



Anaconda -
Deer Lodge
County

Community Mental Health Needs Assessment Commissioners Report

OVERVIEW:

The Anaconda-Deer Lodge County Public Health Department in collaboration with Healthy Montana Families and Megan Rediske, MSN, RN conducted a survey of mental health needs and services in Anaconda-Deer Lodge County (ADLC) in July 2018. The deadline for participation was August 3, 2018, and the survey is now closed. A total of 208 residents responded to the survey.

The survey was based off the 2015 Madison County Mental Health Needs Assessment which was developed by Boise State. The goal was to gather ADLC resident's input and impressions on the current state of mental health services and needs in the community. **The focus of the questions was local perceptions of a mental health services.**

The survey was made available on line through the link <https://www.surveymonkey.com/r/ADLCMH> or in paper format. Drop boxes were made available at key locations in town (ADLC Public Health, Anaconda Housing Authority, Metcalf Center, Community Youth Center, etc.). In person events were held at the Metcalf Senior Center, Anaconda Community Market, and Smelter City Brewery to promote the survey.

Residents 18 years and older were asked to participate. They had the right to answer only the questions they wished to answer and were assured that only the research team would have access to the responses.

PERCEPTIONS OF SERVICES:

Because the main focus on the questionnaire was to assess county members' perceptions of ADLC Mental Health services, multiple question formats were used to gather this information. Three multiple choice questions, two open-ended comment questions and one Likert scale with nineteen questions were used to acquire this information. Multiple concerns were discussed, but the main themes presented are:

- Limited or lack of services
- Suicide
- Substance abuse
- Need for mental health services in schools
- Negative impact of budget cuts and closure of the Anaconda Western Montana Mental Health office
- ADLC residents' safety and visibility of mentally ill in the community

Individual perceptions of **lack of services** was one of the strongest themes from these questions. In the open-ended questions 3 and 4, the majority of the comments surround a generalized statement that no or limited services exist. These comments included “I work in healthcare and see people in need to mental health/case management services on a daily basis” and “Very few services available.” More specific comments included statements on the lack of coordinated services, case management, providers, prescribing services and funding concerns. Out of the two questions, twenty-seven percent of them commented on this trend.

A disconnect exists with the lack of services comments and the data. For scale questions, 81 % of individuals state they disagree or strongly disagree that the mental health needs of ADLC are being adequately met. However, 43 % of respondents said they strongly agree or agree that they feel comfortable seeking mental health services. Also, 43 % of individuals said they strongly agree or agree that they know where to seek help for mental health concerns.

One possible explanation for this disconnect could be that most residents (81 %) feel mental health needs are not being met; while the 43 % who responded positively on knowing where to get services and their comfort in seeking services are actually residents who have sought mental health services. There is no way to verify whether this is true or not because of the anonymous nature of the assessment.

Another two data questions, however, reiterate individuals concerns with the perception of no to limited services in the community. Fifty-four percent of respondents state they strongly agree or agree that they know one or more resident who have been unable to access the mental health care the need. Responders also strongly disagreed or disagreed that there are adequate affordable mental health resources for low income residents. Fifty-eight percent of individuals responded in a negative way to that question.

When asked to select up to five mental health care services that they think are needed to better serve ADLC, the top answer overwhelming was mental health services provided by a professional (73 %). The second highest answer was the need for a crisis facility (54 %). The same trend occurs in the previous question of what are the most concerning mental health topics. Again, the top answer was mental health provider/specialist (66 %). Access to mental health services was a close second with 65 %.

Suicide and substance abuse were also mentioned as concerns for the ADLC County. Comments like “Too many suicides occur in anaconda,” “I have lost family to suicide. I have lost family to alcoholism. Drug addiction has also been a problem.” and “The suicide rate, drug problems, etc. are horrible” were just some of the answers for the open-ended questions.

Both suicide and substance abuse ranked high with mental health topics individuals are concerned with. Suicide was number three with 51 % and substance abuse was number five with 47 %.

The comments echo the data questions surrounding suicide concerns. Seventy-eight percent of respondents stated they knew someone who had committed suicide, and 52 % of respondents would consider themselves a survivor of suicide (someone who has lost a friend, family member or other loved one to suicide.)

Similar to the topic of lack of services, a slight disconnect exists with the data collected for individuals responses to the scale questions surrounding substance abuse. Thirty-seven percent of the respondents state that they strongly agree or agree that they know where to seek

help for substance abuse concerns. Thirty-five percent said they disagree or strongly disagree on this same question.

As with the topic of services here too could indicate that of those who may be in need of substance abuse services, 37 % know how and where to access those services. The 35 % who responded that they do not know to access services may not have a need for such services. Again, it is not possible to verify the validity of this supposition due to the anonymous nature of the assessment.

The need for better mental health services in the schools was also mentioned.

Respondents wrote “suicide in children in the community is too high and needs to be combatted,” “As someone who works with the school district, we have a number of families with children who need support services.” and “Our hospital's ER nurses have several school suicide case in the hospital every week. If we can not keep our young people happy and safe, how can they expect to grow up to be solid citizens in a community?”

The data questions reinforced the comments. Fifty-nine percent of responders strongly disagreed or disagreed that local schools have adequate mental health services. For children eleven years old and younger, 56 % stated they strongly disagree or disagree that this group has adequate mental health services. The same trend exists with the youth (12-18). Sixty percent strongly disagreed or disagreed that mental health services are adequate for this group.

The **recent cuts of the budget and closure of the Anaconda office of Western Montana Mental Health** (WMMH) were commented on. For the closure of WMMH, individuals were concerns about transportation and having to drive to Butte. Quotes like, “Because of budget cuts, more and more people are only getting marginal care” express the concerns at the legislative level.

Anaconda community's safety and the visibility of the mentally ill are two other themes. Individuals wrote, “I fear for my children's safety and friends and family also.” “Right now some are wandering the streets, others are unsure how to get their meds and others really just need someone to talk to.” and “People are out on the street who can't take care of themselves.”

The recent budget cuts, the closure of the Anaconda office of WMMH and concerns about community safety were not asked in a Likert scale format to gather numerical data.

PARENTS AS TEACHERS:

The data for the perception surrounding the Parents as Teacher's supports that most residents of ADLC do not know of the program. The direct question of if they have heard of it showed that 75 % of respondents have not. When asked if they knew anyone enrolled in the program, 90 % responded with a “No” or a “N/A.” Fifty-nine percent of individuals answered with a N/A for the question of how likely would they recommend the Parents as Teacher's program. N/A was also the highest answer (75 %) for how did the individual hear of the program.

DEMOGRAPHIC INFORMATION:

Ten questions were used to define demographic information.

Main themes: The demographics questions revealed that the respondents were full-time residents (93 %), female (75%), and not veterans (93 %). Ninety-four percent of respondents

had health insurance. Overwhelming, private insurance was the main type of insurance with 54 % of individuals. Fifty-one percent of respondents were employed for wages, and 25 % were retired.

Annual household income varied:

Individuals making less than \$25,000 per year were 35 % of respondents.

Individuals making \$25,000-\$49,999 per year were 27 % of respondents.

Individuals making \$50,000-\$74,999 per year were 20 % of respondents.

Individuals making \$75,000-\$149,999 per year were 16 % of respondents.

Individuals making more than \$150,000 per year were 2 % of respondents.

The age range varied.

Individuals 18-25 were 7 % of respondents.

Individuals 26-40 were 22 % of respondents.

Individuals 41-55 were 25 % of respondents.

Individuals 56-70 were 33 % of respondents.

Individuals 71-85 were 12 % of respondents.

Individuals 85 + were 1 % of respondents.

Marital status varied.

Never married individuals were 17 % of respondents.

Married individuals were 42 % of respondents.

Divorced individuals were 20 % of respondents.

Widowed individuals were 11 % of respondents.

Separated individuals were 1 % of respondents.

Cohabiting individuals were 7 % of respondents.

Educational level varied.

Individuals who had some high school were 3 % of respondents.

Individuals with a high school degree with were 17 % of respondents.

Individuals with some college or some technical school were 29 % of respondents.

Individuals with an undergraduate or technical school degree were 17 % of respondents.

Individuals with a graduate or professional degree were 34 % of respondents.

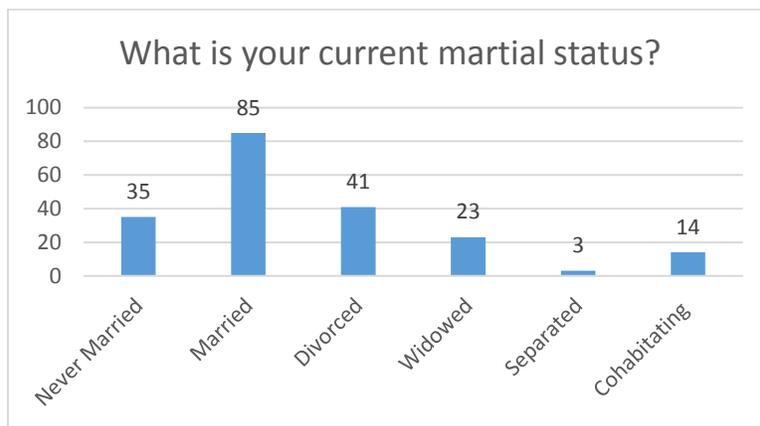
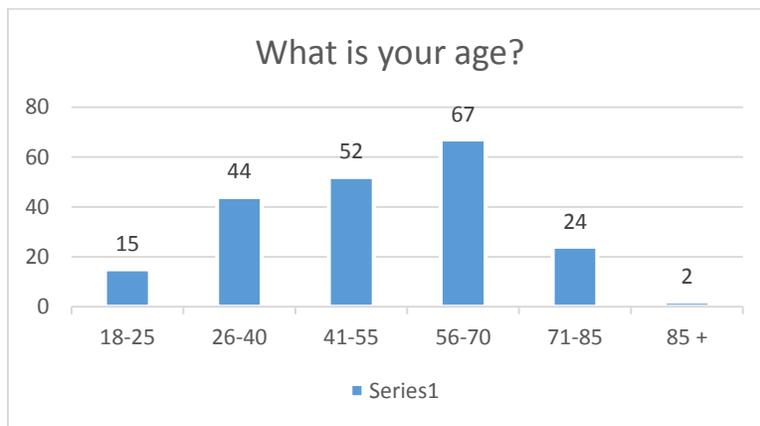
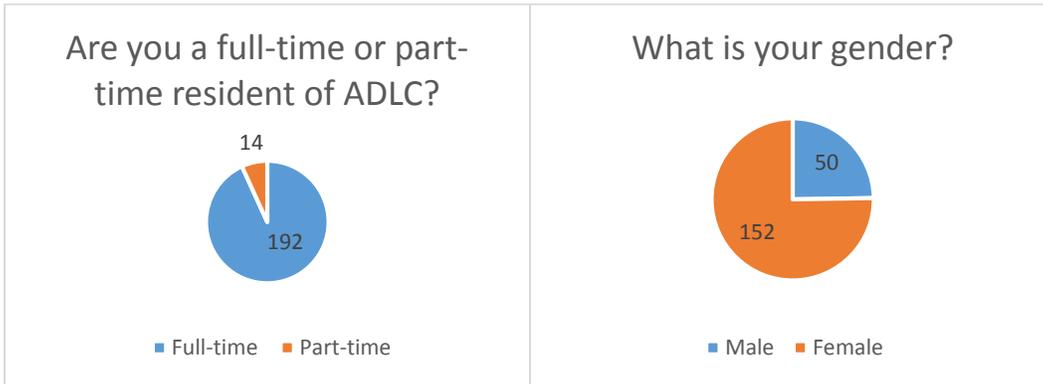
Specific mental health demographic information revealed that 55 % of the respondents had a family member with a diagnosed mental illness. Thirty percent stated they had a diagnosed mental illness, and 14 % of the respondents believed they had an undiagnosed mental illness.

UPDATES FROM THIS ASSESSMENT:

Access to providers, especially for those without transportation, is a growing concern in the community. The Public Health Department and the Board of Health are looking into creating a “tele-psych” at the health department which could provide access to professionals at other locations such as WMMH offices in Butte.

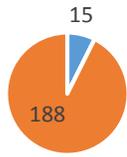
It is recommended that a long-term planning on ADLC County’s mental health topics focus on improving access to services to focus on suicide and substance concerns.

DEMOGRAPHIC GRAPHS:



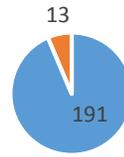
ADLC Community Mental Health Needs Assessment

Are you a veteran of the US Armed Forces?



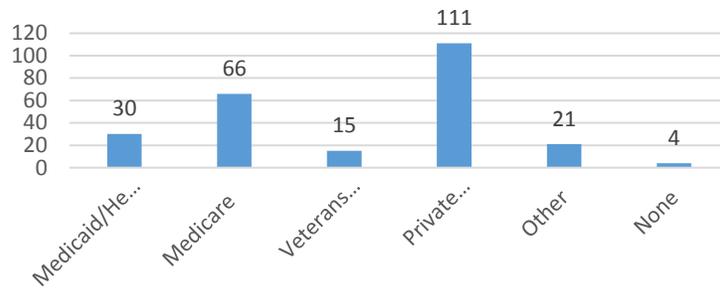
■ Yes ■ No

Do you have health insurance?

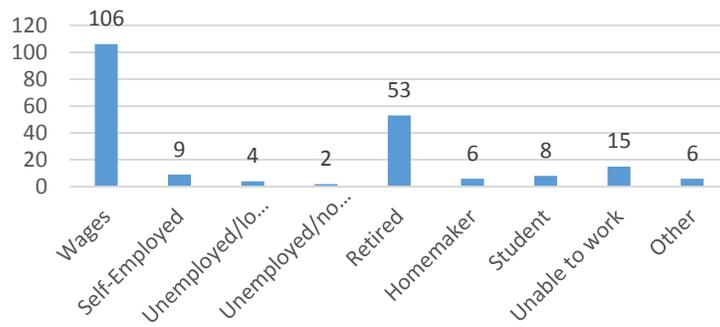


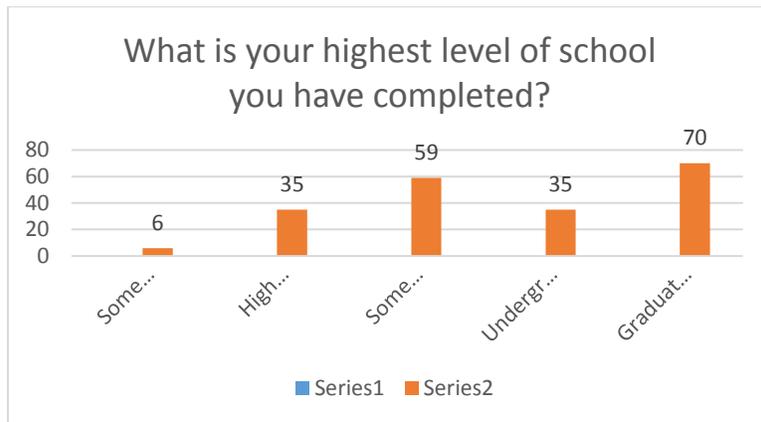
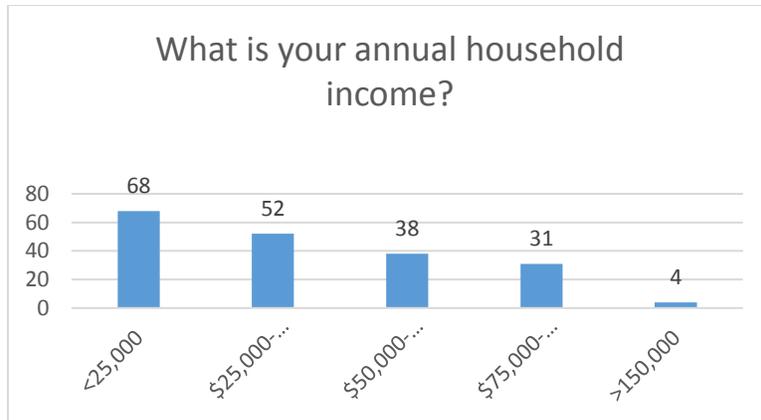
■ Yes ■ No

Please select the types of health insurance you have

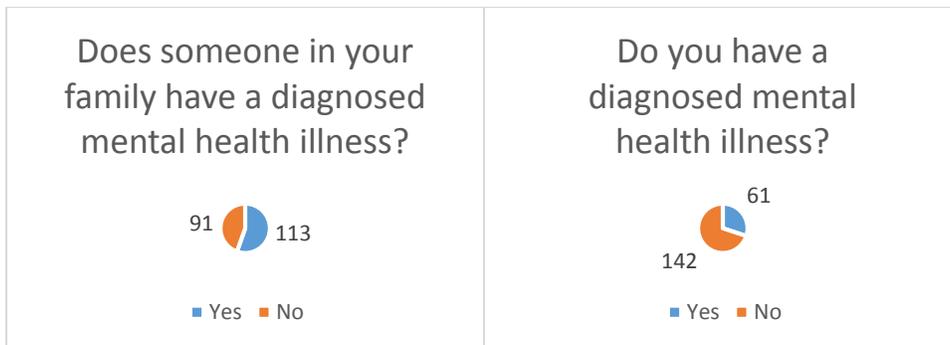


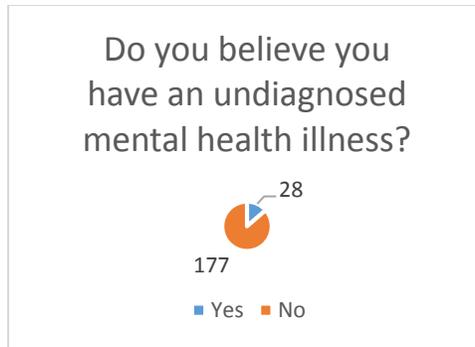
What is your employment status?



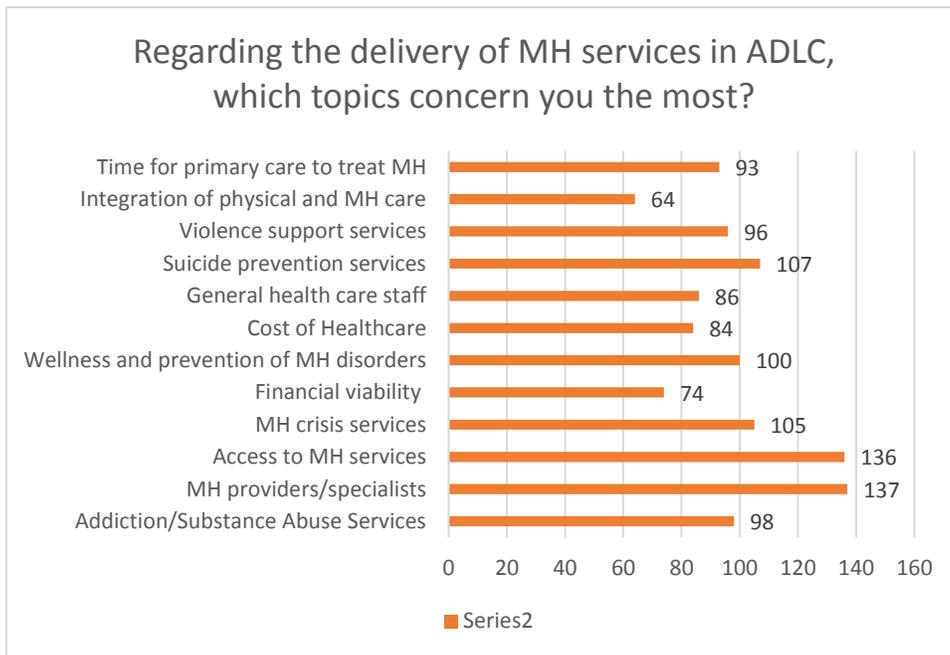


MENTAL HEALTH DEMOGRAPHIC INFORMATION:



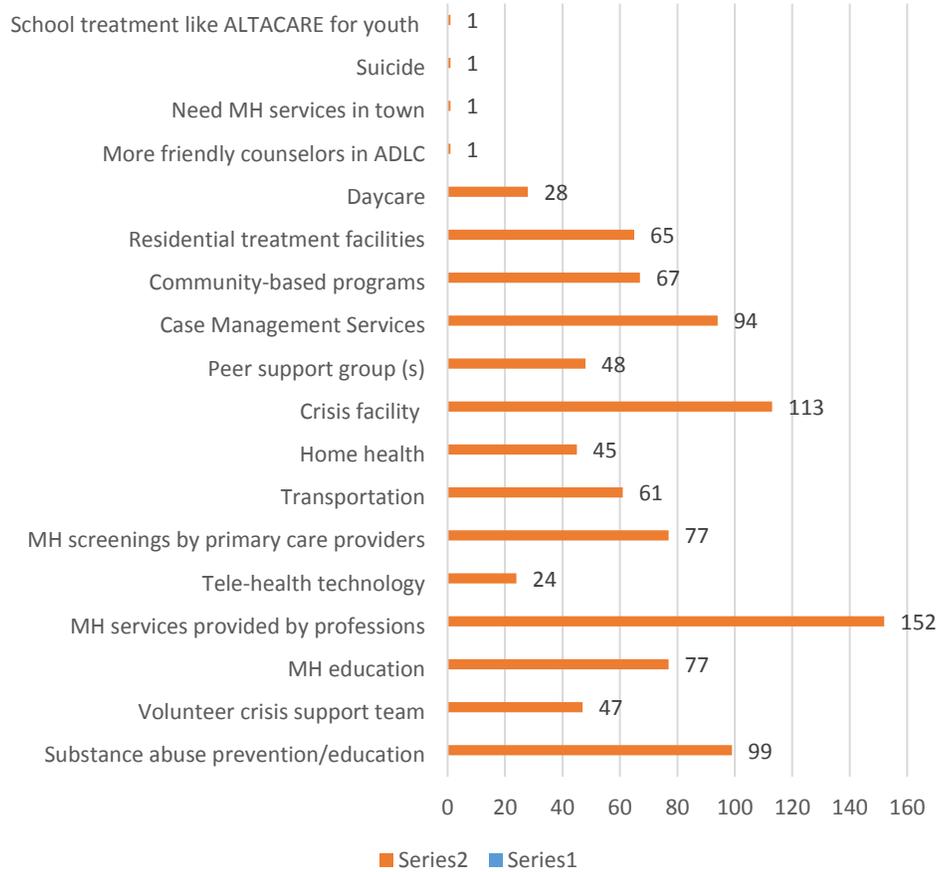


PERCEPTIONS OF SERVICES MULTIPLE CHOICE QUESTIONS:

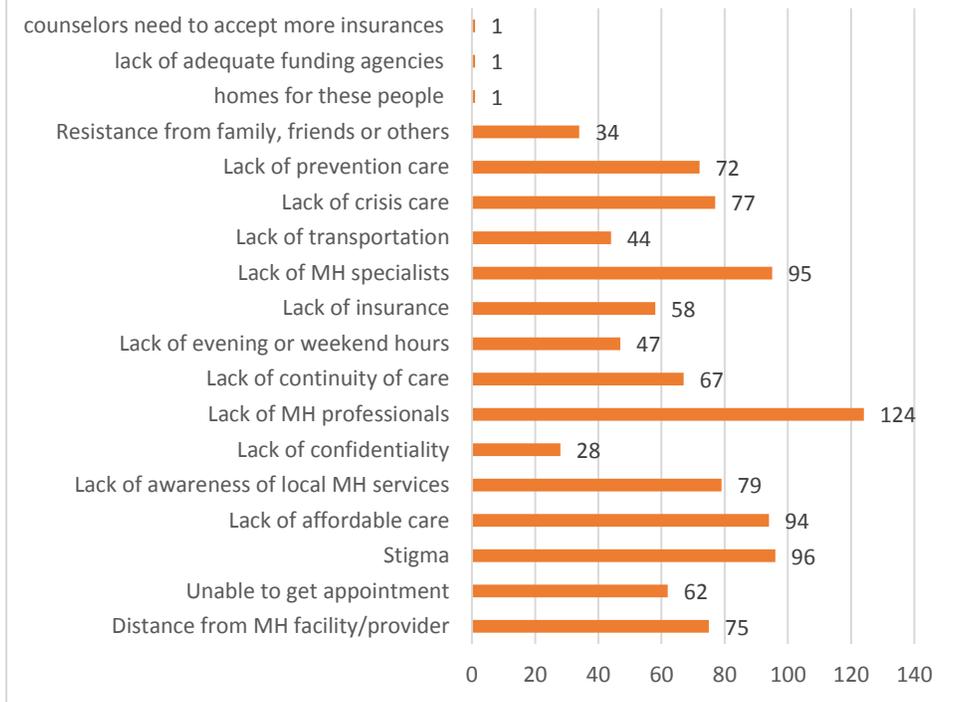


ADLC Community Mental Health Needs Assessment

Please select up to 5 MH care services that you think are needed to better serve ADLC?

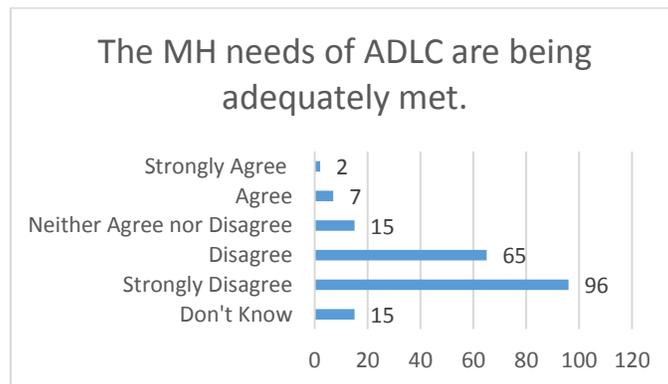


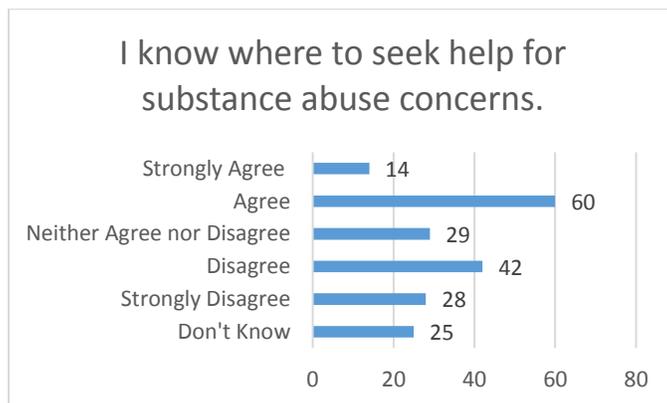
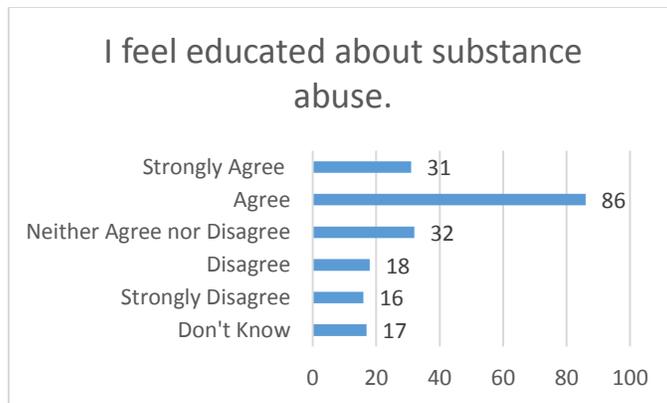
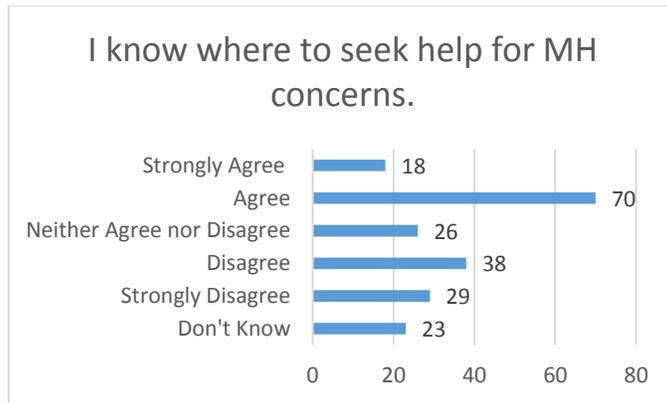
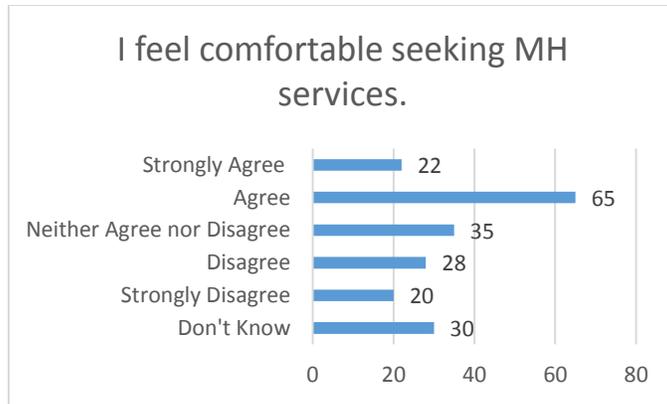
What do you consider to be the top 5 barriers that prevent ADLC residents from receiving MH care?



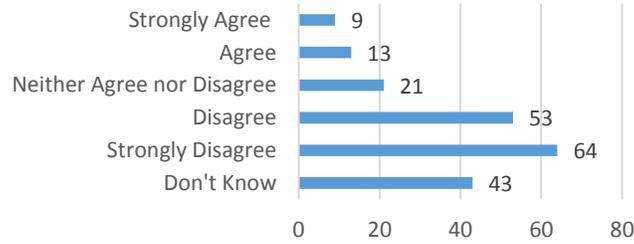
CARE AVAILABILITY AND UTILIZATION:

The MH needs of ADLC are being adequately met.

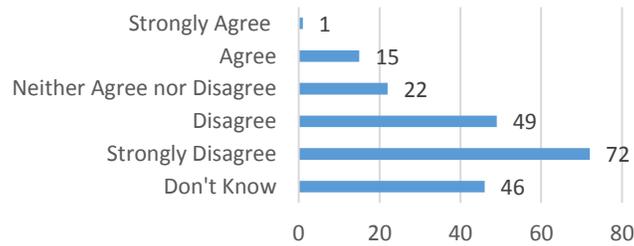




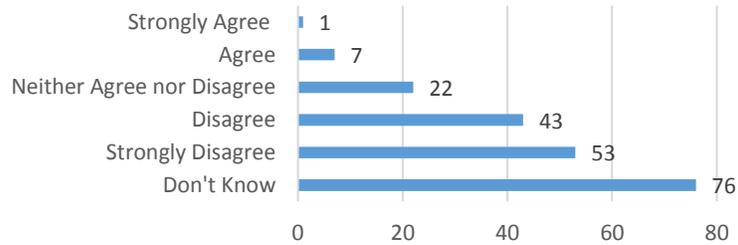
Veterans have adequate resources for their MH concerns.



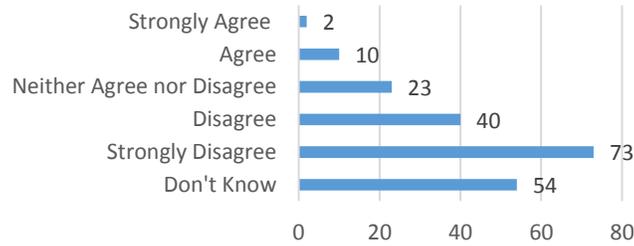
Local schools have adequate MH services.

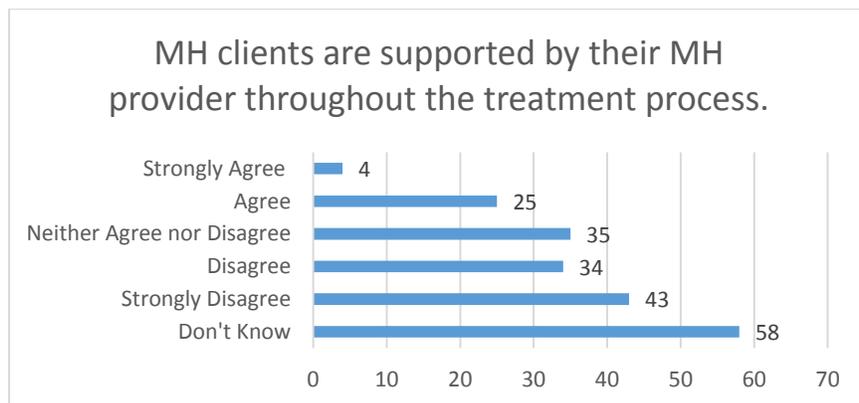
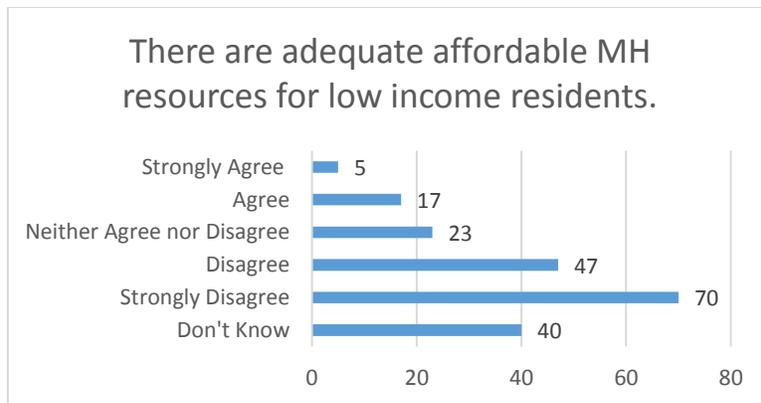
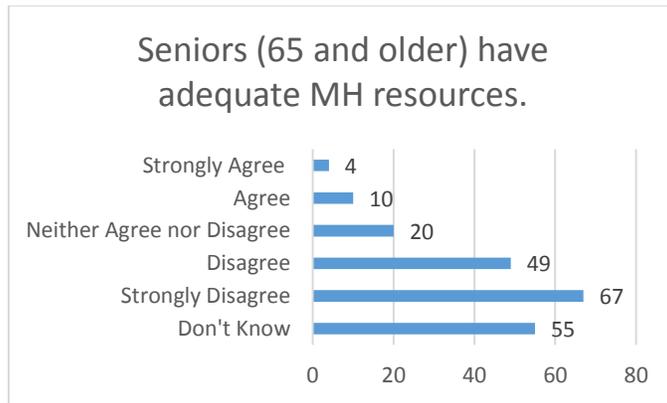
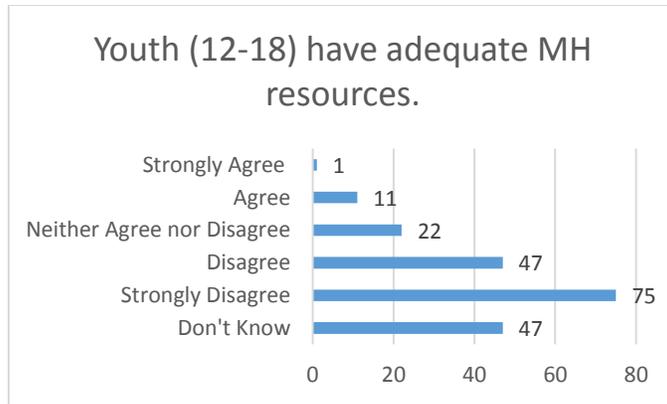


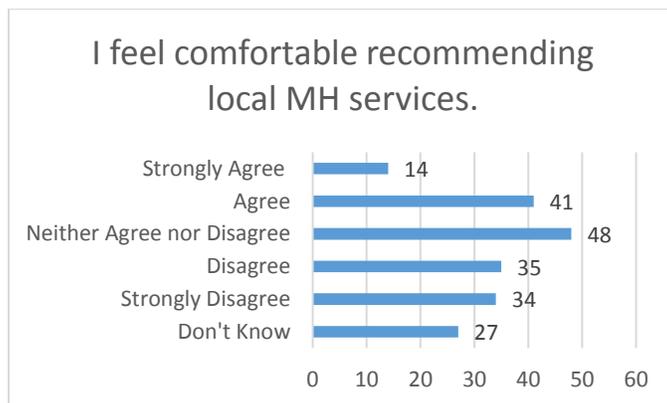
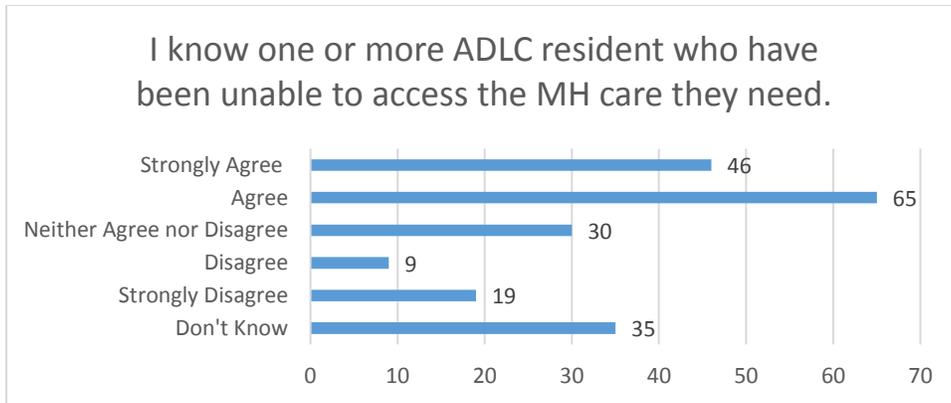
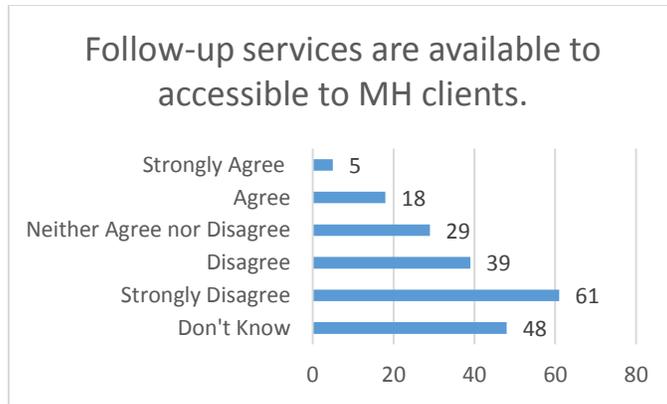
Local nursing homes and assisted living facilities have adequate MH services.

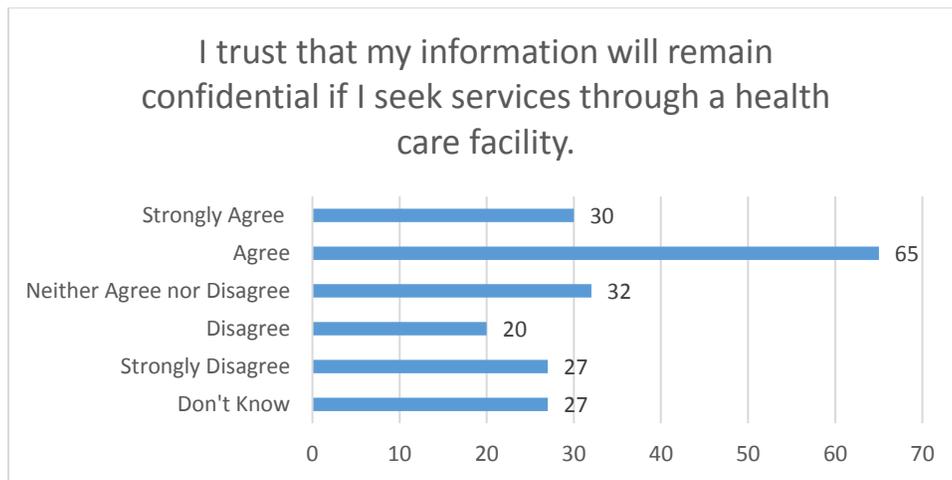
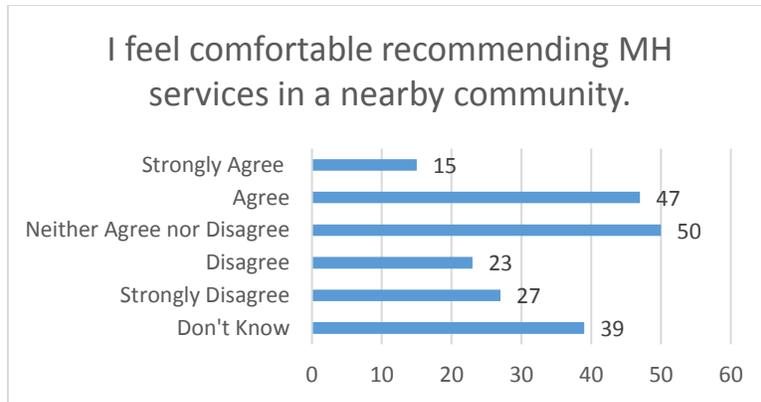


Children (11 and younger) have adequate MH resources.







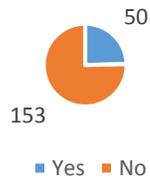


SUICIDE INFORMATION:

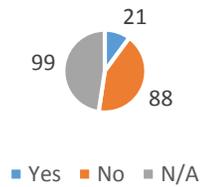


PARENTS AS TEACHERS INFORMATION:

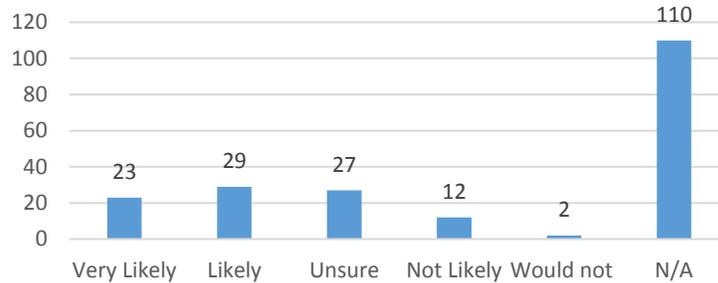
Have you heard of the Parents as Teacher's Program (PAT)?



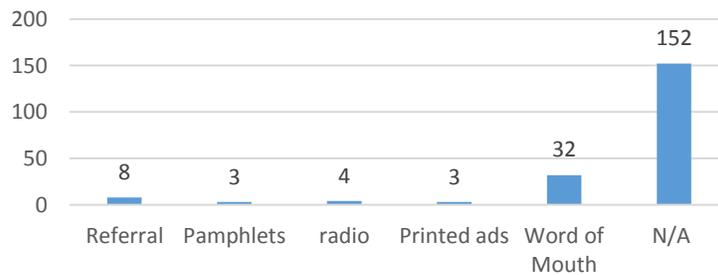
Do you know someone who is enrolled in the PAT program?



If you have heard of the PAT program, how likely would you be to enroll or recommend someone to this service?



If you know of the PAT program, how did you hear about it?



Summary of ADLC Mental Health Needs Assessment Comments:

*Note: Due to the confidential nature of the survey, a summary of the topics of the survey comments are provided, not the entire transcript. The transcript of the open-ended questions three and four is being analyzed deeper by for the research team. They will be applying the qualitative descriptive inquiry method to this data. Due to the time-consuming nature of this analysis process, the results analysis will be completed sometime in early 2019.

2 – Regarding the delivery of mental health services in Anaconda – Deer Lodge County, which of the topics concern you the most...comments:

- 23 – People are in need of services, but there is nowhere for them to go
- 15 – Lack of Coordinated Services/Case Management
- 13 – Lack of providers/prescribing services
- 8 – Funding concerns
- 6 – All of the above are important
- 6 – Suicide (in general and in young people)
- 5 – Lack of adequate crisis care, expect in the ER
- 5 – Transportation Concerns
- 5 – Need to get Mental Health off the streets/increased visible demographic
- 3 – WMMH is closing its doors requiring young people to Butte
- 3 – Cost
- 3 – Substance Abuse concerns
- 2 – Stigma
- 2 – Mental Health services are considered secondary to medical needs
- 2- Advocacy with government for mental health services
- 1 - Budget Cuts = more on the streets and more at MSH
- 1 – Mental Health/Chronic Pain
- 1 – Mental Health Treatment Centers
- 1 – “Elimon dating mental health services is a great concern to me.”
- 1 – Need certified counselors that accept different insurance
- 1 – Important that my primary care giver treats mental health concerns
- 1 – Local services for Anger Management (court ordered counseling)
- 1 – Nearest “resource” is MSH
- 1 – have MDs, not just NPs and PAs
- 1 – Support Groups
- 1 – Competence
- 1 – Suicide Prevention Hotline
- 1 – Trust in institutions and providers is declining
- 1 – Personal connection with people with mental health concerns
- 1 – Time to successfully diagnoses and rule out mental illness
- 1- Guessing which medication for mental health illness
- “Mediocre providers are worse than none.”
- “Many in our county I feel like nobody is aware of the help they can receive or it is hard to find someone to help apply for assistance. We have an abnormal amount of Mental Health needs that nee to be addressed.”

3. How do your greatest mental health concerns impact you or the people you know?

- 17 – Lack of providers/prescribing services/professionals
- 17 – People are in need of general services, but there is nowhere for them to go
- 13 – Suicide in general or children's suicide
- 12 – Substance Abuse Concerns
- 10- Cost/Funding Concerns
- 9 – Children's mental health services
- 9 – Mental Health affects the mentally ill daily lives
- 9- Transportation Concerns
- 9 – See mentally ill or "needy" people at various locations in town/general concerns about them in the community
- 8 – List of Mental health disorders, ex. Depression, Anxiety, PTSD
- 6 – Safety concerns for community
- 3 – Haven't thought about it/not very much/not concerned
- 3 – Case Management services needed
- 3 – Physical health concerns related to mental health concerns
- 3 – Close proximity to MSH/Danger people being released
- 3 – Abuse/Neglect of children/Domestic Violence
- 2 – Therapy needed
- 2- Alcoholism
- 2 – Interferes with functioning/Ruined lives
- 2 – Not being able to take to people about concerns
- 2 – Stigma
- 2 – hurt families/friends due to mental health concerns
- 2 – Lack of treatment centers/staff
- 1- Loss of employment
- 1 – Poor Relationships
- 1 – We are all connected to people who have problems
- 1 – People need more than just medication
- 1 – Long waits for CRT
- 1 – When services are made available, the stigma decreases
- 1 – Lack of Health insurance
- 1 – Afraid of HIPPA violation in a small town
- 1 – Schools are overwhelmed with MH concerns in children
- 1- Some need more help than others
- 1 – Family members who suffer from mental health concerns
- 1 – Spend more on incarceration instead of prevention in the US, not only in ADLC
- 1 – Narcissism/Psychopathy continuum where the "target" or victim is regarded as unworthy and receives no aid
- 1 – Continue to believe alcohol/aggression are OK
- 1 – People with mental health concerns are victims as other are seeking their medication
- 1 – Don't know when it is time to receive help
- 1 – Lack of knowledge of services and how to pay for them
- 1 – Legalizing marijuana is going to make things worse
- 1 – Greatly
- 1 – People miss events/work

- 1 – Family support services needed
- 1 – Education surrounding mental health concerns

Only place to get services in the ER, they provide good care, but no outpatient care

“People are going to die because of these cuts.”

“Anaconda is growing, and we need to invest in these people.”

“Just want to know that there is help.”

“Mental health impacts the entire world we live in.”

“Unable to receive intergraded, continuous treatment.”

4. In your opinion, how do your greatest mental health concerns impact Anaconda-Deer Lodge County residents?

41 -People are in need of general services, but there is nowhere for them to go

18 – Increased crime/violence/safety concern

16 – Suicide concerns

11 – Substance Abuse concerns

10 – Lack of providers/prescribing services/professionals

6 – Not sure/haven't thought about it/Don't care

6 – List of Mental health disorders, ex. Depression, Anxiety, PTSD

6 – Cost/ Funding

5 - Case Management/Outpatient services

5 – Abuse/Neglect Children/Domestic Violence

4 – It impacts the entire community

3 – Stigma/Misunderstanding

3 – Homeless concerns

3 – Transportation concerns

3 – Close proximity to MSH

3 – Lack of crisis care

3 – Greatly/largely

2 - May raise property taxes/emerging costs go to tax payers

2 – Worked missed

2 – Not participating in the community/non-productive citizens

2 – Drain/Burnout

2 – Severe

2 – Cycle of Addiction and Abuse

2 – Inadequate prevention/screening

2 – Little counseling/therapy

2 – Isolation/Lost feelings

2 – Impacts the community economically, people don't want to live here

1 – Mental health individuals don't have a place to live, function in the community

1 – Housing concerns

1 – Doesn't advertise services well

1– Children's mental health

1 – Pay more for patient care if services are lost

1 – Individuals using mental health system for the wrong reasons so those who actually need it can't access it

1 – This town avoids/bullies these problems

- 1 – People do not seek treatment
- 1 – Closing of MSH/Galen
- 1 – It determines the society we live in
- 1 – Lack of empathy/entitled judgement against anyone “lesser”
- 1 – Becoming isolated
- 1- Self-medication options available
- 1 – We’re like a family
- 1 – More collaborative efforts by health care organizations
- 1 – Police department may need more help
- 1 – Providers/Staff not being nice, people going to other services
- 1 – Poor Mental Health = Poverty
- 1 – Not having suitable clothing for them during the seasons
- 1 – Mining/Drinking culture
- 1 – Make the community more accepting of people with mental health concerns
- 1 – Burden on the community
- 1 – We all impact each other
- 1 – People with mental health issues
- 1 – End up at the hospital, MSH, or jail
- 1 – Loss of Productivity
- 1 – Undiagnosed or untreated mental health
- 1 – Hospital doesn’t want to help with mental health
- 1 – Negatively
- 1 – Bullying at school / same-sex concerns in the bathrooms
- 1 – Mentally ill are not healthy

Being bothered by them downtown

Kids are being effective, schools isn’t a priority our held highly

Mental health issues are a tremendous drain on hospitals, doctors, police, fire department and our taxpayers.

Lots of depressed attitudes and a very persuasive situation of people seeing suicide as a choice against mental pain.

“There are too many people with mental health issues wandering town.”

“Anaconda is no different than any community. Every community has people that need help.”

Kids suffer more, can’t handle problems and end up incarcerated

5. Please select up to five mental health care services that you think are needed to better serve Anaconda-Deer Lodge County residents?

10 - People are in need of general services, but there is nowhere for them to go

5 – Funding/Cost concerns

5 - Lack of providers/prescribing services/professionals

4 - Case Management/Outpatient services

3 – Transportation Concerns

2 – All are important

2 - Close proximity to MSH concerns

2 – Solutions are not ideal, but better than nothing

- 1 - Concerns about rental issues
- 1 - Need people to really care about this topic, not just the many who made this
- 1 - We have home health, basic mental health education and peer support now
- 1 - Need more collaboration between health care services
- 1 - A suicide prevention hotline that's easy to find and call
- 1 - Mental health is a health care void
- 1 - Substance abuse should be emphasized at ALL grad levels
- 1 - Transportation concerns connected to the stigma of using that transportation
- 1 - Substance Abuse treatment centers
- 1 - Better public health department
- 1 - Professionals are afraid of becoming homeless
- 1 - Improved crisis services
- 1 - Increased school based professionals
- 1 - Increased mental health services in schools that are not tied to insurance
- 1 - Law enforcement
- 1 - Doing well in education of prevention of substance abuse
- 1 - Residential facilities
- 1 - Residential Treatment facilities
- 1 - Feedback centers for public within government for workplace violence
- 1 - Early childhood prevention/identification
- 1 - Lack of community support
- 1 - Housing/Meals
- 1 - Suicide Crisis evaluations
- 1 - Youth Therapy
- 1 - Continuity of care needs to improve
- 1 - Youth are sent out of town and have to wait for a bed here, ineffective use of medical costs and delays treatment
- 1 - Stigma concerns
- 1 - Cost of medication concerns
- 1 - Volunteers can only do so much
- 1 - More school based Interventions
- 1 - Staff at the hospital and mental health offices need to keep their mouths shut
- 1 - Civility and respect need to be addressed and value on these
- 1 - Programs (training, services, awareness) for domestic violence
- 1 - Assessment facility
- 1 - Quality daycare is scarce

“education for the public and citizens of Anaconda who the most contact on a daily basis with the mentally ill. i.e., housing/landlords, police, EMTs, Fire Department, business owners, and County officials (who often times state " why do you hose them/let them in or employ them" they need education to teach them that mentally ill persons have rights to housing and employment.”

“The budget cuts are soon going to blow up in the countys face and they are going to be forced to use funds to help these folks.”

“I think they all need to be looked in to and get these folks taken care of.”

“We definitely don't need more AWARE services. This just brings more of these issues. I don't like that Anaconda caters to so much of this. We need support for the people who live and pay

taxes in this community as well.”

“Since the recent cutbacks in mental health funding I have observed a rise in the number of under-treated mentally ill people on the streets of Anaconda.”

“I never even thought I had mental health issues until I started work at the montana state hospital and could relate to some of the patients”

6. What do you consider to be the top 5 barriers that prevent Anaconda-Deer Lodge residents from receiving mental health care?

7 – No Services / Harder to get

7 – Concerns with payment/reimbursement system and affordability

5 – Concerns with closure of WMMH

4 – Transportation concerns

3 – Concerns about getting appointments

3 – Confidentiality concerns/Mistrust

3 – Payment/Insurance concerns

2 – Cliques/Stigma

2 – No Money / Cuts made by the governor

2 – Lack of Providers

2 – Lack of Addiction counselors

2 – Overworked/underpaid/overwhelmed professionals

2 – Children’s crisis mental health concerns

1 – Drug use not being addressed

1 – Better corporative planning across agencies/providers

1 – Concerns with clinic making people feel degraded or insignificant

1 – Substance abuse education to prevent substance abuse

1 – Lack of training on specific mental health models in organizations

1 – Potential lack of knowledge of mental health services

1 – Culture of chemical dependency

1 – Hostile work environment concerns

1 – Unfunded services

1 – Help

1 – Have compassion for patients

1 – Education about the stigma

1 – Lack of availability to look at crisis situations

1 – No state money to support services

1 – Afraid to be looked at differently

1 – Subjective providers

1 – Aggressive prohibitionist political agenda

“Anaconda is an economically suppressed community and support is needed on multiple facets.”

“Where is mental health care provided for ADLC?”

“If we are going to advocate for the mentally ill to have the right of living independently than we need to make it possible for them to have the are they need to live well. Neglecting the needs of those living with mental illness only makes life harder for them and everyone living with and around them.”

7. Care Availability and Utilization: Regarding the mental health services available to Anaconda-Deer Lodge County, please indicate your level of agree with the following statements.

Comments:

- 10 – Mental health services decrease due to WMMH closing
- 7 – Confidentiality concerns
- 3 – No concerns about mental health
- 2 – Lack of providers
- 2 – No local mental health services anymore
- 1 – Transportation concerns
- 1 – Receptionist is horrible at WMMH
- 1 – My primary healthcare provider is helpful
- 1 – Don't know where to send people in crisis or for ongoing services
- 1 – No health care in ADLC
- 1 – Where is the care
- 1 – Concerns that the survey didn't ask about 18-65 year olds
- 1 – Stigma concerns
- 1 – Don't know options
- 1 – Anaconda is underserved
- 1 – Everyone should receive services when they need them
- 1 - People get lost in the process
- 1 – Lack of information getting to the correct places
- 1 – Improved mental health education
- 1 – Elderly CRT concerns
- 1 – Lack of services putting vulnerable populations at risk
- 1 – Cut back or overloaded services are worth referring people to

“there are too many questions that I don't where to find the answer. WMMH did have some answers, but I don't even know where to look now.”

“I have no problem meeting my own needs it is others in the community who suffer.”

“I work mostly with youth, so I don't know the answer to most of those questions.”

“We tend to talk a lot in this community without much follow through...we don't really appear to operate as a community but more simply as individuals struggling to co-exist.”

“Dumb place for comments when there were so many issues.”

“The system does not allow for people to get help they need unless they are suicidal or break the law.”

General Comments:

“Restoration of services recently cut in the community needs to occur for the wellness of the community. Expansion of services would be wonderful but there aren't funds adequately available for limited services now. Our legislators need to be made aware of the importance of their support to adequately fund mental health programs\providers.”

“I have worked in the medical field for 31 years and I know how difficult it can be to get our patients into a counselor then a psychiatrist in order to get patients their medications and community services to help them be stable in the community.”

“MY life has not turned out how I anticipated the it would. I feel like I've been taken advantage of and I have contemplated suicide.”

"The loss of mental health services in the Anaconda community has been a significant negative occurrence. Individuals that once had a fairly comprehensive service array now have minimal therapy services available locally. Psychiatric care is going away locally again. Accessing services in Butte is possible but many do not have transportation to be able to do this."

"Thank you for assessing the mental health needs of our community and striving to improve them."

"lack of health care providers makes it difficult to seek help or ask for help"

"Thank you for your impact on helping our community."

"My answers were based on a combination of the many years of wonderful care I have received here in Anaconda along with the notification of the WMMHC will no longer be operating here in Anaconda. I can only foresee the impact of no longer having this clinic available here to me because I can not speak for other's I filled out this survey knowing that my opinion good or bad will have no impact on the fact that we no longer have a clinic and also that I personally believe these survey's are meant to make you think someone is going to take into consideration what you have to say and to be able to do something about it But the fact is I may be Bipolar but I am not ignorant nor do I expect anything to change as a result except for those who will (without any quilty thoughts) or further action will be able to say I tried I do want to thank you for allowing me to have a voice, not that it will do any good but I can say without a doubt I did try but my words fell on deaf ears"

"This administration doesn't give a shit about mental health, addiction or the poor."

"I hope you get some useful information but I am not sure this type of survey will be effective."

"how many residents do you think can respond to this survey with a home computer?"

"Anaconda has demonstrated very positive health care growth guided by the hospital. Mental health services are more vulnerable due to State of Montana budget cuts and the undermining of the Affordable Care Act. Western Montana Mental Health Center provided a base of support that offered basic stability and local mental health and substance abuse providers complimented that base. Unfortunately, services are now over stretched as a result of WMH cuts."

"I hope help is got for these people."

"Please feel free to contact me further if you are interested. I have been collecting data and presenting to the school board for the past few years to emphasize the issue with suicide and suicidality within district and community."

"There are not available mental health care in anaconda. Current mental health counselor is incompetent"

"As a retired provider I am appalled by the states lack of support for a once strong, healthy outpatient support system for people who suffer from serious mental health issues. It is a crime."

"we need mental health facilities close by"

"I am not interested in raising additional taxes or fees for mental health"

"I believe that bullying of all ages is a factor in the increase of suicide and mental health issues with our youth. Many of the children have parents who are also bullies. The schools and youth programs need to find a core values program so that we can teach our children that we are all the same and that deep down we all have the same values: to be loved, to be safe...Maslow's hierarchy of needs."

"Money plays a huge role in one's outlook. I have found State workers to occasionally be rude and critical when approached for information. A personal experience of mine includes dealing with the application for unemployment where the Gestapo approach of "yes or no...no explanations" to be problematic. There is infrequent completion of the communication cycle with inadequate response"

"Someone has to get serious about this problem now and no one seems to be!"

"Catering to the low income has suppressed this community for years. We need to focus on positivity, personal responsibility, and education to prevent these things. We need to work with the schools on these programs for our children's future. We need law enforcement to stop being part of the alcoholism problem and become part of the solution. They likely need better access to mental health as well."

"The cycle of poverty in Anaconda could be greatly helped by better mental health care."

"Anaconda's mental health services and support before the budget cuts was flawed (do to understaffing) but at least some services and support were available. Now we the threat of having no services at all and patients have to go to Butte, this is just not feasible!!!! Most mentally ill adults do not own a car(or even have a driver's license), know a person with a car that could take them, and there is no public(or private, or non profit) transportation from Anaconda to Butte. This leaves our most vulnerable not receiving any care, including medication and results are going to be devastating."

"I am hopeful that this survey will bring attention to the dire need for mental health services locally."

"I predict this will be a complete waste of time, but it will keep some people busy and believing they can make a difference."