedness (4)	.822

## Appendix B

**Table 9**  
**2011 Adult Consumer Survey**  
**Summary of Results (n=1404)**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Other	% Agree/Strongly Agree
1. I like the services that I received there.	625	580	85	59	43	12	86.6%
2. If I had other choices, I would still get services from _____.	538	589	82	99	69	27	81.8%
3. I would recommend _____ to a friend or family member.	611	571	75	74	60	13	85.0%
4. The location of services was convenient (parking, public transportation, distance, etc.).	480	658	102	99	23	42	83.6%
5. Staff were willing to see me as often as I felt it was necessary.	587	602	74	74	36	31	86.6%
6. Staff returned my calls within 24 hours.	473	586	83	97	39	126	82.9%
7. Services were available at times that were good for me.	543	706	56	60	26	13	89.8%
8. I was able to get all the services I thought I needed.	518	621	89	107	54	15	82.0%
9. I was able to see a psychiatrist when I wanted to.	388	527	78	136	44	231	78.0%
10. Staff at _____ believe that I can grow, change and recover.	606	591	89	36	27	55	88.7%
11. I felt comfortable asking questions about my treatment and medication.	590	610	43	65	37	59	89.2%
12. I felt free to complain.	479	667	80	87	45	46	84.4%
13. I was given information about my rights.	561	679	59	45	17	43	91.1%
14. Staff encouraged me to take responsibility for how I live my life.	567	676	68	36	19	38	91.0%
15. Staff told me what side effects to watch out for.	417	588	78	132	39	150	80.1%
16. Staff respected my wishes about who and who is not to be given information about my treatment.	622	637	50	37	22	36	92.0%
17. I, not staff, decided my treatment goals.	433	672	121	88	41	49	81.5%
18. Staff were sensitive to my cultural background (race, religion, language, etc.).	508	666	67	35	17	111	90.8%
19. Staff helped me obtain the information that I needed so that I could take charge of managing my illness.	499	662	84	74	36	49	85.7%
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	400	614	110	113	31	136	80.0%
21. Staff treated me with respect and dignity.	643	622	46	55	30	8	90.6%
22. My treatment (or service) goals were based on my strengths and needs.	511	696	73	57	30	37	88.3%
<b>As a result of the services received:</b>							
23. I deal more effectively with daily problems.	442	661	114	112	34	41	80.9%
24. I am better able to control my life.	434	704	123	86	29	28	82.7%
25. I am better able to deal with crisis.	405	706	133	93	30	37	81.3%
26. I am getting along better with my family.	426	622	147	103	29	77	79.0%
27. I do better in social situations.	332	663	170	143	40	56	73.8%
28. I do better in school and/or work.	291	519	142	113	27	312	74.2%
29. My housing situation has improved.	316	527	191	141	40	189	69.4%
30. My symptoms are not bothering me as much.	353	624	146	161	59	61	72.7%
31. I do things that are more meaningful to me.	385	690	144	109	29	47	79.2%
32. I am better able to take care of my needs.	385	740	132	85	28	34	82.1%
33. I am better able to handle things when they go wrong.	354	740	144	110	28	28	79.5%
34. I am better able to do the things that I want to do.	359	699	166	112	35	33	77.2%
35. The services you received at _____ has improved your quality of life.	449	664	122	95	50	24	80.7%
<b>Relationships with people other than your mental health provider(s):</b>							
36. I am happy with the friendships I have.	397	730	162	77	20	18	81.3%
37. I have people with whom I can do enjoyable things.	447	727	113	87	17	13	84.4%
38. I feel I belong in my community.	341	721	180	110	35	17	76.6%
39. In a crisis, I would have the support I need from family or friends.	524	682	94	66	24	14	86.8%

Note: The margin of error for the Adult Survey was +/- 2.53 % at the 95% confidence level.

## Appendix B

**Table 10**  
**2011 Adult Consumer Survey**  
**Positive Response by Region**

<b>Percent positive response: Strongly Agree or Agree</b>	<b>Region 1</b>	<b>Region 2</b>	<b>Region 3</b>	<b>Region 4</b>	<b>Region 5</b>	<b>Region 6</b>
Number of respondents	62	101	232	158	429	422
1. I like the services that I received there.	82.3%	83.2%	91.3%	85.4%	86.8%	85.7%
2. If I had other choices, I would still get services from _____.	83.9%	81.6%	84.3%	79.9%	82.3%	80.5%
3. I would recommend _____ to a friend or family member.	78.7%	84.2%	87.5%	82.7%	86.0%	84.6%
4. The location of services was convenient (parking, public transportation, distance, etc.).	85.0%	87.9%	85.2%	84.2%	86.1%	78.7%
5. Staff were willing to see me as often as I felt it was necessary.	86.9%	80.0%	91.2%	84.5%	88.4%	84.6%
6. Staff returned my calls within 24 hours.	81.0%	71.1%	82.4%	87.8%	85.9%	81.2%
7. Services were available at times that were good for me.	87.1%	88.1%	89.1%	91.7%	91.0%	89.0%
8. I was able to get all the services I thought I needed.	82.0%	75.2%	83.8%	82.8%	81.5%	82.8%
9. I was able to see a psychiatrist when I wanted to.	76.5%	76.9%	79.8%	78.4%	79.4%	76.1%
10. Staff at _____ believe that I can grow, change and recover.	83.1%	87.0%	91.1%	88.7%	87.6%	89.8%
11. I felt comfortable asking questions about my treatment and medication.	80.3%	89.7%	89.1%	85.5%	90.6%	90.5%
12. I felt free to complain.	83.9%	83.0%	86.3%	81.9%	84.2%	84.8%
13. I was given information about my rights.	93.4%	93.1%	93.4%	90.8%	87.6%	92.6%
14. Staff encouraged me to take responsibility for how I live my life.	88.5%	91.8%	95.2%	87.7%	89.8%	91.3%
15. Staff told me what side effects to watch out for.	83.3%	82.8%	84.2%	80.0%	78.0%	79.1%
16. Staff respected my wishes about who and who is not to be given information about my treatment.	91.8%	92.9%	94.7%	87.7%	92.7%	91.3%
17. I, not staff, decided my treatment goals.	75.0%	81.6%	81.6%	78.2%	81.2%	84.1%
18. Staff were sensitive to my cultural background (race, religion, language, etc.).	94.8%	90.6%	95.3%	89.1%	89.8%	89.4%
19. Staff helped me obtain the information that I needed so that I could take charge of managing my illness.	81.7%	86.6%	86.4%	84.0%	86.3%	85.7%
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	69.1%	80.2%	83.4%	88.4%	77.8%	78.6%
21. Staff treated me with respect and dignity.	88.7%	92.1%	92.2%	85.3%	92.3%	90.0%
22. My treatment (or service) goals were based on my strengths and needs.	86.9%	88.9%	89.0%	88.3%	88.6%	87.6%
<b>As a result of the services received:</b>						
23. I deal more effectively with daily problems.	78.7%	78.6%	80.9%	76.1%	81.4%	83.2%
24. I am better able to control my life.	85.0%	80.8%	85.0%	78.8%	84.3%	81.4%
25. I am better able to deal with crisis.	81.4%	83.5%	84.9%	78.2%	79.0%	82.2%
26. I am getting along better with my family.	77.6%	81.1%	81.3%	79.6%	76.3%	79.9%
27. I do better in social situations.	73.3%	72.6%	75.3%	74.0%	73.0%	74.1%
28. I do better in school and/or work.	83.7%	73.4%	73.7%	77.2%	71.8%	74.5%
29. My housing situation has improved.	77.4%	69.4%	72.1%	73.7%	68.3%	66.2%
30. My symptoms are not bothering me as much.	65.0%	68.4%	75.9%	72.7%	72.6%	73.3%
31. I do things that are more meaningful to me.	86.7%	81.3%	81.3%	80.1%	78.5%	77.0%
32. I am better able to take care of my needs.	81.7%	83.3%	84.1%	83.1%	81.1%	81.4%
33. I am better able to handle things when they go wrong.	77.0%	83.5%	79.9%	78.1%	78.1%	80.7%
34. I am better able to do the things that I want to do.	76.7%	77.3%	82.2%	75.5%	76.5%	75.8%
35. The services you received at _____ has improved your quality of life.	74.2%	79.6%	83.6%	77.7%	82.5%	79.6%
<b>Relationships with people other than your mental health provider(s):</b>						
36. I am happy with the friendships I have.	85.5%	81.2%	82.8%	80.0%	81.9%	79.8%
37. I have people with whom I can do enjoyable things.	82.3%	88.0%	84.8%	83.3%	83.2%	85.2%
38. I feel I belong in my community.	82.0%	79.2%	77.4%	74.2%	76.3%	75.8%
39. In a crisis, I would have the support I need from family or friends.	90.3%	88.0%	87.4%	86.5%	86.5%	86.0%

Note: The margin of error for the Adult Survey was +/- 2.53 % at the 95% confidence level.

## Appendix B

**Table 11**  
**2010 and 2011 Adult Consumer Surveys**  
**Confidence Intervals (CI)**

1 = Strongly Agree; 5 = Strongly Disagree	2010 (n=1124)			2011 (n=1404)		
	Mean	SD	95% CI	Mean	SD	95% CI
1. I like the services that I received there.	1.78	0.912	1.73-1.83	1.79	0.956	1.74-1.84
2. If I had other choices, I would still get services from _____.	1.99	1.058	1.93-2.05	1.96	1.090	1.91-2.02
3. I would recommend _____ to a friend or family member.	1.79	0.940	1.73-1.85	1.85	1.036	1.80-1.91
4. The location of services was convenient (parking, public transportation, distance, etc.).	1.93	0.942	1.87-1.99	1.92	0.930	1.87-1.97
5. Staff were willing to see me as often as I felt it was necessary.	1.79	0.888	1.74-1.84	1.81	0.948	1.76-1.86
6. Staff returned my calls within 24 hours.	1.93	0.961	1.87-1.99	1.94	1.005	1.88-1.99
7. Services were available at times that were good for me.	1.80	0.849	1.75-1.85	1.79	0.854	1.75-1.84
8. I was able to get all the services I thought I needed.	1.94	1.015	1.88-2.00	1.96	1.046	1.91-2.02
9. I was able to see a psychiatrist when I wanted to.	2.08	1.076	2.01-2.15	2.08	1.092	2.02-2.14
10. Staff at _____ believe that I can grow, change and recover.	1.75	0.846	1.70-1.80	1.73	0.854	1.69-1.78
11. I felt comfortable asking questions about my treatment and medication.	1.74	0.817	1.69-1.79	1.77	0.928	1.72-1.82
12. I felt free to complain.	1.90	0.886	1.85-1.95	1.93	0.981	1.88-1.99
13. I was given information about my rights.	1.74	0.767	1.69-1.79	1.74	0.794	1.69-1.78
14. Staff encouraged me to take responsibility for how I live my life.	1.77	0.820	1.72-1.82	1.73	0.789	1.69-1.77
15. Staff told me what side effects to watch out for.	1.94	0.956	1.88-2.00	2.03	1.047	1.98-2.09
16. Staff respected my wishes about who and who is not to be given information about my treatment.	1.68	0.785	1.63-1.73	1.68	0.803	1.64-1.73
17. I, not staff, decided my treatment goals.	2.01	0.978	1.95-2.07	1.99	0.970	1.94-2.04
18. Staff were sensitive to my cultural background (race, religion, language, etc.).	1.77	0.763	1.72-1.82	1.75	0.781	1.71-1.80
19. Staff helped me obtain the information that I needed so that I could take charge of managing my illness.	1.85	0.863	1.80-1.90	1.88	0.935	1.83-1.93
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	2.02	0.946	1.96-2.08	2.02	0.989	1.97-2.08
21. Staff treated me with respect and dignity.	NA	NA	NA	1.72	0.874	1.67-1.76
22. My treatment (or service) goals were based on my strengths and needs.	NA	NA	NA	1.83	0.873	1.78-1.88
<b>As a result of the services received:</b>						
23. I deal more effectively with daily problems.	1.92	0.906	1.87-1.97	2.00	0.981	1.95-2.05
24. I am better able to control my life.	1.92	0.881	1.87-1.97	1.96	0.919	1.91-2.01
25. I am better able to deal with crisis.	1.99	0.877	1.94-2.04	2.00	0.929	1.95-2.05
26. I am getting along better with my family.	2.00	0.890	1.95-2.05	2.01	0.969	1.96-2.06
27. I do better in social situations.	2.13	0.956	2.07-2.19	2.18	1.016	2.13-2.24
28. I do better in school and/or work.	2.11	0.948	2.05-2.17	2.15	1.006	2.09-2.20
29. My housing situation has improved.	2.19	1.009	2.13-2.25	2.23	1.061	2.17-2.29
30. My symptoms are not bothering me as much.	2.18	1.043	2.12-2.24	2.22	1.095	2.16-2.28
31. I do things that are more meaningful to me.	1.98	0.865	1.93-2.03	2.05	0.950	2.00-2.10
32. I am better able to take care of my needs.	1.94	0.833	1.89-1.99	2.00	0.900	1.95-2.05
33. I am better able to handle things when they go wrong.	2.04	0.917	1.99-2.09	2.07	0.928	2.02-2.12
34. I am better able to do the things that I want to do.	2.06	0.906	2.01-2.11	2.10	0.965	2.05-2.15
35. The services you received at _____ has improved your quality of life. *	2.20	1.510	2.12-2.29	2.01	1.008	1.96-2.06
<b>Relationships with people other than your mental health provider(s):</b>						
36. I am happy with the friendships I have.	1.93	0.855	1.88-1.98	1.99	0.869	1.94-2.03
37. I have people with whom I can do enjoyable things.	1.90	0.829	1.85-1.95	1.92	0.870	1.88-1.97
38. I feel I belong in my community.	2.08	0.946	2.02-2.14	2.12	0.952	2.07-2.17
39. In a crisis, I would have the support I need from family or friends.	1.79	0.806	1.74-1.84	1.84	0.874	1.79-1.88

Note: The margin of error for the Adult Survey was +/- 2.53 % at the 95% confidence level.

\*Consumers responded significantly less positively to this question in 2011 than in 2010.

## Appendix B

**Table 12**  
**2011 Youth Consumer Survey**  
**Summary of Results (n=161)**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Other	% Agree/Strongly Agree
1. Overall, I am satisfied with the services my child received.	55	69	11	14	9	3	78.5%
2. I helped to choose my child's services.	44	73	19	16	5	4	74.5%
3. I helped to choose my child's treatment goals.	49	79	17	9	5	2	80.5%
4. The people helping my child stuck with us no matter what.	63	59	9	17	10	3	77.2%
5. I felt my child had someone to talk to when he/she was troubled.	46	73	14	17	8	3	75.3%
6. I participated in my child's treatment.	67	79	5	5	3	2	91.8%
7. The services my child and/or family received were right for us.	38	78	17	16	9	3	73.4%
8. The location of services was convenient for us.	48	87	13	7	5	1	84.4%
9. Services were available at times that were convenient for us.	46	84	11	14	4	2	81.8%
10. My family got the help we wanted for my child.	38	74	16	20	11	2	70.4%
11. My family got as much help as we needed for my child.	34	67	24	21	14	1	63.1%
12. Staff treated me with respect.	66	79	7	5	3	1	90.6%
13. Staff respected my family's religious/spiritual beliefs.	50	87	16	3	0	5	87.8%
14. Staff spoke with me in a way that I understood.	53	94	7	4	1	2	92.5%
15. Staff were sensitive to my cultural/ethnic background.	47	86	14	2	1	11	88.7%
<b>As a result of the services my child and/or family received:</b>							
16. My child is better at handling daily life.	32	76	16	20	13	4	68.8%
17. My child gets along better with family members.	29	81	17	21	9	4	70.1%
18. My child gets along better with friends and other people.	31	80	19	21	7	3	70.3%
19. My child is doing better in school and/or work.	30	77	20	15	13	6	69.0%
20. My child is better able to cope when things go wrong.	22	85	18	26	9	1	66.9%
21. I am satisfied with our family life right now.	31	74	24	19	9	4	66.9%
22. My child is better able to do the things he/she wants to do.	28	93	17	15	7	1	75.6%
23. The services your child received at _____ has improved his/her quality of life.	33	80	15	17	13	3	71.5%
<b>Relationships with people other than your mental health provider(s):</b>							
24. I know people who will listen and understand me when I need to talk.	30	97	12	14	4	4	80.9%
25. I have people that I am comfortable talking with about my child's problems.	25	117	8	7	2	2	89.3%
26. In a crisis, I have the support I need from family or friends.	35	92	18	9	3	4	80.9%
27. I have people with whom I can do enjoyable things.	34	110	4	7	3	3	91.1%

*Note: The margin of error for the Youth Survey was +/- 7.38% at the 95% confidence level. Because of the small sample size, and the large confidence interval, caution should be exercised in interpreting the results of the Youth Survey.*



## Appendix B

**Table 13**  
**2010 and 2011 Youth Consumer Surveys**  
**Confidence Intervals (CI)**

	2010 (n=232)			2011 (n=161)		
	Mean	SD	95% CI	Mean	SD	95% CI
1. Overall, I am satisfied with the services my child received.	1.86	0.912	1.75-1.98	2.07	1.135	1.89-2.25
2. I helped to choose my child's services.	1.94	0.962	1.82-2.07	2.14	1.041	1.98-2.30
3. I helped to choose my child's treatment goals.	1.94	0.945	1.82-2.07	2.01	0.965	1.86-2.16
4. The people helping my child stuck with us no matter what.	1.79	0.913	1.67-1.91	2.06	1.209	1.87-2.25
5. I felt my child had someone to talk to when he/she was troubled.	1.96	0.944	1.84-2.08	2.17	1.117	1.99-2.34
6. I participated in my child's treatment.	1.74	0.779	1.64-1.85	1.73	0.824	1.60-1.86
7. The services my child and/or family received were right for us.	2.00	0.993	1.88-2.13	2.24	1.103	2.07-2.41
8. The location of services was convenient for us.	1.83	0.868	1.72-1.94	1.96	0.917	1.82-2.11
9. Services were available at times that were convenient for us.	1.81	0.805	1.71-1.91	2.03	0.971	1.88-2.18
10. My family got the help we wanted for my child.	2.11	1.104	1.97-2.25	2.32	1.171	2.14-2.50
11. My family got as much help as we needed for my child.	2.25	1.157	2.10-2.40	2.46	1.213	2.27-2.65
12. Staff treated me with respect.	1.63	0.679	1.54-1.72	1.75	0.832	1.62-1.88
13. Staff respected my family's religious/spiritual beliefs.	1.65	0.620	1.57-1.73	1.82	0.686	1.71-1.93
14. Staff spoke with me in a way that I understood.	1.66	0.612	1.58-1.74	1.78	0.699	1.67-1.89
15. Staff were sensitive to my cultural/ethnic background.	1.71	0.609	1.63-1.79	1.83	0.702	1.71-1.94
<b>As a result of the services my child and/or family received:</b>						
16. My child is better at handling daily life.	2.30	1.152	2.15-2.45	2.40	1.187	2.21-2.59
17. My child gets along better with family members.	2.25	1.027	2.11-2.38	2.36	1.104	2.19-2.54
18. My child gets along better with friends and other people.	2.21	0.948	2.08-2.33	2.32	1.072	2.15-2.49
19. My child is doing better in school and/or work.	2.29	1.096	2.15-2.43	2.38	1.152	2.20-2.56
20. My child is better able to cope when things go wrong.	2.42	1.089	2.27-2.56	2.47	1.093	2.30-2.64
21. I am satisfied with our family life right now.	2.35	1.153	2.20-2.50	2.37	1.105	2.20-2.54
22. My child is better able to do the things he/she wants to do.	2.27	0.977	2.14-2.40	2.25	0.997	2.09-2.41
23. The services your child received at _____ has improved his/her quality of life.	2.19	1.038	2.05-2.32	2.35	1.167	2.16-2.53
<b>Relationships with people other than your mental health provider(s):</b>						
24. I know people who will listen and understand me when I need to talk.	2.03	0.801	1.92-2.13	2.14	0.916	2.00-2.28
25. I have people that I am comfortable talking with about my child's problems.	1.88	0.781	1.78-1.98	2.02	0.707	1.91-2.13
26. In a crisis, I have the support I need from family or friends. *	1.80	0.677	1.71-1.88	2.06	0.860	1.93-2.20
27. I have people with whom I can do enjoyable things.	1.78	0.640	1.69-1.86	1.96	0.768	1.83-2.08

Note: The margin of error for the Youth Survey was +/- 7.38% at the 95% confidence level. Because of the small sample size, and the large confidence interval, caution should be exercised in interpreting the results of the Youth Survey.

\* Consumers responded significantly more positively to this question in 2011 than in 2010.