MENTAL HEALTH ATTITUDES & ACCESS SURVEY RESULTS — 2020 —
Mental Health Attitudes & Access Survey Results

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History and Impacts of Mental Illness Stigma

The mental health services landscape in Summit County, Utah has evolved rapidly over the last few years. In 2016, CONNECT Summit County was the primary platform for the public discussion of mental health issues in Summit County. Robust programming such as Mental Health Awareness Month has kept mental health in the public consciousness. In 2017, a community coalition, the Summit County Mental Wellness Alliance, was formed to address the County’s serious mental health and substance abuse challenges. CONNECT Summit County was one of the founding members of Summit County Mental Wellness Alliance.

The Summit County Council, the local government body responsible for public health, has adopted the Summit County Mental Wellness Strategic Plan. It was prepared by the Summit County Mental Wellness Alliance with especially important support from the Summit County Health Department. The Park City Council has also adopted the Summit County Mental Wellness Strategic Plan. In Summit County, there are mental health service providers both in private practice and nonprofit organizations.

According to 2019 U.S. Census Bureau estimates, the population of Summit County has reached just over 42,000 citizens (U.S. Census, 2019). The National Alliance on Mental Illness states that one in five adults in the United States will experience mental illness in a given year, and approximately one in five youth aged 13–18 will experience a severe mental disorder at some point during their lifetime (Mental Health, 2020). The Kem C. Gardner Policy Institute and the Utah Hospital Association confirm that one in five Utahns will experience a mental illness and yet there is still a stigma associated with mental illness and its treatment (Kem C. Gardner Policy Institute and the Utah Hospital Association, 2019). Extrapolating by population for the Summit County community, this means that about 8,000 of our residents could be suffering from a mental health condition at any given time. This does not include the significant ripple effect on their families and friends.

In the Fall of 2015, Summit County conducted a community-wide Mental Health Services and Needs Assessment with a clear directive: “Enhance the quality of life for all residents by improving community awareness of mental health and increasing access to appropriate treatment.” This robust assessment has been a starting place for many organizations, including CONNECT Summit County. It has given us a baseline by which to understand our impact.

It is important to note that the purpose of the outreach was to engage as many members of the community as possible in a conversation about mental health and to collect perspectives from as many people as possible; not to create a statistically valid study of mental health issues for

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Summit County. Consistent with national studies, the two largest barriers identified by survey respondents fit broadly into funding issues and stigma. This was a consistent theme in responses from patients, friends and family, and providers. Both issues came up regularly during community dialogue sessions (Report of Mental, 2016).

A follow up survey is being conducted in February 2021.

“The Secretary of Health and Human Services said, 'Fear and stigma persist, resulting in lost opportunities for individuals to seek treatment and improve or recover' (Stigma and Serious, 2016). Stigma is known to lower self-esteem, contribute to disrupted family relationships and adversely affect the ability to socialize, obtain housing, and become employed. Despite growing awareness that psychiatric disorders are medical diseases that respond to treatment, stigma has not decreased. Recent studies indicate such as the one from the Treatment Advocacy Center in June 2016, to the contrary, that stigma against people with mental illness has increased over the past half-century and is still increasing.

As stated by the Mayo Clinic, real and harmful effects of stigma include a reluctance to seek help or treatment, lack of understanding by others, fewer opportunities for work or school leading to trouble finding housing, bullying, physical violence or harassment, health insurance that doesn’t adequately cover mental illness treatment and the belief that one will never succeed at certain challenges or that one can’t improve your situation (Mental Health, 2017). Others’ judgments almost always stem from a lack of understanding rather than information based on facts which is why awareness and attitudes of the general population is a critical thing to measure.

In July of 2020, we saw stigma play out in our own community with the permitting of the Summit County Clubhouse and the concerns from residents about its location. County staff recommended that the Snyderville Basin Planning Commission consider approving the Conditional Use Permit for Summit County Clubhouse in Highland Estates (84098).

Summit County Clubhouse (SCC) is an inclusive community in which all adults living with a mental health diagnosis can achieve their highest potential. Summit County Clubhouse (SCC) is the only place in Summit County where adults with a history of mental illness can receive social, pre-employment, and healthy living support on a regular basis. The Clubhouse welcomes all Summit County adults with a history of mental illness as lifetime members. Summit County Clubhouse members may have a mental health diagnosis that could include anxiety, depression, schizoaffective disorder, bi-polar disorder, schizophrenia or PTSD.

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For this public process to move forward, it was open for a public hearing. The resistance from the surrounding neighbors was shocking and heartbreaking. It is clear that, despite all of the effort over the past five years by community organizations and the Summit County Health Department, stigma still persists and the lack of understanding of mental illness is significant.

Excerpts from the public comment:

“...We do not believe that a service for adults with mental health diagnoses belong in our neighborhood so close to our home. We want to feel safe in our house and neighborhood...“

“...There is a bus stop in front of the house which will be used by many people visiting. Now we have mentally ill strangers getting off the bus in front of a house with 3 young children living in it. Obviously, both the tenant and I are very concerned for their safety...“

“...Will the Snyderville Planning Commission guarantee that “members” are not current or former drug and/or alcohol addicts (often associated with “mental” illness) and if so, how does the Commission plan to monitor this representation? Would any of the Committee members want such a facility adjacent to their house or in their “residential” neighborhood? What do Committee members think will happen to the values of homes in this neighborhood following such a move? Does the Committee stand willing and able to withstand the liability, litigation and potentially exorbitant settlement costs should something adverse occur?...”

How would this process have looked if we were all operating from a well-informed stigma-free attitude toward mental illness?

An important part of educating the community and erasing stigma is raising awareness around the fact that mental health services are not simply a therapist or a medication prescriber. Mental health services include services and supports that help individuals with mental illness recover holistically, inclusive of their social, vocational, and community contributions.

Individuals with mental illness are excluded and isolated from the community due to stigma; the underlying beliefs many of us hold about those with serious mental illness that prevents us from embracing these individuals and including them in our daily lives.

Mental health services support not only the individuals who live with a mental illness, but also are beneficial to their families, friends, and the community at large by decreasing homelessness, hospitalizations, and criminalization of the mentally ill – all of which are a significant emotional, mental, and financial cost to our community.

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In recent years, CONNECT Summit County has made meaningful and measurable progress. However, there is still a great deal of work to do to fulfill our mission of creating a well-informed and stigma-free community with access to mental health resources for everyone.

**Background, Research Objectives and Methodology**

In August 2020, prior to the “Part of Our Nature” anti-stigma campaign, CONNECT Summit County set out to investigate the “attitudes surrounding emotional, psychological, and social well-being in Summit County.” We wanted to better understand our community’s attitudes in regards to mental health stigma in order to provide a baseline to quantifiably measure the impact CONNECT Summit County has over time through core initiatives such as anti-stigma campaigns and programming.

**Research Objectives**

1. Do Summit County residents know about available mental health resources?
2. How able and comfortable are Summit County residents accessing needed mental health resources?
3. Do Summit County residents know about CONNECT Summit County?

**Research Methodology**

CONNECT Summit County researched, curated, and launched a 14-question survey in English and Spanish to capture major ethnic, racial, and origin groups in Summit County. The survey was distributed through community partnerships, email, social media, and flyers with an eye for making the sample as random and county-wide as possible. We worked with a consultant to ensure the accuracy of survey questions and high-level data analytics.

Note: at CONNECT Summit County we read “probably” and “moderately” as having hesitation, therefore in our results, we have placed those responses in the category of lacking information.

Survey active from July 22 to August 7

- Survey clicks: 1,056 individuals
- Survey completion rate: 80% (849 / 1,056)
- Survey response rate: unknown as the sampling was a broad distribution

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As an expression of our appreciation to those who completed the survey, respondents could opt in to enter a drawing for a gift certificate ($20 value) from a local Summit County business. 58.9% of respondents elected to enter the drawing.

Results and Analysis of Survey in English

Key Findings

These key findings give an overview of our objectives and where respondents land in awareness and knowledge about mental health resources, ability to communicate about mental health issues and familiarity with CONNECT Summit County.

Objective 1

Do Summit County residents know about available mental health resources?

- 80% of our respondents are not aware of mental health resources
- 85% of our respondents do not know where to go to access mental health resources

Objective 2

How able and comfortable are Summit County residents accessing needed mental health resources?

- 76% of respondents are unlikely to ask for help with a mental health issue
- 71% of respondents have helped someone with a mental health need

Objective 3

Do Summit County residents know about CONNECT Summit County?

- 84% of respondents are unfamiliar with CONNECT Summit County

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Analytical Results

\[ n = \text{the number of people who responded to the survey question} \]

Objective 1: Do Summit County residents know about available mental health resources?
“Resource awareness” is the first step to “resource knowledge” and understanding where to access mental health services.

Survey Question - Mental Health Resource Awareness
How aware are you of the mental health resources available in Summit County, Utah? (n = 921)

Analysis
80% of respondents lack sufficient awareness of mental health resources in Summit County.

Conclusion
Awareness of mental health resources should be a priority when discussing mental health in Summit County.

Survey Question - Mental Health Resource Knowledge
Would you know where to go to access mental health resources, if you needed to? (n = 920)

Analysis
85% of survey respondents lack clarity on where to go to access mental health resources if needed.

Conclusion
Awareness of mental health resources is the first step—knowing where to access those resources is the second. When marketing awareness, where to access those resources should be promoted in conjunction.

Objective 2: How able and comfortable are Summit County residents accessing needed mental health resources?
In this portion of the survey we asked questions regarding access and ability to talk about mental health within the community.

Survey Question - Ability to Access Mental Health Resources
Would you be able to access mental health resources, if you needed to? (Have access to a computer, transportation, etc.) (n = 919)

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Analysis
34% of survey respondents are not able to access mental health resources.

Conclusion
With limited resources there are likely other more pressing issues to receive a higher priority and aside from targeted situations, access ought not be considered in programmatic and marketing efforts. Location of residence, gender, age, and race did not play a role in ability to access mental health resources; however, it is possible those without access were unable to complete the survey. Additional research should attempt to answer this.

Survey Question - Talking About Mental Health
How difficult do you feel it is to talk about mental health or emotional challenges in our community? (n = 872)

Analysis
The respondents are split on this topic, with roughly one-third finding it difficult, one-third finding it easy, and one-third neutral.

Conclusion
With only 40% of respondents finding mental health and emotional challenges easy to discuss, Summit County should work to ensure there are safe places for this topic. Programmatic and research efforts should work to identify why mental health is difficult for many to discuss.

Survey Question - Asking for Help with Mental Health Challenge
How likely are you to personally ask for help if you were to have (or have had) a mental or emotional challenge? (n = 875)

Analysis
76% of survey respondents are unlikely to ask for help with a mental illness.

Conclusion
Efforts to reduce mental health stigma may invite those respondents to be more likely to discuss their mental health struggles.

Survey Question - Helping Others who need mental health support
Have you ever helped someone in your community (including family members) that needed mental health support? (This might include intervention, directing them to available resources, or supporting them through a challenging time.) (n = 867)

Analysis
72% of survey respondents have helped someone in the community with mental health support.

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Conclusion
While most respondents are unlikely to ask for help with personal mental health challenges, the majority of survey respondents are willing—and have—helped others with mental health challenges. There may be an opportunity to normalize mental health by reminding people of loved ones who struggle.

According to AmeriCorps, Utah ranks highest in the nation for volunteer hours and philanthropic giving (AmeriCorps, 2015). Therefore we were not surprised that we have such a high rate of respondents who have helped someone in our community with mental health support. However, it is alarming that over half of our respondents are not very likely to ask for support when challenged by their mental health.

Objective 3: Do Summit County residents know about CONNECT Summit County?
As a relatively new nonprofit in Summit County, Utah we were curious how many respondents know about CONNECT Summit County and the work we do in the community.

Survey Question - Familiarity with CONNECT Summit County
How familiar are you with CONNECT Summit County and their mission? (n = 869)

Analysis
84% of survey respondents are not at all familiar with CONNECT Summit County and its mission. Only 16% of survey respondents are as familiar as we would like them to be.

Conclusion
Because CONNECT Summit County is a significant resource for mental health information in the County, programmatic and marketing efforts should focus on the brand as much as the message. Knowing who to go to for help is half the battle.

Statistically Significant Findings
Statistical significance refers to the claim that a result from that data generated is not likely to occur randomly or by chance but is instead likely to be attributable to a specific cause.

Our survey results are statistically significant at the 95% Confidence Level with a Confidence Interval (Margin of Error) of +/- 3.32% (industry standard MoE = +/- 5.00%). For all statistical tests of significance, a two-tailed test with an alpha level less than 0.05 is considered statistically significant. Data analytics were conducted in Python.

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**Objective 1:** Do Summit County residents know about available mental health resources?

Statistically significant
- Gender
- Age

Not Statistically significant
- Location of residence
- Race

Conclusion
Men and those under 35 have slightly poorer awareness of mental health resources in Summit County and should be considered in programmatic and marketing efforts.

**Objective 2:** How able and comfortable are Summit County residents accessing needed mental health resources?

**Likelihood to ask for help**

Statistically significant
- Gender
- Age
- Race

Not Statistically significant
- Location of residence

Conclusion
Men, those under 35, and those that are non-white are slightly less likely to ask for help with a mental or emotional challenge and should be considered in programmatic and marketing efforts.

**Helping Others**

Statistically Significant Results
- Location of residence
- Gender
- Age

Not Statistically significant
- Race

Conclusion
Women, those under 35, and those who live in rural Summit County are most likely to have helped someone with a mental health challenge. This may be a promoter segment.

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Objective 3: Do Summit County residents know about CONNECT Summit County?

Statistically significant
- Location of residence
- Gender

Not Statistically significant
- Age
- Race

Conclusion
Women and urban community members are most familiar with CONNECT Summit County. This should be considered in future programmatic and marketing efforts.

Correlation Analysis

We see that there is a correlation between knowledge of CONNECT Summit County and knowing where to access resources. Because of this, we realize we have a lot of work to do in brand awareness in order to ensure that everyone in Summit County knows how to access mental health resources and what those resources are. This is the main focus of our Peer Navigation program.

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English Survey Respondent Demographics

Survey Question: In which community to live? (n=857)

Analysis
Western Summit County was oversampled, leaving the more rural parts of the county under sampled. (12.8% of respondents did not live in Summit County.)

Conclusion
While the sampling distribution does not perfectly match the population, we achieved sufficient respondents in all geographies for statistical significance. Future research should better reach Eastern and Northern Summit County.

Survey Question: What is your gender identity? (n=855)

Analysis
Females were overrepresented and males were underrepresented in the sample.

Conclusion
Given that 268 males were sampled, it is unlikely a more even sampling distribution would have a significant impact on the research findings; nevertheless, future research should better reach the male population.

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Survey Question: What is your racial, ethnic, or origin identity? (select all that apply) (n=877)

Analysis
Whites were slightly overrepresented and Latinos were underrepresented in the sample. Other races were sampled within an acceptable range.

Conclusion
Our sampling plan called for 40 Latinx individuals in order for the sample to be statistically significant and we only achieved 26; however, we also sent a Spanish version of the survey which had an additional 76 respondents, which brings the Latinx population into statistical significance.

Survey Question: What is your age group? (n=857)

Analysis
Our sample heavily skewed toward the older population while under sampling the younger population. (25.4% of Summit County’s population is under 18 and were not sampled.)

Conclusion
While the distribution of the sample is skewed, a statistically sufficient number of respondents was collected in all age groups with the exception of 18 to 24, which was underrepresented by 33.

Future research should better reach this age group.

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Results and Analysis of Survey in Spanish

Research Methodology

We used the same methodology as the version in English, however the translation added another layer. The Spanish version of the survey was translated from English by “we translate” and was reviewed by two Summit County community members, one a native Spanish speaker from Mexico and one a mental health services provider who speaks Spanish fluently. They offered edits to the translation which we adopted before distribution. We used this approach in order to ensure that our translation was accurate, conversational and accessible to our population.

Survey active from July 29 to August 30

- Survey clicks: 80 individuals
- Survey completion rate: 97% (78 / 80)
- Survey response rate: unknown as the sampling was a broad distribution

Survey results are not typically considered statistically significant when the sample size is less than 130; however, given the small reported population size of 1,904 and the sampling methodology used, we believe the results to be informative (US Census, quick facts, 2019). We also realize that this population count is most likely underrepresented and in our community, the number is guesstimated at 20% to 25% of the population (Park City Community Foundation, 2020), not 11.5% totally 1,904 as represented in the US Census quick facts, 2019.

As an expression of our appreciation to those who completed the survey, respondents could opt in to enter a drawing for a gift certificate ($20 value) from a local Summit County business. 92% of respondents elected to enter the drawing.

Key Findings

These key findings give an overview of our objectives and where respondents land in awareness and knowledge about mental health resources, ability to communicate about mental health issues and familiarity with CONNECT Summit County.

Objective 1

Do Summit County residents know about available mental health resources?

- 84% of our respondents are not aware of mental health resources

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- 91% of our respondents do not know where to go to access mental health resources

Objective 2

How able and comfortable are Summit County residents accessing needed mental health resources?
- 58% of respondents are unlikely to ask for help with a mental health issue
- 53% of respondents have helped someone with a mental health need

Objective 3

Do Summit County residents know about CONNECT Summit County?
- 91% of respondents are unfamiliar with CONNECT Summit County

Analytical Results

n = the number of people who responded to the survey question

Objective 1: Do Summit County residents know about available mental health resources?
“Resource Awareness” is the first step to “Resource Knowledge” and understanding where to access mental health services.

Survey Question - Mental Health Resource Awareness
¿Qué conocimiento tiene usted de los recursos de salud mental disponibles en el Condado de Summit, Utah? (n=79) How aware are you of the mental health resources available in Summit County, Utah?

Analysis
84% of respondents lack sufficient awareness of mental health resources in Summit County.

Conclusion
Awareness of mental health resources should be a priority when discussing mental health in Summit County.

Survey Question - Mental Health Resource Knowledge
¿Sabría usted dónde ir para acceder a los recursos de salud mental, si necesita hacerlo? (n=80) Would you know where to go to access mental health resources, if you needed to?

Analysis
91% of survey respondents would lack clarity on where to go to access mental health services for all residents of Summit County.
Mental Health Attitudes & Access Survey Results

Conclusion
Awareness of mental health resources is the first step—knowing where to access those resources is the second. When marketing awareness, where to access those resources should be promoted in conjunction.

Objective 2: How able and comfortable are Summit County residents accessing needed mental health resources? In this section of the survey we asked questions regarding access and ability to talk about mental health within the community the results and analysis are below.

Survey Question - Ability to Access Mental Health Resources
¿Podría usted acceder a recursos de salud mental si necesitará hacerlo? (Tener acceso a una computadora, transporte, etc.) (n=80) Would you be able to access mental health resources, if you needed to? (Have access to a computer, transportation, etc.)

Analysis
70% of survey respondents are not able to access mental health resources.

Conclusion
Aside from targeted situations, access should not be considered in programmatic and marketing efforts. Location of residence, gender, age, and race did not play a role in ability to access mental health resources; however, it is possible those without access were unable to complete the survey. Additional research should attempt to answer this.

Survey Question - Talking About Mental Health
¿Cuán difícil siente que es hablar sobre salud o desafíos emocionales en nuestra comunidad? (n=80) How difficult do you feel it is to talk about mental health or emotional challenges in our community?

Analysis
96% of respondents find it difficult to talk about mental health or emotional challenges.

Conclusion
With only 4% of respondents finding mental health and emotional challenges easy to discuss, Summit County should work to ensure there are safe places for this topic. Programmatic and research efforts should work to identify why mental health is difficult for many to discuss.

Survey Question - Asking for Help with Emotional Challenge
¿Qué posibilidad tendría usted de pedir personalmente ayuda si tuviese (o hubiera tenido) un desafío mental o emocional? (n=80) How likely are you to personally ask for help if you were to have (or have had) a mental or emotional challenge?

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Analysis
58% of survey respondents are unlikely to ask for help with a mental illness.

Conclusion
Efforts to reduce mental health stigma may invite those respondents to be more likely to discuss their mental health struggles.

Survey Question - Helping Others who need mental health support
¿Ha ayudado usted alguna vez a alguien en su comunidad (incluyendo miembros de la familia) que necesitaba apoyo de salud mental? (Esto podría incluir intervención, dirigir a la persona a recursos disponibles o apoyarla a través de un periodo difícil). (n=80)
Have you ever helped someone in your community (including family members) that needed mental health support? (This might include intervention, directing them to available resources, or supporting them through a challenging time.)

Analysis
53% of survey respondents have helped someone in the community with mental health support.

Conclusion
While most respondents are unlikely to ask for help with personal mental health challenges, over half of survey respondents are willing—and have—helped others with mental health challenges. There may be an opportunity to normalize mental health by reminding people of loved ones who struggle.

According to AmeriCorps, Utah ranks highest in the nation for volunteer hours and philanthropic giving (AmeriCorps, 2015). Therefore we are not surprised that we have such a high rate of respondents who have helped someone in our community with mental health support. However, it is alarming that over half of our respondents are not very likely to ask for support when challenged by their mental health.

Objective 3: Do Summit County residents know about CONNECT Summit County?
As a relatively new nonprofit in Summit County, Utah we were curious how many respondents know about CONNECT Summit County and the work we do in the community.

Survey Question - Familiarity with CONNECT Summit County
¿Cuán familiarizado está con CONNECT Summit County y su misión? (n=79) How familiar are you with CONNECT Summit County and their mission?

Analysis
91% of survey respondents are not at all familiar with CONNECT Summit County and its mission. Only 9% of survey respondents are as familiar as we would like them to be.

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Conclusion
Because CONNECT Summit County is a significant resource for mental health information in the County, programmatic and marketing efforts should focus on the brand as much as the message. Knowing who to go to for help is half the battle.

Spanish Survey Respondent Demographics

Survey Question: ¿En qué comunidad vive usted? (n=78) In which community to live?

Analysis
Western Summit County was oversampled, leaving the more rural parts of the county under sampled. (11.3% of respondents did not live in Summit County.)

Conclusion
While the sampling distribution does not perfectly match the population, it is a reasonable match. Future research should better reach Eastern and Northern Summit County.

Survey Question: ¿Cuál es su identidad de género? (n=80) What is your gender identity?

Analysis
Females were overrepresented and males were underrepresented in the sample.

Conclusion
Given that only ten males participated in the survey, it is difficult to say whether the results properly reflect male sentiment. Future research should better reach the male population.

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Survey Question: ¿Cuál es su identidad racial, étnica o de origen? (seleccione todas las que apliquen) (n=80) What is your racial, ethnic, or origin identity? (select all that apply)

Analysis
Latinos were the majority of respondents for this survey.

Conclusion
Given that the English version of the survey only had 3% of the respondents as Latino, we needed this survey in Spanish to capture more of the Latino population and we did so by offering the survey in two languages.

Survey Question: ¿Cuál es su grupo de edad? (n=80) What is your age group?
Analysis
Our sample skewed toward the younger population while under sampling the older population. (25.4% of Summit County’s population is under 18 and were not sampled.)

Conclusion
The skewness may have to do with the distribution, which was heavily online. Future research should better reach the older demographic through a larger sample size and more robust distribution methods.

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Addendum Raw Data

We value transparency and know that we have read this data in a specific way. Therefore we are choosing to share our raw data with the public and you may view it here.

References

References


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