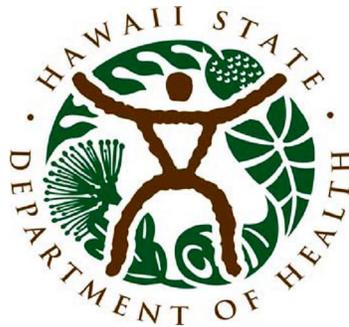


# 2012 Hawai`i Annual Adult Community Mental Health Services Consumer Satisfaction Survey: Convenience Sample Results

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## *Adult Mental Health Division*

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## EXECUTIVE SUMMARY

This report details the statewide results of the FY2012 Hawai'i Annual Adult Community Mental Health Services Consumer Survey Convenience Sample, administered from August 1, 2012 through September 1, 2012. A total of 1,104 consumers chose to participate in this survey from among those who had received at least one Adult Mental Health Division (AMHD) funded clinical or case management service at a Community Mental Health Center (CMHC) during the first half of FY2012. Of those eligible to participate (N=2,557), these 1,104 consumers represent a response rate of 43.2% (Table 1).

The survey instrument is used by mental health programs throughout the United States and is endorsed by the Substance Abuse Mental Services Administration's (SAMHSA) Mental Health Statistics Improvement Program (MHSIP). Survey results are incorporated annually into SAMHSA's *Community Mental Health Block Grant* initiative, which is comprised of National Outcome Measures (NOMS) and the related Universal Reporting System (URS) tables. The survey instrument includes 39 statements addressing eight domains: 1) Satisfaction with Services; 2) Access to Services; 3) Appropriateness of Services; 4) Treatment Planning; 5) Outcomes of Services; 6) Functioning; 7) Social Connectedness; and four statements added to the survey by the State of Hawai'i. Participants rate each statement on a five-point scale ranging from "Strongly Agree," "Agree," "Neutral," "Disagree," to "Strongly Disagree."

<b>Adult Convenience Sample Highlights</b>	
• Participating Providers:	8 CMHC's
• Survey Response Rate:	1,104 surveys (43.2%)
<b>Scale Scores*</b>	
• Appropriateness/Quality of Services:	<b>89%</b>
• Hawai'i specific questions:	<b>90%</b>
• Access to Services:	<b>90%</b>
• Satisfaction with Services:	<b>90%</b>
• Participation in Treatment Planning:	<b>80%</b>
• Functioning:	<b>79%</b>
• Improved Outcomes from Services:	<b>81%</b>
• Social Connectedness:	<b>76%</b>

\*Scale Scores = For each item of the eight domains, the frequency of responses was calculated based on the cumulative percent of positive responses "Strongly Agree" and "Agree." For example, a score of 89% indicates that the sample either strongly agreed or agreed with the statement.

For 2012, results of the convenience sample showed that consumers rated most positively those factors related to their interaction with clinicians and/or staff (i.e., Hawaii specific questions, Access to Services, Satisfaction with Services and Appropriateness of Services), but indicated less satisfaction with domains that relate directly to their day-to-day lives (i.e., Participation in Treatment Planning, Outcomes, Functioning and Social Connectedness). This report also examines consumer responses addressing the eight CMHC locations.

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## INTRODUCTION

The Adult Mental Health Division (AMHD) surveys consumer perception of treatment services across the State of Hawai'i on an annual basis. The present report summarizes the results of the FY2012 annual consumer satisfaction survey of a convenience sample of consumers including some who were discharged during the 2012 fiscal year. The survey compares FY2012 random sample and convenience sample survey data total score results with FY2010 and FY 2011 random sample survey data. Results are presented for each CMHC case management area as well.

### Background

The FY2012 Hawai'i Adult Community Mental Health Consumer Survey (HACMHCS) was given to each CMHC to distribute to any consumer who received at least one treatment or case management service from a state-operated Community Mental Health Center (CMHC) between July 1 and December 31, 2011.

### Analysis of Response Rates

Appendix A shows the statements used to assess each domain and the sequence (number of the statements) in which they appear in the survey instrument. Consumers were asked to rate their agreement or disagreement with each statement using a 5-point Likert-type scale which includes "Strongly Agree," "Agree," "Neutral," "Disagree" and "Strongly Disagree" with an option of "Does Not Apply." Lower scores indicate higher levels of agreement with statements, which translate to more favorable perceptions of services provided.

The General Satisfaction with Services domain is covered in the first three statements and the Access domain includes statements four through nine. There are nine statements within the Appropriateness domain (statements 10, 12 to 16, 18 to 20), two statements within the Treatment Planning domain (statements 11 and 17), eight statements within the Outcomes domain (statements 24 to 31), four statements within the Functioning domain (statements 32 to 35), four statements within the Social Connectedness domain (statements 36 to 39), and, lastly, three statements within the Hawai'i-specific domain (statements 21 to 23).

## METHOD

### Convenience Sample

For the convenience sample, there were 2,557 consumers eligible to participate. These consumers received at least one clinical or case management service from a CMHC between July 1 and December 31, 2011. The convenience sample did not include Purchase of Service Provider (POS) providers.

### Instrument

The survey instrument, the "Hawai'i Mental Health Services Consumer Survey 2012," is a modified version of the satisfaction survey developed by the Mental Health Statistical Improvement Program (MHSIP). The MHSIP Consumer Survey, which was developed and recommended by a national

workgroup of consumers and mental health providers, focuses on the care received by adult mental health consumers in community settings. The survey is provided in Appendix A. The two parts that comprise the survey instrument include:

Part 1: Thirty-nine statements that participants are asked to rate based on their experiences at their agency during the prior three months. These 39 statements address eight domains: 1. Satisfaction with Services, 2. Access to Services, 3. Appropriateness of Services, 4. Participation in Treatment Planning, 5. Outcomes of Services, 6. Functioning, 7. Social Connectedness, and statements added to the survey by the State of Hawai'i, or 8. Hawai'i-Specific domain. Participants rated each statement on a five-point scale ranging from "Strongly Agree," "Agree," "Neutral," "Disagree," to "Strongly Disagree." There was also an option of selecting, "Does Not Apply," which was treated as a non-response.

Part 2: Participants were asked to provide demographic data as race/ethnicity, gender, and date of birth.

## PROCEDURE

**Survey Distribution:** Surveys were collated and distributed to each CMHC with attention to the CMHC Center Manager. Each CMHC was tasked with distributing, collecting and returning surveys to AMHD.

**Survey Collection:** The survey period was August 1, 2012 through September 1, 2012.

**Data Entry:** Two AMHD staff coordinated data entry with a team of Hawaii Certified Peer Specialists and one practicum student. Each survey was double-entered to ensure data accuracy. If discrepancies were discovered, the differences were identified and resolved by checking the original survey and re-entering the survey.

**Analysis:** The data were analyzed using the Statistical Package for Social Scientists (SPSS) statistical program. Based on the recommendation of the MHSIP Policy Group, domain scores (Satisfaction of Services, Access to Services, Appropriateness of Services, Participation in Treatment Planning, Outcomes of Services, Functioning, Social Connectedness, and Hawai'i-specific) were calculated only if two-thirds of the statements comprising each domain were completed. All 39 items in Part 1 of the survey were scored on a 5-point Likert-type scale ranging from 1 for "Strongly Agree," 2 for "Agree," 3 for "Neutral," 4 for "Disagree," and 5 for "Strongly Disagree." The option, "Does Not Apply" was treated as a non-response. Lower scores indicated more favorable experiences with the specific agency or service.

Table 1: Compares the response rates from three random samples (2010, 2011 and 2012) with the convenience sample. The response rate for the 2012 CMHC's convenience sample (43.2%) is slightly higher than the 2012 CMHC's random sample, but all CMHC's response rates are lower than the response rate by POS providers in the previous three years.

Table 1. 2010-2012 Comparison of Response Rates<sup>1</sup> for Consumers Served by AMHD

Statewide		2010-Random Sample			
	Sample	Completed	Refused/No Response	Unreachable	Response Rate
<b>CMHCs</b>	467	230	132	105	63.5%
<b>POS</b>	333	383	131	49	53.9%
<b>Total</b>	<b>800</b>	<b>443</b>	<b>263</b>	<b>154</b>	<b>59.3%</b>

Statewide		2011-Random Sample			
	Sample	Completed	Refused/No Response	Unreachable	Response Rate
<b>CMHCs</b>	286	166	83	37	66.7%
<b>POS</b>	446	277	94	75	74.7%
<b>Total</b>	<b>732</b>	<b>443</b>	<b>177</b>	<b>112</b>	<b>71.5%</b>

Statewide		2012-Random Sample			
	Sample	Completed	Refused/No Response	Unreachable	Response Rate
<b>CMHCs</b>	274	89	143	42	38.36%
<b>POS</b>	399	211	161	27	56.72%
<b>Total</b>	<b>673</b>	<b>300</b>	<b>304</b>	<b>69</b>	<b>49.67%</b>

Statewide		2012-Convenience Sample			
	Sample	Completed	Refused/No Response	Unreachable	Response Rate
<b>CMHCs</b>	2557	1104	n/a	n/a	43.2%
<b>POS</b>	---	---	n/a	n/a	---
<b>Total</b>	<b>2557</b>	<b>1104</b>			<b>43.2%</b>

<sup>1</sup> Response rate is the quotient of the number of completed surveys divided by the number of consumers who were contacted (i.e. list of names minus the number who were unreachable) for the random sample, and for the convenience sample, the rate is the quotient of the number of completed surveys divided by the number of consumers who were eligible to participate.

Table 2 shows the response rates for the CMHCs. The highest response rate was from Central Oahu (59.1%), followed by Kalihi-Palama (Oahu) (58%), West Hawaii (53%), Windward Oahu (43.3%), Maui (38.5%), East Hawaii (37.5%), Diamond Health (Oahu) 34.3% and Kauai (24%).

Table 2. 2012 Hawai'i Adult Community Mental Health Consumer Survey Response Rates – Community Mental Health Centers (CMHCs) Convenience Sample

CMHCs	Sample	Response Rate
<b>Maui County</b>		
Maui	192 of 499	38.5%
<b>Honolulu County</b>		
Kalihi-Palama	255 of 440	58.0%
Central-O`ahu	165 of 279	59.1%
Windward-O`ahu	101 of 233	43.3%
Diamond Head	94 of 274	34.3%
<b>Hawai`i County</b>		
East Hawai`i	134 of 357	37.5%
West Hawaii	89 of 167	53.3%
<b>Kaua`i County</b>		
Kaua`i CMHC	74 of 308	24.0%
<b>All CMHCs</b>	<b>1,104 of 2,557</b>	<b>43.2%</b>

Table 3 shows the proportion of completed surveys by these CMHCs, with the most completed by Kalihi-Palama (Oahu) (23.2% of the sample), followed by Maui (17.4%), Central Oahu 14.9%), East Hawaii (12.1%), Windward Oahu (9.1%), Diamond Head (Oahu) (8.5%), West Hawaii (8.1%) and Kauai (6.7%).

Table 3. 2012 Hawai'i Adult Community Mental Health Consumer Survey % of Completed Surveys by Community Mental Health Centers (CMHCs) Convenience Sample

CMHCs	Sample	% of completed surveys
<b>Maui County</b>		
Maui	192	17.4%
<b>Honolulu County</b>		
Kalihi-Palama	255	23.1%
Central-O`ahu	165	14.9%
Windward-O`ahu	101	9.1%
Diamond Head	94	8.5%
<b>Hawai`i County</b>		
East Hawai`i	134	12.1%
West Hawaii	89	8.1%
<b>Kaua`i County</b>		
Kaua`i CMHC	74	6.7%
<b>All CMHCs</b>	<b>1,104</b>	<b>100.0%</b>

## RESULTS

Statewide Positive Responses by Domains: Table 4 shows the positive responses to each of the survey domain areas.

- **Hawai'i Specific Questions:** Three questions in the survey pertain to the extent to which consumers felt that services were provided with respect and in a culturally appropriate manner. The overall score was 91.1%, similar to previous years' responses with the random samples.
- **Appropriateness:** Nine questions in the survey focused on *Appropriateness* (Appendix B). The overall score for this domain was 88.6%, which was slightly lower than previous years' responses with the random samples.
- **Access:** Six questions in the survey gathered information regarding *Access* (Appendix B). This domain scored at 89.9%, which is similar to the 2011 and 2012 random samples.
- **Satisfaction:** Three questions were asked in the survey to ascertain *Satisfaction* (Appendix B). The overall score for this domain was 90.3%, similar to the 2012 random sample.
- **Treatment Planning:** The survey comprised two questions to indicate *Treatment Planning* (Appendix B). The overall score for this domain was 80.2, lower than all three years' random samples.
- **Functioning:** Five questions indicate respondent's impressions of *Functioning* (Appendix B). The overall score for this domain was 79.0%, similar to previous years' responses with the random samples.
- **Treatment Outcomes:** Eight questions were asked to get consumers' perception on *Outcome* (Appendix B). The overall score for this domain was 80.8%, which was slightly higher than the 2011 and 2012 random samples.
- **Social Connectedness:** Four questions were asked in the survey to ascertain *Social Connectedness* (Appendix B). The score for this domain was 76.1%, higher than all of the random samples (at 71-72%). Social Connectedness seems to be one area where the convenience sample seems to be different than the random samples, with slightly higher social connectedness. However, social connectedness is still the one area with the lowest proportion of positive scores.

Statewide, consumers from the convenience sample reported positively in most domain areas; however, a general pattern was repeated this year, with the random sample and convenience samples both showing that consumers were generally more satisfied with service provision than with the outcomes of their services. The exceptions were treatment planning (slightly lower positive scores) and social connectedness (slightly higher positive scores) in the convenience sample.

Overall, consumers rated most positively on factors related to their interaction with clinicians or staff (i.e., Appropriateness and Satisfaction with Services and Hawaii specific questions). The convenience sample's lowest marks were for measures that relate directly to their lives (i.e., Outcomes and Functioning), and for

Treatment Planning. Survey findings should help to guide the AMHD’s ongoing efforts to improve the quality of mental health services for adults.

Table 4. 2010-2012 Comparison of Eight Domain Scores

Statewide	2010-RS	2011-RS	2012-RS	2012-CS
<b>Hawaii-Specific</b>	91.0%	90.8%	93.2%	90.4%
<b>Appropriateness</b>	90.5%	92.2%	91.8%	88.6%
<b>Satisfaction</b>	88.3%	87.7%	90.3%	90.3%
<b>Treatment Planning</b>	83.8%	85.9%	84.3%	80.2%
<b>Access</b>	82.4%	89.6%	90.2%	89.9%
<b>Functioning</b>	79.5%	81.1%	79.5%	79.0%
<b>Treatment Outcomes</b>	76.6%	79.9%	78.9%	80.8%
<b>Social Connectedness</b>	70.2%	71.7%	72.0%	76.1%

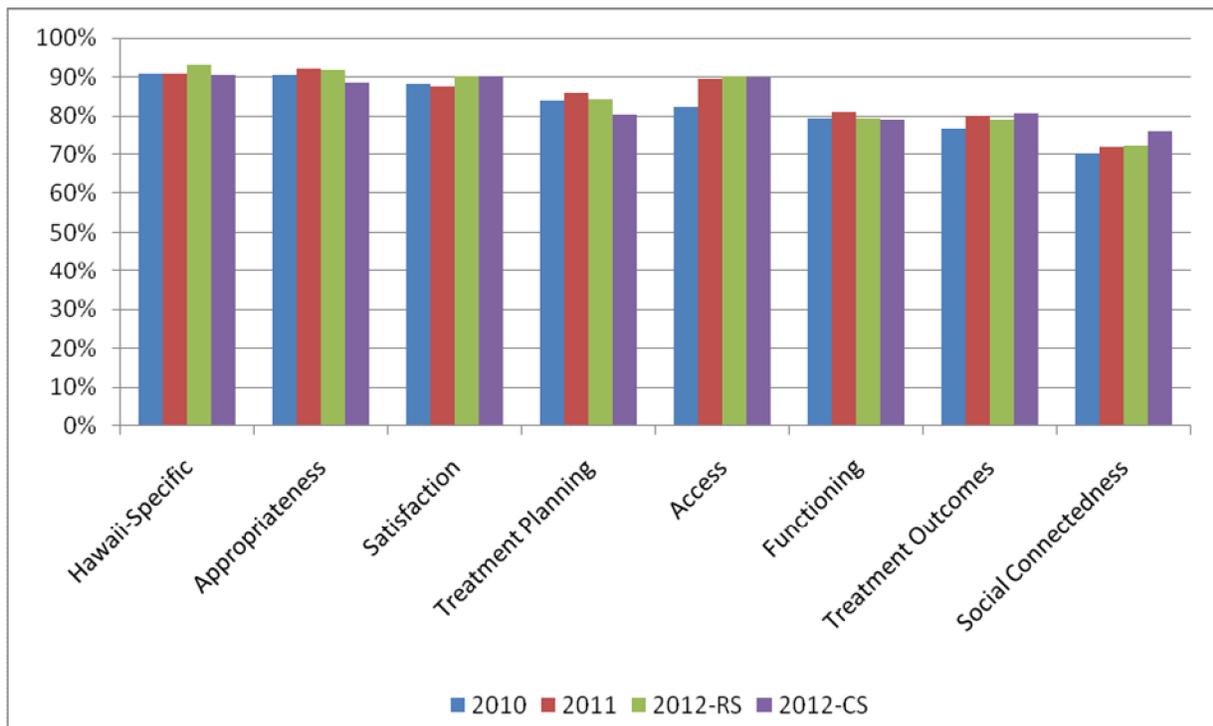


Table 5 shows the domain scores by each of the different CMHCs. Consumers participating in the convenience sample from Windward Oahu and Kauai had the most scores lower than 85% (5 of 8 domains), while other CMHCs had 4 or less scores lower than 85%.

Participation in treatment planning and treatment outcomes had scores lower than 85% among 7 of the 8 CMHCs, while functioning and social connectedness also had scores lower than 85% for all 8 CMHCs.

Table 5. 2012 Convenience Sample Domain Scores by Community Mental Health Centers (CMHCs)

<b>Statewide</b>									
	<b>Windward, Oahu</b>	<b>Central, Oahu</b>	<b>Diamond Head, Oahu</b>	<b>Kalihi- Palama, Oahu</b>	<b>Kauai</b>	<b>Maui</b>	<b>East Hawaii</b>	<b>West Hawaii</b>	<b>TOTAL</b>
<b>Hawaii-Specific</b>	90.0	92.1	87.8	88.5	90.3	93.2	90.2	89.9	90.4%
<b>Appropriateness</b>	84.7	90.9	90.1	88.5	80.3	89.9	90.2	88.4	88.6%
<b>Satisfaction</b>	89.0	95.8	87.9	85.5	90.4	92.1	91.7	92.0	90.3%
<b>Treatment Planning</b>	71.9	80.7	82.2	80.0	74.6	87.1	82.3	73.6	80.2%
<b>Access</b>	82.0	90.9	87.9	89.5	91.5	93.7	90.2	89.7	89.9%
<b>Functioning</b>	81.6	78.7	79.8	78.4	67.6	82.2	80.9	77.3	79.0%
<b>Treatment Outcomes</b>	81.3	82.9	77.0	80.3	73.4	85.9	81.1	75.6	80.8%
<b>Social Connectedness</b>	81.1	83.8	67.4	73.0	72.1	81.8	68.5	75.6	76.1%

## DISCUSSION

Statewide, for 2012, consumers who participated in the convenience sample generally reported an overall satisfaction in most domains, with the Hawai`i Specific, Access, Satisfaction and Appropriateness domains were over 89% positive. Furthermore, the pattern found in prior MHSIP random sample results remain with the convenience sample: Consumers were more satisfied with service provision than with the outcomes of services. They rated most positively those factors related to their interaction with clinicians and/or staff (i.e., Satisfaction, Appropriateness), but indicated less satisfaction with domains that relate directly to their lives (i.e., Outcomes, Functioning, Treatment Planning). The convenience sample's Social Connectedness scores were slightly higher than previous years' and the 2012 random samples, yet social connectedness is still the one area with the lowest proportion of positive scores.

The 2012 Hawai`i Consumer Survey is a modified version of the nationally accepted MHSIP Consumer Survey and is a reliable survey instrument for collecting information about consumers' perception of services provided by Hawai`i's public mental health system. It is important to examine domains that were scored higher or lower to determine strengths and deficits in the current public mental health system (CMHC's case management areas). Mental health service providers should look at these relatively positive results not only as an indication of a job well done, but as a clear call for improvements in certain areas.

## REFERENCES

Mental Health Statistics Improvement Project (MHSIP): [www.mhsip.org](http://www.mhsip.org)

The MHSIP Quality Report Toolkit: A Companion Document for the MHSIP Quality Report (2005)

Annual Consumer Survey-Hawai`i (1995, 1997, 2002, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012)

**APPENDIX A:**  
***Hawai'i Mental Health Services Consumer Survey 2012***

Date Survey was completed (MM/DD/YY): \_\_\_\_\_

**Thank you for agreeing to participate in this survey.**  
**Please take a moment to review this page for information and instructions.**

**Purpose of this Survey**

Your answers and those of others will tell us what people think of their mental health care. This information will help us to identify areas of strengths and areas in which improvements would help us provide the best possible services. In Part 1 of this survey, we ask you to rate the services you received from this agency during the last **3 months**. In Part 2, we ask you about your access to care and your oral health; and in Part 3, we ask about demographic information, such as your age and ethnicity.

**Voluntary and Confidential**

- É Your participation is voluntary.
- É Your answers will be confidential and will not affect your services at this agency.
- É This agency's staff will NOT have access to your individual responses. Only authorized personnel from the Department of Health will see your answers.

**Instructions**

- o Please read the instructions for each part of this survey (Parts 1, 2, and 3) before completing each section.
- o **After you complete this survey, drop it in the locked mailbox.**
- o **If you prefer to complete this survey at a later time, please ask for a prepaid return envelope and mail your completed survey to us.**

## **Hawai'i Mental Health Services Consumer Survey 2012**

**Instructions (Part 1):** Please rate your level of agreement with each statement from *Strongly Agree* to *Strongly Disagree*, by circling the **one** response that best fits your experience with this agency during the last 3 months. If the statement does not apply to you, please circle *Does Not Apply*.

1. I like the services that I received here.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
2. If I had other choices, I would still get services from this agency.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
3. I would recommend this agency to a friend or family member.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
4. The location of services was convenient (for example, for parking, to public transportation, the distance, etc.).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
5. Staff were willing to see me as often as I felt it was necessary.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
6. Staff returned my call in 24 hours.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
7. Services were available at times that were good for me.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
8. I was able to get all the services I thought I needed.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
9. I was able to see a psychiatrist when I wanted to.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
10. Staff here believe that I can grow, change and recover. (Recovery is having a life that is meaningful to you ó a home, a job, a loving partner, friends, children, hobbies, transportation.)	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
11. I felt comfortable asking questions about my treatment and medication.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
12. I felt free to complain.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
13. I was given information about my rights.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
14. Staff encouraged me to take responsibility for how I live my life.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
15. Staff told me what side effects to watch out for (for example: dry mouth, drooling, itching, etc.).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
16. Staff respected my wishes about who is and who is not to be given information about my treatment.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
17. I, not staff, decided my treatment goals.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply

## **Hawai'i Mental Health Services Consumer Survey 2012**

18. Staff were sensitive to my cultural background (such as race, religion, language, traditions, etc.).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
19. Staff helped me obtain the information I needed so that I could take charge of managing my illness.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
20. I was encouraged to use consumer-run programs (such as support groups, drop-in centers, crisis phone line, peer specialist, etc.).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
21. I received services, including medications, in a timely manner, that is, there were no delays.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
22. Staff asked me about my physical health (such as medical problems, illnesses, health problems).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
23. Staff expressed an understanding of my values (your likes or dislikes, beliefs and ideas) in developing my treatment plan.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
24. As a direct result of services I received, I deal more effectively with daily problems.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
25. As a direct result of services I received, I am better able to control my life (that is, being in charge of, managing my life).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
26. As a direct result of services I received, I am better able to deal with crisis.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
27. As a direct result of services I received, I am getting along better with my family.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
28. As a direct result of services I received, I do better in social situations.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
29. As a direct result of services I received, I do better in school and/or work.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
30. As a direct result of services I received, my housing situation has improved.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
31. As a direct result of services I received, my symptoms are not bothering me as much.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
32. As a direct result of services I received, I do things that are more meaningful to me (that is, greater worth and importance).	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
33. As a direct result of services I received, I am better able to take care of my needs.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply
34. As a direct result of services I received, I am better able to handle things when they go wrong.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Does Not Apply

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<b>35.</b> As a direct result of services I received, I am better able to do things I want to do.	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Does Not Apply</b>
<b>36.</b> Thinking about people in my life other than mental health staff, I am happy with the friendships I have.	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Does Not Apply</b>
<b>37.</b> Thinking about people in my life other than mental health staff, I have people with whom I can do enjoyable things.	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Does Not Apply</b>
<b>38.</b> Thinking about people in my life other than mental health staff, I feel I belong in my community.	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Does Not Apply</b>
<b>39.</b> Thinking about people in my life other than mental health staff, when in a crisis I would have the support I need from family or friends.	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Does Not Apply</b>

## Hawai'i Mental Health Services Consumer Survey 2012

**Instructions (Part 3):** Please complete the following demographic information.

46. What is your race or ethnicity (check all that apply)?

- Alaska Native (322)*
- American Indian (400)*
- Black or African American (11)*
- White or Caucasian (10)*
- Portuguese (323)*

### **NATIVE HAWAIIAN AND PACIFIC ISLANDER**

- American Samoan (16)*
- Chamorro/CNMI (500)*
- Chamorro/Guam (501)*
- Chuukese (502)*
- CNMI/Carolinian (503)*
- Hawaiian (404)*
- Kosraean (505)*
- Marshallese (506)*
- Palauan (507)*
- Phonpeian (508)*
- Yapese (509)*
- Other Pacific Islander (317)*

### **ASIAN**

- Asian Indian (410)*
- Chinese (318)*
- Filipino (325)*
- Japanese (320)*
- Korean (319)*
- Vietnamese (321)*
- Other Asian (407)*

### **HISPANIC OR LATINO\*\***

- Cuban (402)
- Mexican (405)
- Puerto Rican (324)
- Other Hispanic or Latino (408)

\*\* If Hispanic or Latino, also select a race  
(these are in the bold italics)

### **OTHER**

- Other (14)
- Adopted--don't know (410)
- Unknown (411)
- Prefer not to answer (99)

47. Which race/ethnicity group do you PRIMARILY identify with? \_\_\_\_\_

48. What is your gender?       Male       Female

49. What is your date of birth? \_\_\_\_\_(MM/DD/YY)

**APPENDIX B: Overview of the Eight Domains Addressed by the 2012  
Hawaii Adult Community Mental Health Survey**

<b>Domains</b>	<b>Survey</b>
<b>Satisfaction</b> <i>Overall satisfaction with services received</i>	1. I like the services that I received here.
	2. If I had other choices, I would still get services from this agency
	3. I would recommend this agency to a friend or family members.
<b>Access</b> <i>Entry into mental health services is timely and convenient</i>	4. The location of the services was convenient
	5. Staff were willing to see me as often as I felt it was necessary
	6. Staff returned my call within 24 hours
	7. Services were available at times that were good for me.
	8. I was able to get all the services I thought I needed.
	9. I was able to see a psychiatrist when I wanted to.
<b>Appropriateness</b> <i>Each consumer is treated as an individual, with a treatment plan that addresses strengths as well as weaknesses, proper ethno-cultural context, and consumer goals</i>	10. Staff here believes that I can grow, change and recover.
	12. I feel free to complain.
	13. I was given information about my rights
	14. Staff encouraged me to take responsibility for how I live my life
	15. Staff told me what side effects to watch out for.
	16. Staff respected my wishes about who is and who is not to be given information about my treatment.
	18. Staff were sensitive to my cultural background.
	19. Staff helped me obtain the information needed so that I could take charge of managing my illness.
	20. I was encouraged to use consumer-run programs.
	<b>Treatment Planning</b> <i>The extent to which consumers felt that they participated in their treatment planning process</i>
17. I, not staff, decided my treatment goals.	
<b>Outcome</b> <i>The extent to which mental health treatment had a positive effect on wellbeing, relationship, life circumstances, and potential recovery</i>	24. As a direct result of services I received, I deal more effectively with daily problems.
	25. As a direct result of services I received, I am better able to control my life.
	26. As a direct result of services I received, I am better to deal with crisis.
	27. As a direct result of services I received, I am getting along better with my family.
	28. As a direct result of services I received, I do better in social situations.
	29. As a direct result of services I received, I do better in school and /or work.
	30. As a direct result of services I received, my housing situation has improved.

Domains	Survey
	31. As a direct result of services I received, my symptoms are not bothering me as much.
<b>Functioning</b> <i>The extent to which mental health treatment had a positive effect on daily functioning</i>	32. As a direct result of services I received, I do things that are more meaningful to me.
	33. As a direct result of services I received, I am better able to take care of my needs.
	34. As a direct result of services I received, I am better able to handle things when they go wrong.
	35. As a direct result of services I received, I am better able to do things that I want to do.
<b>Social Connectedness</b> <i>The extent to which mental health treatment had a positive effect on one's sense of belongingness</i>	36. Thinking about people in my life other than mental health staff, I am happy with the friendships I have.
	37. Thinking about people in my life other than mental health staff, I have people with whom I can do enjoyable things.
	38. Thinking about people in my life other than mental health staff, I feel I belong in my community.
	39. Thinking about people in my life other than mental health staff, when in a crisis I would have the support I need from family or friends.
<b>Hawai'i-specific</b> <i>The extent to which consumers felt that services were provided with respect and in a culturally appropriate manner</i>	21. I received services, including medications, in a timely manner, that is, there were no delays.
	22. Staff asked about my physical health.
	23. Staff expressed an understanding of my values in developing my treatment plan.