

THE SURVEY

Thank you for taking the time to complete the following survey. The purpose is to gain a better understanding of our community's ideas, beliefs, experiences, and attitudes as they relate to mental health. THIS SURVEY IS COMPLETELY CONFIDENTIAL AND ANONYMOUS.

If participating in this survey becomes triggering or upsetting to you in any way, please reach out to Dial Help at **Call: 800-562-7622** or **906-482-HELP (906-482-4357)** **Text: 35NEEDS (906-356-3337)** for *free and confidential services*.

As a thank you for your time, there will be a spot at the end of the survey to submit your email for an entry into a drawing for a \$25.00 gift card from some of our supporting organizations. This is optional and will remain confidential.

* Required

1. What is your age? *

- 12-18
- 19-25
- 26-32
- 33-39
- 40-50
- 51-60
- 61-79
- 80 or older

2. What gender identity do you most identify with? *

- Female
- Male
- Transgender Male
- Transgender Female
- Gender Variant/Non-conforming

- Prefer not to answer

3. What is your sexual orientation? *

- Asexual
- Bisexual
- Gay
- Heterosexual
- Lesbian
- Pansexual
- None of the above/prefer not to answer
- Other: _____

4. What is your ethnicity (or race)? *

- Hispanic of any race
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Two or more races
- Prefer not to respond
- Other: _____

5. What is your education level? *

- Less than a high school diploma
- High school degree or equivalent
- Associate's degree
- Bachelor's degree
- Master's degree
- Doctorate
- Other: _____

6. What county do you live in? *

- Baraga
- Houghton
- Keweenaw
- Ontonagon
- Gogebic
- Other: _____

7. Are you a local college student?

- Yes
- No

8. Have you ever served in the military? *

- Yes
- No

9. Have you ever heard of the ACE survey? (Adverse Childhood Experiences survey)

- Yes
- No

10. Have you ever taken the ACE survey?

- Yes
- No

11. On a scale of 1 to 5, how well do you understand the impact of childhood trauma on adult behavior? (Please select a number on the scale from 1 to 5)

No knowledge

Very Knowledgeable

1

2

3

4

5

THE QUESTIONS IN THIS SECTION SHOULD BE RESPONDED TO AS PRIOR TO YOUR 18TH BIRTHDAY:

12. Did a parent or other adult in the household often or very often push, grab, slap, or throw something at you? OR ever hit you so hard that you had marks or were injured?

- Yes
- No

13. Did you often or very often feel that no one in your family loved you or thought you were important or special? OR your family didn't look out for each other, feel close to each other, or support each other?

- No
- Yes

14. Was a biological parent ever lost to you through divorce, abandonment, death, incarceration or other reason?

- No
- Yes

15. Did you ever live with someone who struggled with their use of alcohol and/or drugs?

- No
- Yes

16. Did you ever live with someone who was depressed, mentally ill, or attempted suicide?

- No
- Yes

17. Did you feel able to talk to your family about your feelings?

- No
- Yes

18. Did you have at least two nonparent adults who had genuine concern for you?

- No
- Yes

19. Did you enjoy participating in community traditions?

- No
- Yes

As it pertains to the following questions, mental health is defined as our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices.

20. How big of a mental health problem do you think we have in our community?
(Please select a number on the scale from 1 to 5)

We don't have a problem in our community.

It's a serious issue.

1 2 3 4 5

21. How well do you understand mental health?

- None
- A little
- Some
- A lot

22. Have you ever experienced a mental health condition (diagnosed or undiagnosed)?

- Yes
- No
- Unsure

23. Have you ever seen a mental health professional?

- Yes
- No

24. How comfortable are you talking with friends or family about your own mental health?
(Please select a number on the scale from 1 to 5)

Not comfortable

Comfortable

1 2 3 4 5

25. Do you know someone who has thought about suicide?

- Yes
- No

26. Have you personally ever thought about suicide?

- Yes
- No

27. If you or a loved one were having a mental health crisis, do you know how to get help?

- Yes
- No

28. Have you used any apps or online tools to help manage a mental health condition?

- Yes
- No

29. If you answered yes to the question above and would like to share, please share which online tool(s) you have utilized.

30. **Check all that apply:**

- Someone I know has made a suicide attempt but didn't die
- Someone I know has died by suicide
- Someone I know has talked to me about their thoughts of suicide
- I have worried about the mental health of someone I know
- I have worried about my own mental health
- I am worried about my own mental health
- I would like to feel more comfortable talking with others about their own mental health

31. What do you believe stops people from getting help for mental health problems? (Check all that apply)

- Cost
- Stigma
- Transportation
- Fear
- Provider availability
- Not finding a provider that is a good fit
- Not knowing how or where to start

- Talking themselves out of it
- Feeling like a burden to others

For the following, please answer agree, disagree, or I don't know:

32. Only mental health professionals can help someone who is suicidal.

- Agree
- Disagree
- I don't know

33. Most people who die by suicide show some signs beforehand.

- Agree
- Disagree
- I don't know

34. If someone wants to die by suicide, there is nothing anyone can do to prevent it.

- Agree
- Disagree
- I don't know

35. Directly asking a person if they are suicidal can make them feel worse or make them attempt suicide.

- Agree
- Disagree
- I don't know

36. Seeing a mental health professional is a sign of weakness.

- Agree
- Disagree
- I don't know

37. Mental health conditions can be caused by stressful experiences.

- Agree
- Disagree
- I don't know

38. An adolescent threatening suicide is most likely wanting attention and isn't likely to actually follow through with it.

- Agree
- Disagree
- I don't know

39. How big of a problem do you think the misuse of drugs is in our community?

We don't have a problem in our community.

It's a serious issue.

1

2

3

4

5

40. How big of a problem do you think the misuse of alcohol is in our community?

We don't have a problem in our community.

It's a serious issue.

1

2

3

4

5

41. Have you ever struggled with your own used of alcohol or drugs (prescribed or non-prescribed)?

- Yes
- No

42. What do you think we can do in our community to help people who have drug and/or alcohol problems? (Please select ONLY your top 5)

_____ More treatment options locally

_____ Medication-assisted treatment

_____ Job training

_____ Better funding for treatment

_____ Sober living houses

_____ More healthcare providers who are comfortable talking to patients about addiction

_____ Community education about addiction

_____ Peer recovery coaches

_____ Programs that allow people to seek treatment instead of going to jail, i.e. treatment courts

_____ Support and counseling for people while they are in jail

_____ More severe penalties for people who use drugs

_____ Clean needle exchange programs

_____ Reduce stigma and shame

_____ Wider variety of self-help and support groups

_____ Access to Naloxone (Narcan), a drug that can reverse an overdose

_____ Easy access to testing and treatment for diseases like Hepatitis C and HIV

_____ Detox services, resources, and support to help people through withdrawal

43. What statement below best describes your thoughts about people who struggle with alcohol or drug use?

Check all that apply.

- They're selfish
- They could stop if they wanted to
- They have a chronic disorder and need help to recover
- They're not trying hard enough to stop
- There's nothing anyone can do for them
- They need more willpower

44. Which is worse, using alcohol or drugs?

- Alcohol
- Drugs
- They're equal

45. Have you or someone you know ever overdosed on drugs?

- No
- Yes, myself
- Yes, someone I know
- Both myself and someone I know

46. What resource(s) do you feel is missing in our community?

47. Is there anything else you would like to share about your experiences or opinions regarding childhood trauma, mental health issues, or substance use in our community?

48. How would you like to receive more information on mental health? (Select all that apply)

- Internet
- Social Media
- Text messages
- TV
- Radio
- Brochures
- Workshops
- Other:

If you would like to get involved in this project, please contact Gail Ploe with the Western Upper Peninsula Health Department gploe@wuphd.org.

Thank you for taking the time to complete this survey. If you could use support or would like to speak with someone, please reach out to Dial Help at Call: 800-562-7622 or 906-482-HELP (906-482-4357) Text: 35NEEDS (906-356-3337) for free and confidential services.

To be entered into a drawing for a \$25.00 gift card as a thank you for your time, please enter your email below. This is completely optional and will remain confidential.

Email address.