

WHAT DID CONSUMERS SAY?

Highlights and Data Details from the "Voice Your Opinion 2000-01" Consumer Survey

Connecticut Department of Mental Health and Addiction Services Quality Management and Improvement Division June 2002 *

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APPENDIX 1: Comparison of Survey Participants to DMHAS Community Client Profile.

APPENDIX 2: Copy of the Survey Instrument

I. BACKGROUND

The consumer survey project "Voice your Opinion 2000-01" at the Connecticut Department of Mental Health and Addiction Services (DMHAS) was the first statewide sampling of mental health consumers' opinions across the state. The project built on two initiatives that took place in 1998: the application for the Sixteen State Indicator Pilot (SIP) project funds by the Department and the recommendations of the existing consumer workgroup (Statewide Consumer Satisfaction Survey workgroup). These two initiatives that started independently, came together in November 1999 through the approval of the consumers' workgroup recommendations by the executive management at DMHAS and through availability of funds from the Substance Abuse and Mental Health Services Administration (SAMHSA) at the Department of Health and Human Services in Washington, DC.

The paradigm selected for the implementation of the first statewide survey in Connecticut was a peer-aided model. The peer-surveyor teams were recruited, trained and supervised by a consumer advocacy agency (Advocacy Unlimited, Inc, AU) which was under contract by DMHAS to provide these services. The surveyors completed a two-day course that was designed and taught by AU staff. The surveyors worked in teams of 2-4 people, with one member designated as a team leader. In addition to the collection of surveys at the selected sites by peer-surveyors, the consumers were also able to request a mail-in survey. Collection phase of the survey spanned between October 2000 through May 2001.

Survey sites were selected and negotiated with providers by DMHAS staff. The DMHAS staff was also responsible for data entry (scanning), data cleaning and analysis.

The survey instrument was available both in English and Spanish. The instrument was developed in the spring and summer of 2000 with the input of people in recovery from mental illnesses and/or substance abuse, as well as from family members, providers, Advocacy Unlimited, and DMHAS staff who served on the Consumer Advisory Council and/or as members of the SIP Steering Committee. Twenty eight questions on the instrument were the same as on the MHSIP 28-question version of the consumer survey.

The survey was implemented among recipients of community mental health services. Overall, 1169 consumers participated in the survey process. The survey has taken place at each state-operated and/or private-not-for-profit LMHA. Surveyors visited 42 different agencies (i.e. 38% of all mental health agencies funded and or operated by DMHAS). The demographic composition of the participants is similar to demographics of DMHAS community clients (Appendix 1).

Overall, the survey reached 4% of all community mental health service recipients. Based on the type of services received, the respondents represented 7% of all DMHAS clients receiving case management, 4% of clients receiving outpatient services, 9% of clients receiving residential services, 10% of clients receiving vocational services, and 10% of clients in social rehabilitation programs. The 95% confidence intervals around the state and regional estimates of clients' opinions about the access to mental health services, quality and appropriateness, participation in treatment planning, general satisfaction, respect, and positive outcomes are $\pm 3\%$ and $\pm 6\%$, for the state and regions, respectively.

This report was prepared as a data resource for the consumer conference that was held on June 28, 2002. In the future, the consumer data may be re-analyzed and appear in a different format than in the current document.

II. HIGHLIGHTS OF WHAT CONSUMERS SAID

A. ACCESS

Overall 74 % of respondents rated their access to mental health services favorably. The younger patients (45 and under) rated their access to services less favorably than those over 45 years of age.

B. PARTICIPATION IN TREATMENT PLANNING

☑ 65% of clients responded positively about their participation in treatment planning. White consumers reported less satisfaction than Black/African Americans or Hispanic consumers.

C. QUALITY AND APPROPRIATENESS

☑ 74% of clients perceived their services as appropriate. There were no significant differences in any of the demographic breakdowns.

D. RESPECT

☑ 77% of consumers agreed that they were treated with respect. Black/African Americans consumers tended to be less satisfied than White or Hispanic consumers.

E. OUTCOMES

☑ 73% of respondents reported doing better as a result of services received. No significant differences were noted among any demographic groups.

F. SATISFACTION IN GENERAL

☑ 83% of consumers rated their satisfaction with services positively. Young people (18-20 years old) were less satisfied than people in any other age group. Black/African Americans participants were among the least satisfied (76%) and Hispanic consumers were the most satisfied group (89%).

G. SUBSTANCE ABUSE RELATED ISSUES

What is the prevalence of addiction problems among survey participants?			
$\overline{\mathbf{V}}$	About one half of survey recipients reported a current or past history of addiction problems.		
$\overline{\mathbf{V}}$	Almost one quarter of respondents indicated that their substance abuse issues were current.		
$\overline{\checkmark}$	About one fifth of people with current addiction issues were not receiving addiction services.		
	About 40% of those with current addiction issues were engaged in the self-help groups.		
	Almost a third of those with current addiction issues but not receiving addiction services listed access issues to addiction services as a problem.		
What is the rate of satisfaction with mental health services and/or outcomes among dually diagnosed?			
Ø	The overall rate of satisfaction with mental health services and/or outcomes was similar between those with both mental health and addiction problems and those without the co-morbidity.		
V	People with current addiction problems who were not receiving addiction services were <u>less</u> satisfied with their mental health services and outcomes (compared to those receiving addiction services).		
Ø	About a half of those with current addiction problems indicated that it was difficult for them to get services they needed because of the co-morbidity.		

Does mental health staff educate clients about substance use issues?

☑ Mental health service staff incorporated substance abuse issues into their communication with clients. Staff were more likely to talk about substance abuse issues with those whose addiction issues were current than with those who did not have current addiction problems.

H. ACCESS TO PHYSICAL AND DENTAL HEALTH SERVICES

About Physical Health

- ☑ 61% of clients describe their health status as good or excellent.
- ☑ 84% of clients had seen a doctor or a nurse in the past year for a physical health check up or because they were sick.
- ☑ 73% of clients had a physical during the past 12-months. Females were more likely to have had a physical than males. White consumers were <u>less</u> likely to have had a physical than Black/African Americans or Hispanic consumers.

About Dental Health

- ☑ 57% of clients had seen a dentist or hygienist for a checkup or cleaning during the past 12 months.
- ☑ 32% of clients were not able to see a dentist when they had a dental problem.

I. HELP WITH MENTAL HEALTH CRISES

Are mental health services helping clients to deal better with crisis?

- About three-quarters of survey respondents reported being able to deal better with crisis as a result of services they received.
- ☑ 30% said they were not able to get crisis services when needed. The greatest unmet need was reported by Hispanic consumers (42%) and those 18-20 years of age (45%).

Whom do people call when in crisis?

- ☑ When in crisis, the clients most frequently call providers (51%), family (41%) or friends (32%). Twelve (12%) percent of people relied only on the family and 7% listed only friends.
- ☑ 37% of clients reported that they hesitate to call a crisis program. Female consumers, Hispanic consumers and those in the 31-45 years of age category were more likely to hesitate than males or people in other race or age categories.
- ☑ The four most frequently cited reasons for not calling a crisis program were:
 - ☑ Fear of confinement.
 - ✓ Staff disrespect or not being taken seriously,
 - ☑ Services not being helpful or making client worse, and
 - ☑ Being embarrassed or thinking that the problem was not serious enough.

the White consumers.

V	28% of clients said that they do not trust police. The four most frequently cited reasons were: ☑ General distrust of police, ☑ Police lacking skills with mental illness, ☑ Mental illness stigma and/or racial bias, ☑ Being afraid of going to the hospital or jail.		
J.	WORK		
Wł	nat do consumers say about working, pay and income?		
V	39% of survey participants worked for pay or as a volunteer.		
V	40% of workers were employed for 10 hours per week or less.		
V	65% of workers would work more hours if they could keep their insurance.		
V	The majority of those who worked earned less than \$10 per hour.		
V	The earned and non-earned income of 85% of $\underline{\text{all}}$ clients (regardless of their work status) was \$1000 or less.		
Are	e mental health services helping consumers to do better in work/school?		
V	79% of people receiving vocational services said that they did better in work/school because of mental health services they received (compare to 64% of all clients).		
Wł	no works for pay?		
V	About 20% of people who were <u>not</u> in vocational services worked for pay.		
V	The employment rate among those who received vocational services was 47% more than double the rate for those not in vocational services		

☑ The proportion of those who were paid for their work was the lowest among 46-64 year-olds.

☑ Hispanic consumers were less likely to have paying work than the Black/African Americans or

K. LIVING SITUATION

Where do clients live? Do they need assistance to live independently? Do they move frequently?

- About one half (51%) of clients reported to live independently in an apartment or house.
- About half of those who lived in independent housing said that they were receiving assistance with activities like shopping, cooking, bathing, managing money, at least occasionally.
- ☑ 82% had not moved or moved only once in the last two years. About 17% lived in 3 to 10 places and 1% (9 people) reported living in more than 10 places during the past two years.

Has clients' housing situation improved as a result of services they received?

☑ 67% reported that their housing situation improved. The rate was the lowest among those who received services for fewer than 6 months (43%).

Do people like their home? Do they feel safe in their neighborhood?

- ☑ About one fifth (22%) of respondents said they did not like their home. Among the reasons were:
 - ☑ Problems with roommates, family or neighbors,
 - ☑ Living quarters being too small or crowded,
 - ☑ Housing of the wrong type or in the wrong location,
 - ☑ Client prefers living independently.
- About 18% of clients reported that they did not feel safe in their neighborhood. The two most frequent reasons were:
 - ☑ High crime neighborhood, gangs,
 - ☑ Presence of drugs in the neighborhood.

L. DMHAS GRIEVANCE PROCEDURE

- ✓ 57% reported that they did not know about the existence of DMHAS' grievance procedure.
- ☑ 19% of people who knew about DMHAS grievance procedure used it in the past 12 months to resolve problems.

III. DATA DETAILS

Α. **ACCESS**

Consumer ratings for this measure were based on the following questions from the 28-question-version of the MHSIP consumer survey:

- Q4: The location of services was convenient.
- Q5: Staff was willing to see me as often as I felt was necessary.
- Q6: Staff returned my calls within 24 hours.
- Q7: Services were available at times that were good for me.
- ☑ Overall 74.4% of respondents rated their access to mental health services favorably¹. Younger clients (45 and under) rated their access to services less favorably than clients age 46 and over.

¹ The analysis included:

^{1.} Re-coding of all "non-applicable " responses to missing;

^{2.} Excluding all respondents with more than 1/3 items missing;

^{3.} Calculating mean score for all items in the domain;

^{4.} Finding the percentage of respondents with the mean score of <2.5 (= % that agree, are satisfied). The same analytical strategy was also applied to other multiple item domains (quality and appropriateness, participation in treatment planning, general satisfaction, outcomes, and respect).

	N	% Clients who were satisfied with ACCESS ²
State	787/1058	74.4%
State	70771000	7 7
Region		
1	146/188	77.7
2	215/302	71.2
3	135/180	75.0
4	143/189	75.7
5	148/199	74.4
Gender		
Male	399/536	74.4
Female	346/467	74.0
Unknown	43/56	76.8
Ethnicity/ Race		
White	498/673	74.0
Black/African	97/132	73.5
American		
Hispanic	116/141	82.3
Mixed/Other	48/71	64.8
Unknown	30/41	73.2
Age ³		
18-20	20/33	60.6
21-30	101/139	72.7
31-45	314/444	70.7
46-64	263/329	79.9
65 and over	15/20	78.3
Unknown	71/90	78.9
Duration of services		
Less than 6 months	44/62	71.0
6-12 months	37/46	80.4
1-2 years	68/87	78.2
2-5 years	98/143	68.5
5-10 years	112/157	71.3
More than 10 years	380/499	76.2
Unknown	48/64	75.0

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Percent satisfied with access = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain x 100.

³ Chi square, p<0.05

B. PARTICIPATION IN TREATMENT PLANNING

Ratings of consumers' satisfaction with participation in treatment planning was derived from the following questions (both questions are from the 28-question-version of the MHSIP consumer survey):

Q17: I, not the staff, decided my treatment goals.

Q11: I felt comfortable asking questions about my treatment and medication.

☑ 65.2% of clients responded positively about their participation in treatment planning. The satisfaction rate was lower among white participants (64.1%) than among Black/African Americans (71.1%) or Hispanic (72.4%) participants. On a regional basis, the lowest score of satisfaction was found in Region 2 (59.9%) and the highest was found in region 5 (73.0%).

	N	% clients who were satisfied with PARTICIPATION IN TREATMENT PLANNING ⁴
State	634/973	65.2
Region ⁵		
1	107/169	63.3
2	166/277	59.9
3	106/167	63.5
4	120/175	68.6
5	135/185	73.0
Gender		
Male	325/505	64.4
Female	280/421	66.5
Unknown	29/47	61.7
Ethnicity/ Race ⁶		
White	401/626	64.1
Black/African	86/121	71.1
American		
Hispanic	92/127	72.4
Mixed/Other	35/67	52.2
Unknown	20/32	62.5
Age		
18-20	18/32	56.3
21-30	88/131	67.2
31-45	264/417	63.3
46-64	201/301	66.8
65 and over	13/21	61.9
Unknown	50/71	70.4
Duration of services	11150	10.0
Less than 6 months	44/63	69.8
6-12 months	33/45	73.3
1-2 years	60/81	74.1
2-5 years	81/134	60.4
5-10 years	94/147	63.9
More than 10 years	283/448	63.2
Unknown	39/55	70.9

⁴ Percent satisfied with participation in treatment planning = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain x 100.

 $^{^{5}}$ Chi square, df =4, 9.675, p<=0.05 6 Chi square, df = 4, p<0.05

C. QUALITY AND APPROPRIATENESS OF SERVICES

Consumer ratings for this composite measure were derived from the following questions (from the 28-question-version of the MHSIP consumer survey):

- Q10: Staff here believe that I can grow, change and recover.
- Q12: I felt free to complain.
- Q15: Staff told me what side effects to watch out for.
- Q16: Staff respected my wishes about who is, and who is not, to be given information about my treatment.
- Q18: Staff were sensitive to my cultural/ethnic background (race, religion, language, etc.).
- Q19: Staff helped me to obtain information I needed so I could take charge of managing my illness.
- ☑ 74.1% of clients perceived their services as appropriate. Differences among various demographic groupings were not significant.

	N	% clients who were satisfied with the
	IN	QUALITY/APPROPRIATENESS of
		their services ⁷
State	768/1037	74.1
State	700/1037	74.1
Region		
1	134/182	73.6
2	207/294	70.4
3	126/178	70.8
4	143/183	78.1
5	158/200	79.0
Gender		
Male	386/531	72.7
Female	344/452	76.1
Unknown	38/54	70.4
Ethnicity/ Race		
White	478/658	72.6
Black/African	99/130	76.2
American		
Hispanic	111/140	79.3
Mixed/Other	51/70	72.9
Unknown	29/39	74.4
Age		
18-20	21/33	63.6
21-30	102/135	75.6
31-45	322/442	72.9
46-64	235/316	74.4
65 and over	19/25	76.0
Unknown	69/86	80.2
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Duration of services	10/61	65.6
Less than 6 months	40/61	65.6
6-12 months	37/46	80.4
1-2 years	72/88	81.8
2-5 years	97/139	69.8
5-10 years	115/159	72.3
More than 10 years	364/483	75.4
Unknown	43/61	70.5

 $^{^{7}}$ Percent satisfied with quality/appropriateness = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain x 100.

D. RESPECT

Consumers' perception of the respect with which they are treated was derived from responses to four questions of which three were designed with the help of the Consumer Survey Advisory Council (Q25, 26, and 27). The grouping of the four questions listed below into a composite measure of respect was supported by results of factor analysis.

- Q25: When I get services we speak my preferred language.
- Q26: Changes are made to accommodate my physical disability.
- Q27: My wishes are respected about the amount of family involvement I want in my treatment.
- Q23: My cultural and ethnic beliefs are acknowledged and respected.
- ☑ Statewide, 77.0% of consumers agreed that they were treated with respect. Fewer Black/African Americans (73.7%) reported that they were treated with respect (73.7%) than White or Hispanic consumers (78.5%) and 81.5% of Whites and Hispanics, respectively).

Region	N	% clients who agreed they were
		treated with RESPECT ⁸
State	643/835	77.0
Region		
1	116/157	73.9
2	134/177	75.7
3	122/160	76.3
4	124/157	79.0
5	147/184	79.9
Gender		
Male	335/430	77.9
Female	286/371	77.1
Unknown	22/34	64.7
C IMARIO W II	22/31	0117
Ethnicity/ Race ⁹		
White	398/507	78.5
Black/African	84/114	73.7
American		
Hispanic	106/130	81.5
Mixed/Other	39/59	66.1
Unknown	16/25	64.0
Age		
18-20	22/32	68.8
21-30	91/112	81.3
31-45	270/349	77.4
46-64	199/261	76.2
65 and over	13/16	81.3
Unknown	48/65	73.8
Duration of services		
Less than 6 months	40/55	72.7
6-12 months	31/39	79.5
1-2 years	54/66	81.8
2-5 years	89/117	76.1
5-10 years	99/128	77.3
More than 10 years	304/393	77.4
Unknown	26/37	70.3

⁸ Percent satisfied with respect = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain x 100.

⁹ Chi square, df=4, NS

E. OUTCOMES

Consumers' perception of positive outcomes is also a composite measure. The score was derived from the analysis of questions (from the 28-question-version of the MHSIP consumer survey) listed below:

As a result of services that I have received -

Q31: I deal more effectively with daily problems.

Q32: I am better able to control my life.

Q33: I am better able to deal with crisis.

Q34: I am getting along better with my family.

Q35: I do better in social situations.

Q36: I do better in school and/or work.

Q38: My symptoms are not bothering me as much.

☑ Overall, 72.9% of respondents reported doing better as a result of services received. Regional and demographic differences were not significant.

Region	N	% clients who were satisfied with their OUTCOMES ¹⁰
State	725/994	72.9%
Region		
1	124/172	72.1
2	210/283	74.2
3	118/165	71.5
4	122/180	67.8
5	151/194	77.8
Gender		
Male	379/510	74.3
Female	317/440	72.0
Unknown	29/44	65.9
Ethnicity/ Race		
White	466//633	73.6
Black/African	90/128	70.3
American		
Hispanic	102/132	77.3
Mixed/Other	46/69	66.7
Unknown	21/32	65.6
Age		
18-20	24/32	75.0
21-30	99/131	75.6
31-45	302/428	70.6
46-64	220/305	72.1
65 and over	16/21	76.2
Unknown	64/77	83.1
Duration		
Less than 6 months	44/64	68.8
6-12 months	33/44	75.0
1-2 years	63/79	79.7
2-5 years	94/136	69.1
5-10 years	108/152	71.1
More than 10 years	342/467	73.2
Unknown	41/52	78.8

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Percent satisfied with outcomes = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain x 100.

F. GENERAL SATISFACTION WITH SERVICES

This composite measure was derived from the following questions (from the 28-question version of the MHSIP consumer survey):

Q1: I like services that I received here.

Q2: If I had other choices, I would still get services from this agency.

Q3: I would recommend this agency to a friend or family member.

☑ Statewide, 82.8% of consumers were satisfied with their services. Young people (18-20) were less satisfied than people in any other age group. The Black/African Americans participants were among the least satisfied (75.7%), while Hispanics were the most satisfied group (88.9%).

	N	% clients who were satisfied with the
		services in general ¹¹
State	908/1096	82.8
Region		
1	159/197	80.7
2	260/313	83.1
3	154/185	83.2
4	165/195	84.6
5	170/206	82.5
Gender		
Male	455/555	82.0
Female	403/478	84.3
Unknown	50/63	79.4
Ethnicity/ Race ¹²		
White	581/688	84.4
Black/African	105/139	75.5
American		
Hispanic	128/144	88.9
Mixed/Other	56/74	75.7
Unknown	38/51	74.5
12		
Age ¹³		
18-20	23/34	67.6
21-30	117/142	82.4
31-45	371/463	80.1
46-64	292/333	87.7
65 and over	25/25	100.0
Unknown	80/99	80.8
D 4: 6 :		
Duration of services	52/68	76.5
Less than 6 months	52/68	76.5
6-12 months	41/48	85.4
1-2 years	77/90	85.6
2-5 years	110/142	77.5
5-10 years	135/164	82.3
More than 10 years	431/508	84.8
Unknown	62/76	81.6

Percent satisfied in general = Total number of respondents with an average scale score <2.5/ total number of respondents with analyzable data for this domain.

¹² Chi square, df=4, p<0.05 ¹³ Chi square, df=5, p<0.05

G. SUBSTANCE ABUSE (SA) RELATED ISSUES

The "Voice Your Opinion 2000-01" consumer survey was designed for implementation among the recipients of DMHAS-operated and/or funded mental health services. Many clients of mental health services, however, have a co-occurring substance use disorder. Since outcomes and opinions among dually diagnosed clients are likely to depend on the success or failure of integrating addiction services with clients' mental health treatment needs, the survey instrument included a number of questions that were probing for the history of substance abuse and treatment. Based on the responses to these questions we devised a composite indicator of current SA problems ¹⁴, an indicator of SA history ¹⁵ and an indicator of current involvement in the SA treatment ¹⁶. Unless otherwise noted, the analyses described below use these composite indicators.

Prevalence of substance abuse problems and engagement in addiction treatment:

- About one half of survey respondents (547/1108, 49.4%) reported problems with substance use either currently or in the past. 4
- ☑ Almost one quarter of survey respondents (259/1108; 23.4%) indicated that their substance use issues were current.
- ☑ 78% of clients with current substance abuse problems reported receiving addiction services¹⁵. Therefore, up to 22% (57/259) of those with current problems may be disengaged from addiction treatment.¹⁷

What percent of people with a history of addiction problems reported that their current alcohol and/or drug use continues to be a problem?

¹⁴ "Current SA problem" = 1 (YES) if any of the following items were answered positively:

Q46: Do you think your current use of alcohol/or other drugs is a problem?

O50A: Are you currently engaged in treatment of substance abuse problems?

Q69_9: Currently receives addiction services.

¹⁵ SA history = 1 (Yes) if there is an indication of current SA problems (see above) and/or any of the following items are positive:

Q47: Have you ever been told that your use of alcohol and/or drugs is a problem?

Q48: Have you ever been court mandated to participate in substance abuse treatment?

O49A: Have you ever been in the substance treatment program?

Q49B: Check-off any type of substance treatment programs where treated in the past.

Q69-10: Currently uses addiction self-help groups

 $^{^{16}}$ Currently in SA treatment = 1(Yes) if any of the following was answered positively:

Q50A: Are you currently engaged in treatment of substance abuse problems?

Q69 9: Currently receives addiction services.

¹⁷

¹⁷ The actual level of disengagement from addiction treatment and/or support, however, is difficult to assess, because some of the clients who have not indicated receiving addiction treatment services could potentially be receiving treatment through integration of such services within their mental health treatment programs.

- ☑ 22.5% of clients reported a history of a court mandated substance treatment (Yes on Q 48).
- 41.9% of people who were mandated by the courts to undertake a SA treatment (Yes on Q48) in the past, reported that their current use of alcohol and/or drugs was a problem (Yes on Q46).
- ☑ 32.4% of people who were told that they have a problem with substance use (Yes on Q47) in the past, thought that their current use of alcohol and/or drugs was a problem (Yes on Q46).

Utilizing self-help groups:

- ☑ About 40% (100/259, 38.6%) of those with current problems used self-help programs.
- ☑ The use of self-help groups among people with a past substance abuse history was less (16.8%).

What are potential barriers to receiving addiction services:

Forty-four consumers (out of 57 people with current SA issues not receiving addiction services) provided an explanation of why they were not in addiction treatment. Some people gave more than one reason and thus the total is more than 100%. About a third of all clients who were disengaged from addiction services reported problems with access to services (14/44, 31.8%).

I am clean and sober now	20.5% (9)
I do not need it; I do not have problem with alcohol and/or drugs	22.7%(10)
I do not want to be treated	15.9% (7)
Treatment does not work for me	11.4% (5)
I am involved in an addiction self help group	15.9% (7)
Problems with access:	31.8% (14)
I do not know where to go (6)	
There is no program where I live (5)	
Each time I am on waiting list nobody called me (2)	
Nicotine and caffeine addiction are not covered (1)	
I will not follow through	2.3% (1)
Staff does not understand	2.3% (1)

Who are the people who are not in addiction treatment despite having substance abuse issues currently?

Almost 30% people who were not receiving addiction services were between 18-30 years of age (compared to 19.8% among those who were receiving addiction treatment services). In contrast, older people, 46-64 years of age, accounted for a greater proportion of the group of people who were receiving services (compare 26.2% to 19.6%, respectively). Gender and ethnicity/race differences were less apparent (females and Hispanics, however, accounted for a slightly higher proportion in the disengaged group than in the group receiving treatment).

	Not in addiction treatment	Receiving Addiction Treatment
18-30 y	29.4% (15/51)	19.8% (37/187)
31-45 y	51.0 % (26/51)	51.3% (96/187)
46-64 y	19.6% (10/51)	26.2% (53/187)
65+	0	<1% (1/187)
Male	64.2% (34/53)	68.5% (135/197)
Female	35.8% (19/53)	31.5% (62/197)
White	52.8% (28/53)	53.8% (105/195)
Black/African	20.8% (11/53)	20.5% (40/195)
American		
Hispanic	18.9% (10/53)	14.4% (28/195)
Other	7.5% (4/53)	11.2% (22/195)

☑ The percentage of people with current substance use issues who were <u>not</u> in addiction treatment at the time of the survey was between 23-27% in Regions 1,2,3 and 5. In contrast, only 11.5% of all people with current substance use problems in Region 4 reported that they were not receiving addiction services.

	% of clients who were <u>not</u> receiving addiction treatment services (as % of all respondents with current addiction issues)
Region 1	25.6% (10/39)
Region 2	22.7% (17/75)
Region 3	26.6% (16/60)
Region 4	11.5% (6/52)
Region 5	24.2% (8/33)

What is the level of satisfaction with mental health services and/or outcomes among people with addiction problems?

<u>The present and/or past history</u> of problems with substance use had little effect on the level of clients' satisfaction with mental health services and/or outcomes.

SA History	Access	Appropriateness/	Participation	Positive	General
		Quality		Outcomes	Satisfaction
None	73.3%	72.4%	64.0%	71.8%	83.3%
Past	75.5%	72.0%	64.0%	73.7%	81.5%
Current	75.3%	79.7%	68.2%	73.6%	84.2%
All	74.4%	74.1%	65.0%	72.8%	83.0%

☑ The rate of satisfaction with any of the examined constructs, however, was **substantially lower** among those with current addiction problems who were **not** in addiction treatment.

ADDICTION treatment	Access	Appropriateness/ Quality	Participation	Positive Outcomes	General Satisfaction
Currently In	78.2%	82.5%	72.2%	77.7%	86.9%
Addiction	(154/197)	(160/194)	(135/187)	(150/193)	(173/199)
Treatment					
Currently Not	64.8%	69.2%	53.1%	58.5%	74.1%
in Addiction	(35/54)	(36/52)	(26/49)	(31/53)	(40/54)
Treatment					
Chi square	P<0.05	P<0.05	P<0.05	P<0.05	P<0.05

About a half of those with mental illness and current substance abuse problems indicated that it was difficult for them to get treatment because of co-morbidity (Q28).

SA History	% who agreed (score 1 or 2)*
None	26.1 % (72/276)
Past	31.8 % (67/211)
Current	49.6 % (113/228)

^{*}Q28: It has been hard for me to get the treatment I need because I have both psychiatric and substance abuse problems.

Does mental health staff incorporate substance abuse education messages into their communication with clients?

Mental health services staff communicated substance abuse education messages more frequently to the clients with dual diagnosis, and especially to those who were currently having issues with their substance use.

SA History	% who agreed (score 1 or 2)*
None	52.8% (134/254)
Past	68.2% (152/223)
Current	79.0% (172/218)

^{*}Q29: My mental health staff and I talk about how alcohol and street drugs affect mental illness.

SA History	% who agreed (score 1 or 2)*
None	60.8 % (141/232)
Past	71.6% (159/222)
Current	84.8 % (184/217)

^{*}Q30: My mental health staff is helping me to understand what I can do to keep myself from using substances.

H. ACCESS TO PHYSICAL AND DENTAL HEALTH SERVICES

Self-assessment of health status

 \square 61% of clients (from total N = 1005) described their health status as good or excellent.

Access to health care

- ☑ 83.9% of clients (802/956) reported that they <u>have seen a doctor or a nurse</u> for a health check-up or because they were sick (Q39).
- ☑ Females were more likely to access health care (87.4%) than males (81.3%)¹⁸. Age, ethnicity and/or race group differences were not significant.
- ▼ 73.2% of clients who reported that they <u>had a physical</u> during the past 12 months was (714/976, Q41). Females were more likely to have a physical (76.4%) than males (70.2%). The Black/African Americans (84.4%) and/or Hispanic consumers (80.6%) were more likely to have had a physical exam than White consumers (69.9%)¹⁹.

Access to dental care

- Slightly over one half of clients (57.4%) reported that they have seen a dentist or hygienist for a checkup or cleaning during the last 12 months.
- ☑ 32.2% (237/760²⁰) of clients reported that they <u>were not able to see dentist</u> when they had a problem during the past 12 months.

¹⁸ Chi square, df=1, p<0.05

¹⁹ Chi square for gender: df =1, p<0.05; ethnicity/race: df = 5, p<0.01

Total N excludes 160 of those who reported that they did not have a dental problem in the past year.

I. HELP WITH MENTAL HEALTH CRISES

Are mental health services helping clients dealing with crises?

☑ On average, about three-quarters (75.7%) of participants reported being able to deal with crises better as a result of services received. Among those who have been receiving services for only one year or less, the percentage reporting a positive effect of services on their ability to cope with the crisis was under two thirds.

Region	N	% Clients who "strongly
		agree" or "agree" on Q33*
State	753/995	75.7%
Region		
1	123/170	74.4%
2	220/285	76.5%
3	127/168	75.6%
4	132/181	72.9%
5	151/191	79.1%
Gender		
Male	379/509	74.5%
Female	344/441	78.0%
Unknown	30/65	46.2%
Unknown	30/03	46.2%
Ethnicity/ Race		
White	489/632	77.4%
Black/African	102/131	77.9%
American		
Hispanic	102/132	77.3%
Mixed/Other	39/66	59.1%
Unknown	21/31	65.6%
Age		
18-20	23/33	69.7%
21-30	100/132	75.8%
31-45	324/426	76.1%
46-64	232/305	76.1%
65 and over	15/21	71.4%
Unknown	59/70	74.7%
Duration of		
services ²¹		
Less than 6 months	39/61	63.9%
6-12 months	28/46	60.9%
Between 1-2 years	62/78	79.5%
Between 2-5 years	103/136	75.7%
Between 5-10 years	112/153	73.2%
More than 10 years	369/469	78.7%
Unknown	40/52	76.9%

^{*}As a result of services that I have received: - (Q33.) I am better able to deal with crisis.

²¹ Duration of less than 12 months (62.6%, 67/107) $\underline{vs.}$ 1 year and over (77.3%, 646/836): Chi square, df=1, 11.048661, P<0.01

☑ 29.7% of participants said that they were not able to get crisis services when needed. The highest percent of unmet need was reported by Hispanics (41.5%) or those of mixed/other race (40.0%) and by the age group between 18-20 years old (44.8%).

Region	N	% Clients who "strongly
		agree" or "agree" on
		Q21*
State	277/934	29.7%
Region		
1	53/161	32.9%
2	71/271	27.3%
3	39/159	30.4%
4	54/168	24.4%
5	42/175	34.3%
Gender		
Male	139/481	28.9%
Female	122/409	29.8%
Unknown	16/44	36.4%
Ethnicity/		
Race ²²		
White	156/600	26.0%
Black/African	35/116	30.2%
American		
Hispanic	51/123	41.5%
Mixed/Other	26/65	40.0%
Unknown	9/31	29.0%
22		
Age ²³		
18-20	13/29	44.8%
21-30	32/132	26.0%
31-45	124/405	30.6%
46-64	78/283	27.6%
65 and over	5/18	27.8%
Unknown	25/76	30.1%

Q21: I cannot get crisis services when I need them

 $^{^{22}\} Chi\ Square,\ df=3\ \ (Unknown\ group\ excluded),\ 15.416096,\ p<0.01\ (post\ hoc\ t-test:\ Hisp.>White,\ Mixed>White;$ other comparisons NS).

²³ Chi square, NS.

☑ When in mental health crisis, people were most likely to call providers (51.0%), family (41.3%) or friends (31.7%)*. A crisis hot line was on average used by about 25% of participants, except in region 5 where as many as 38% of respondents report calling a crisis hot line.

	Family	Friend	Provider	Resid.	Warm	Crisis	Police	Dial	Other
				Counselor	line	Hot		911	
						line			
1	42.8%	26.5%	53.0%	10.8%	9.0%	21.7%	7.8%	14.5%	
2	36.3%	30.4%	54.1%	12.6%	10.3%	19.6%	8.9%	15.2%	
incl.									
pilot									
3	40.9%	31.0%	51.5%	20.5%	6.4%	25.1%	8.2%	16.4%	
4	47.2%	31.7%	50.0%	10.0%	10.6%	23.9%	4.4%	10.6%	
5	42.0%	38.8%	45.2%	13.8%	13.3%	38.3%	9.0%	11.7%	
									2.2% Nobody
All	41.3%	31.7%	51.0%	13.4%	10.1%	25.3%	7.8%	13.7%	0.8% Church
									0.7% Emerg.
									room
									0.1% SA Access
									line
									0.4% 12 Step
									1.8% No
									explanation

^{*} Q63: Who do you call when you are in mental health crisis?

[✓] Most of the clients who called their family or friends also used others to help them when in crisis. Nevertheless, as many as 12.2% of all clients (139/1136) relied only on their family and 6.7% (76/1136) relied only on their friends for help.

As many as 37.2% (357/959) of people across the state reported that they hesitated to call crisis programs. The persons who were most likely to hesitate were either females (42.0%), Hispanics (40.8%) or those between 31-45 years of age (42.8%).

	N	% Yes on
		Q64*
State	354/959	37.2%
Region		
1	69/165	41.8%
2	99/267	37.1%
3	57/165	34.5%
4	57/176	32.4%
5	75/186	40.3%
Gender		
Male	162/486	33.3%
Female	187/445	42.0%
Unknown	8/28	28.6%
Ethnicity/Race		
White	226/620	36.5%
Black	41/127	32.3%
Hispanic	51/125	40.8%
Mixed/Other Race	23/67	34.3%
Unknown	6/20	30.0%
Age		
18-20	10/33	30.35%
21-30	45/128	35.2%
31-45	177/414	42.8%
46-64	99/303	32.7%
65 and over	4/20	20.0%
Unknown	22/61	36.1%
Duration of services		
<6 months	24/62	38.7%
6-12 months	11/45	24.4%
1-2 years	17/75	22.7%
2-5 years	47/128	36.7%
5-10 years	63/154	40/9%
>10 years	181/458	39.5%

^{*}Q64: Do you hesitate to call a crisis program?

Among those who hesitated to call a crisis program, 57% people (204/357) offered at least one reason why. Three of the most frequently cited reasons were: 1. Fear of confinement/jail (19.1%), 2. crisis staff is not respectful or not taking clients seriously (17.6%), and 3. perceiving crisis services as ineffective or being worried of getting more sick (11.3%).

Explanation offered why clients hesitate to call crisis	# of	%
hotline.	Comments	
Fear of confinement/jail	39	19.1%
Fear of strangers/using phone	16	7.8%
Fear – general	5	2.5%
Hesitates-embarrassed, does not like bothering others,	17	8.3%
unsure if needed		
Criticism-disrespect/not taken seriously	36	17.6%
Criticism-services ineffective/make me more sick	23	11.2%
Criticism-mistrust/dislike of service	7	3.4%
Not Using Crisis Services: Have other means	18	8.8%
Not Using Crisis Services: NA, never been in crisis	16	7.8%
Not Using Crisis Services: No explanation	4	2.0%
Positive Comments	3	1.0%
Other/Unclear/Inappropriate response	27	13.2-%

Many people also do not trust police when in crisis (268/957; 28.0%). The most likely not to trust police were American Indians (9/13, 69%; these clients were folded into the mixed/other category in the table below).

	N	% No on Q65*
State	268/957	28.0%
Region		
1	45/165	27.3%
2	78/270	28.9%
3	38/167	22.8%
4	49/177	27.7%
5	58/178	32.6%
Gender		
Male	136/491	27.7%
Female	122/438	27.9%
Unknown	10/28	35.7%
Ethnicity/Race		
White	161/622	25.9%
Black	32/124	25.8%
Hispanic	33/127	25.9%
Mixed/Other Race	31/61	50.8%
Unknown	11/23	47.8%
Age		
18-20	26/30	20.0%
21-30	32/127	25.2%
31-45	117/419	27.9%
46-64	87/301	28.9%
65 and over	4/20	20.0%
Unknown	22/60	36.7%

^{*}Q64: Do you trust the police when you need it?

Among those who said that they do not trust police, 143 people offered at least one reason why. Four most frequently quoted reasons were: 1. Generalized distrust/dislike of police (i.e. "police are crooks", 21.7%), 2. Police lacks skill in dealing with mentally ill, their response is ineffective (15.4%), 3. Police are insensitive, do not understand mental illness and/or are racially biased (14.0%), 4. Fear of confinement (in hospital or jail, 13.3%).

Explanation offered why clients do not trust police.	# of	%
	Comments	
Fear of confinement (hospital/jail)	19	13.3%
General Fear	7	4.9%
Distrust because of the previous history of involvement	14	9.8%
with law		
Police do not understand mental illness; MI stigma, racial	20	14.0%
discrimination		
Police lack skills dealing with MI, ineffective, slow	22	15.4%
General distrust/ dislike of police; police are crooks	33	21.7%
Distrust of police because of the previous physically	12	8.0%
abusive experience		
Never needed to call/ use other means to deal with crisis	4	2.8%
Positive comment	1	0.7%
Miscellaneous other/Unclear/Inappropriate	15	11.2%

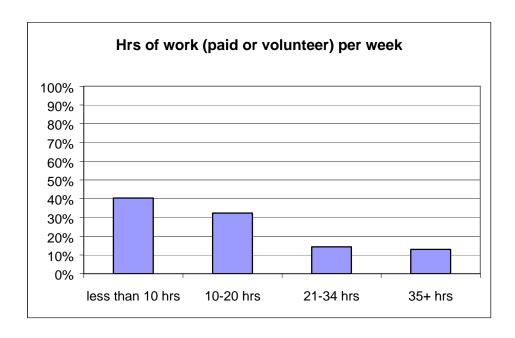
J. DATA ABOUT WORK

How many people work, how many hours and what do they earn?

This analysis included all survey participants (regardless of age and whether they were receiving vocational services or not)²⁴.

☑ 39% of all survey participants with analyzable employment data (340/879) indicated that they worked either for pay or as a volunteer (Q54). This number included all participants regardless of age or services received. About one third of those who work, worked as volunteers (i.e. they were not "employed"; Q54 and Q56 combined).

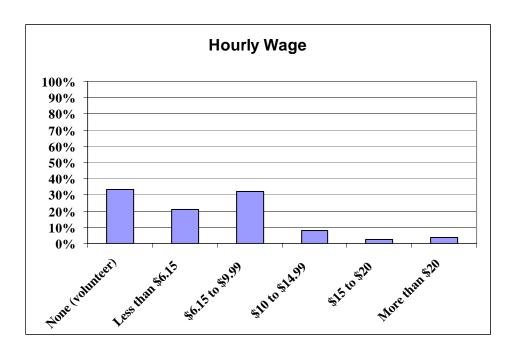
☑ About 40% of those who worked (for pay or as a volunteer) worked 10 hours or less per week.



24 The only exception is an a

²⁴ The only exception is an exclusion of data from the pilot site because edits in Q52, Q53 and Q57 that were made after the collection at that site.

☑ The majority of people who worked (either for pay or as volunteers) earned less than \$10 per hour (Q54 and Q56).



- ☑ **64.8%** (528/810) of the participants indicated that they **would work more** hours if they could keep their Medicaid/Medicare insurance; only 7% (78/810) said that they already work enough (Q52).
- ☑ One half of the people who said they would work more if they could keep their Medicaid/Medicare insurance indicated that they were not aware of changes in the law that may allow higher earnings without losing Medicaid benefits (Q53).
- ☑ The total monthly income of 85% of clients (including SSI, wages, etc) was \$1000 or less.

Are mental health services helping people to do better in school or work (Q36)?

This analysis included only people age 64 or younger.

People who were receiving vocational service reported doing better at work/school among those than those who work but do not receive vocational services.

	Analyzable N	Agree	Neutral	Disagree
		(score 1 or 2)	(score =3)	(score 4 or 5)
All participants	725	465	156	105
		64.0%	21.5%	14.5%
RECEIVES	185	146	24	15
VOCATIONAL		78.9%	13.0%	8.1%
SERVICES				
NOT IN	191	125	45	21
VOCATIONAL		65.4%	23.6%	11.0%
SERVICES, BUT				
WORKS (for pay				
or as a volunteer)				

Q36: As a result of services that I have received - I do better in school/or work

Who works for pay?

This analysis included all participants with valid data for both Q54 and Q56, regardless of age.

- ☑ Overall, about 26% of all respondents worked for pay.
- ☑ Close to one half of people who were receiving vocational services were employed (i.e. they were working for pay). The employment rate among those who were <u>not</u> in vocational services was 19.7%.

	All	In Vocational	Not in Vocational
Survey average	25.7% (231/899)	47.2% (92/195)	19.7% (139/704)
www.rej wrenege		110270 (22,220)	
Male	28.4% (135/476)	52.2% (59/113)	20.9% (76/363)
Female	22.7% (96/423)	40.2% (33/82)	18.5% (63/341)
18-20	24.1% (7/29)	NC* (3/8)	19.0% (4/21)
21-30	34.7% (42/121)	53.8% (21/39)	25.6% (21/82)
31-45	29.2% (119/407)	54.8% (51/93)	21.7% (68/314)
46-64	18.1% (52/288)	31.6% (16/49)	15.4% (37/240)
>64	18.2% 4/22)	NC (1/1)	14.3% (3/21)
White	29.1% (178/611)	50.4% (67/133)	23.2% (111/478)
Black/African	23.1% (27/117)	51.5% (17/33)	11.9% (10/84)
American	(27/117)	(17700)	1200 / 0 (10/01)
Hispanic	14.9% (17/114)	36.4% (8/22)	9.8% (9/92)
Mixed/Other	10.2% (6/59)	NC (1/7)	9.6% (5/52)
12 months or less	25.7% (26/101)	62.5% (10/16)	18.8% (16/85)
1-2 years	21.1% (16/76)	NA (4/12)	18.8% (12/64)
2-5 years	34.4% (43/125)	52.8% (19/36)	27.0% (24/89)
5-10 years	21.7% (31/143)	36.0% (9/25)	18.6% (22/118)
>10 years	25.0% (110/440)	49.0% (50/102)	17.8% (60/338)
Region 1	25.9% (41/158)	41.9% (13/31)	22.0% (28/127)
Region 2	27.5% (72/262)	58.0% (29/50)	20.3% (43/212)
Region 3	21.3% (34/160)	38.1% (16/42)	15.3% (18/118)
Region 4	24.0% (40/167)	50.0% (16/32)	17.8% (24/135)
Region 5	27.4% (48/175)	46.3% (19/41)	21.6% (29/134)

^{*} NC = not calculated (total number in the cell less than 15)

Among those NOT in vocational programs, the percent of whites who worked for pay (23.2%) was more than double the rate among both Black/African Americans (11.9%) or Hispanics (9.8%).

Percent of those who worked for pay was the lowest among people older than 46 years.

Percent of Hispanic consumers in the vocational programs that worked for pay was lower than that of White or Black/African American consumers.

K. LIVING SITUATION

Where do people live?

Consumer survey respondents were asked to select a living situation category that best described their living situation in the past 30 days (Q58). The most frequently mentioned categories were 1. Living independently in an apartment or house (51.4%); 2. Sharing accommodations with non-family (14.2%); and 3. Living in the family apartment/house (12.5%). The exception was Region 3 where the third most common living situation category listed (13.6%) was the Group Home category (includes Board and Care Homes, Rest Homes). About 4% (35/904) of respondents were homeless²⁵.

Living Situation	State	Region 1	Region 2	Region 3	Region 4	Region 5
Independent, apt.	51.4%	48.8%	45.5%	49.7%	52.7%	60.9%
or house	(465/904)					
Shared with non-family	14.2% (128/904)	14.1%	13.4%	16.6%	9.2%	17.9%
Rooming House	4.6% (42/904)	3.5%	4.5%	3.6%	4.3%	7.3%
In family apt./house	12.5% (113/904)	16.4%	15.8%	5.9%	15.8%	7.8%
Board & Care home, Group home, Rest home	7.6% (69/904)	8.8%	5.4%	13.6%	7.6%	3.4%
Nursing Home	1.2% (11/904)	0	1.5%	1.8%	2.2%	0
Homeless ²⁵	3.9% (35/904)	0.6%	8.4%	2.4%	4.9%	2.2%
Hospital	1.7% (15/904)	3.5%	1.5%	3.0%	0.5%	0
Jail	0.2% (2/904)	0	0.5%	0.6%	0	0
Other *	2.7% (25/904)	4.1%	3.5%	3.0%	2.7%	0.6%

^{*}Includes 4 people in supervised apartments, 1 person in respite and 20 people listing unspecified "other".

Do people who live in independent housing receive much assistance with their living activities?

Respondents were asked whether they received assistance in their living activities like shopping, cooking, bathing, or managing money, etc. (Q59A) and if yes, how frequently (Q59B).

Among those who lived in an independent housing, close to one half (46%) were reported to receive assistance with living activities at least occasionally (Q58 and Q59A combined).

37

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²⁵ One of the survey sites was a shelter in Region 2

Among those who <u>lived independently</u> in an apartment or home and who <u>received help</u>, about a quarter (24.4%) received help daily, 45.9% weekly and 29.7% occasionally. Women were more than twice as likely to receive daily help (34.5%) than men (14.6%). (Q58, Q59A and Q59B).

Clients who live independently (Q59A) and receive assistance with daily activities (Q59B)	Daily help	Weekly help	Occasional help
State	24.4% (42/172)	45.9% (79/172)	29.7% (51/172)
Gender			
Unknown	16.7% (1)	66.6% (4)	16.7% (1)
Male	14.6% (12)	52.9 (45)	30.5% (25)
Female	34.5% (29)	35.7% (30)	29.8% (25)
Age			
Unknown	23.1% (3)	30.8% (4)	46.2% (6)
18-20	20% (1)	40% (2)	40% (2)
21-30	26.3% (5)	47.4% (9)	26.3% (5)
31-45	24% (18)	49.3% (37)	26.7% (20)
46-64	21.1% (12)	47.4% (27)	31.8% (18)
65-74	100% (3)		
	, ,		
Race			
White	23.1% (27)	47.9% (56)	29.1% (34)
Black/African	28% (7)	52.0% (13)	20.0% (5)
American			
Hispanic	26.3% (5)	36.8% (7)	36.8% (7)
Mixed/Unknown	27.3% (3)	27.3% (3)	45.4% (5)

How frequently do people change their residence?

- ☑ Over eighty percent of clients (719/873; 82.5%) had not moved or moved only once during the past 2 years (Q60). The rest of the people moved more frequently: 16.6% (145) lived in 3-10 places and 1% (9 people) reported living in more than 10 places during the past two years.
- ☑ Younger people (under 30) and people with addiction problems (either current or a history) accounted for a higher proportion of people (p<0.05) in a group that moved more frequently (three or more places of residence in the past 2 years) than in a group which reported a more stable housing (1-2 places of residence in the past two years).

Did clients' housing situation improved as a result of services they received?

Sixty seven percent of clients reported that their housing situation improved as a result of services they received (Q37). The percent of those who reported improved housing seemed to vary little by age, race and/or gender. The rate was the lowest among those who had received services for less than 6 months. (Q37: My housing situation has improved)

	% Agree*
State	67.3% (645/959)
	, , ,
Region	
Southwest	66.5% (107/161)
South Central	64.3% (175/272)
Eastern	69.8% (118/169)
North Central	66.1 % (113/171)
Northwestern	71.0% (132/186)
Gender	
Unknown	67.5% (27/40)
Male	67.3% (338/502)
Female	67.1% (280/417)
Age	
Unknown	70.4% (50/71)
18-20	69.6% (23/33)
21-30	65.6% (84/128)
31-45	68.5% (280/409)
46-64	65.2% (195/299)
65-74	66.6% (10/15)
75+	75% (4/3)
Race	
Unknown	65.5% (19/29)
White	65.6% (395/602)
Black/African American	70.3% (90/128)
Native American	73.3% (11/15)
Native Hawaiian/Pacific. Isl.	100% (2/2)
Mixed	63.5% (33/52)
Hispanic	72.5% (95/131)
Time receiving services ²⁶	
Unknown	71.7% (38/53)
< 6 months	43.1% (25/58)
6-12 months	57.5% (23/40)
1-2 years	70.5% (55/78)
2-5 years	68.4% (91/133)
5-10 years	59.5% (88/148)
>10 years	72.4% (325/449)

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²⁶ Chi square, df =3, 24.543, p<0.01 (<=1y=49.0%; 1-5 yrs=69.2%; 5-10 years=59.5%, over 10 yrs=72.4%)

Do people like their home and if not, why not?

When asked if they liked their home, about one fifth (22.3%) of all clients responded negatively. The percentage of those who responded that they do not like their home tended to be higher among non-White clients and was the highest among the youngest age group (35.5% for 18-20 years old).

	% No (Q61)*	
State	22.3% (216/969)	
Region		
Southwest	20.4% (34/167)	
South Central	26.0% (70/269) ²⁷	
Eastern	19.9% (34/171)	
North Central	20.5% (36/176)	
Northwestern	22.6% (42/186)	
Gender		
Unknown	23.1% (6/26)	
Male	20.5% (101/493)	
Female	24.2% (109/450)	
Age		
Unknown	24.6% (16/102)	
18-20	35.5% (11/31)	
21-30	28.1% (36/128)	
31-45	23.3% (97/417)	
46-64	17.3% (53/307)	
65-74	15.8% (3/19)	
75+	0% (0/2)	
Race		
Unknown	23.8% (5/21)	
White	20.4% (129/632)	
Black/African American	26.8% (34/124)	
Native American	28.6% (4/14)	
Native Hawaiian/Pacific Isl.	0 (0/2)	
Mixed	31.3% (15/48)	
Hispanic	23.2% (29/125)	

^{*}Q61: Do you like your home?

Many people (142) offered an explanation why they did not like their homes. The most frequent reason (16.2%, 23 people) was related to problems with roommates, family and neighbors and it included problems with cleanliness of others with whom the client shared living quarters. Many people wrote that their homes or rooms were too small or crowded (17, 12.0%) or they did not like to live in a senior housing or would have preferred to live on another floor or in a different location (15, 10.6%). Ten clients (7.0%) did not like their home because of an unsafe location and/or presence of drugs. Two

²⁷ One of the agencies in Region 2 where the survey took place was a shelter. When all people who reported to be homeless were removed from the analysis, the regional total of those who reported that they do not like their home decreased to 23.2%.

people in this group mentioned that the presence of drugs or alcohol in or around their home makes it difficult for them to control their own substance use behavior.

Housing not satisfactory:	
Too small, crowded	12.0% (17)
Wrong floor, location or type of housing	10.6% (15)
Poor maintenance, dirty, cold	8.5% (12)
Unsafe location, drugs	7.0% (10)
Too noisy	7.0% (10)
Personal Interactions	
Problems with roommates, family, neighbors	16.2% (23)
Prefer to live independently, alone	10.6% (15)
No privacy	3.5% (5)
Problems with staff	3.5% (5)
Racial discrimination, personal abuse, MI stigma	3.5% (5)
Lonely, prefers to live with others	2.1% (3)
Others do not obey rules	1.4% (2)
Affordability	
Does not have a home, lives in shelter, current housing is temporary	9.2% (13)
Too expensive, lease problems, being evicted	5.6% (8)
Rules	
Restrictions, no choice, strict compliance rules, locked	4.9% (7)
Miscellaneous	6.3% (9)

Do people feel safe where they live and if not, why?

☑ Overall about 18% of the clients reported that they did not feel safe in their neighborhood. The number of people who did not feel safe was the highest in region 4 (25.1%), while the percentage of people who did not feel safe in the other four regions ranged from 15.1% - 18.4%. In general, the non-White people reported feeling less safe in their neighborhoods than whites. The youngest group (18-20) had the lowest percentage of people who did not feel safe and the "unknown" category in each breakdown had the highest rate of unfavorable ratings.

	Analyzable N	% No on Q62*
State	953	17.9%
Region		
1	166	15.1%
2 (incl. Pilot)	267	15.7%
3	166	16.3%
4	175	25.1%
5	179	18.4%
Gender		
Unknown	25	24.0%
Male	489	16.8%
Female	439	18.9%
Ethnicity/Race		
Unknown	19	36.8%
White	624	15.1%
Black/ African American	125	22.4%
American Indian	13	23.1%
Native Hawaiian	2	0%
Mixed/Other Race	47	25.5%
Hispanic	123	21.9%
Age		
Unknown	60	20.0%
18-20	29	6.9%
21-30	126	19.0%
31-45	417	18.9%
46-64	302	16.9%
65-74	16	18.8%
75+	3	0%

^{*}Q62: Do you feel safe in your neighborhood?

Seventy-nine (79) people explained why they did not feel safe in their neighborhood. The most frequently cited reasons were: 1. high crime neighborhood, gangs (31 people) and 2. presence of drugs in the neighborhood (30 people). Several people mentioned that the presence of the drugs in their surroundings makes it difficult for them to control their own behavior. Six people reported personal victimization (personal theft, physical or sexual abuse).

High crime area, gangs, vandalism	39.2% (31)
Drugs around	38.0% (30)
Personal experience of victimization (theft, physical or sexual	7.6% (6)
abuse)	
Afraid of others or strangers	10.1 % (8)
Not feeling safe in general (especially at night) in general	6.3% (5)
Neighborhood intolerance	3.8% (3)
Miscellaneous other (e.g. dogs, too much traffic)	8.9% (7)

L. DMHAS GRIEVANCE PROCEDURE

Do people know about the existence of the DMHAS grievance procedure?

✓ Voice Your Opinion 2000-01 results suggest that over half (56.8%) of people who receive DMHAS services do not know about the existence of a DMHAS grievance procedure. Knowledge about the DMHAS grievance procedure varies considerably from region to region. For example, consumers in the Northwest region appear most knowledgeable about the existence of the procedure (only 44% do not know about the procedure) while as many as 64% of consumers in the North Central region reported being ignorant of its existence.

Region	% reporting NOT knowing about the DMHAS grievance
	procedure*
State	56.8% (598/1050)
Southwestern	58.4%
South Central	62.2%
Eastern	53.6%
North Central	63.5%
Northwestern	43.5%

^{*}Q66: Do you know that there is a DMHAS grievance procedure?

☑ The highest level of ignorance about the existence of a grievance procedure was noted among the **respondents by mail** (73.9%). Perhaps people who have chosen to participate in the survey by requesting a mail-in questionnaire (about 10% of all respondents) are the most isolated and least likely to learn from communicating with other clients and consumer advocates.

What percentage of people have used a grievance procedure in the past?

☑ Nineteen percent (84/440) of those who responded that they knew about DMHAS' grievance procedure have used a grievance procedure to resolve problems with services in the past.

Region	% using a grievance procedure in the past 12 months*
State	(84) 19.1%
Southwestern	(17) 23.6%
South Central	(23) 16.2%
Eastern	(16) 13.4%
North Central	(14) 20.8%
Northwestern	(23) 22.0%

^{*}Q67: In the past 12 months, have you ever initiated a grievance procedure to resolve problems with your services?