

## Region 7E Adult Mental Health Initiative Needs Assessment Results

# Pine County

The Region 7E Adult Mental Health Initiative (AMHI) contracted with Wilder Research to conduct a post-COVID mental health needs assessment for Region 7E, which includes the counties of Chisago, Kanabec, Isanti, Mille Lacs, and Pine. This assessment was conducted via an online survey sent through county staff to mental health consumers and caregivers, as well as primary care providers, mental health providers, and county staff working in the region. This report summarizes the findings from the needs assessment results in Pine County. In total, 18 consumers and 20 providers responded to the survey. Providers sometimes represented more than one county, and may have their data included in more than one county report. It should be noted that the Ns for county-specific reports are relatively low and conclusions from the data should be made with caution.

## Demographics

### Consumers and caregivers

In total, 18 consumers and caregivers from Pine County responded to the survey. Survey respondents are compared to county-specific data available through Minnesota Compass ([mncompass.org](http://mncompass.org)). With regard to age, respondents were comparable to the region as a whole, with an overrepresentation of 45-54 year olds and an underrepresentation of individuals age 65 or older (Figure 1). Underrepresentation of older adults could be due to the sampling methodology, as younger adults are often more likely to be more comfortable with completing surveys online. Race and ethnicity data, as well as education level data were not measured in the exact same way between the survey and county data. Individuals of color were not represented in the survey data for Pine County, however education level data was similar between survey respondents and county-level data. With regard to gender, survey respondents over represent women when compared to county-specific data (94% compared to

46%). Eleven percent of respondents reported having been in jail or prison in the past two years, and 11% had been homeless.

#### 1. RESPONDENT CHARACTERISTICS

<b>Age</b>	<b>Survey respondents (N=18)</b>	<b>Pine County (N=23,297)</b>
18-24	11%	8%
25-34	17%	13%
35-44	17%	16%
45-54	33%	16%
55-64	22%	21%
65+	0%	26%

## 1. RESPONDENT CHARACTERISTICS (CONTINUED)

<b>Race</b>	<b>Survey respondents (N=18)</b>	<b>Pine County (N=28,338)</b>
White	100%	88%
American Indian or Alaska Native	0%	2%
Black or African American	0%	2%
Other	0%	1%
Asian or Pacific Islander	0%	1%
Two or more races, alone	0%	3%
<b>Ethnicity</b>	<b>(N=18)</b>	<b>(N=28,338)</b>
Hispanic or latino/a/e	0%	3%
<b>Gender identity</b>	<b>(N=18)</b>	<b>(N=28,997)</b>
Female (or woman)	94%	46%
Male (or man)	6%	54%
Non-binary, gender non-conforming, or genderqueer	0%	- <sup>a</sup>
<b>Identify as trans</b>	<b>(N=18) 0%</b>	<b>-<sup>a</sup></b>
<b>Education level</b>	<b>(N=18)</b>	<b>(N=21,421)</b>
Some high school	11%	8%
High school diploma or GED	39%	41%
Vocational training	0%	33%
Associate degree	6%	
Some college	28%	
Bachelor's degree	6%	11%
Graduate degree	11%	5%

Note. All available regional data with the exception of age (includes ages 18+) and education level (includes ages 25+) includes data for children as well as adults in the region. Create your own regional profile at [mncompass.org](http://mncompass.org).

<sup>a</sup> These data are not available at the county level.

Forty-four percent of survey respondents report having a disability or chronic condition that impacts their daily life, compared to 18% of the county as a whole (Figure 2). Thirty-three percent report that their disability affects their mobility, 6% affects their vision and 6% their hearing.

## 2. DISABILITY STATUS

<b>Status</b>	<b>Survey respondents (N=18)</b>	<b>Pine County (N=27,584)</b>
<b>Reports having a disability</b>	<b>44%</b>	<b>18%</b>
Disability affects mobility	33%	- <sup>a</sup>
Disability affects vision	6%	- <sup>a</sup>
Disability affects hearing	6%	- <sup>a</sup>

<sup>a</sup> These data are not available at the county level.

Consumers were asked about any diagnoses they may have. Most respondents reported having been diagnosed with an anxiety disorder or panic disorder (83%), major depression (72%), or Post-Traumatic Stress Disorder (PTSD; 50%; Figure 3).

### 3. DIAGNOSED CONDITIONS

<b>Have you ever been told by a doctor or nurse that you have any of the following conditions?</b>	<b>% (N=18)</b>
Anxiety disorder or panic disorder	83%
Major depression	72%
Post-Traumatic Stress Disorder (PTSD)	50%
Attention-deficit/hyperactivity disorder (ADHD)	33%
Manic episodes or manic depression, also called bipolar disorder	28%
Anti-social personality disorder, borderline personality disorder, or any other severe personality disorder	28%
Substance abuse disorder	17%
A concussion or Traumatic Brain Injury (TBI)	11%
Schizophrenia	6%
Paranoid or delusional disorder, other than schizophrenia	6%
Anorexia, bulimia, or another eating disorder	0%
Autism spectrum disorder	0%

Note. Column does not total 100% as respondents were allowed to select more than one response.

All consumer respondents report having health insurance, which is higher than the county average of 92% (Figure 4).

### 4. HEALTHCARE COVERAGE

<b>Coverage</b>	<b>Survey respondents (N=18)</b>	<b>Pine County (N=21,670)</b>
Has health care coverage/insurance	100%	92%

Consumers most commonly had private health insurance (50%), followed by public health care other than Medicare (39%; Figure 5).

### 5. HEALTHCARE COVERAGE TYPE

<b>Coverage type</b>	<b>(N=18)</b>
Private insurance	50%
Public healthcare program other than Medicare (Medical Assistance, MinnesotaCare, PMAP Plan)	39%
Medicare	6%
Other	6%

Other responses included: private insurance and medical assistance (6%).



## Providers

In total, 20 providers working in Pine County responded to the survey. They most commonly represented mental health providers (35%; Figure 6), and most commonly worked for a mental health clinic (45%; Figure 7).

### 6. ROLE

<b>Which of the following most closely describes your role?</b>	<b>(N=20)</b>
Mental health provider/therapist <sup>a</sup>	35%
Foster care/housing provider	20%
County staff member	10%
Employment/vocational provider	5%
Nurse Practitioner (NP)	5%
Hospital administrator/clinical director	5%
Emergency Center/Department Physician or staff	5%
Other <sup>b</sup>	20%

<sup>a</sup> Mental health provider/therapist was not included as a category in the survey, but was back-coded from the “Other” category.

<sup>b</sup> Other responses include: advocate (5%); community outreach (5%); peer recovery support specialist (5%), social worker (5%).

### 7. TYPES OF ORGANIZATIONS

<b>What type of organization do you work for?</b>	<b>(N=20)</b>
Mental health clinic	45%
Foster care/housing services	20%
Public health/human services department	5%
Employment/vocational services	5%
Hospital or emergency department	0%
Medical or primary care clinic	0%
Psychiatry clinic	0%
Law enforcement	0%
Other <sup>a</sup>	25%

<sup>a</sup> Other responses include: housing provider (15%); outpatient services (10%); sober outpatient treatment and mh services (5%).

# Services

## Mental health services

### Consumers

A majority of consumers (78%) had received services for their mental health in the last two years (Figure 8). The most common types of services received by consumer respondents are individual psychology services (69%), psychiatric services (62%), and mental health case management (38%; Figure 9).

### 8. RECEIVED MENTAL HEALTH SERVICES

<b>In the past two years (24 months) have you received any services for your mental health?</b>	<b>(N=18)</b>
Yes	72%
No	28%

### 9. TYPES OF SERVICES RECEIVED

<b>Services received</b>	<b>(N=13)</b>
Individual psychology services (e.g., outpatient therapy or counseling)	69%
Psychiatric services (e.g., medications, medication management)	62%
Mental health case management	38%
Emergency room services or an emergency mental health hold	23%
Integrated Mental Health/Chemical Dependency Treatment	23%
Peer-to-peer support services	23%
Children’s Therapeutic Services and Supports (CTSS)	23%
Adult Rehabilitative Mental Health Services (ARMHS)	15%
Group psychology services (e.g., outpatient therapy or counseling)	15%
Community Support Program (CSP)	15%
In-home supports (e.g. behavioral aide, personal care attendant)	15%
Inpatient counseling or treatment	15%
Transportation services	8%
Day treatment (adult and children’s)	8%
Recovery services	8%
Supportive housing (e.g., sober housing, mental health supportive housing, etc.)	0%
Crisis phone line, text line, or warm line	0%
Faith-based support services	0%
Adult foster care (residential care for people age 18 or older that require mental health supports)	0%
Supported employment (services that help people get and maintain paid employment)	0%
Mobile crisis assessment/stabilization services	0%
Respite services (services that provide short-term care for caregivers)	0%

<b>Services received</b>	<b>(N=13)</b>
Other	15%

When asked about their satisfaction with the services they received, 77% of Pine County respondents reported being very satisfied or somewhat satisfied, 15% neither satisfied nor dissatisfied, and 8% somewhat or very dissatisfied (Figure 10).

#### 10. SATISFACTION WITH SERVICES

<b>Satisfaction with services (N=13)</b>	<b>Very/somewhat satisfied</b>	<b>Neither satisfied nor dissatisfied</b>	<b>Very/Somewhat dissatisfied</b>
Overall, how satisfied are you with the services you have received?	77%	15%	8%

When asked how these services have helped them with specific life activities, the majority of respondents found services at least somewhat helpful. Ninety-two percent of respondents report services have been very or somewhat helpful in their ability to spend time doing things they enjoy, while 82% report services allowed them to feel safe and stable (Figure 11). Sixty-nine percent report services have improved their overall quality of life and allow them to perform daily activities. Sixty-four percent report services allow them to access other mental health services they need, while 54% report services allow them to have personal relationships. Five of seven felt services were helpful with their ability to work or volunteer.

#### 11. EXPERIENCE WITH SERVICES

<b>Please rate how helpful the services you have received has been in supporting your ability to do the following life activities successfully</b>	<b>N</b>	<b>Very/somewhat helpful</b>	<b>Not very/Not at all helpful</b>
Spend time doing things you enjoy	12	92%	8%
Feel safe and stable	11	82%	18%
Improve your overall quality of life	13	69%	31%
Perform daily activities (chores, paying bills, etc.)	13	69%	31%
Access mental health services you need (completing paperwork, knowing options for services)	11	64%	36%
Have personal relationships	13	54%	46%
Work or volunteer	7	5/7	2/7

Note. Data are presented in counts rather than percentages when N<10.

Most respondents (8 of 9) feel that they have avoided in-patient psychiatric hospitalization because of the services they have received (Figure 12).

#### 12. AVOIDANCE OF IN-PATIENT PSYCHIATRIC HOSPITALIZATION



Hospitalization (N=9)	Strongly agree or agree	Disagree or strongly disagree
Because of mental health services I have received in the past 24 months, I have avoided in-patient psychiatric hospitalization	8/9	1/9

Note. Data are presented in counts rather than percentages when N<10.

Currently, the majority of respondents (83%) feel they have the support they need to remain safe and stable (Figure 13). In the past two years, 33% of respondents attempted to obtain services for their mental health but were unable to do so.

**13. OBTAINING NEEDED SUPPORTS**

<b>Supports</b>	<b>% (N=18)</b>
Do you feel like you have the support you need to feel safe and stable?	83%
In the past two years, have you attempted to obtain services for your mental health and been unable to do so?	33%

In terms of their current mental health, over half (56%) report their mental health depends on the day, while 22% report it is staying the same and 22% report it is getting worse (Figure 14). None of the respondents report their mental health is getting better overall.

**14. MENTAL WELLBEING**

<b>Thinking about your mental health right now, overall would you say you are...</b>	<b>% (N=18)</b>
Depends on the day	56%
Staying the same	22%
Getting worse	22%
Getting better	0%

**Providers**

Providers were asked about which services are most helpful for keeping consumers safe and stable. The top three supports included: supportive housing (42%), mobile crisis assessment and stabilization services (32%), and individual psychology services (32%; Figure 15).

**15. TOP THREE SERVICES FOR KEEPING CONSUMERS SAFE AND STABLE**

<b>In your experience, which services and supports are most helpful for keeping consumers with mental health needs safe and stable?</b>	<b>% (N=19)</b>
Supportive housing (e.g., sober housing, mental health supportive housing)	42%
Mobile crisis assessment/ stabilization services	32%
Individual psychology services (e.g., outpatient therapy or counseling)	32%
Psychiatric services (e.g., medications, medication management)	26%
Mental health case management	21%
Community Support Program (CSP)	16%
In-home supports (e.g., behavioral aide, personal care attendant)	16%
Transportation services	16%
Adult Rehabilitative Mental Health Services (ARMHS)	11%
Integrated Mental Health/Chemical Dependency Treatment	11%
Adult foster care	11%
Emergency room services or emergency mental health hold services	11%

<b>In your experience, which services and supports are most helpful for keeping consumers with mental health needs safe and stable?</b>	<b>% (N=19)</b>
Day treatment services (adults and children)	11%

**15. TOP THREE SERVICES FOR KEEPING CONSUMERS SAFE AND STABLE (CONTINUED)**

<b>In your experience, which services and supports are most helpful for keeping consumers with mental health needs safe and stable?</b>	<b>% (N=19)</b>
Children's Therapeutic Services and Supports (CTSS)	11%
Peer to peer support services	11%
Crisis telephone, text line, or warm line	5%
Inpatient counseling or treatment	5%
Supported employment	5%
Recovery services	5%
Faith-based support services	5%
Group psychology services (e.g., outpatient therapy or counseling)	0%
Respite services	0%
None of the above	0%
Other	0%

**Barriers to care**

**Consumers**

When asked about barriers to service access, the most common reasons cited by consumers include not being able to pay for services (33%), wait times being too long (28%), and not being able to access the service they need in their area (28%; Figure 16). Twenty-two percent report not experiencing any barriers to services.

**16. BARRIERS TO CARE**

<b>Have any of the following barriers prevented you from accessing services?</b>	<b>% (N=18)</b>
I couldn't pay for the services	33%
The wait time was too long	28%
The service I needed wasn't available in my area	28%
I couldn't find transportation to get to services	22%
I don't know what services are available	17%
I wasn't eligible for the services	11%
I don't know how to access services	11%
I was worried about how I would be seen	11%
I don't require formal mental health services at this time	6%
I don't think the service(s) will help	6%
I don't have a mental health diagnosis	6%
I don't have the technology I need to access telehealth services	0%
I was worried about the effect on current or future employment	0%
I was worried about my family finding out	0%
I can't financially afford to take time off for treatment	0%
I did not want to get exposed to the coronavirus while using in-person services	0%

<b>Have any of the following barriers prevented you from accessing services?</b>	<b>% (N=18)</b>
The people who provide it don't speak my language/I couldn't get an interpreter	0%
The services weren't culturally specific	0%
Other	0%
None of the above	22%

## Providers

Providers were also asked about barriers to consumers getting the mental health care they need. The most commonly endorsed barriers were similar to consumer responses. The most commonly endorsed barrier from the provider perspective is not being able to find transportation to get to services (80%; Figure 17). Barriers related to capacity also ranked fairly high, such as the wait time being too long (65%) or the service not being available in the area (55%). Not being able to pay for services (45%) and consumers not knowing what services are available (40%) were also commonly cited.

### 17. BARRIERS TO ACCESSING SERVICES

<b>In your experience, which of the following barriers prevent consumers in your area from getting the mental health care they need?</b>	<b>% (N=20)</b>
Not being able to find transportation to get to services	80%
The wait time is too long	65%
The service needed isn't available in my area	55%
Not being able to pay for the services	45%
Consumers don't know what services are available	40%
Consumers don't know how to access services	35%
Consumers can't financially afford to take time off for treatment	35%
Consumers don't have the technology they need to access telehealth services	30%
Not being eligible for the services	25%
Consumers don't feel they require formal mental health services at this time	20%
Consumers are worried about how they will be seen/don't want to be judged	15%
Consumers are worried about the effect of services on current or future employment	15%
Consumers are worried about their family finding out	15%
Consumers don't think the service(s) will help	15%
Consumers don't have a diagnosis	10%
Consumers don't want to get exposed to the coronavirus while using in-person services	10%
The people who provide services don't speak their language/No interpreters available	5%
The services aren't culturally specific	0%
Other <sup>a</sup>	5%
None of the above	0%

<sup>a</sup> Other responses include: lack of crisis services (5%).

Providers were asked to identify the biggest barrier out of the barriers they selected. The most commonly selected barrier by far is not being able to find transportation (42%), followed by the wait times being too long (16%), consumers not being able to pay for services (11%), consumers not knowing how to access services (11%), and consumers not having needed technology to access telehealth services (11%; Figure 18).

#### 18. BIGGEST BARRIER TO ACCESSING SERVICES

<b>Of those, which is the biggest barrier?</b>	<b>% (N=19)</b>
Not being able to find transportation to services	42%
The wait time is too long	16%
Not being able to pay for the services	11%
Consumers don't know how to access services	11%
Consumers don't have the technology they need to access telehealth services	11%
The service needed isn't available in the area	5%
Other barriers <sup>a</sup>	5%

<sup>a</sup>Other responses include: lack of crisis services (6%).

Providers were asked about what they saw as the biggest gaps in mental health services. The top two most commonly cited gaps for Pine County transportation services (61%) and supportive housing (56%; Figure 19). Psychiatric services (28%), in-home supports (22%), and emergency room services (22%) were also commonly cited.

#### 19. BIGGEST GAPS IN MENTAL HEALTH SERVICES

<b>Which of these do you consider the biggest gap in mental health services and supports available to consumers in your region?</b>	<b>% (N=18)</b>
Transportation services	61%
Supportive housing (e.g., sober housing, mental health supportive housing)	56%
Psychiatric services (e.g., medications, medication management)	28%
In-home supports (e.g., behavioral aide, personal care attendant)	22%
Emergency room services or emergency mental health hold services	22%
Mobile crisis assessment/ stabilization services	17%
Inpatient counseling or treatment	17%
Respite services	11%
Adult Rehabilitative Mental Health Services (ARMHS)	11%
Mental health case management	11%
Day treatment services (adults and children)	6%
Supported employment	6%
Peer to peer support services	6%
Faith-based support services	6%

## 19. BIGGEST GAPS IN MENTAL HEALTH SERVICES (CONTINUED)

<b>Which of these do you consider the biggest gap in mental health services and supports available to consumers in your region?</b>	<b>% (N=18)</b>
Integrated Mental Health/Chemical Dependency Treatment	0%
Children's Therapeutic Services and Supports (CTSS)	0%
Community Support Program (CSP)	0%
Individual psychology services (e.g., outpatient therapy or counseling)	0%
Adult foster care	0%
Crisis telephone, text line, or warm line	0%
Group psychology services (e.g., outpatient therapy or counseling)	0%
Recovery services	0%
Other	11%
None of the above	0%

Respondents' organizations have done a variety of things to try and address gaps in mental health services in the past two years, including hiring more staff (47%), starting to offer telehealth services (47%), and opening a new location (16%; Figure 20).

## 20. ADDRESSING THE GAPS

<b>What (if anything) has your organization been able to do to address gaps in the past 2 years (24 months)?</b>	<b>% (N=19)</b>
Hire more staff	47%
Started offering telehealth services	47%
Started offering new services	16%
Open a new location	11%
Other <sup>a</sup>	32%
None of the above	11%

<sup>a</sup> Other responses include: help set up rides (5%); internships (5%); invited to join crisis services (5%); opened a drop-in center (5%); don't turn anyone away, regardless of ability to pay (5%); working on Residential Crisis Stabilization option (5%).

Providers also provided information on service capacity in their area. For most area providers and most specific groups, service capacity is limited or not available (Figure 21). Providers most commonly reported services meet or exceed demand for adults age 25 years or older (24%), but this was still a minority of providers. Providers most commonly report limited availability for people experiencing homelessness (81%), transition-age youth (76%), and children under 16 (76%).

## 21. SERVICE CAPACITY

<b>What is the service capacity of your geographic area to meet the specific mental health needs of the following groups (N=13-17)</b>	<b>Exceeds demand</b>	<b>Meets demand</b>	<b>Limited availability</b>	<b>Not available</b>
Adults age 25+	6%	24%	65%	6%
People experiencing homelessness	0%	6%	81%	13%
Transition-age youth (age 16-24)	6%	0%	76%	18%
Specific cultural or ethnic groups	0%	7%	67%	27%
Incarcerated individuals	0%	15%	69%	15%
Children under age 16	0%	12%	76%	12%

## Primary care services

Most respondents (89%) report visiting a primary care doctor in the past two years. Of those, most (93%) feel that primary care doctors are respectful of them or family members when discussing mental health topics and that appropriate mental health resources are available at primary care offices (Figure 22). Slightly fewer, but still a majority feel comfortable discussing mental health issues with their primary care doctor (80%), and feel that primary care doctors are knowledgeable about mental health services and supports (73%) and mental health topics (64%).

### 22. PRIMARY CARE SERVICES AND MENTAL HEALTH

<b>Primary care services and mental health</b>	<b>N</b>	<b>Strongly agree or agree</b>	<b>Disagree or strongly disagree</b>
Primary care doctors are respectful of me and family when discussing mental health topics	14	93%	7%
Appropriate mental health resources (handouts, pamphlets) are available at primary care offices such as clinics and hospitals	14	93%	7%
I feel comfortable discussing mental health issues with my primary care doctor	15	80%	20%
Primary care doctors are knowledgeable about mental health services and supports	14	73%	27%
Primary care doctors are knowledgeable about mental health topics	14	64%	36%

## COVID-19 and mental health services

When asked if COVID-19 made mental health services harder to access, 50% of consumers said yes. Two thirds of consumer respondents (67%) agreed or strongly agreed that COVID-19 negatively impacted their mental health, while 56% said the same of their physical health (Figure 23). Fifty-nine percent of respondents felt they were able to find enough services and support to meet additional needs from COVID-19, while about a third (33%) reported that COVID-19 negatively impacted their ability to meet basic needs.



### 23. COVID-19 AND MENTAL HEALTH

<b>COVID-19 and mental health</b>	<b>N</b>	<b>Strongly agree or agree</b>	<b>Disagree or strongly disagree</b>
COVID-19 negatively impacted my mental health	18	67%	33%
I was able to find enough services and support to meet additional needs I had because of COVID-19	17	59%	41%
COVID-19 negatively impacted my physical health	18	56%	44%
COVID-19 negatively impacted my ability to meet basic needs for myself (i.e., food or water, clothing or hygiene necessities)	18	33%	67%

### Telehealth services

Forty-four percent of respondents report receiving mental health services through telehealth in the past two years. Of those, four of six consumer respondents from Pine County had used telehealth 8 or more times (Figure 24).

### 24. TELEHEALTH SERVICE USAGE FREQUENCIES

<b>Usage</b>	<b>% (N=6)</b>
1-2 times	1/6
3-4 times	0/6
5-7 times	1/6
8 or more times	4/6

Note. There was a survey programming error that resulted in 40 respondents in total being misdirected for this question and are therefore not included.

When asked about telehealth services, 75% report that remote or telehealth services did not feel as helpful as in-person services (Figure 25). Less than half of respondents report in-person services were cancelled or postponed because of COVID-19, while roughly a third (35%) reported the services they needed were not available because of COVID-19. A majority of respondents (82%) rarely or never had issues with having the proper equipment to connect for remote services.

### 25. TELEHEALTH SERVICES

<b>Services (N=17)</b>	<b>Always or sometimes</b>	<b>Rarely or never</b>
Remote or telehealth services didn't feel as helpful as in-person services	75%	25%
In person services were cancelled or postponed because of COVID-19	41%	59%
Services I needed, even remote services, were not available because of COVID-19	35%	65%

<b>Services (N=17)</b>	<b>Always or sometimes</b>	<b>Rarely or never</b>
I did not have a device, internet, and/or data plan necessary to connect for remote services (for example, no smartphone or tablet, or not enough Wi-Fi or cell service to connect for a Zoom group.)	18%	82%

## Information about mental health services

In Pine County, the most common place consumer respondents get information about mental health services in their area is their primary care provider (72%), peers, friends, or family (50%), or online (44%; Figure 26).

### 26. WHERE RESPONDENTS GET INFORMATION ABOUT MENTAL HEALTH SERVICES

<b>Where do you usually get information about mental health services in your area?</b>	<b>% (N=18)</b>
My primary care provider	72%
Peers, friends, or family	50%
Online search engines (e.g., Google, Yahoo)	44%
Other	28%
Social media pages (e.g., Facebook, Twitter, Instagram)	17%
The Region 7E Adult Mental Health Initiative Website ( <a href="http://www.adultmentalhealth.org">www.adultmentalhealth.org</a> )	6%
My neighborhood library or community center	0%
None of the above	6%

Other responses included: case manager (12%); TSA (12%); Fasttracker MN (6%).  
Note. Respondents were able to select more than one option.

Respondents were asked about the Region 7E Adult Mental Health Initiative website. Overall, 11% of individuals report having visited the website (Figure 27). Seventeen percent knew (prior to receiving the survey) that the website was a place to get information on mental health services.

### 27. WEBSITE AWARENESS

<b>Website awareness</b>	<b>% (N=18)</b>
Have visited the Region 7E Adult Mental Health Initiative website	11%
Knew the website was a place to get information on mental health services prior to receiving the survey	17%

## Key findings

- **The majority of consumers feel they have the support they need to keep themselves safe and stable.** A majority of respondents have used mental health services in the past two years. A majority of them report being satisfied with the services they received, and that these services have helped them improve a variety of aspects of their lives, as well as avoid in-patient psychiatric hospitalization.
- **COVID-19 made services even harder to access.** Several respondents describe services as difficult to obtain anyway. Half of respondents felt that COVID-19 made mental health services harder to access.
- **Consumers most commonly get information about mental health services from their primary care provider, friends and family, and from online searches.** A few consumers have used the Region 7E Adult Mental Health Initiative website to look for available services in their area, but a majority of consumers are unaware of the resource.
- **Less than half of Pine County consumers had used telehealth services.** Those that had used telehealth report using the services often. A majority of telehealth consumers report that services did not feel as helpful as in person services.
- **For most area providers and most specific groups, service capacity is limited or not available.** The majority of providers identified limited or no capacity for all groups listed.
- **Similar barriers to accessing mental health services were provided by both consumers and providers.** Common barriers endorsed by both groups included: not being able to pay for services, wait times being too long, the service needed isn't available in the area, not being able to find transportation to get to services, and not knowing what services are available.

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