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DATA INFRASTRUCTURE GRANT

***ADULT MENTAL HEALTH &
WELL-BEING SURVEY***

2011 ADULT SURVEY

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AT A GLANCE

Summary of 2011 Adult Mental Health & Well Being Survey

The 2011 Adult Mental Health & Well-Being Survey was administered by mail in June 2011. The survey was mailed to individuals who received services during the previous eight months from MaineCare Section 17 Community Support Services or Section 97 Services Adult Residential Services (PNMI). The 2011 survey had a response rate of 17.2%. Highlights from the 2011 survey include:

DEMOGRAPHICS

- Females (63.2%) were more likely to respond to the survey than males (36.8%).
- The age of survey respondents ranged from 18 to 93 with an average age of 47.5 years.
- Individuals aged 35 and 54 had the highest survey response rate (49.7%).
- The geographic distribution of survey respondents corresponded closely to the distribution of the actual service population.

DOMAIN AREA SUMMARY

- Overall, respondents reported a high degree of satisfaction with their mental health services.
- The Participation in Treatment Planning domain had the highest proportion of satisfied respondents by domain (83.2%).
- Individuals reported being the least satisfied with their experiences of Outcomes (61.8%) and Functioning (58.8%).
- Significant differences were found in the following:
 - Respondents age 65 and older reported significantly greater satisfaction with their experiences relating to Access, Treatment, General Satisfaction, Social Connectedness, Outcomes, and Functioning.
 - AMHI class members reported greater satisfaction than non class members in the areas of Social Connectedness, Outcomes, and Functioning.
 - Females reported significantly greater satisfaction than males with Quality and Appropriateness of their services.
 - Males reported greater satisfaction in the area of Social Connectedness.

HEALTH AND WELL-BEING

- Respondents of the 2011 Adult Mental Health & Well-Being Survey were more likely to report:
 - Higher percentages of health risk, including smoking, obesity, high cholesterol and high blood pressure than the general population in Maine.
 - Higher percentages of chronic health conditions than the general population in Maine.

INTRODUCTION

Currently in its 11th year, the Maine Data Infrastructure Grant (DIG) is a federally funded project coordinated by Maine's Department of Health and Human Services Office of Continuous Quality Improvement Services (OCQIS). The grant is sponsored through the Federal Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) and supports the strengthening of state-level mental health system data through the analysis of service use and service outcomes for adults and children receiving mental health services.

The DIG supports the administration of the DHHS Mental Health & Well-Being Survey, a survey administered annually to adults, children and families receiving publicly funded mental health services from DHHS. Many of the questions asked in the DHHS Mental Health & Well-Being Survey in Maine are also used by State Mental Health Authorities in 50 states and 7 United States Territories. The widespread use of the survey allows for national comparisons of satisfaction trends. The survey assesses consumer satisfaction with mental health services and continues to remain a key part of SAMHSA's National Outcome Measures. The National Outcome Measures (NOMs) are a performance-based, outcome-driven measurement system that focuses on outcomes for people receiving mental health services.

In 2007, Maine was the first state to introduce the inclusion of Health and Well-Being items in both the Adult and Child/Family Mental Health & Well-Being Surveys. These items were adapted from the Behavioral Risk Factor Surveillance System (BRFSS), which is a survey used by all 50 states and has been coordinated by the Centers for Disease Control and Prevention (CDC) since 1987. The Health and Well-Being items included in the Mental Health & Well-Being survey are intended to assess the history of heart disease, diabetes and other health risk factors in survey respondents receiving mental health services. The introduction of these items provides an opportunity to determine if there is an association between the reported health of a survey respondent and satisfaction with the services that they have received over the past year.

Results from the survey are reported annually to stakeholders of the mental health system, including service recipients and their family members, community service providers, and state mental health officials. By examining trends and consumer satisfaction, we can continue to gauge the perceptions of how well services are being provided and use this information side by side with additional measures of service outcomes to improve and enhance the experience of service recipients.

SURVEY METHODOLOGY

Administration of this year's Adult Mental Health & Well-Being Survey was initiated in June 2011. The DHHS Behavioral Health Administrative Service Organization, APS Healthcare, Inc., provides the name, address, zip code, gender, race, age and county of residence for administration of the survey. APS Healthcare, Inc. maintains the service authorization data system for MaineCare funded behavioral health services. The survey was mailed to individuals who received a Severe Mental Illness (SMI) related service during the previous eight months. Adults with a Severe Mental Illness (SMI) are an important subpopulation of adults with mental health challenges and a priority population for the DHHS Office of Adult Mental Health Services. This group is identified by their use of Section 17 Community Support Services or Section 97 Services Residential Treatment Services. In addition to the survey, a cover letter is enclosed to inform individuals of the purpose of the survey, where to call to ask questions about the survey, and that completing the survey is voluntary.

A total of 10,618 names and addresses of adults receiving an SMI related service were obtained from the APS HealthCare, Inc. data system, CareConnection. In this report, this group of 10,618 is referred to as the "service population". Of that 10,618, 8,925 Adult Mental Health & Well-Being Surveys were mailed to valid addresses. Of the 8,925 valid addresses, the DHHS Office of Continuous Quality Improvement Services received back 1,536 completed surveys for a response rate of 17.2%.

STATISTICAL SIGNIFICANCE

Significant difference determines how likely it would be that change between groups of responses is not by chance alone. An example of this would be exploring survey responses by gender to better understand if a difference between responses in males and females is significant. Therefore, a finding indicating that there is a significance difference means that there is statistical evidence to support a real difference between groups of respondents. Survey questions indicating statistical differences were highlighted with an asterisk (*). No notation was made for questions showing no statistical differences.

AMHI CLASS MEMBER

An AMHI class member is defined as a person who was a patient at the Augusta Mental Health Institute or Riverview Psychiatric Center on or after January 1, 1988 and includes both civil and forensic admissions. By looking at trends and recipient satisfaction, the Office of Adult Mental Health Services (OAMHS) and the Office of Continuous Quality Improvement Services (OCQIS) can better understand class members' experiences with their mental health supports and services. Data obtained from AMHI class members is available in the appendix.

DHHS Adult Mental Health & Well Being Survey

SURVEY AREAS

Individuals are asked to answer survey questions using a Likert Scale (Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree). Response options Strongly Agree and Agree are combined to calculate percentages of satisfaction for individual questions. Survey questions are organized into seven domain areas:

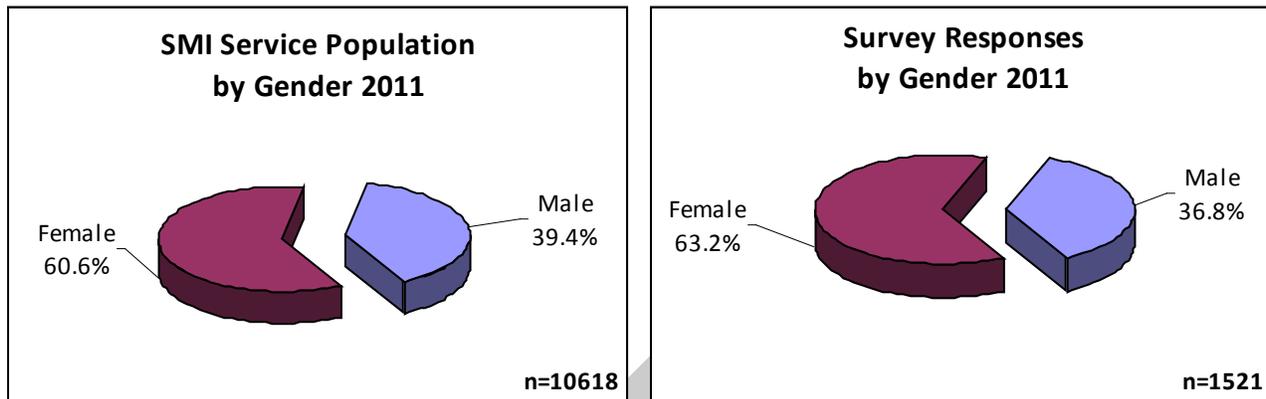
- 1) *Perception of Access* – examines an individual’s experience with the convenience and availability of services. Some questions for this area include:
 - The location of services is convenient (public transportation, distance, parking, etc.).
 - Staff are willing to see me as often as I feel it is necessary.
 - Services are available at times that are good for me.
- 2) *Quality and Appropriateness* – refers to individual experiences with the overall quality of services received and include the following questions:
 - Staff encourage me to take responsibility for how I live my life.
 - I feel free to complain.
 - I am given information about my rights.
- 3) *Participation in Treatment Planning* – examines the extent to which individuals are involved and participate in treatment planning decisions. Some questions for this area include:
 - I feel comfortable asking questions about my treatment and medication.
 - I, not staff, decide my treatment goals.
- 4) *General Satisfaction* – examines an individual’s overall satisfaction with the services that have been received. Some questions in this area include:
 - I like the services I receive.
 - If I had other choices, I would still get services from my current service provider(s).
 - I would recommend my current service provider(s) to a friend or family member.
- 5) *Social Connectedness* – examines the extent to which individuals have supportive social relationships and experience a sense of belonging in their community. Some questions for this area include:
 - Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.
 - Other than my current service provider(s), I have people with whom I can do enjoyable things.
 - Other than my current service provider(s), I feel I belong in my community.
- 6) *Outcomes* – examines the extent to which individuals feel that changes in their life are a result of the treatment and services they are receiving. Some questions for this area include:
 - As a direct result of my current services, I deal more effectively with daily problems.
 - As a direct result of my current services, I am better able to control my life.
 - As a direct result of my services, I do better in social situations.
- 7) *Functioning* – this area examines individual experiences with services and how these services have improved or maintained functioning in respect to dealing with everyday situations, problems and crises. Some questions for this scale include:
 - As a direct result of my current services, my symptoms are not bothering me as much.
 - As a direct result of my current services, I am better able to take care of my needs.
 - As a direct result of my current services, I am better able to do things that I want to do.

DRAFT

DEMOGRAPHICS

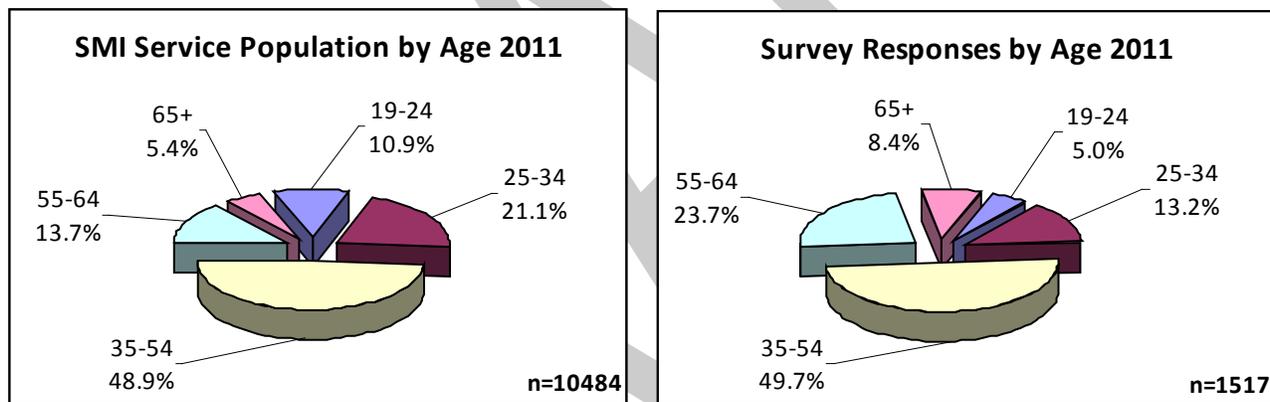
Demographics: SMI Service Population Compared with Survey Responses

GENDER (Figure 1)



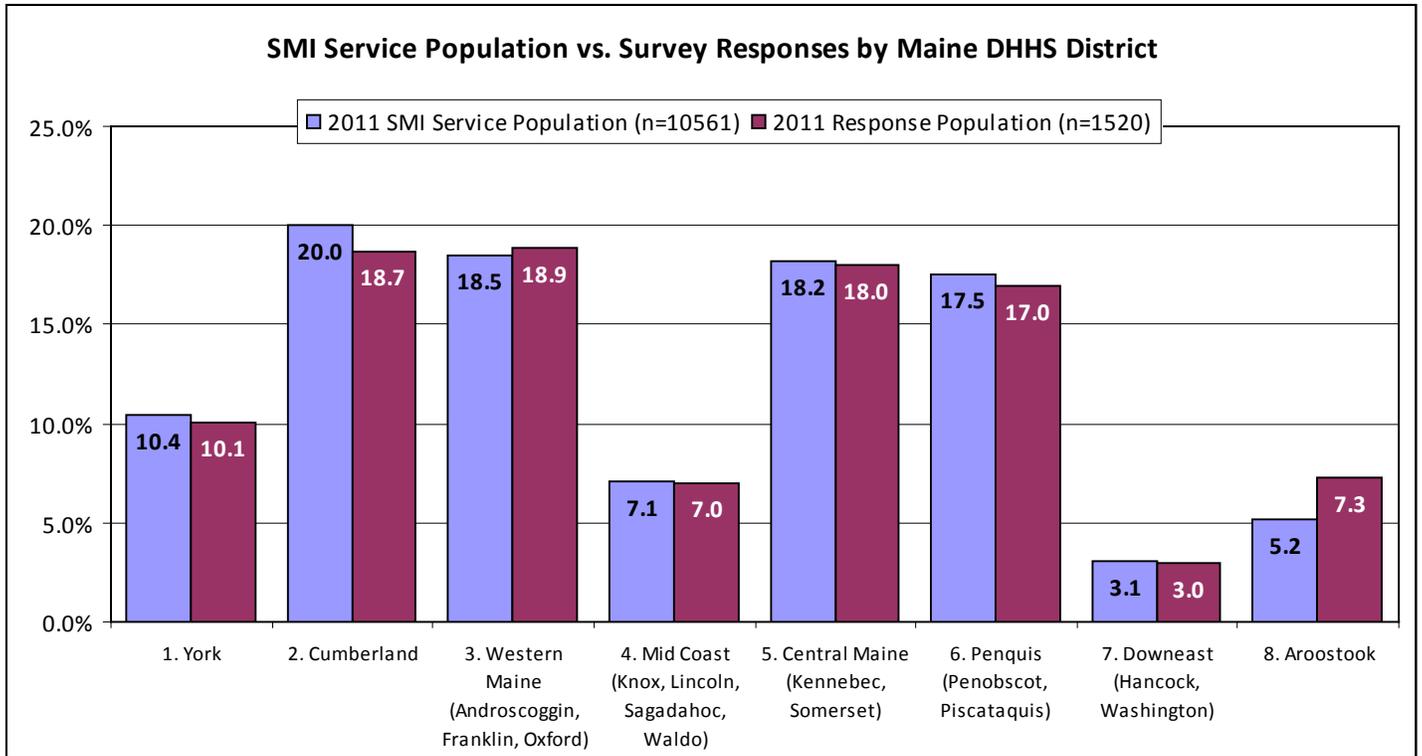
- The 2011 distribution of respondents by gender correspond closely with the SMI service population.

AGE (Figure 2)



- Nearly three-quarters (73.4%) of survey respondents were between the ages of 35 and 64 years while 18.2% were 34 years or younger.
- Compared with the SMI service population, adults 55 years and older were over represented in the survey sample while younger adults 18 to 34 years were under represented.

DHHS DISTRICTS (Figure 3)



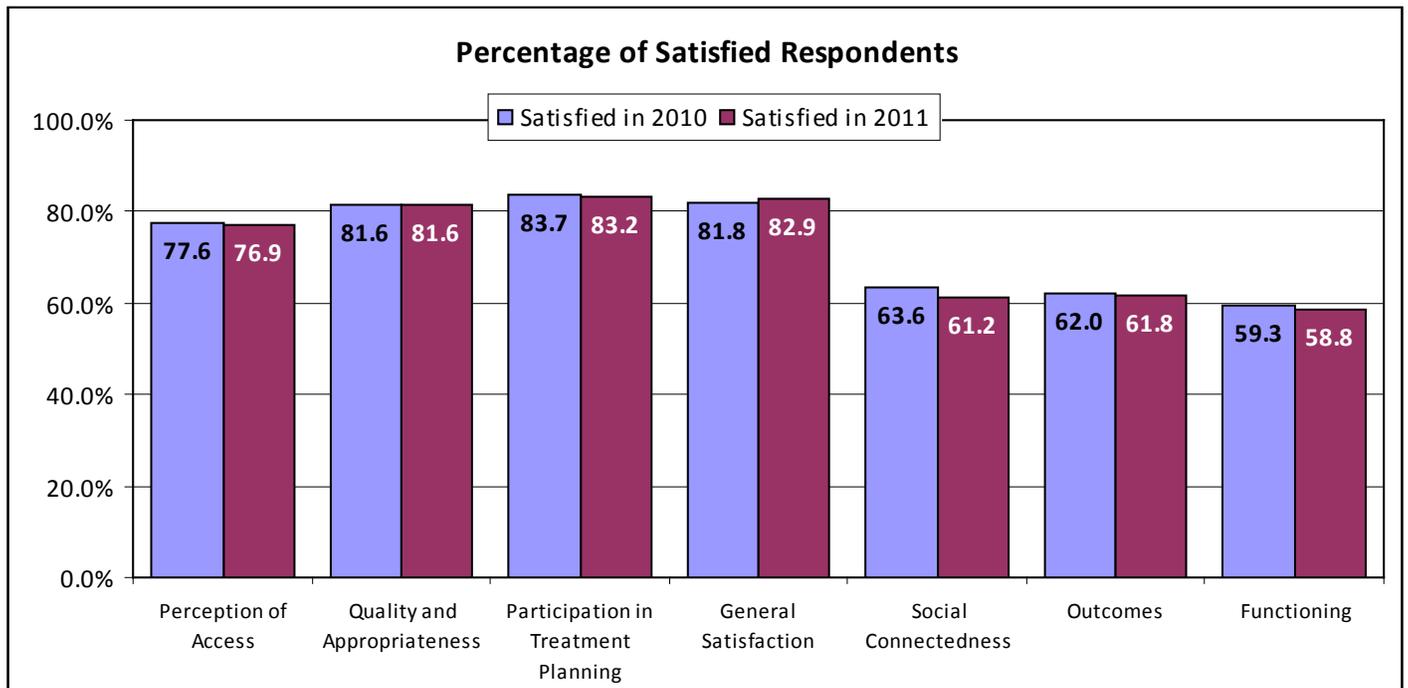
- The geographic distribution of survey respondents by district closely corresponds to the distribution of the actual SMI service population.

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SATISFACTION BY DOMAIN AREAS

SATISFACTION BY DOMAIN AREAS

DOMAIN AVERAGES (Figure 4)



- Respondents reported the highest degree of satisfaction with their engagement and participation in the Treatment Planning (83.2%) process.
- Respondents were least satisfied with the degree of improvement they experienced in Social Connectedness (61.2%), Outcomes (61.8%), and ability to Function (58.8%).
- Reported satisfaction remained relatively stable between 2010 and 2011.
- Satisfaction was found to differ significantly by age and class member status. (See page 12 and 13 for a closer look)

A CLOSER LOOK

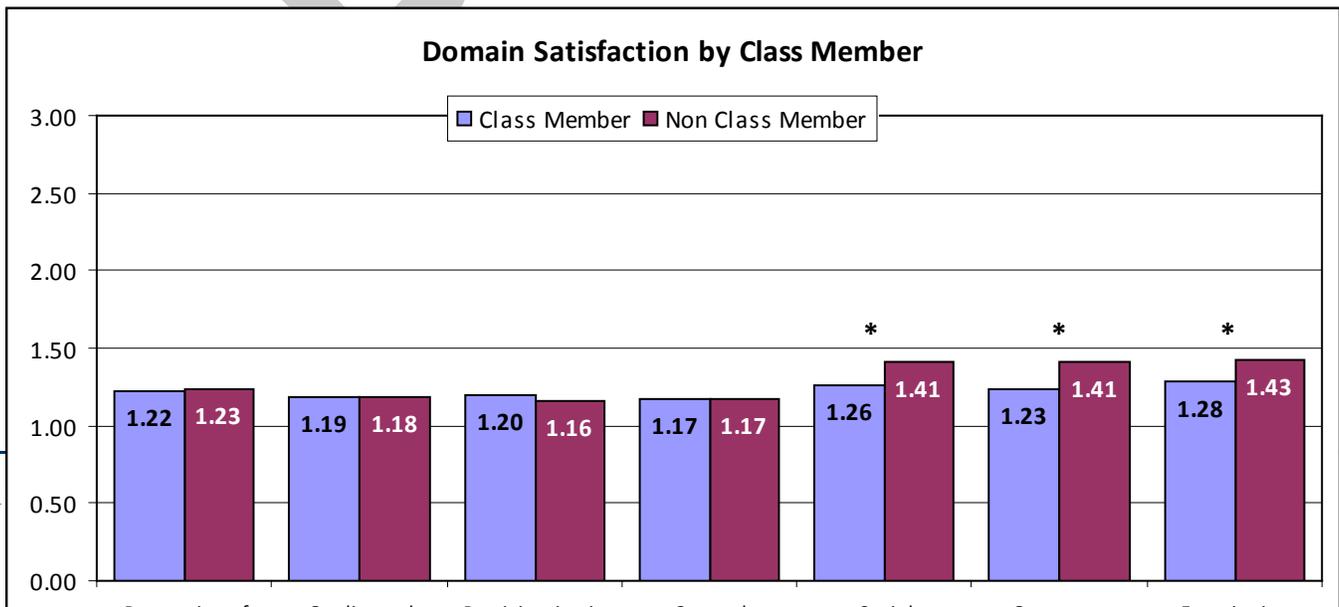


DOMAIN SATISFACTION BY AGE (Figure 5)

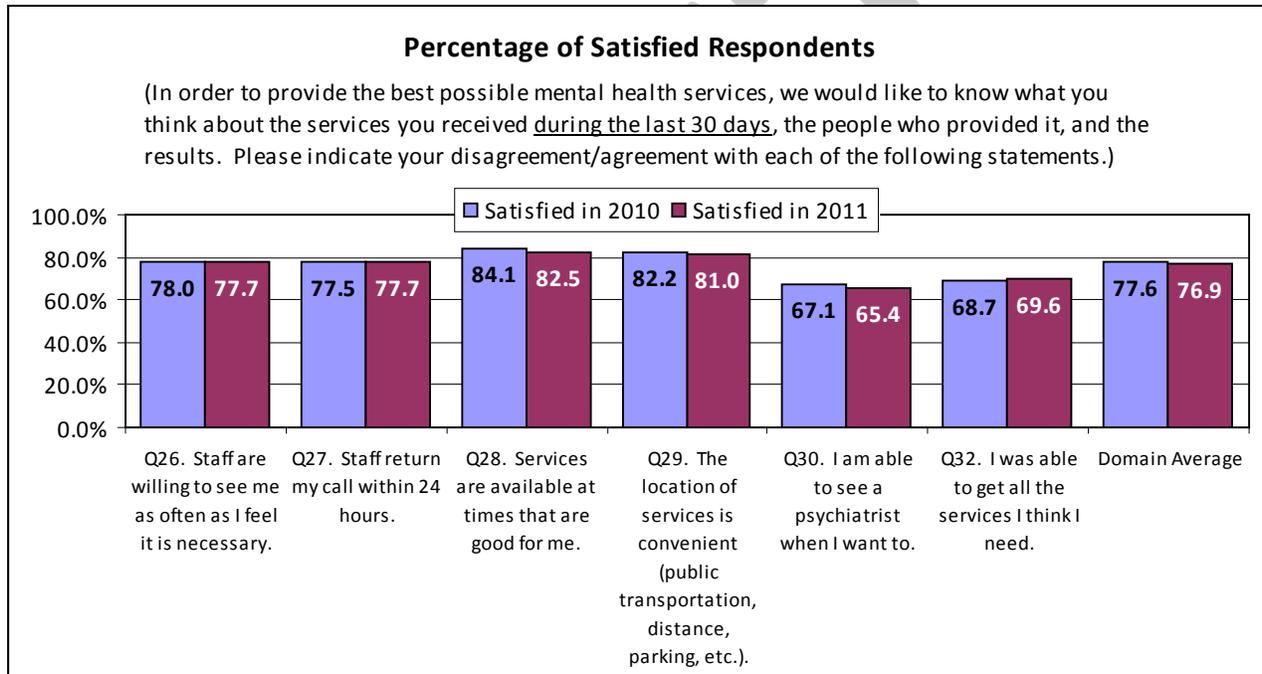
DOMAIN	2011		
	% Satisfied Age Group 18-34 (n=80)	% Satisfied Age Group 35-64 (n=1314)	% Satisfied Age Group 65+ (n=127)
Perception of Access*	65.8%	76.8%	83.9%
Quality and Appropriateness	75.0%	81.5%	85.8%
Participation in Treatment Planning*	72.2%	83.8%	84.6%
General Satisfaction*	72.5%	83.3%	88.9%
Social Connectedness*	68.4%	60.0%	68.3%
Outcomes*	52.5%	60.3%	82.7%
Functioning*	45.6%	57.7%	76.4%

- Respondents age 65 and older were significantly more likely to report being satisfied with their experiences with Access to Services, Participation in Treatment Planning, General Satisfaction, Social Connectedness, Outcomes, and Functioning.

DOMAIN SATISFACTION BY CLASS MEMBER (Figure 6)

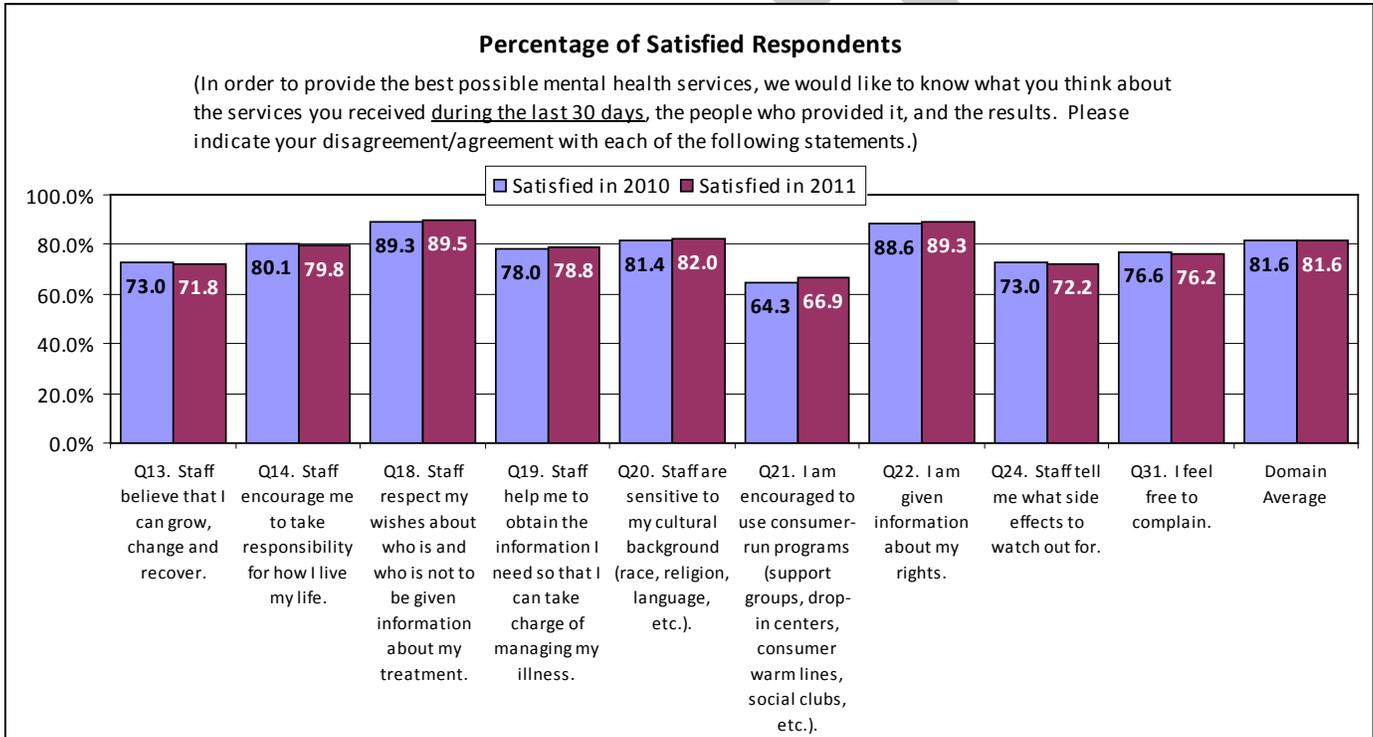


PERCEPTION OF ACCESS (Figure 7)



- The Perception of Access domain includes six questions and assesses convenience and availability of services.
- In 2011, three-quarters (76.9%) of respondents reported satisfaction with Access to their services.
- Respondents were most likely to report satisfaction (82.5%) with services that were available at times that were good for them (Q28) and that the location of services was convenient (81.0%) (Q29).
- Nearly two-thirds (65.4%) of respondents reported satisfaction when asked if they were able to see a psychiatrist when they want to (Q30).
- Reported satisfaction with Access to Services remained stable between 2010 and 2011.

QUALITY AND APPROPRIATENESS (Figure 8)

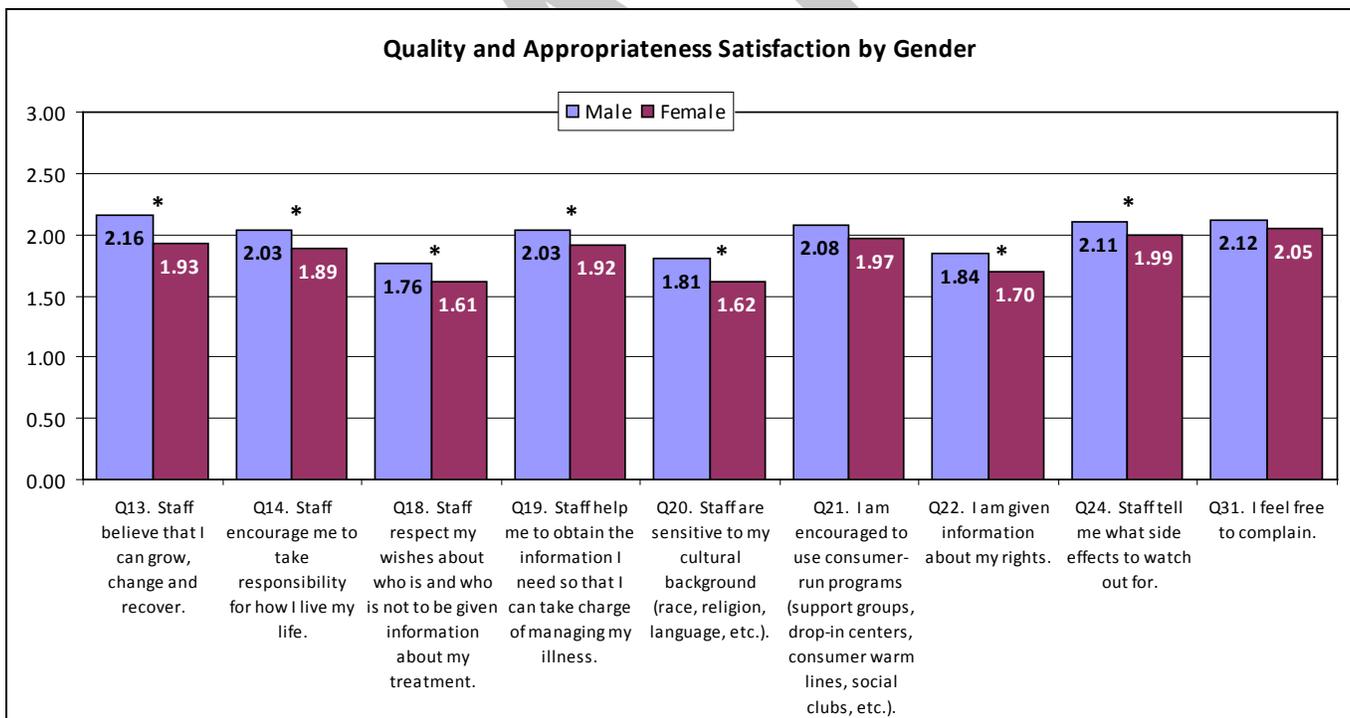


- The Quality and Appropriateness domain includes nine questions and assesses individual experiences with overall quality of services received.
- The majority (89.5%) of respondents reported that staff respected their wishes about who is and who is not given information about their treatment (Q18).
- Most respondents (89.3%) reported that they are given information about their rights (Q22).
- Slightly less than three-quarters (71.8%) of individuals reported that staff at their agency believe that the individual can grow, change and recover (Q13).
- Participant responses to the Quality and Appropriateness domain remained stable between 2010 and 2011.
- Individual responses to the Quality and Appropriateness domain were found to differ reliably by gender. (Please see next page for a closer look)

A CLOSER LOOK

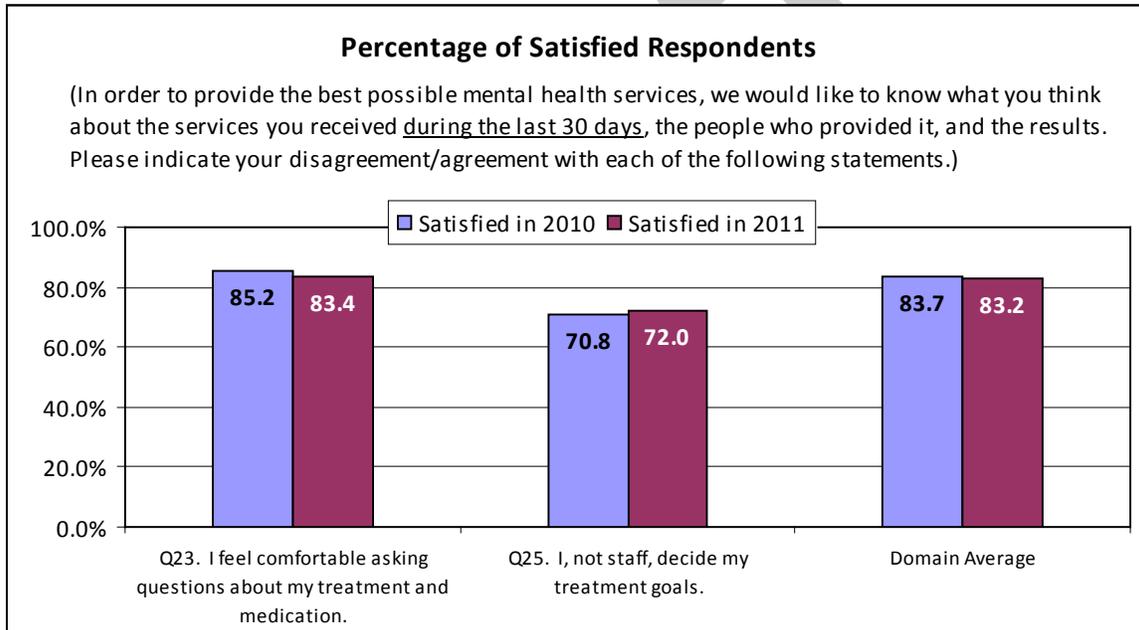


QUALITY AND APPROPRIATENESS SATISFACTION BY GENDER (Figure 9)



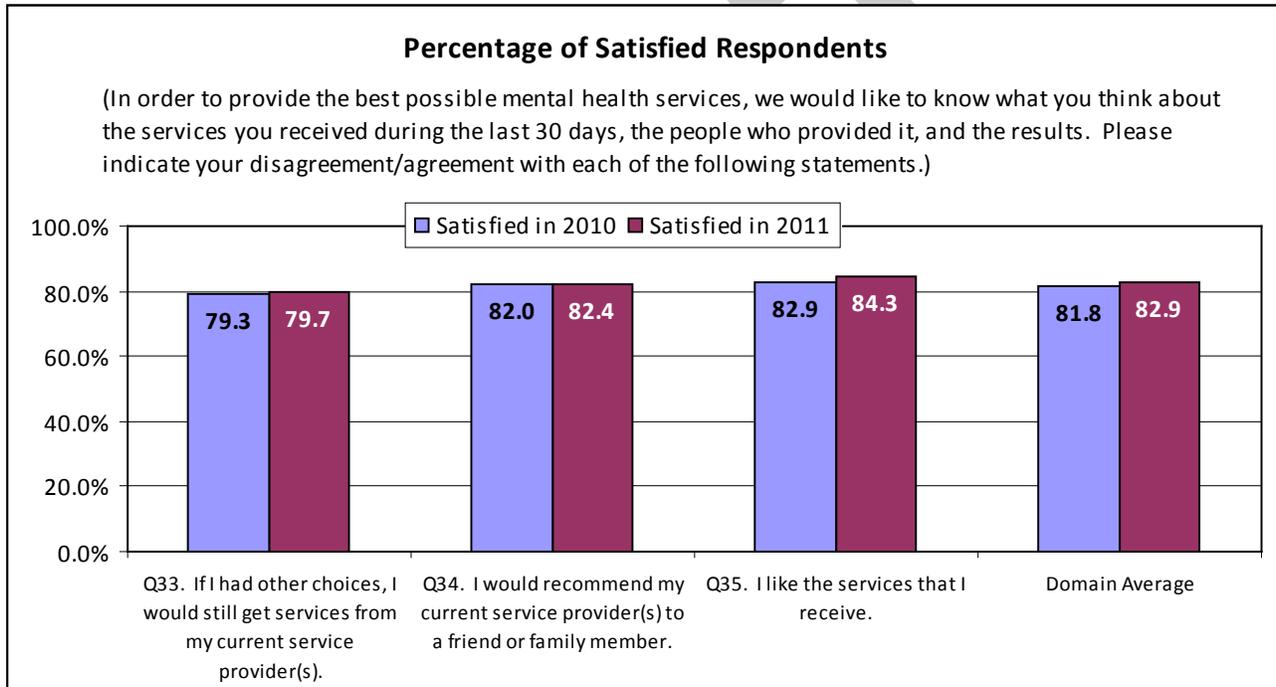
- Individual responses to the Quality and Appropriateness domain differed significantly by gender.
 - To take a closer look, each question within the Quality and Appropriateness domain was analyzed by comparing average scale scores.
- Females reported significantly greater satisfaction with Questions 13, 14, 18, 19, 20, 22 and 24 (*using a scale of 1 to 5, 1 being mostly satisfied and 5 being least satisfied*).
- Females were significantly more likely to report that:
 - Staff believe they can grow, change and recover (Q13).
 - Staff encourage them to take responsibility for how they live their life (Q14).
 - Staff respect their wishes about who is and who is not to be given information about their treatment (Q18).
 - Staff help them to obtain the information they need so they can take charge of managing their illness (Q19).
 - Staff are sensitive to their cultural background (race, religion, language, etc.) (Q20).

PARTICIPATION IN TREATMENT PLANNING (Figure 10)



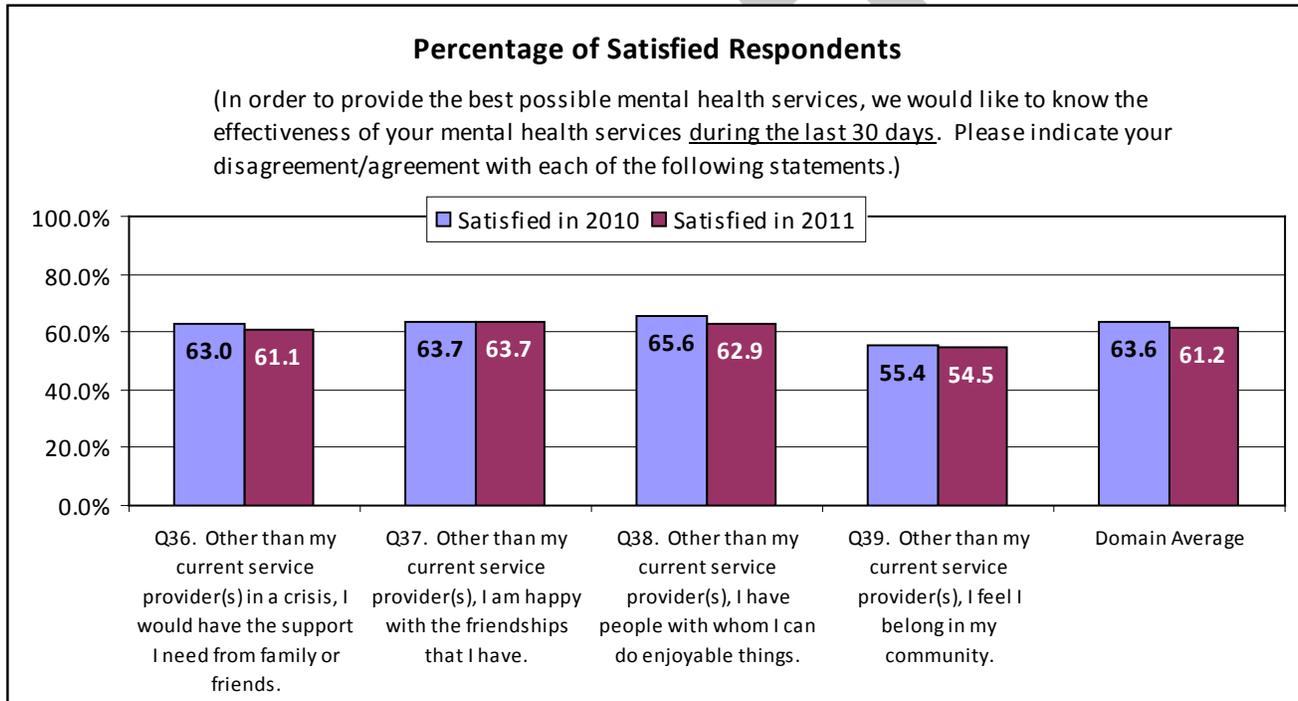
- The Participation in Treatment Planning domain contains two questions and assesses the extent to which individuals are involved and participate in treatment planning decisions.
- More than 80% of respondents reported being satisfied with their level of Participation in Treatment Planning.
- Slightly more than 83% of individuals reported that they were comfortable asking questions about their treatment and medication (Q23).
- More than two-thirds (72.0%) of respondents reported that they, not staff, decide their treatment goals (Q25).
- Reported satisfaction with Participation in Treatment Planning remained stable between 2010 and 2011.

GENERAL SATISFACTION (Figure 11)



- The General Satisfaction domain includes three questions and assesses an individual's satisfaction with the services that they have received.
- Nearly 80% of individuals reported that if given other choices, they would still get services from their current service provider (Q33).
- More than 80% of individuals reported they would recommend their service provider to a friend or family member (Q34).
- More than 80% of respondents reported that they like the services they receive (Q35).
- Respondent experiences with overall satisfaction remained stable between 2010 and 2011.

SOCIAL CONNECTEDNESS (Figure 12)

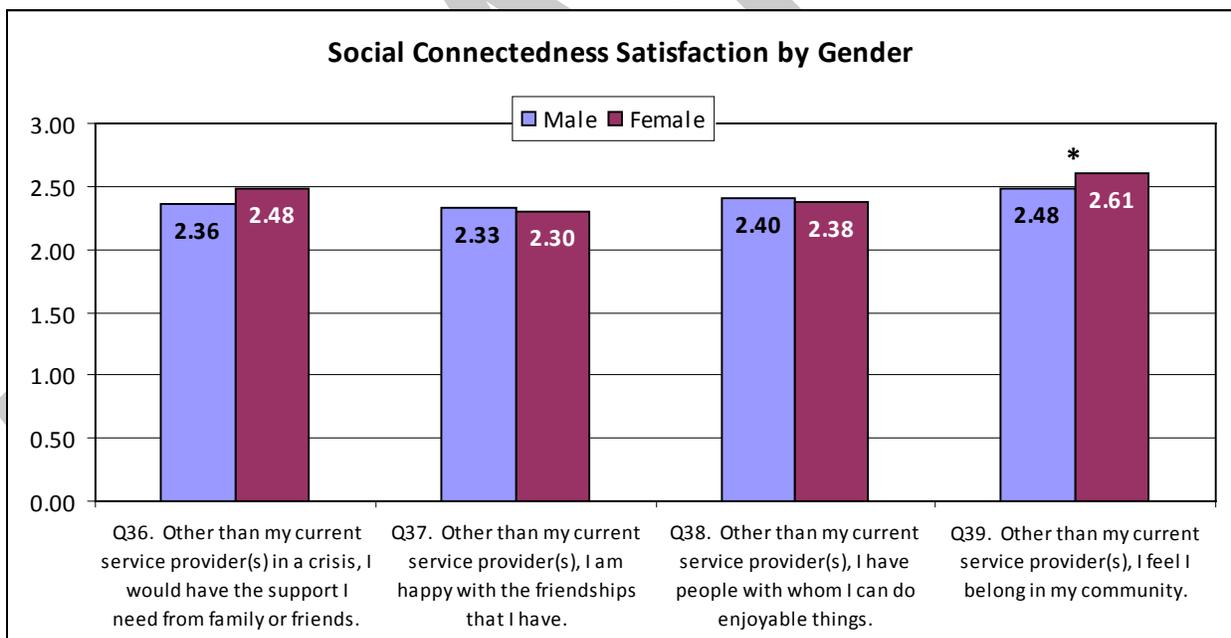


- The Social Connectedness domain includes four questions and examines the extent to which individuals have supportive social relationships and experience a sense of belonging in the community.
- Less than two-thirds (62.9%) of individuals reported that they have people with whom they can do enjoyable things (Q38).
- Slightly more than one-half (54.5%) of individuals reported that they feel they belong in the community (Q39).
- Experiences with Social Connectedness differed significantly by gender (*See next page for a closer look*) and by class member status. (*See page 21 for a closer look*)
- Reported satisfaction with Social Connectedness remained consistent between 2010 and 2011.

A CLOSER LOOK



SOCIAL CONNECTEDNESS SATISFACTION BY GENDER (Figure 13)



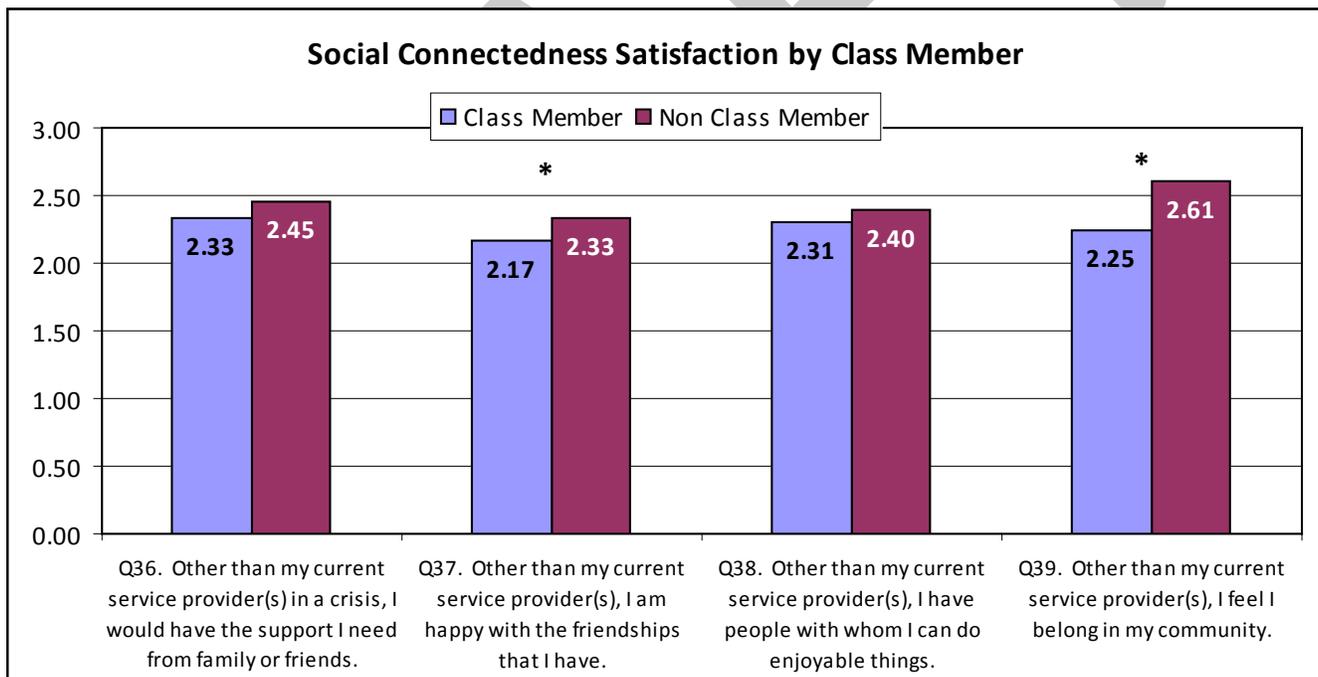
- Individual responses to the Social Connectedness domain differed significantly by gender.
 - To take a closer look, each question within the Social Connectedness domain was analyzed by comparing average scale scores.
- Males reported significantly more positive experiences related to belonging in their community (Q39) (1 being the highest level of satisfaction and 5 being the lowest level of satisfaction).

A CLOSER



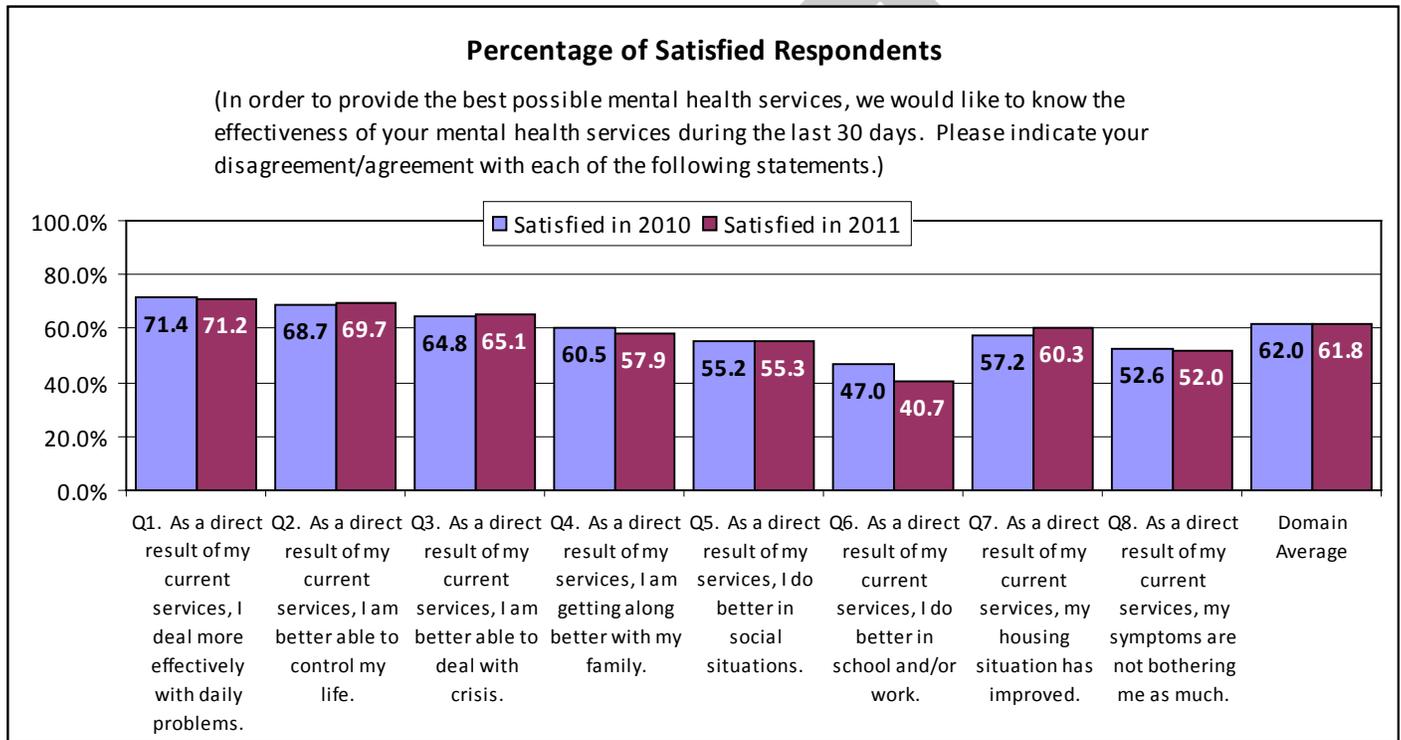
LOOK

SOCIAL CONNECTEDNESS SATISFACTION BY CLASS MEMBER (Figure 14)



- Individual responses to the Social Connectedness domain differed by class member status.
 - To take a closer look, each question within the Social Connectedness domain was analyzed by using average scale scores.
- AMHI class members reported significantly greater satisfaction on Question 37 and 39 (1 being the highest level of satisfaction and 5 being the lowest level of satisfaction).
 - AMHI class members were more likely to report that they are happy with the friendships they have (Q37).
 - AMHI class members were more likely to report satisfaction when asked if they feel they belong in the community (Q39).

OUTCOMES (Figure 15)

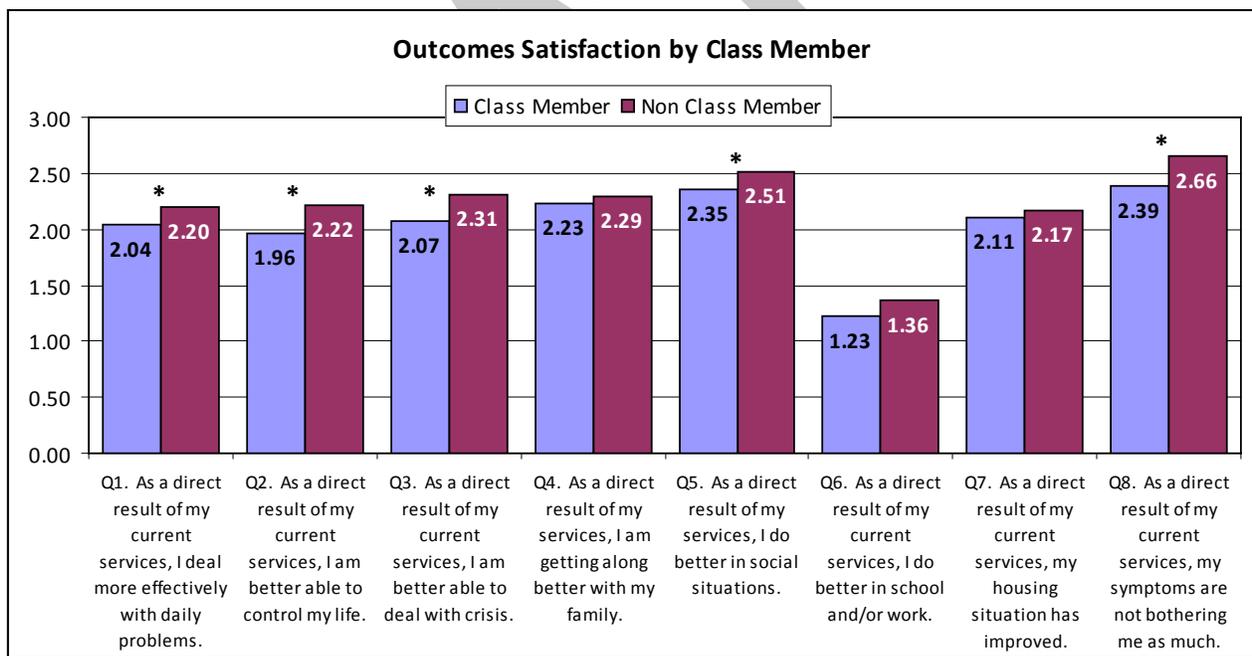


- The Perception of Outcomes domain includes eight questions and assesses the extent to which individuals feel that changes in their life are a result of the treatment and services they are receiving.
- More than 60% of respondents reported that as a direct result of their mental health services, their housing situation has improved (Q7).
- Slightly more than 70% (71.2%) of respondents reported that as a direct result of their mental health services, they deal more effectively with daily problems (Q1).
- More than one-half (52.0%) of individuals reported that as a direct result of their mental health services, their symptoms are not bothering them as much (Q8).
- Slightly more than 40% of respondents reported that as a direct result of their services, they do better in school and/or work (Q6).
 - It is important to note that the number of respondents for this question was 717, less than one-half of the survey response population because the question was not applicable to many of the respondents who were not in school and/or work.
 - Individual responses to the Outcomes domain differed reliably by class member status. *(See next page for a closer look)*

A CLOSER LOOK

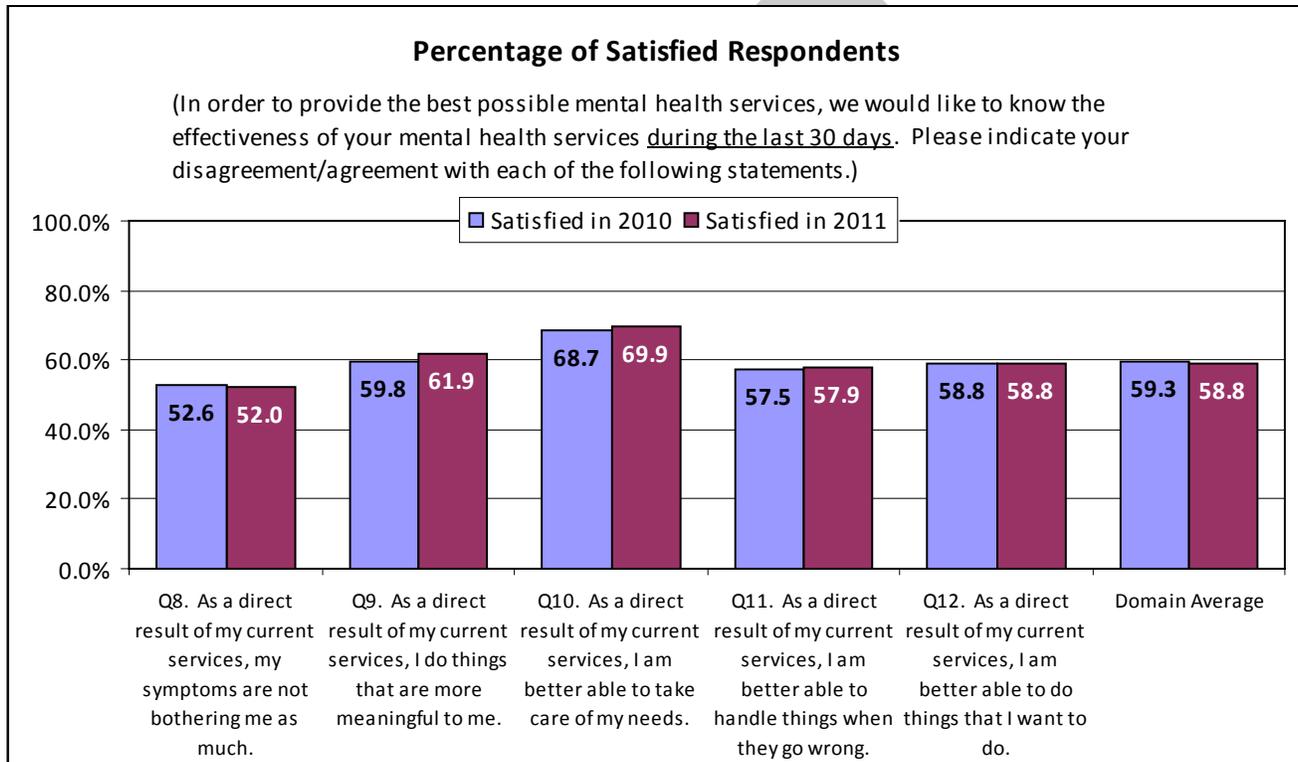


OUTCOMES SATISFACTION BY CLASS MEMBER (Figure 16)



- Individual responses to the Outcomes domain differed by class member status.
 - To take a closer look, each question within the Social Connectedness domain was analyzed by comparing average scale scores. (1 being the highest level of satisfaction and 5 being the lowest level of satisfaction)
- Compared to non class members, AMHI class members were significantly more likely to report that as a direct result of their services:
 - They can deal more effectively with daily problems (Q1).
 - They are better able to control their life (Q2).
 - They are better able to deal with crisis (Q3).
 - They do better in social situations (Q5).
 - Their symptoms are not bothering them as much (Q8).

FUNCTIONING (Figure 17)



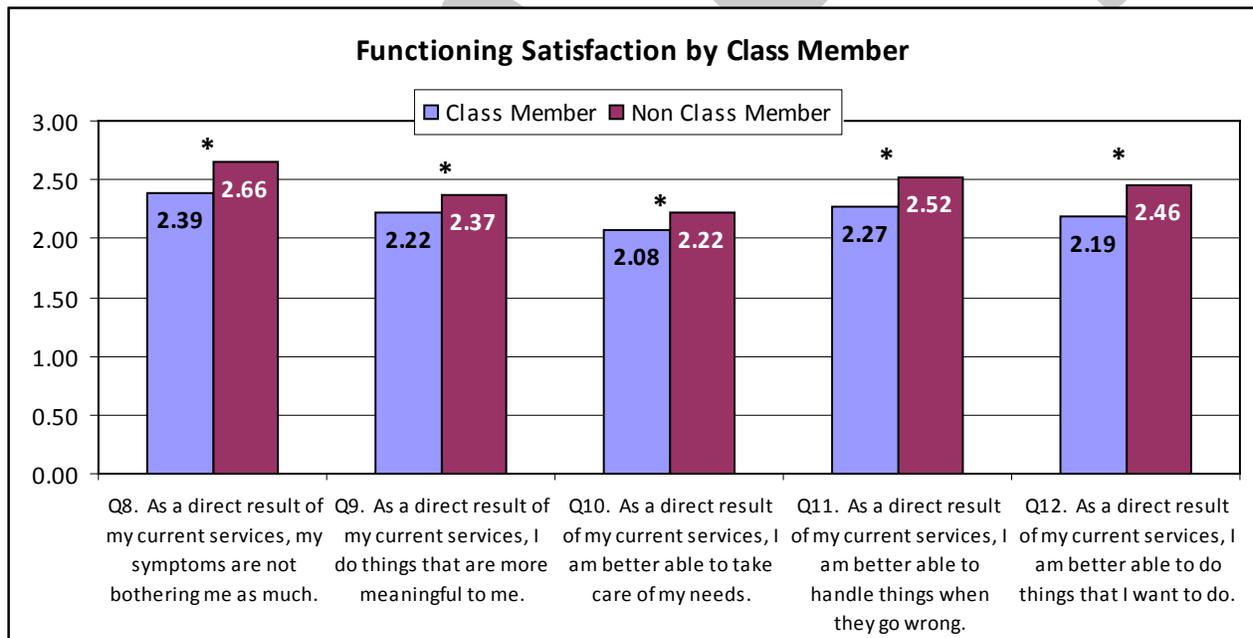
- The Functioning domain includes five questions and assesses individual experiences with services and how these services have improved or maintained functioning in respect to dealing with everyday situations, problems, and crises.
- Over one-half (58.8%) of individuals reported improved functioning due to their mental health services.
- Slightly less than 70% (69.9%) of respondents reported that as a result of their mental health services, they were better able to take care of their needs (Q10).
- Over one-half (58.8%) of individuals reported that as a result of their mental health services, they are able to do things that are more meaningful to them (Q12).
- Individual responses to the Functioning domain differed significantly by class member status. (See next page for a closer look)

A CLOSER



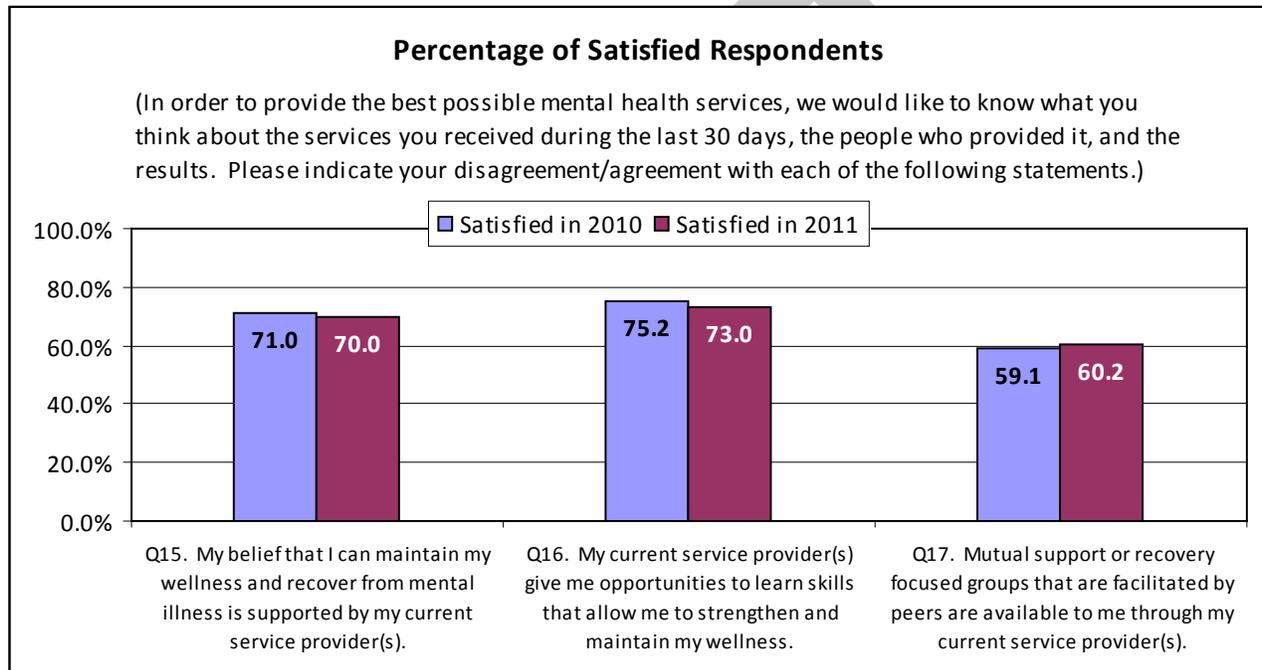
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FUNCTIONING SATISFACTION BY CLASS MEMBER (Figure 18)



- Individual responses to the Functioning domain differed significantly by class member status.
 - To take a closer look, each question within the Social Connectedness domain was analyzed by using average scale scores.
- AMHI class members reported significantly greater satisfaction on all five questions. *(1 being the highest level of satisfaction and 5 being the lowest level of satisfaction)*
- AMHI class members were significantly more likely to report that as a direct result of their services:
 - Their symptoms are not bothering them as much (Q8).
 - They do things that are more meaningful to them (Q9).
 - They are better able to take care of their needs (Q10).
 - They are better able to handle things when they go wrong (Q11).
 - They are better able to do things that they want to do (Q12).

MAINE ADDED QUESTIONS (Figure 19)

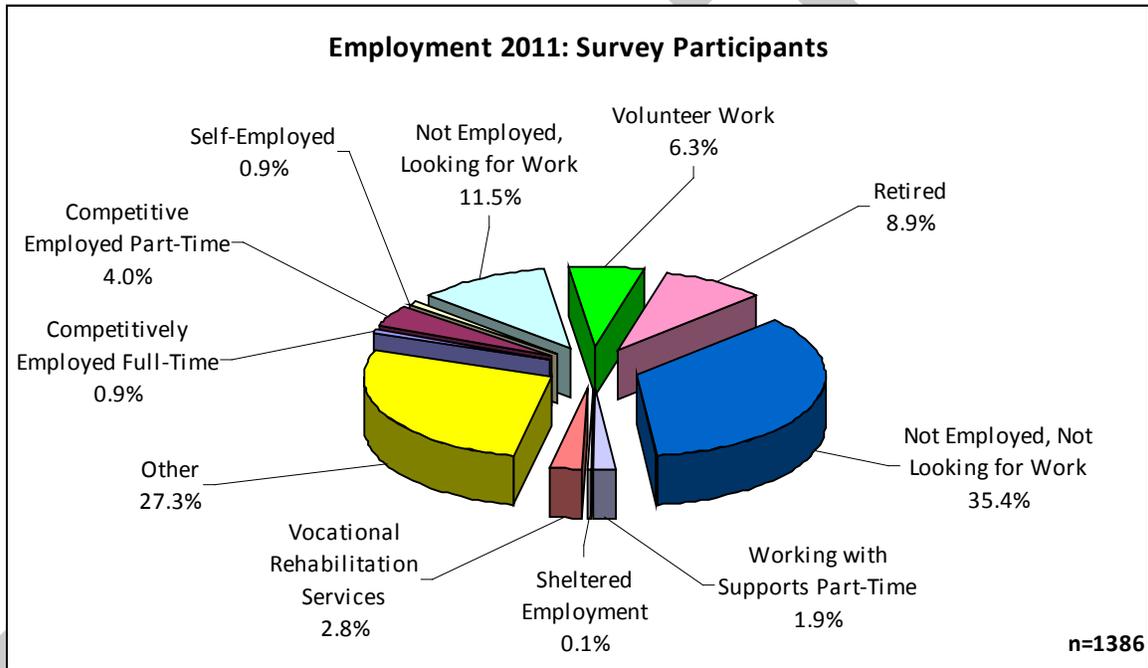


- The DHHS Office of Adult Mental Health Services collaborated with the Office of Continuous Quality Improvement Services to add three additional questions to better understand recovery oriented mental health experiences by service recipients.
- Slightly less than three-quarters (73.0%) of respondents felt their current service provider gave them opportunities to learn skills that allowed them to strengthen and maintain their wellness (Q16).
- More than 60% of respondents reported that mutual support or recovery focused groups that were facilitated by peers were available to them through their service provider (Q17).
- Responses on recovery-oriented mental health experiences remained stable between 2010 and 2011.

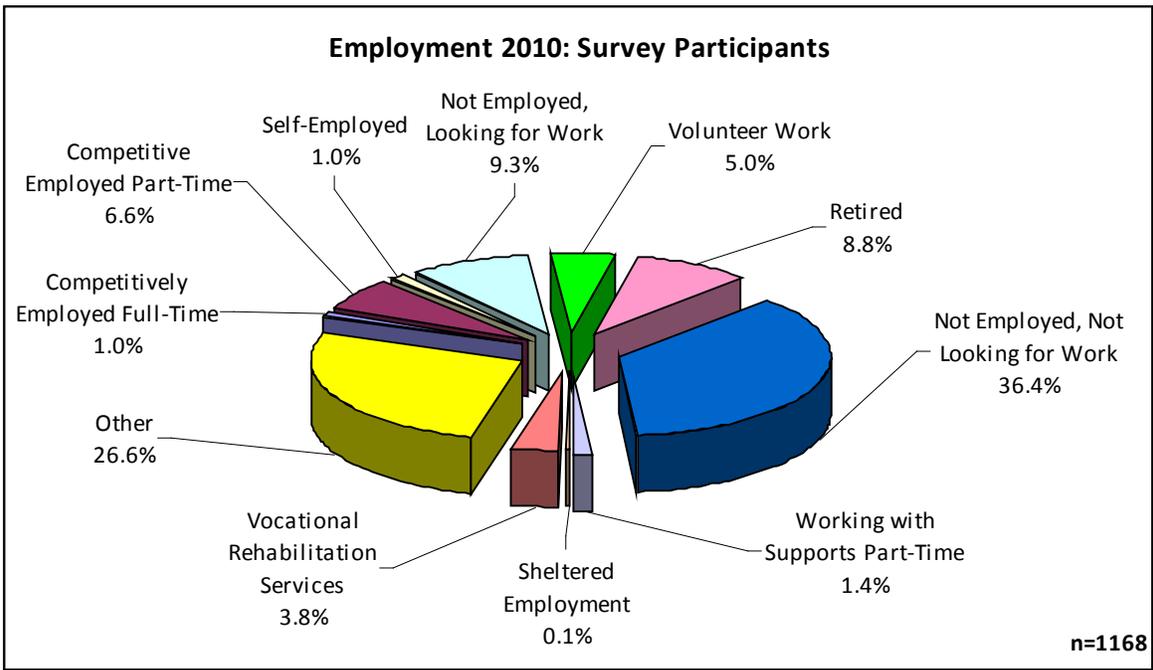
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EMPLOYMENT

EMPLOYMENT STATUS (Figure 20)



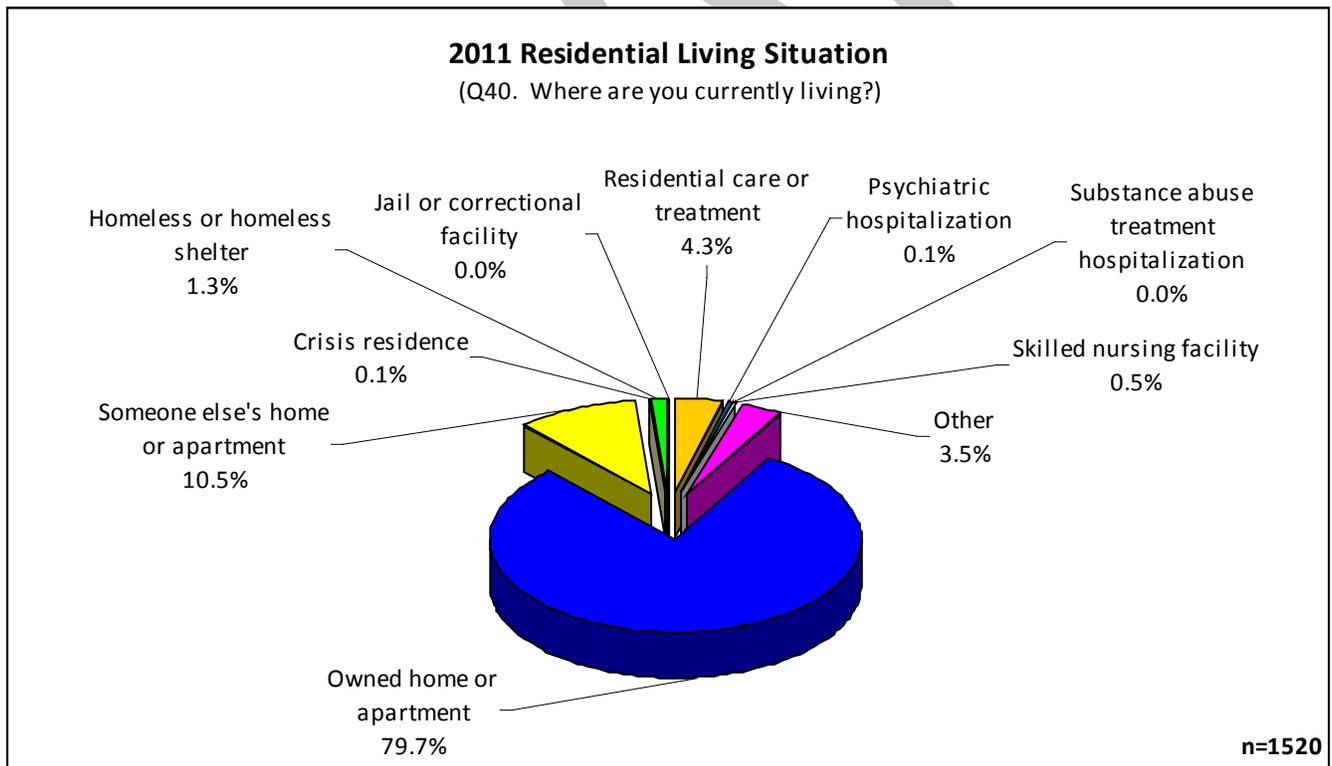
- In 2011, less than 10% (7.7%) of individuals responding to the survey indicated that they were employed competitively, working with supports, or self-employed. This is 2.3% less than 2010, where 10% reported being employed in 2010.
- In 2011, slightly more than 10% reported being unemployed and looking for work. This was consistent with 2010 where 9.3% of respondents indicated that they were unemployed and looking for work.
- Slightly more than one-third (35.4%) of respondents indicated that they were not employed and not looking for work compared to 36.4% in 2010.



DRAFT

HOUSING

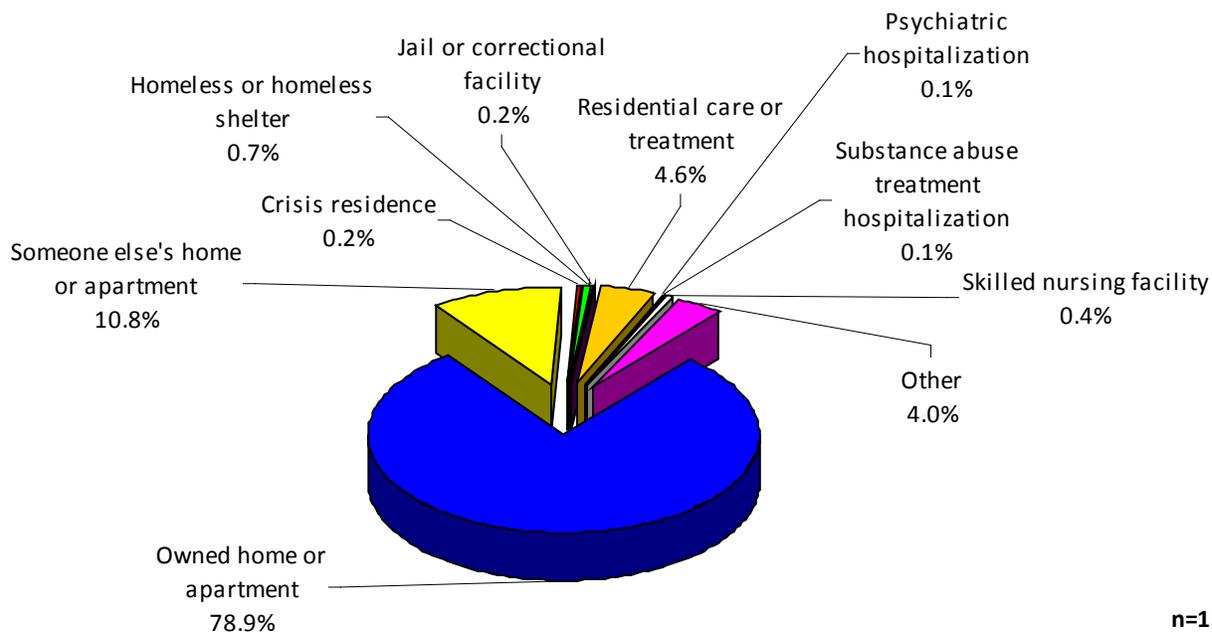
RESIDENTIAL LIVING SITUATION (Figure 21)



- The majority (79.7%) of individuals responding to the survey in 2011 indicated that they were living in an owned home or apartment at the time of the survey. This is consistent with 2010 when 78.9% reported living in an owned home or apartment at the time of the survey.

2010 Residential Living Situation

(Q40. Where are you currently living?)

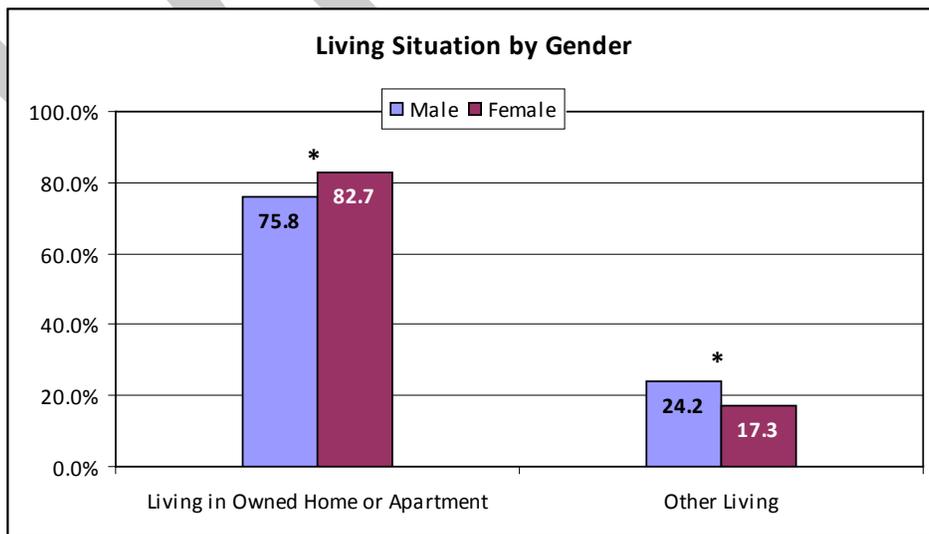


A CLOSER



LOOK

LIVING SITUATION BY GENDER (Figure 22)

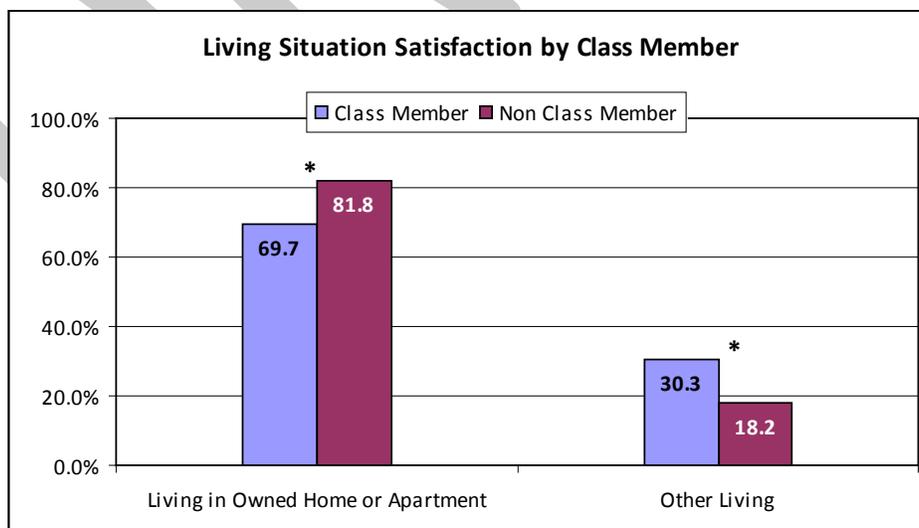


- Self-reported living situation differed reliably by gender.
- Females were significantly more likely than males to report that they were living in an owned home or apartment at the time of the survey.

A CLOSER LOOK

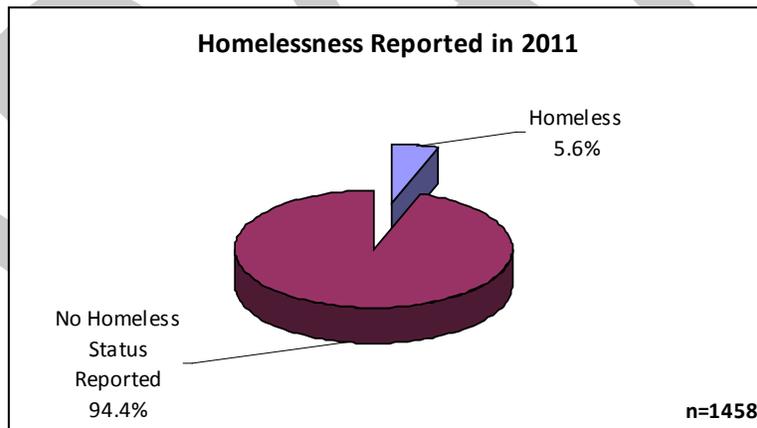


LIVING SITUATION BY CLASS MEMBER STATUS (Figure 23)

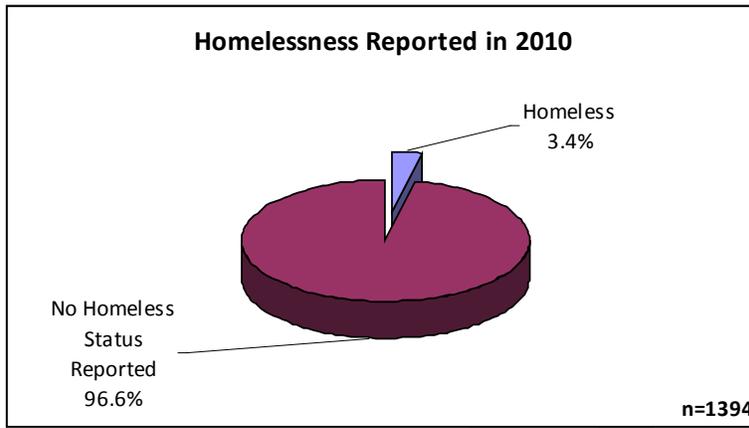


- Class member respondents differed significantly from non class members in the types of living situations reported.
- Non-AMHI class members were significantly more likely to report that they were living in an owned home or apartment at the time of the survey.

MULTIPLE LIVING SITUATION: HOMELESSNESS (Figure 24)



- When reporting living situations, 5.6% (n=87) of individuals responding to the 2011 survey indicated that they had been homeless or living in a homeless shelter in the last twelve months compared to 3.4% (n=48) reported in 2010.



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HEALTH & WELL-BEING

HEALTH & WELL-BEING

In 2007, Maine was the first state to introduce Health and Well-Being items to the Mental Health & Well-Being Surveys. These items were adapted from the Behavioral Risk Factor Surveillance System (BRFSS), which is a survey used by all 50 states and has been coordinated by the Centers for Disease Control and Prevention (CDC) since 1987. The BRFSS is a telephone survey aimed at state residents that collects information on health issues, such as asthma, diabetes, and health care access. Maine has been using the BRFSS since 1987 to collect information from over 6,500 residents each year from the general population in Maine. Federal, state and local health officials, and researchers use information obtained from the BRFSS to track health risks, identify emerging problems, prevent disease and improve treatment.

The inclusion of the BRFSS questions in the Mental Health & Well-Being Survey allows DHHS to compare the health status of individuals receiving mental health services to the health status of the general population in Maine. It also allows an assessment of the history of heart disease, diabetes and other health risk factors in survey respondents as well as the impact an individual's health may have on the delivery of his/her mental health services.

Questions asked in the 2011 Mental Health & Well-Being Survey are:

- Height and Weight (translated into Body Mass Index)
- Have you ever been told by a doctor or health professional that you have (angina or coronary heart disease, heart attack or myocardial infarction, stroke, high blood cholesterol, high blood pressure or hypertension, diabetes, asthma, arthritis, epilepsy or seizure disorder, injury to head or brain, liver condition)? See *Tables Not Included in Report Appendix for asthma, arthritis, epilepsy or seizure disorder, injury to head or brain, and liver condition (e.g., Hepatitis, Cirrhosis, decreased liver function)*
- Do you smoke cigarettes (everyday, some days, not at all)?
- During the past month, did you participate in any physical activities or exercises such as running, aerobics, basketball or other sports, gardening or walking for exercise? See *Tables Not Included in Report Appendix*
- Vigorous physical activities are those that cause large increases in breathing, heart rate or sweating. How many days per week do you do these vigorous activities for at least 10 minutes at a time? See *Tables Not Included in Report Appendix*
- On the days when you drink alcohol, about how many drinks do you drink on average? See *Tables Not Included in Report Appendix*
- How would you describe the condition of your teeth (excellent, very good, good, fair, poor)? See *Tables Not Included in Report Appendix*
- How long has it been since you had your teeth cleaned by a dentist or dental hygienist? See *Tables Not Included in Report Appendix*
- Would you say that your general health is (excellent, very good, good, fair, poor)?
- Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health not good?
- Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health not good?
- During the past 30 days, about how many days did poor physical or mental health keep you from doing usual activities, such as self-care, school, or recreation?

Percent of Respondents Responding Positively to a Health Risk

HEALTH RISK (Figure 25)

HEALTH RISK (Age 18-64 Years)	Age Group	2009 DIG Survey Percent (n=1257)	2008 Maine BRFSS Percent	2010 DIG Survey Percent (n=1256)	2009 Maine BRFSS Percent	2011 DIG Survey Percent (n=1394)
Do you smoke cigarettes? <u>Smoking*</u>	18-44	49.6	23.7	50.7	22.3	47.7
	45-64	43.7	17.1	44.2	17.1	42.8
Height and Weight. <u>Obesity*</u>	18-44	53.4	23.7	49.5	24.2	60.7
	45-64	50.8	31.0	54.9	31.8	55.0
Have you ever been told by your doctor or health professional that you have? Blood cholesterol is high. <u>High Cholesterol*</u>	18-44	26.0	<i>Not Collected in 2008</i>	23.1	20.4	24.9
	45-64	50.5		46.4	45.6	45.6

Have you ever been told by your doctor or health professional that you have? Blood pressure is high. <u>High Blood Pressure*</u>	18-44	24.2	16.3	21.5	13.4	27.5
	45-64	44.4	38.2	41.7	34.1	42.4

- Nearly two-thirds (60.7%) of individuals aged 18 to 44 years old reported being obese in the 2011 Mental Health & Well-Being Survey and one-half (49.5%) of respondents in the 2010 Mental Health & Well-Being Survey compared to slightly less than one-quarter (24.2%) of Maine adult BRFSS respondents in 2009.
- Nearly one-half of individuals aged 18 to 44 years both in the 2010 and 2011 Mental Health & Well-Being Survey (50.7% and 47.7% respectively) reported being smokers compared to 23.7% of Maine adult BRFSS respondents in 2009.

Percent of Individuals with a Chronic Health Condition

CHRONIC HEALTH CONDITIONS *(Figure 26)*

CHRONIC HEALTH CONDITIONS* <i>(Age 18-64 Years)</i>	Age Group	2009 DIG Survey Percent (n=1257)	2008 Maine BRFSS Percent	2010 DIG Survey Percent (n=1256)	2009 Maine BRFSS Percent	2011 DIG Survey Percent (n=1394)
Have you ever been told by your doctor or health professional that you have? Angina or coronary heart disease. Heart attack or myocardial infarction. Diabetes. <u>Chronic Disease*</u>	18-44	14.3	3.7	16.8	3.3	18.0
	45-64	35.3	13.7	37.2	15.4	37.1
Have you ever been told by your doctor or health professional that you have? Angina or coronary heart disease. Heart attack or myocardial infarction. <u>Cardiovascular Disease**</u>	18-44	2.4	1.1	2.4	1.3	4.2
	45-64	11.7	6.7	13.1	6.5	11.8

Have you ever been told by your doctor or health professional that you have? <u>Diabetes</u>	18-44	12.7	2.6	14.4	2.1	14.7
	45-64	29.0	9.4	30.9	11.0	32.0
* Chronic Disease = reported CVD or Diabetes **Cardiovascular Disease (CVD) = reported angina or heart attack						

- Respondents of the 2011 Mental Health & Well-Being Survey between the ages of 45 and 64 were almost twice as likely to have Cardiovascular Disease compared to the Maine adult respondents to the 2009 BRFSS.
- Adults between the ages of 45 and 64 in the 2011 Mental Health & Well-Being Survey were three times more likely to report being told by their health professional that they have Diabetes compared to Maine adult respondents to the 2009 BRFSS.

METABOLIC RISK (Figure 27)

METABOLIC RISK* (Age 18-64 Years)	Age Group	2009 DIG Survey Percent (n=1257)	2007 Maine BRFSS Percent	2010 DIG Survey Percent (n=1256)	2009 Maine BRFSS Percent	2011 DIG Survey Percent (n=1394)
0 Risks	18-44	38.3	61.6	44.6	64.2	35.5
	45-64	26.5	45.3	25.2	44.6	28.2
2 or More Risks	18-44	25.8	10.3	23.5	10.4	28.7
	45-64	46.2	23.5	45.6	24.3	44.7
* Metabolic Risk = reported obesity, high blood pressure, or high cholesterol and no diabetes						

- More than one-quarter (28.7%) of 2011 Mental Health & Well-Being Survey respondents between the ages of 18 and 44 reported having two or more health risks compared to 23.5% of 2010 Mental Health & Well-Being Survey respondents and 10.4% of BRFSS respondents in 2009.
- Adults between the ages of 45 and 64 in the 2011 Mental Health & Well-Being Survey were nearly twice as likely to report two or more metabolic risks compared to BRFSS respondents in 2009.
- More than one-third (35.5%) of 2011 Mental Health & Well-Being Survey respondents between the ages of 18 and 44 reported no metabolic risks compared to 44.6% in 2011 and 64.2% of BRFSS respondents in 2009.

CARDIOVASCULAR RISK (Figure 28)

CARDIOVASCULAR RISK* (Age 18-64 Years)	Age Group	2009 DIG Survey Percent (n=1257)	2007 Maine BRFSS Percent	2010 DIG Survey Percent (n=1256)	2009 Maine BRFSS Percent	2011 DIG Survey Percent (n=1394)
0 Risks	18-44	17.8	42.5	22.9	47.4	17.6
	45-64	13.3	29.3	12.5	27.8	13.4
3 or More Risks	18-44	19.9	5.0	21.9	4.6	23.4
	45-64	39.6	19.3	44.7	19.7	40.2
* Cardiovascular Risk = reported CVD, high blood pressure, high cholesterol, diabetes, smoking or obesity						

- Adults between the ages of 18 and 44 in the 2011 Mental Health & Well-Being Survey were five times more likely to report 3 or more cardiovascular risks compared to 4.6% of BRFSS respondents in 2009.

- Adults between the ages of 45 and 64 in the 2011 Mental Health & Well-Being Survey were twice as likely to report having 3 or more cardiovascular risks compared to BRFSS respondents in 2009.

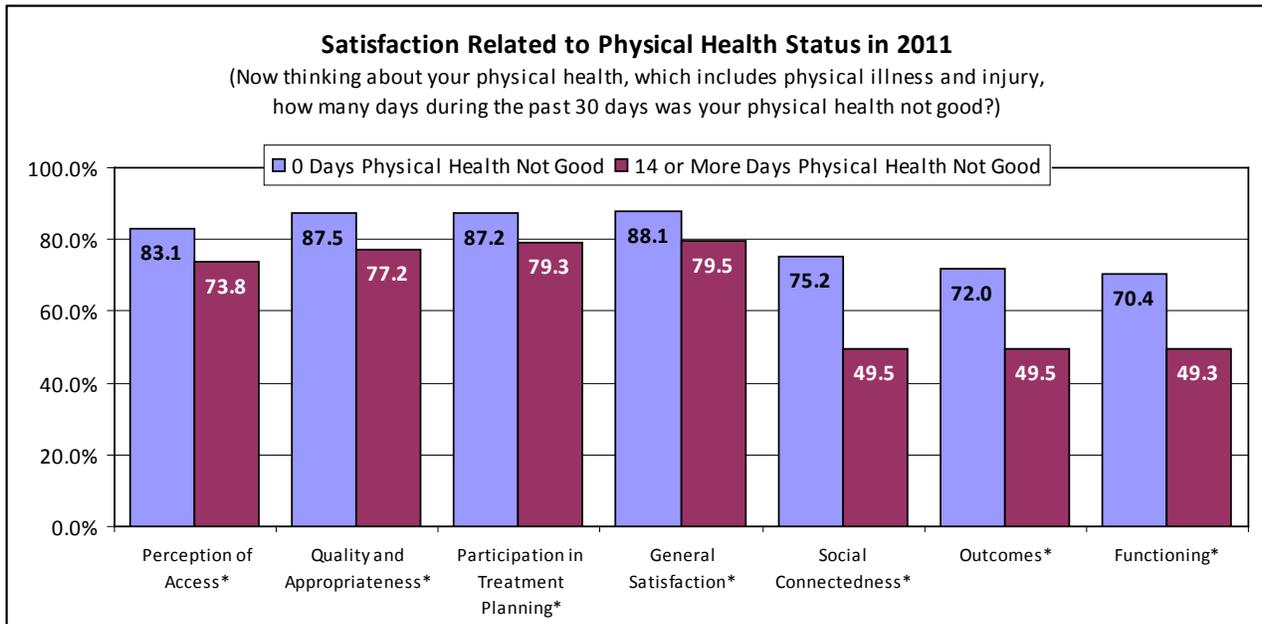
Percent of Individuals Reporting 14 or More Unhealthy Days

UNHEALTHY DAYS (Figure 29)

UNHEALTHY DAYS (Age 18-64 Years) <i>Numbers reflect the percentage of individuals reporting 14 or more poor health days</i> <i>** Statistically Significant</i>	2009 DIG Survey Percent (n=1257)	2008 Maine BRFSS Percent	2010 DIG Survey Percent (n=1256)	2009 Maine BRFSS Percent	2011 DIG Survey Percent (n=1394)
Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health not good?	63.9	8.8	63.8	11.8	65.8
Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health not good?	86.4**	11.6	82.5	12.6	86.9
During the past 30 days, about how many days did poor physical or mental health keep you from doing usual activities, such as self-care, school, or recreation?	65.2	12.5	64.5	15.5	68.9

- Respondents of the 2011 Mental Health & Well-Being Survey were five times more likely to report experiencing 14 or more physically unhealthy days during the past 30 days compared to BRFSS respondents in 2009.

PHYSICAL HEALTH STATUS (Figure 30)



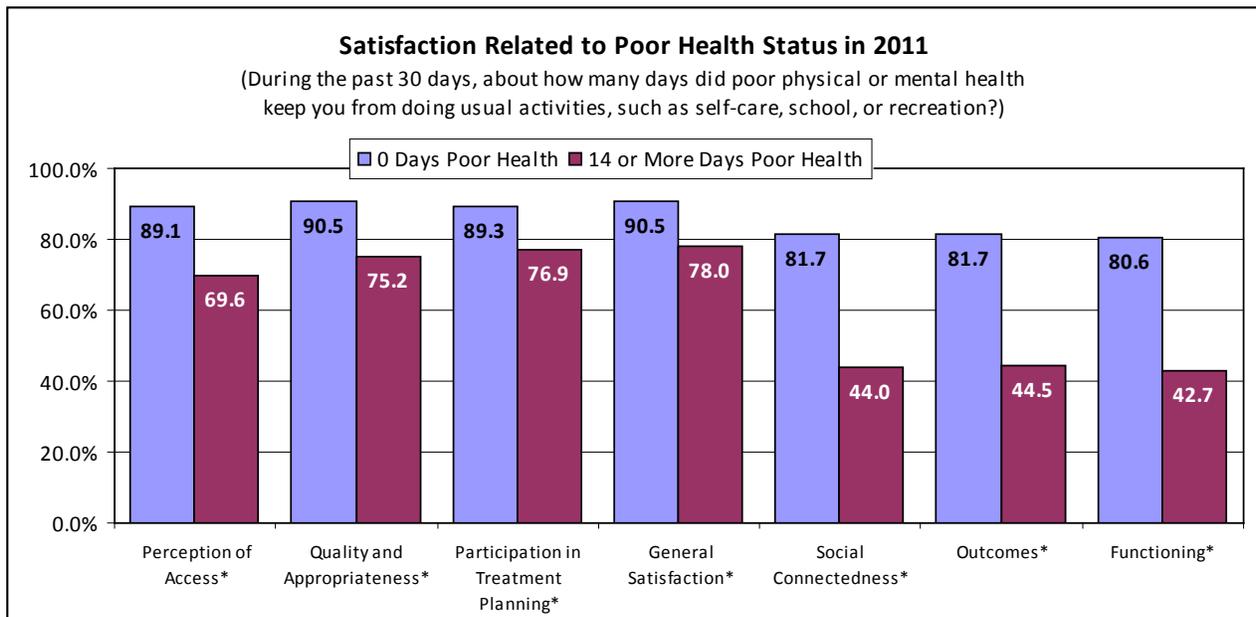
- Individual survey respondents who reported 14 or more poor physical health days were significantly less likely to report satisfaction in all domains compared to individuals reporting 0 poor physical health days.
- Differences in satisfaction were most evident in the areas of Social Connectedness, Outcomes, and Functioning.

MENTAL HEALTH STATUS (Figure 31)



- Individuals who reported 14 or more poor mental health days were significantly less likely to report satisfaction in all domains compared to those reporting 0 poor mental health days.
- Differences in satisfaction were most evident in the areas of Social Connectedness, Outcomes, and Functioning.

POOR HEALTH STATUS (Figure 32)



- Individuals who reported 14 or more poor physical or mental health days were significantly less likely to report satisfaction in all domains compared to those reporting 0 poor physical or mental health days.
- Differences in satisfaction were most evident in the areas of Social Connectedness, Outcomes, and Functioning.

In the past several years, there has been an increase on the availability of information discussing the need for better integration of mental health and physical health services. The Adult Mental Health & Well-Being Survey provides an opportunity to better understand how physical health impacts mental health experiences and satisfaction for individuals receiving publicly funded mental health services in Maine.

Information collected via the Adult Mental Health & Well-Being Survey has been consistent over the past few years. When compared to the BRFSS survey results, it provides an overview of differences on health risks and chronic conditions for those individuals experiencing a serious mental illness versus adults in the general population in Maine.

- Respondents of the Adult Mental Health & Well-Being Survey were more likely to report higher percentages in all areas of health risk than that of the general population in Maine.
- Respondents of the Adult Mental Health & Well-Being Survey reported higher percentages in all areas of chronic health conditions than that of the general population in Maine.
- Respondents of the Adult Mental Health & Well-Being Survey reported greater metabolic and cardiovascular risks.
- Respondents of the Adult Mental Health & Well-Being Survey have more days of disability when they are unable to participate in regular activities compared to the general population in Maine.

In addition to the contrasts of health risks and chronic conditions between the respondents of the Adult Mental Health & Well-Being Survey versus the BRFSS, significant relationships have been consistently reported when comparing unhealthy days and satisfaction with mental health experiences.

- Individuals receiving a mental health services and reporting 14 or more poor physical health days were less likely to report satisfaction in all the survey domain areas when compared to individuals reporting 0 poor physical health days.
- Individuals receiving a mental health services and reporting 14 or more mental health days were less likely to report satisfaction in all the survey domain areas when compared to individuals reporting 0 poor mental health days.
- Individuals receiving a mental health services and reporting 14 or more poor physical or mental health days were less likely to report satisfaction in all the survey domain areas when compared to individuals reporting 0 poor physical or mental health days.

Results of this integrated analysis of health and consumer satisfaction serve as a mechanism to continue the dialogue relating to the inclusion of health issues in existing mental health services and evaluation activities. Continued and regular surveillance of health risk (e.g., smoking, obesity, metabolic risk, diabetes, etc.) can provide information on the effectiveness of new programming that addresses health in mental health systems of care.

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APPENDICES

Gender: Figure 1

GENDER: FIGURE 1	2011				
	Response Population	Class Member	Non Class Member	Class Status Unknown	Actual Population
Male	560	97	463	0	4182
Female	961	96	865	0	6436
Subtotal	1521	193	1328	0	10618
Missing	24	0	0	24	0
TOTAL	1545	193	1328	24	10618

Age: Figure 2

AGE: FIGURE 2	2011				
	Response Population	Class Member	Non Class Member	Class Status Unknown	Actual Population
19-24	76	2	74	0	1147
25-34	201	22	179	0	2208
35-54	754	105	649	0	5122
55-64	359	49	310	0	1436
65+	127	15	112	0	571
Subtotal	1517	193	1324	0	10484
Missing	28	0	4	24	134
TOTAL	1545	193	1328	24	10618

DHHS District: Figure 3

DISTRICT	COUNTY	2011					
		COUNTY TOTAL	Response Population	Class Member	Non Class Member	Class Status Unknown	Actual Population
1	York	154	154	16	138	0	1097
2	Cumberland	284	284	45	239	0	2109
3	Androscoggin	160	287	54	233	0	1953
	Franklin	38					
	Oxford	89					
4	Knox	39	107	16	91	0	751
	Lincoln	22					
	Sagadahoc	29					
	Waldo	17					
5	Kennebec	205	273	47	226	0	1927
	Somerset	68					
6	Penobscot	239	258	12	246	0	1847
	Piscataquis	19					
7	Hancock	28	46	1	45	0	330
	Washington	18					
8	Aroostook	111	111	2	109	0	547
	Subtotal	1520	1520	193	1327	0	10561
	Missing	25	25	0	1	24	57
	TOTAL	1545	1545	193	1328	24	10618

Domain Averages: Figure 4

Domain Averages	Satisfaction Response	2011				TOTAL COUNT
		Response Population	Class Member	Non Class Member	Class Status Unknown	
Perception of Access	Satisfied	1166	148	999	19	1516
	Not Satisfied	350	41	305	4	
Quality and Appropriateness	Satisfied	1255	157	1078	20	1538
	Not Satisfied	283	36	244	3	
Participation in Treatment Planning	Satisfied	1250	151	1081	18	1502
	Not Satisfied	252	38	210	4	
General Satisfaction	Satisfied	1267	159	1093	15	1528
	Not Satisfied	261	33	220	8	
Social Connectedness	Satisfied	929	140	775	14	1518
	Not Satisfied	589	50	531	8	
Outcomes	Satisfied	951	149	787	15	1539
	Not Satisfied	588	44	536	8	
Functioning	Satisfied	902	138	749	15	1535
	Not Satisfied	633	55	570	8	

Domain Satisfaction by Age: Figure 5

DOMAIN AVERAGES	Satisfaction Response	2011			TOTAL COUNT
		Age Group 18-34	Age Group 35-64	Age Group 65+	
Perception of Access*	Satisfied	52	991	104	1493
	Not Satisfied	27	299	20	
Quality and Appropriateness	Satisfied	60	1066	109	1515
	Not Satisfied	20	242	18	
Participation in Treatment Planning*	Satisfied	57	1071	104	1480
	Not Satisfied	22	207	19	
General Satisfaction*	Satisfied	58	1082	112	1505
	Not Satisfied	22	217	14	
Social Connectedness*	Satisfied	54	777	84	1496
	Not Satisfied	25	517	39	
Outcomes*	Satisfied	42	789	105	1516
	Not Satisfied	38	520	22	
Functioning*	Satisfied	36	754	97	1512
	Not Satisfied	43	552	30	

Domain Satisfaction by Class Member: Figure 6

DOMAIN AVERAGES	TOTAL COUNT		2011	
			Mean Average Class Member	Mean Average Non Class Member
Perception of Access	Class Member	189	1.22	1.23
	Non Class Member	1304		
Quality and Appropriateness	Class Member	193	1.19	1.18
	Non Class Member	1322		
Participation in Treatment Planning	Class Member	189	1.20	1.16
	Non Class Member	1291		
General Satisfaction	Class Member	192	1.17	1.17
	Non Class Member	1313		
Social Connectedness*	Class Member	190	1.26	1.41
	Non Class Member	1306		
Outcomes*	Class Member	193	1.23	1.41
	Non Class Member	1323		
Functioning*	Class Member	193	1.28	1.43
	Non Class Member	1319		

Perception of Access: Figure 7

PERCEPTION OF ACCESS QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q26. Staff are willing to see me as often as I feel it is necessary.	1466	1138	151	971	16
Q27. Staff return my call within 24 hours.	1449	1127	141	971	15
Q28. Services are available at times that are good for me.	1489	1229	159	1050	20
Q29. The location of Services is convenient (public transportation, distance, parking, etc.).	1456	1179	144	1018	17
Q30. I am able to see a psychiatrist when I want to.	1392	910	123	771	16
Q32. I was able to get all the services I think I need.	1488	1036	136	886	14

Quality and Appropriateness: Figure 8

QUALITY AND APPROPRIATENESS QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q13. Staff believe that I can grow, change and recover.	1455	1045	128	901	16
Q14. Staff encourage me to take responsibility for how I live my life.	1471	1173	144	1011	18
Q18. Staff respect my wishes about who is and who is not to be given information about my treatment	1466	1312	153	1138	21
Q19. Staff help me to obtain the information I need so that I can take charge of managing my illness.	1455	1146	143	989	14
Q20. Staff are sensitive to my cultural background (race, religion, language, etc.).	1347	1105	139	953	13
Q21. I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	1334	892	134	747	11
Q22. I am given information about my rights.	1490	1330	165	1144	21
Q24. Staff tell me what side effects to watch out for.	1406	1015	119	881	15
Q31. I feel free to complain.	1493	1137	143	973	21

Quality and Appropriateness Satisfaction by Gender: Figure 9

QUALITY AND APPROPRIATENESS QUESTIONS	2011			
	TOTAL COUNT		Mean Average Male	Mean Average Female
Q13. Staff believe that I can grow, change and recover.*	Male	558	2.16	1.93
	Female	946		
Q14. Staff encourage me to take responsibility for how I live my life.*	Male	553	2.03	1.89
	Female	950		
Q18. Staff respect my wishes about who is and who is not to be given information about my treatment.*	Male	539	1.76	1.61
	Female	944		
Q19. Staff help me to obtain the information I need so that I can take charge of managing my illness.*	Male	542	2.03	1.92
	Female	941		
Q20. Staff are sensitive to my cultural background (race, religion, language, etc.).*	Male	542	1.81	1.62
	Female	940		
Q21. I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	Male	539	2.08	1.97
	Female	939		
Q22. I am given information about my rights.*	Male	546	1.84	1.70
	Female	939		
Q24. Staff tell me what side effects to watch out for.*	Male	541	2.11	1.99
	Female	943		
Q31. I feel free to complain.	Male	545	2.12	2.05
	Female	946		

Participation in Treatment Planning: Figure 10

PARTICIPATION IN TREATMENT PLANNING QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q23. I feel comfortable asking questions about my treatment and medication.	1480	1235	152	1063	20
Q25. I, not staff, decide my treatment goals.	1452	1045	133	900	12

General Satisfaction: Figure 11

GENERAL SATISFACTION QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q33. If I had other choices, I would still get services from my current service provider(s).	1478	1178	151	1012	15
Q34. I would recommend my current service provider(s) to a friend or family member.	1493	1230	145	1068	17
Q35. I like the services that I receive.	1500	1265	156	1094	15

Social Connectedness: Figure 12

SOCIAL CONNECTEDNESS QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q36. Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	1473	899	117	767	15
Q37. Other than my current service provider(s), I am happy with the friendships that I have.	1479	941	141	787	13
Q38. Other than my current service provider(s), I have people with whom I can do enjoyable things.	1485	935	125	797	13
Q39. Other than my current service provider(s), I feel I belong in my community.	1498	816	130	675	11

Social Connectedness Satisfaction by Gender: Figure 13

SOCIAL CONNECTEDNESS QUESTIONS	2011			
	TOTAL COUNT		Mean Average Male	Mean Average Female
Q36. Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	Male	547	2.36	2.48
	Female	939		
Q37. Other than my current service provider(s), I am happy with the friendships that I have.	Male	549	2.33	2.30
	Female	944		
Q38. Other than my current service provider(s), I have people with whom I can do enjoyable things.	Male	550	2.40	2.38
	Female	940		
Q39. Other than my current service provider(s), I feel I belong in my community.*	Male	550	2.48	2.61
	Female	944		

Social Connectedness Satisfaction by Class Member: Figure 14

SOCIAL CONNECTEDNESS QUESTIONS	TOTAL COUNT		2011	
			Mean Average Class Member	Mean Average Non Class Member
Q36. Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	Class Member	189	2.33	2.45
	Non Class Member	1297		
Q37. Other than my current service provider(s), I am happy with the friendships that I have.*	Class Member	191	2.17	2.33
	Non Class Member	1302		
Q38. Other than my current service provider(s), I have people with whom I can do enjoyable things.	Class Member	188	2.31	2.40
	Non Class Member	1302		
Q39. Other than my current service provider(s), I feel I belong in my community.*	Class Member	190	2.25	2.61
	Non Class Member	1304		

Outcomes: Figure 15

OUTCOMES QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q1. As a direct result of my current services, I deal more effectively with daily problems.	1532	1092	159	918	15
Q2. As a direct result of my current services, I am better able to control my life.	1523	1061	157	889	15
Q3. As a direct result of my current services, I am better able to deal with crisis.	1516	987	145	826	16
Q4. As a direct result of my services, I am getting along better with my family.	1424	824	110	700	14
Q5. As a direct result of my services, I do better in social situations.	1493	825	114	702	9
Q6. As a direct result of my current services, I do better in school and/or work.	717	292	38	249	5
Q7. As a direct result of my current services, my housing situation has improved.	1353	816	125	681	10
Q8. As a direct result of my current services, my symptoms are not bothering me as much.	1512	786	125	648	13

Outcomes Satisfaction by Class Member: Figure 16

OUTCOMES QUESTIONS	TOTAL COUNT		2011	
			Mean Average Class Member	Mean Average Non Class Member
Q1. As a direct result of my current services, I deal more effectively with daily problems.*	Class Member	193	2.04	2.20
	Non Class Member	1328		
Q2. As a direct result of my current services, I am better able to control my life.*	Class Member	192	1.96	2.22
	Non Class Member	1325		
Q3. As a direct result of my current services, I am better able to deal with crisis.*	Class Member	193	2.07	2.31
	Non Class Member	1322		
Q4. As a direct result of my services, I am getting along better with my family.	Class Member	192	2.23	2.29
	Non Class Member	1320		
Q5. As a direct result of my services, I do better in social situations.*	Class Member	192	2.35	2.51
	Non Class Member	1314		
Q6. As a direct result of my current services, I do better in school and/or work.	Class Member	181	1.23	1.36
	Non Class Member	1268		
Q7. As a direct result of my current services, my housing situation has improved.	Class Member	189	2.11	2.17
	Non Class Member	1312		
Q8. As a direct result of my current services, my symptoms are not bothering me as much.*	Class Member	192	2.39	2.66
	Non Class Member	1320		

Functioning: Figure 17

FUNCTIONING QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q8. As a direct result of my current services, my symptoms are not bothering me as much.	1512	786	125	648	13
Q9. As a direct result of my current services, I do things that are more meaningful to me.	1502	929	136	780	13
Q10. As a direct result of my current services, I am better able to take care of my needs.	1503	1051	145	892	14
Q11. As a direct result of my current services, I am better able to handle things when they go wrong.	1515	877	130	735	12
Q12. As a direct result of my current services, I am better able to do things that I want to do.	1510	887	132	743	12

Functioning Satisfaction by Class Member: Figure 18

FUNCTIONING QUESTIONS	TOTAL COUNT		2011	
			Mean Average Class Member	Mean Average Non Class Member
Q8. As a direct result of my current services, my symptoms are not bothering me as much.*	Class Member	192	2.39	2.66
	Non Class Member	1320		
Q9. As a direct result of my current services, I do things that are more meaningful to me.*	Class Member	193	2.22	2.37
	Non Class Member	1313		
Q10. As a direct result of my current services, I am better able to take care of my needs.*	Class Member	190	2.08	2.22
	Non Class Member	1320		
Q11. As a direct result of my current services, I am better able to handle things when they go wrong.*	Class Member	193	2.27	2.52
	Non Class Member	1319		
Q12. As a direct result of my current services, I am better able to do things that I want to do.*	Class Member	192	2.19	2.46
	Non Class Member	1321		

Maine Added Questions: Figure 19

CONSUMER SATISFACTION QUESTIONS	2011				
	TOTAL COUNT	Total Satisfied	Class Member Satisfied	Non Class Member Satisfied	Class Status Unknown Satisfied
Q15. My belief that I can maintain my wellness and recover from mental illness is supported by my current service provider(s).	1487	1040	134	892	14
Q16. My current service provider(s) give me opportunities to learn skills that allow me to strengthen and maintain my wellness.	1465	1070	138	917	15
Q17. Mutual support or recovery focused groups that are facilitated by peers are available to me through my current service provider(s).	1251	754	105	640	9

Employment Status: Figure 20

EMPLOYMENT STATUS (Q43. Are you currently employed?)	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Competitively Employed Full-Time	13	2	11	0
Competitively Employed Part-Time	56	9	45	2
Self-Employed	12	1	11	0
Not Employed, Looking for Work	159	24	129	6
Volunteer Work	87	15	72	0
Retired	124	12	112	0
Not Employed, Not Looking for Work	490	71	412	7
Working with Supports Part-Time	26	0	26	0
Sheltered Employment	1	0	1	0
Vocational Rehabilitation Services	39	3	36	0
Other	379	25	348	6
Subtotal	1386	162	1203	21
Missing	159	31	125	3
TOTAL	1545	193	1328	24

EMPLOYMENT STATUS (Q43. Are you currently employed?)	2010			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Competitively Employed Full-Time	12	2	10	0
Competitively Employed Part-Time	78	13	63	2
Self-Employed	13	2	11	0
Not Employed, Looking for Work	111	20	87	4
Volunteer Work	59	11	48	0
Retired	104	10	93	1
Not Employed, Not Looking for Work	432	57	366	9
Working with Supports Part-Time	17	1	16	0
Sheltered Employment	1	1	0	0
Vocational Rehabilitation Services	45	4	41	0
Other	316	24	283	9
Subtotal	1188	145	1018	25
Missing	206	31	174	1
TOTAL	1394	176	1192	26

Residential Living Situation: Figure 21

RESIDENTIAL LIVING SITUATION (Q40. Where are you currently living?)	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Owned or Rented Home or Apartment	1211	127	1064	20
Someone Else's Home or Apartment	159	19	139	1
Crisis Residence	1	0	1	0
Homeless or Homeless Shelter	19	1	17	1
Jail or Correctional Facility	0	0	0	0
Residential Care or Treatment	66	27	39	0
Medical Hospitalization	0	0	0	0
Psychiatric Hospitalization	3	2	1	0
Substance Abuse Treatment Hospitalization	0	0	0	0
Skilled Nursing Facility	8	1	7	0
Other	53	11	42	0
Subtotal	1520	188	1310	22
Missing	25	5	18	2
TOTAL	1545	193	1328	24

RESIDENTIAL LIVING SITUATION (Q40. Where are you currently living?)	2010			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Owned or Rented Home or Apartment	1037	108	910	19
Someone Else's Home or Apartment	142	11	129	2
Crisis Residence	3	0	3	0
Homeless or Homeless Shelter	9	1	7	1
Jail or Correctional Facility	2	0	2	0
Residential Care or Treatment	61	28	32	1
Medical Hospitalization	0	0	0	0
Psychiatric Hospitalization	1	1	0	0
Substance Abuse Treatment Hospitalization	1	0	1	0
Skilled Nursing Facility	5	1	4	0
Other	53	12	40	1
Subtotal	1314	162	1128	24
Missing	80	14	64	2
TOTAL	1394	176	1192	26

Living Situation by Gender: Figure 22

LIVING SITUATION SATISFACTION BY GENDER	2011		
	Response Population	Male	Female
Living in Owned Home or Apartment*	993	336	657
Other Living*	244	107	137
TOTAL	1237	443	794

Living Situation by Class Member Status: Figure 23

LIVING SITUATION SATISFACTION BY CLASS MEMBER STATUS	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Living in Owned Home or Apartment*	993	108	885	0
Other Living*	244	47	197	0
TOTAL	1237	155	1082	0

Multiple Living Situation: Figure 24

MULTIPLE LIVING SITUATION <i>(Q41. Have you lived in any of the following places in the last 12 months?)</i>	2011			
	Class Member	Non Class Member	Class Status Unknown	TOTAL
Owned or Rented Home or Apartment	126	988	19	1133
Someone Else's Home or Apartment	20	225	3	248
Crisis Residence	13	67	2	82
Homeless or Homeless Shelter	7	78	2	87
Jail or Correctional Facility	5	31	1	37
Residential Care or Treatment	34	57	0	91
Medical Hospitalization	17	60	1	78
Psychiatric Hospitalization	21	75	0	96
Substance Abuse Treatment Hospitalization	1	15	0	16
Skilled Nursing Facility	7	22	0	29
Other	8	45	1	55

MULTIPLE LIVING SITUATION <i>(Q41. Have you lived in any of the following places in the last 12 months?)</i>	2010			
	Class Member	Non Class Member	Class Status Unknown	TOTAL
Owned or Rented Home or Apartment	105	871	19	976
Someone Else's Home or Apartment	15	173	5	193
Crisis Residence	9	38	1	48
Homeless or Homeless Shelter	2	45	1	48
Jail or Correctional Facility	3	14	1	18
Residential Care or Treatment	30	48	0	78
Medical Hospitalization	4	44	2	50
Psychiatric Hospitalization	26	64	3	93
Substance Abuse Treatment Hospitalization	1	12	0	13
Skilled Nursing Facility	3	16	0	19
Other	13	49	3	65

Health Risk: Figure 25

HEALTH RISK (Age 18-64 Years)	Age Group	2009 DIG Survey	2009 TOTAL COUNT	2010 DIG Survey	2010 TOTAL COUNT	2011 DIG Survey	2011 TOTAL COUNT
Do you smoke cigarettes? <u>Smoking*</u>	18-44	230	548	245	483	271	568
	45-64	232	648	324	733	333	778
Height and Weight. <u>Obesity*</u>	18-44	248	464	203	410	284	468
	45-64	289	569	359	654	364	662
Have you ever been told by your doctor or health professional that you have? Blood cholesterol is high. <u>High Cholesterol*</u>	18-44	149	574	114	493	144	578
	45-64	345	683	354	763	372	816
Have you ever been told by your doctor or health professional that you have? Blood pressure is high. <u>High Blood Pressure*</u>	18-44	139	574	106	493	159	578
	45-64	303	683	318	763	346	816

Chronic Health Conditions: Figure 26

CHRONIC HEALTH CONDITIONS* (Age 18-64 Years)	2011			
	Age Group	2009 DIG Survey	2010 DIG Survey	2011 DIG Survey
Have you ever been told by your doctor or health professional that you have? Angina or coronary heart disease. Heart attack or myocardial infarction. Diabetes. <u>Chronic Disease*</u>	18-44	82	83	104
	45-64	241	284	303
Have you ever been told by your doctor or health professional that you have? Angina or coronary heart disease. Heart attack or myocardial infarction. <u>Cardiovascular Disease**</u>	18-44	14	12	24
	45-64	80	100	96
Have you ever been told by your doctor or health professional that you have? <u>Diabetes</u>	18-44	73	71	85
	45-64	198	236	261
TOTAL COUNT	18-44	574	493	578
	45-64	683	763	816
* Chronic Disease = reported CVD or Diabetes ** Cardiovascular Disease (CVD) = reported angina or heart attack				

Metabolic Risk: Figure 27

METABOLIC RISK* (Age 18-64 Years)	2011			
	Age Group	2009 DIG Survey	2010 DIG Survey	2011 DIG Survey
0 Risks	18-44	220	220	205
	45-64	181	192	230
2 or More Risks	18-44	145	116	166
	45-64	315	348	365
TOTAL COUNT	18-44	574	493	578
	45-64	683	763	816

* Metabolic Risk = reported obesity, high blood pressure, or cholesterol and no diabetes

Cardiovascular Risk: Figure 28

CARDIOVASCULAR RISK* (Age 18-64 Years)	2011			
	Age Group	2009 DIG Survey	2010 DIG Survey	2011 DIG Survey
0 Risks	18-44	102	113	102
	45-64	91	95	109
3 or More Risks	18-44	114	108	135
	45-64	270	341	328
TOTAL COUNT	18-44	574	493	578
	45-64	683	763	816

* Cardiovascular Risk = reported CVD, high blood pressure, high cholesterol, diabetes, smoking or obesity

Unhealthy Days: Figure 29

UNHEALTHY DAYS (Age 18-64 Years)	2009 DIG Survey	2009 TOTAL COUNT	2010 DIG Survey	2010 TOTAL COUNT	2011 DIG Survey	2011 TOTAL COUNT
<i>Numbers reflect the percentage of individuals reporting 14 or more poor health days</i>						
<i>** Statistically Significant</i>						
Now thinking about your physical health, which includes physical illness and injury, how many days during the past 30 days was your physical health not good?	453	709	433	679	488	742
Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health not good?	642**	743	569	690	677	779
During the past 30 days, about how many days did poor physical or mental health keep you from doing usual activities, such as self-care, school, or recreation?	503	771	446	692	539	782

Physical Health Status: Figure 30

PHYSICAL HEALTH STATUS	Satisfaction Response	2011			
		0 Days Physical Health Not Good	TOTAL 0 DAYS	14 or More Days Physical Health Not Good	TOTAL 14 OR MORE DAYS
Perception of Access*	Satisfied	231	278	386	523
	Not Satisfied	47		137	
Quality and Appropriateness*	Satisfied	244	279	409	530
	Not Satisfied	35		121	
Participation in Treatment Planning*	Satisfied	239	274	410	517
	Not Satisfied	35		107	
General Satisfaction*	Satisfied	244	277	418	526
	Not Satisfied	33		108	
Social Connectedness*	Satisfied	209	278	259	523
	Not Satisfied	69		264	
Outcomes*	Satisfied	201	279	262	529
	Not Satisfied	78		267	
Functioning*	Satisfied	195	277	260	527
	Not Satisfied	82		267	

Mental Health Status: Figure 31

MENTAL HEALTH STATUS	Satisfaction Response	2011			
		0 Days Physical Health Not Good	TOTAL 0 DAYS	14 or More Days Physical Health Not Good	TOTAL 14 OR MORE DAYS
Perception of Access*	Satisfied	105	120	499	715
	Not Satisfied	15		216	
Quality and Appropriateness*	Satisfied	113	120	546	724
	Not Satisfied	7		178	
Participation in Treatment Planning*	Satisfied	112	118	542	704
	Not Satisfied	6		162	
General Satisfaction*	Satisfied	110	120	556	716
	Not Satisfied	10		160	
Social Connectedness*	Satisfied	110	118	334	717
	Not Satisfied	8		383	
Outcomes*	Satisfied	104	120	329	723
	Not Satisfied	16		394	
Functioning*	Satisfied	106	119	308	721
	Not Satisfied	13		413	

Poor Health Status: Figure 32

POOR HEALTH STATUS	Satisfaction Response	2011			
		0 Days Physical Health Not Good	TOTAL 0 DAYS	14 or More Physical Health Not Good	TOTAL 14 OR MORE DAYS
Perception of Access*	Satisfied	253	284	396	569
	Not Satisfied	31		173	
Quality and Appropriateness*	Satisfied	258	285	434	577
	Not Satisfied	27		143	
Participation in Treatment Planning*	Satisfied	251	281	432	562
	Not Satisfied	30		130	
General Satisfaction*	Satisfied	258	285	444	569
	Not Satisfied	27		125	
Social Connectedness*	Satisfied	232	284	250	568
	Not Satisfied	52		318	
Outcomes*	Satisfied	232	284	257	577
	Not Satisfied	52		320	
Functioning*	Satisfied	228	283	246	576
	Not Satisfied	55		330	

TABLES NOT INCLUDED IN REPORT

RENT SUBSIDY (Q42. Are you currently receiving a rent subsidy?)	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Yes	760	99	645	16
No	727	87	632	8
Subtotal	1487	186	1277	24
Missing	58	7	51	0
TOTAL	1545	193	1328	24

TYPE OF RENT SUBSIDY (Q42a. If yes, which do you receive?)	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Section 8 Housing	411	60	340	11
Project Base Rental Subsidy	139	15	121	3
BRAP	63	12	50	1
Shelter Plus Care	63	5	58	0
Other Rental Assistance	107	11	96	0
TOTAL	783	103	665	15

CURRENT INCOME (Q44. What is your current income status?)	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Social Security Disability Insurance (SSDI)	845	130	700	15
Social Security Income (SSI)	649	85	556	8
Earned Employment	76	10	64	2
Other	135	12	117	6
No Income Source	94	4	89	1
Temporary Assistance for Needy Families (TANF)	88	1	86	1
Retirement from Social Security	56	9	46	1
Child Support	43	0	43	0
General Assistance	31	2	29	0
Veteran's Disability Payment	7	0	7	0
Private Disability	9	1	8	0
Trust	8	3	5	0
Veteran's Pension	5	0	4	1
Pension from Former Job	10	1	8	1
Alimony	10	0	10	0
Workers Compensation	4	0	4	0
Unemployment Insurance	18	1	16	1

TABLES NOT INCLUDED IN REPORT

HEALTH RISK <i>(Q44. Have you ever been told by your doctor or health professional that you have?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Asthma	485	59	416	10
Arthritis	615	71	530	14
Epilepsy or Seizure Disorder	125	20	104	1
Injury to Head or Brain	230	31	193	6
Liver Condition <i>(e.g., Hepatitis, Cirrhosis, decreased liver function)</i>	113	17	95	1

EXERCISE <i>(Q46. During the past month, did you participate in any physical activities or exercises such as running, aerobics, basketball or other sports, gardening or walking for exercise?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Yes	1009	121	874	14
No	484	62	413	9
Subtotal	1493	183	1287	23
Missing	52	10	41	1
TOTAL	1545	193	1328	24

VIGOROUS PHYSICAL EXERCISE <i>(Q47. Vigorous physical activities are those that cause large increases in breathing, heart rate, or sweating. How many days per week do you have these vigorous Activities for at least 10 minutes at a time?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
MEAN (Days)	1.32	1.34	1.32	/
MEDIAN (Days)	1.00	1.00	1.00	/
No exercise	468	48	415	5
1 day/week	117	12	105	0
2 days/week	149	19	126	4
3 days/week	169	16	150	3
4 days/week	91	10	78	3
5 days/week	72	10	60	2
6 days/week	17	1	16	0
7 days/week	121	23	96	2
Subtotal	1204	139	1046	19
Missing	341	54	282	5
TOTAL	1545	193	1328	24

TABLES NOT INCLUDED IN REPORT

ALCOHOL <i>(Q48. On the days when you drink alcohol, about how many drinks do you drink on average?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
No Drinks	764	78	669	17
1 Drink	60	8	52	0
2 Drinks	40	8	32	0
3 Drinks	20	4	15	1
4 Drinks	14	1	13	0
5 Drinks	9	0	9	0
6 Drinks	9	1	8	0
7 Drinks	1	0	1	0
8 Drinks	2	1	1	0
9 Drinks	1	1	0	0
10+ Drinks	5	2	3	0
Subtotal	925	104	803	18
Missing	620	89	525	6
TOTAL	1545	193	1328	24

CONDITION OF TEETH* <i>(Q49. How would you describe the condition of your teeth?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
Excellent/Good	527	67	451	9
Fair/Poor	791	88	693	10
Subtotal	1318	155	1144	19
Missing	227	38	184	5
TOTAL	1545	193	1328	24

TABLES NOT INCLUDED IN REPORT

CONDITION OF TEETH <i>(Q50. How long has it been since you had your teeth Cleaned by a dentist or dental hygienist?)</i>	2011			
	Response Population	Class Member	Non Class Member	Class Status Unknown
MEAN (Months)	4.01	3.56	4.09	/
MEDIAN (Months)	4.00	3.00	4.00	/
No Dental Cleaning	28	1	26	1
1 Month	47	12	34	1
2 Months	46	7	39	0
3 Months	49	11	38	0
4 Months	39	5	34	0
5 Months	15	5	10	0
6 Months	90	10	76	4
More than 6 Months (Less than 1 year)	41	3	37	1
More than 1 year	639	50	578	11
Subtotal	994	104	872	18
Missing	551	89	546	6
TOTAL	1545	193	1328	24

GENERAL HEALTH <i>(Q51. Would you say that your general health is...)</i>	2011	
	Excellent/Good	Fair/Poor
2011 DIG Survey (n=1478)	703	775
2010 DIG Survey (n=1314)	665	649
2009 DIG Survey (n=1215)	622	593

TABLE 1: NATIONAL OUTCOME MEASURES BY SURVEY AREAS

Survey Area	Adult Consumer Survey Question	2011					TOTAL
		Strongly Agree	Agree	Undecided/Neutral	Disagree	Strongly Disagree	
Perception of Access	Staff are willing to see me as often as I feel it is necessary.	442	696	149	111	68	1466
	Staff return my call within 24 hours.	447	680	169	105	48	1449
	Services are available at times that are good for me.	468	761	155	63	42	1489
	The location of services is convenient (public transportation, distance, parking, etc.).	457	722	147	75	55	1456
	I am able to see a psychiatrist when I want to.	320	590	226	166	90	1392
	I was able to get all the services I think I need.	388	648	232	121	99	1488
Quality and Appropriateness	Staff believe that I can grow, change and recover.	408	637	291	70	49	1455
	Staff encourage me to take responsibility for how I live my life.	395	778	210	53	35	1471
	Staff respect my wishes about who is and who is not to be given information about my treatment.	659	653	97	28	29	1466
	Staff help me to obtain the information I need so that I can take charge of managing my illness.	410	736	203	66	40	1455
	Staff are sensitive to my cultural background (race, religion, language, etc.).	481	624	179	32	31	1347
	I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	339	553	252	129	61	1334
	I am given information about my rights.	594	736	91	40	29	1490
	Staff tell me what side effects to watch out for.	413	602	183	154	54	1406
Participation in Treatment Planning	I feel free to complain.	439	698	196	94	66	1493
	I feel comfortable asking questions about my treatment and medication.	566	669	130	74	41	1480
General Satisfaction	I, not staff, decide my treatment goals.	392	653	249	107	51	1452
	If I had other choices, I would still get services from my current service provider(s).	551	627	181	62	57	1478
	I would recommend my current service provider(s) to a friend or family member.	596	634	141	62	60	1493
Social Connectedness	I like the services that I receive.	618	647	137	48	50	1500
	Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	350	549	229	191	154	1473
	Other than my current service provider(s), I am happy with the friendships I have.	344	597	275	168	95	1479
	Other than my current service provider(s), I have people with whom I can do enjoyable things.	311	624	258	182	110	1485
Outcomes	Other than my current service provider(s), I feel I belong in my community.	286	530	347	176	159	1498
	As a direct result of my current services, I deal more effectively with daily problems.	373	719	272	102	66	1532
	As a direct result of my current services, I am better able to control my life.	352	709	300	106	56	1523
	As a direct result of my current services, I am better able to deal with crisis.	335	652	322	142	65	1516
	As a direct result of my services, I am getting along better with my family.	285	539	350	157	93	1424
	As a direct result of my services, I do better in social situations.	237	588	355	222	91	1493
	As a direct result of my current services, I do better in school and/or work.	99	193	267	93	65	717
	As a direct result of my current services, my housing situation has improved.	329	487	273	145	119	1353
Functioning	As a direct result of my current services, my symptoms are not bothering me as much.	222	564	355	246	125	1512
	As a direct result of my current services, I do things that are more meaningful to me.	279	650	351	143	79	1502
	As a direct result of my current services, I am better able to take care of my needs.	313	738	269	125	58	1503
	As a direct result of my current services, I am better able to handle things when they go wrong.	221	656	357	188	93	1515
	As a direct result of my current services, I am better able to do things that I want to do.	258	629	361	180	82	1510
Not Part of Scale	My belief that I can maintain my wellness and recover from mental illness is supported by my current service provider(s).	392	648	288	90	69	1487
	My current service provider(s) give me opportunities to learn skills that allow me to strengthen and maintain my wellness.	339	731	247	103	45	1465
	Mutual support or recovery focused groups that are facilitated by peers are available to me through my current service provider(s).	227	527	284	134	79	1251

TABLE 2: NATIONAL OUTCOME MEASURES BY CLASS MEMBER

Survey Area	Adult Consumer Survey Question	2011					TOTAL
		Strongly Agree	Agree	Undecided/ Neutral	Disagree	Strongly Disagree	
Perception of Access	Staff are willing to see me as often as I feel it is necessary.	58	93	13	10	10	184
	Staff return my call within 24 hours.	45	96	14	15	7	177
	Services are available at times that are good for me.	51	108	11	7	7	184
	The location of services is convenient (public transportation, distance, parking, etc.).	44	100	16	7	10	177
	I am able to see a psychiatrist when I want to.	45	78	24	23	12	182
	I was able to get all the services I think I need.	46	90	21	14	14	185
Quality and Appropriateness	Staff believe that I can grow, change and recover.	56	72	31	11	13	183
	Staff encourage me to take responsibility for how I live my life.	55	89	28	9	6	187
	Staff respect my wishes about who is and who is not to be given information about my treatment.	69	84	10	8	8	179
	Staff help me to obtain the information I need so that I can take charge of managing my illness.	57	86	17	9	8	177
	Staff are sensitive to my cultural background (race, religion, language, etc.).	57	82	18	4	7	168
	I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	47	87	20	8	9	171
	I am given information about my rights.	70	95	11	3	8	187
	Staff tell me what side effects to watch out for.	49	70	23	16	19	177
Participation in Treatment Planning	I feel comfortable asking questions about my treatment and medication.	49	94	21	7	16	187
	I, not staff, decide my treatment goals.	66	86	14	12	8	186
General Satisfaction	If I had other choices, I would still get services from my current service provider(s).	42	91	26	13	11	183
	I would recommend my current service provider(s) to a friend or family member.	69	82	12	13	11	187
	I like the services that I receive.	69	76	14	9	13	181
Social Connectedness	Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	72	84	14	6	11	187
	Other than my current service provider(s), I am happy with the friendships I have.	41	76	24	19	20	180
	Other than my current service provider(s), I have people with whom I can do enjoyable things.	49	92	16	16	14	187
	Other than my current service provider(s), I feel I belong in my community.	40	85	28	14	17	184
Outcomes	As a direct result of my current services, I deal more effectively with daily problems.	49	81	31	12	15	188
	As a direct result of my current services, I am better able to control my life.	64	95	10	10	14	193
	As a direct result of my current services, I am better able to deal with crisis.	67	90	19	8	8	192
	As a direct result of my services, I am getting along better with my family.	58	87	28	11	8	192
	As a direct result of my services, I do better in social situations.	51	59	36	19	15	180
	As a direct result of my current services, I do better in school and/or work.	38	76	41	21	11	187
	As a direct result of my current services, my housing situation has improved.	25	13	23	13	10	84
	As a direct result of my current services, my symptoms are not bothering me as much.	54	71	26	15	13	179
Functioning	As a direct result of my current services, my symptoms are not bothering me as much.	42	83	34	17	16	192
	As a direct result of my current services, I do things that are more meaningful to me.	48	88	27	16	12	191
	As a direct result of my current services, I am better able to take care of my needs.	55	90	20	14	9	188
	As a direct result of my current services, I am better able to handle things when they go wrong.	43	87	35	14	12	191
	As a direct result of my current services, I am better able to do things that I want to do.	50	82	34	16	8	190
Not Part of Scale	My belief that I can maintain my wellness and recover from mental illness is supported by my current service provider(s).	60	74	31	12	11	188
	My current service provider(s) give me opportunities to learn skills that allow me to strengthen and maintain my wellness.	43	95	20	14	10	182
	Mutual support or recovery focused groups that are facilitated by peers are available to me through my current service provider(s).	27	78	29	18	11	163

TABLE 3: NATIONAL OUTCOME MEASURES BY NON CLASS MEMBER

Survey Area	Adult Consumer Survey Question	2011					TOTAL
		Strongly Agree	Agree	Undecided/ Neutral	Disagree	Strongly Disagree	
Perception of Access	Staff are willing to see me as often as I feel it is necessary.	378	593	133	99	57	1260
	Staff return my call within 24 hours.	396	575	152	89	40	1252
	Services are available at times that are good for me.	409	641	142	56	34	1282
	The location of services is convenient (public transportation, distance, parking, etc.).	408	610	128	68	43	1257
	I am able to see a psychiatrist when I want to.	272	499	200	142	74	1187
	I was able to get all the services I think I need.	338	548	208	106	81	1281
Quality and Appropriateness	Staff believe that I can grow, change and recover.	347	554	256	58	34	1249
	Staff encourage me to take responsibility for how I live my life.	333	678	179	44	27	1261
	Staff respect my wishes about who is and who is not to be given information about my treatment.	581	557	87	20	19	1264
	Staff help me to obtain the information I need so that I can take charge of managing my illness.	350	639	181	57	30	1257
	Staff are sensitive to my cultural background (race, religion, language, etc.).	420	533	158	28	22	1161
	I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	288	459	227	121	49	1144
	I am given information about my rights.	514	630	80	37	19	1280
	Staff tell me what side effects to watch out for.	358	523	159	137	34	1211
Participation in Treatment Planning	I feel comfortable asking questions about my treatment and medication.	382	591	175	87	49	1284
	I, not staff, decide my treatment goals.	490	573	115	62	32	1272
General Satisfaction	If I had other choices, I would still get services from my current service provider(s).	345	555	217	93	38	1248
	I would recommend my current service provider(s) to a friend or family member.	477	535	164	49	43	1268
	I like the services that I receive.	521	547	126	51	45	1290
Social Connectedness	Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	539	555	118	42	38	1292
	Other than my current service provider(s), I am happy with the friendships I have.	303	464	203	168	133	1271
	Other than my current service provider(s), I have people with whom I can do enjoyable things.	292	495	255	149	79	1270
	Other than my current service provider(s), I feel I belong in my community.	267	530	226	165	91	1279
Outcomes	As a direct result of my current services, I deal more effectively with daily problems.	233	442	309	162	142	1288
	As a direct result of my current services, I am better able to control my life.	304	614	257	91	50	1316
	As a direct result of my current services, I am better able to deal with crisis.	279	610	278	97	44	1308
	As a direct result of my services, I am getting along better with my family.	268	558	293	129	55	1303
	As a direct result of my services, I do better in social situations.	228	472	311	137	75	1223
	As a direct result of my current services, I do better in school and/or work.	196	506	305	200	76	1283
	As a direct result of my current services, my housing situation has improved.	72	177	240	79	52	620
	As a direct result of my current services, my symptoms are not bothering me as much.	269	412	242	129	102	1154
Functioning	As a direct result of my current services, my symptoms are not bothering me as much.	179	469	317	227	106	1298
	As a direct result of my current services, I do things that are more meaningful to me.	226	554	321	125	62	1288
	As a direct result of my current services, I am better able to take care of my needs.	254	638	244	111	46	1293
	As a direct result of my current services, I am better able to handle things when they go wrong.	175	560	318	172	77	1302
	As a direct result of my current services, I am better able to do things that I want to do.	203	540	320	164	71	1298
Not Part of Scale	My belief that I can maintain my wellness and recover from mental illness is supported by my current service provider(s).	328	564	252	77	56	1277
	My current service provider(s) give me opportunities to learn skills that allow me to strengthen and maintain my wellness.	293	624	225	87	33	1262
	Mutual support or recovery focused groups that are facilitated by peers are available to me through my current service provider(s).	198	442	250	112	66	1068

DRAFT

**ADULT CONSUMER
SURVEY**



2011 Adult Mental Health & Well-Being Survey

STATEMENT	RESPONSE OPTIONS					
	Strongly Agree (1)	Agree (2)	Undecided/ Neutral (3)	Disagree (4)	Strongly Disagree (5)	Not Applicable (9)
1. As a direct result of my current services, I deal more effectively with daily problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. As a direct result of my current services, I am better able to control my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. As a direct result of my current services, I am better able to deal with crisis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. As a direct result of my services, I am getting along better with my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. As a direct result of my services, I do better in social situations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. As a direct result of my current services, I do better in school and/or work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. As a direct result of my current services, my housing situation has improved.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. As a direct result of my current services, my symptoms are not bothering me as much.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. As a direct result of my current services, I do things that are more meaningful to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. As a direct result of my current services, I am better able to take care of my needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. As a direct result of my current services, I am better able to handle things when they go wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. As a direct result of my current services, I am better able to do things that I want to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Staff believe that I can grow, change and recover.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Staff encourage me to take responsibility for how I live my life.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. My belief that I can maintain my wellness and recover from mental illness is supported by my current service provider(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STATEMENT	RESPONSE OPTIONS					
	Strongly Agree (1)	Agree (2)	Undecided/ Neutral (3)	Disagree (4)	Strongly Disagree (5)	Not Applicable (9)
16. My current service provider(s) give me opportunities to learn skills that allow me to strengthen and maintain my wellness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Mutual support or recovery focused groups that are facilitated by peers are available to me through my current service provider(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Staff respect my wishes about who is and who is not to be given information about my treatment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Staff help me to obtain the information I need so that I can take charge of managing my illness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Staff are sensitive to my cultural background (race, religion, language, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. I am encouraged to use consumer-run programs (support groups, drop-in centers, consumer warm lines, social clubs, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. I am given information about my rights.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. I feel comfortable asking questions about my treatment and medication.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Staff tell me what side effects to watch out for.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. I, not staff, decide my treatment goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Staff are willing to see me as often as I feel it is necessary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Staff return my call within 24 hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Services are available at times that are good for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. The location of services is convenient (public transportation, distance, parking, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. I am able to see a psychiatrist when I want to.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. I feel free to complain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. I was able to get all the services I think I need.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. If I had other choices, I would still get services from my current service provider(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STATEMENT	RESPONSE OPTIONS					
	Strongly Agree (1)	Agree (2)	Undecided/ Neutral (3)	Disagree (4)	Strongly Disagree (5)	Not Applicable (9)
34. I would recommend my current service provider(s) to a friend or family member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. I like the services that I receive.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. Other than my current service provider(s) in a crisis, I would have the support I need from family or friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Other than my current service provider(s), I am happy with the friendships I have.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Other than my current service provider(s), I have people with whom I can do enjoyable things.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Other than my current service provider(s), I feel I belong in my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HOUSING

40. Where are you currently living? *(Please check one)*

- (1) OWNED OR RENTED HOME OR APARTMENT
- (2) SOMEONE ELSE'S HOME OR APARTMENT
- (3) CRISIS RESIDENCE
- (4) HOMELESS OR HOMELESS SHELTER
- (5) JAIL OR CORRECTIONAL FACILITY
- (6) RESIDENTIAL CARE OR TREATMENT
- (7) MEDICAL HOSPITALIZATION
- (8) PSYCHIATRIC HOSPITALIZATION
- (9) SUBSTANCE ABUSE TREATMENT HOSPITALIZATION
- (10) SKILLED NURSING FACILITY
- (11) OTHER _____

41. Have you lived in any of the following places in the last 12 months? *(Check all that apply)*

- OWNED OR RENTED HOME OR APARTMENT
- SOMEONE ELSE'S HOME OR APARTMENT
- CRISIS RESIDENCE
- HOMELESS OR HOMELESS SHELTER
- JAIL OR CORRECTIONAL FACILITY
- RESIDENTIAL CARE OR TREATMENT
- MEDICAL HOSPITALIZATION
- PSYCHIATRIC HOSPITALIZATION
- SUBSTANCE ABUSE TREATMENT HOSPITALIZATION
- SKILLED NURSING FACILITY
- OTHER _____

42. Are you currently receiving a rent subsidy?

- YES
- NO

42a. If yes, which do you receive?

- SECTION 8 HOUSING
- PROJECT BASE RENTAL SUBSIDY
- BRAP
- SHELTER PLUS CARE
- OTHER RENTAL ASSISTANCE

EMPLOYMENT AND INCOME

43. Are you currently employed? (Please check one)

- (1) COMPETITIVELY EMPLOYED FULL-TIME (32+ HOURS PER WEEK)
- (2) COMPETITIVELY EMPLOYED PART-TIME
- (3) SELF-EMPLOYED
- (4) NOT EMPLOYED, LOOKING FOR WORK
- (5) VOLUNTEER WORK
- (6) RETIRED
- (7) NOT EMPLOYED, NOT LOOKING FOR WORK
- (8) WORKING WITH SUPPORTS PART-TIME
- (9) SHELTERED EMPLOYMENT
- (10) VOCATIONAL REHABILITATION SERVICES
- (11) OTHER

44. What is your current income status? (Please check all that apply)

- NO INCOME SOURCE
- EARNED EMPLOYMENT
- UNEMPLOYMENT INSURANCE
- SUPPLEMENTAL SECURITY INCOME (SSI)
- SOCIAL SECURITY DISABILITY INCOME (SSDI)
- TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)
- GENERAL ASSISTANCE (GA)
- VETERAN'S DISABILITY PAYMENT
- PRIVATE DISABILITY
- WORKERS COMPENSATION
- RETIREMENT FROM SOCIAL SECURITY
- VETERAN'S PENSION
- PENSION FROM FORMER JOB
- CHILD SUPPORT
- ALIMONY
- TRUST
- OTHER

HEALTH AND WELL-BEING

43. Height _____ **Weight** _____

44. Have you ever been told by your doctor or other health professional that you have? (Check all that apply)

- _____ Angina or coronary heart disease
- _____ Heart attack or myocardial infarction
- _____ Stroke
- _____ High blood cholesterol
- _____ High blood pressure or hypertension
- _____ Diabetes
- _____ Asthma
- _____ Arthritis
- _____ Epilepsy or seizure disorder
- _____ Injury to head or brain
- _____ Liver Condition (e.g. Hepatitis, Cirrhosis, decreased liver function)

45. Do you now smoke cigarettes? (Please check one)

- _____ (1) Everyday
- _____ (2) Some Days
- _____ (3) Not at all

46. During the past month, did you participate in any physical activities or exercises such as running, aerobics, basketball or other sports, gardening or walking for exercise?

- _____ Yes
- _____ No

47. Vigorous physical activities are those that cause large increases in breathing, heart rate or sweating. How many days per week do you do these vigorous activities for at least 10 minutes at a time?

Number of days per week _____

48. On the days when you drink alcohol, about how many drinks do you drink on average?

(One drink is one can or bottle of beer or wine cooler, one glass of wine, one cocktail or one shot of liquor)

Average number of drinks per day _____

49. How would you describe the condition of your teeth: (Please check one)

- _____ (1) Excellent
- _____ (2) Very Good
- _____ (3) Good
- _____ (4) Fair
- _____ (5) Poor

50. How long has it been since you had your teeth cleaned by a dentist or dental hygienist?

Number of Months _____ Number of Years _____

51. Would you say that in general your general health is: *(Please check one)*

- _____ (1) Excellent
- _____ (2) Very Good
- _____ (3) Good
- _____ (4) Fair
- _____ (5) Poor

52. 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?

_____ Number of Days

53. 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?

_____ Number of Days

54. During the past 30 days, about how many days did poor physical or mental health keep you from doing usual activities, such as self-care, school, or recreation?

_____ Number of Days

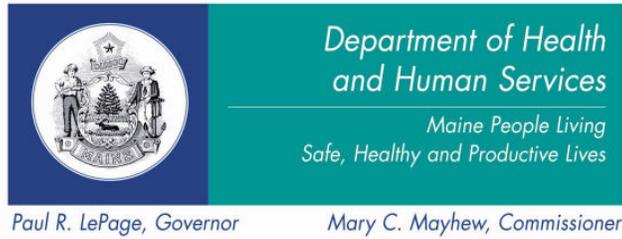
Thank you for taking the time to complete this survey! If you have any questions, please call 1-888-367-5124.



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Caring..Responsive..Well-Managed..We are DHHS.



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