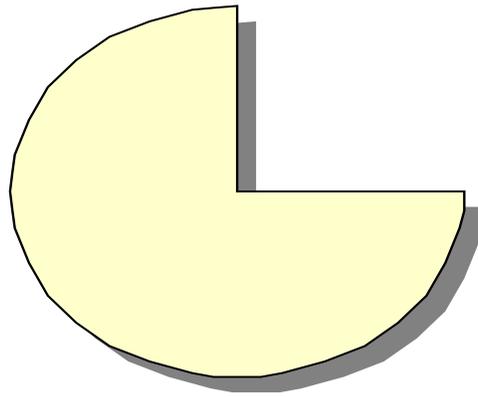


“WHAT DO YOU THINK?”

New Hampshire 2015
Peer Support Outcomes Survey



State Report
January 2016

New Hampshire Bureau of Behavioral Health

105 Pleasant Street

Concord, NH 033301

(603) 271-5007

The NH 2015 Peer Outcomes Survey is designed, conducted, and analyzed by the New Hampshire Bureau of Behavioral Health in collaboration with state-funded Peer Support Agencies operating in the state mental health regions.

The Alternative Life Center, Conway NH (Region I)

H.E.A.R.T.S., Nashua, NH (Region VI)

Lakes Region Consumer Advisory Board, Laconia, NH (Regions III & IV)

Monadnock Peer Support Agency, Keene, NH (Region V)

On the Road to Recovery, Manchester, NH (Regions VII & X)

Seacoast Consumer Alliance, Portsmouth, NH (Region VIII)

Stepping Stone, Claremont, NH (Region II)

Tri-City Cooperative, Rochester, NH (Region IX)

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Funding for this report provided by the Mental Health Block Grant awarded by the Center for Mental Health Services of the US Substance Abuse and Mental Health Services Administration (Grant No. 2B09SM010035-12 from US Department of Health and Human Services under CFDA 93.243

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OVERVIEW

Background

Peer Support Agencies (PSAs) provide certain community-based, consumer-run, public mental health services, described and governed by state rules under contracts with the Bureau of Behavioral Health (BBH). Services are provided at no cost to consumers. In 2015, eight not-for-profit agencies, operating fourteen physical locations in the state's ten mental health regions, provided an array of on-site supports, several mobile outreach teams, a transitional living program, and, with the addition of a second site in 2014, two peer-run Planned Respite Programs. Over 1900 adults with serious mental illness (SMI) were served statewide. The agencies serve adults only.

In New Hampshire, the Intentional Peer Support¹ model (IPS), developed by Shery Mead, is selected as the foundational approach to peer support interactions. Peer staffs at every agency have been trained in IPS. Additionally, the Wellness Recovery Action Plan (WRAP)², an evidence-based practice developed by Mary Ellen Copeland has been established for use in New Hampshire via PSA staff who are trained as Advanced Facilitators. In turn, they train WRAP Group Facilitators from every PSA around the state. For the purpose of this report, the term "peer support", regarding New Hampshire PSAs, explicitly includes IPS and WRAP as core practices at all agencies.

Peer support occurs when people provide knowledge, experience, and emotional, social, or practical help to each other.³

Members and participants at PSAs differ only by member privileges. Participants are not registered members of the PSA. Participants engage in all activities except they do not have member voting privileges and cannot serve on the agencies' consumer-run boards. For the purpose of the survey and this report, the terms "consumers", "members", "participants", and "peers" are used interchangeably. Staffs are also peers. Guests or visitors to the agencies are not included in the survey or in the unduplicated count of peers.

The Executive Directors of New Hampshire state-funded Peer Support Agencies (PSAs) met with the Bureau of Behavioral Health's State Planner to develop an annual online consumer survey. The first "What do you think?" survey was conducted in 2009. The survey is conducted using Survey Monkey but consumers can also submit paper responses for later data entry. Computer access is provided at all PSA locations and consumers are strongly encouraged to participate.

Purpose of the Survey

The purpose of the survey is to receive feedback from participants in peer support that may be used to enhance planning, financing, service delivery, and development of consumer-operated services and programs within a recovery-oriented behavioral health care system throughout New Hampshire.

New Hampshire's PSA Executive Directors, as a group, decided to create a new survey of members that would enable them to assess outcomes and program satisfaction over time. The survey now includes research-based questions about the peer support experience.

The survey includes indicators that measure recovery supports in the priority areas of HEALTH, PURPOSE, COMMUNITY, and GENERAL SATISFACTION. There are 14 indicators measured by 45 survey items. An additional item indicates which PSA the respondent is affiliated with, and is not included in the report. Individuals that did not respond to this item are

¹ <http://intentionalpeersupports.org/>

² <http://www.mentalhealthrecovery.com/>

³ Shery Mead, David Hilton, Laurie Curtis, "Peer Support: A Theoretical Perspective".
<http://mentalhealthpeers.com/pdfs/peersupport.pdf>

included in the overall report. Each PSA received their individual results along with the overall report for their own internal quality improvement efforts.

New Hampshire PSAs are primarily funded by the NH Mental Health Block Grant and, as such, data on selected priority areas is collected and reported to the Substance Abuse and Mental Health Services Administration (SAMHSA), which issues the block grant funds.

Positive outcomes in these domains, associated with peer support, are commonly believed to result in the reduction and prevention of hospitalization, and increased wellbeing. A primary area of interest is to support the reduction or prevention of psychiatric hospitalization while providing practical supports for life in the community. Specific survey items measure the effectiveness of these goals.

The Peer Outcomes Protocols (POP)⁴ instrument and the Mental Health Statistical Improvement Project (MHSIP) survey that includes certain National Outcomes Measures (NOMS) for block grant reporting were used to select the Peer Support Recovery outcomes and identify the survey items to be included, such as General Satisfaction which is embedded within the section for Community. New Hampshire PSAs now have four domains that may be surveyed annually, to help inform the self-directed activities of these consumer-operated services and programs.

Input from members of PSAs is important for shaping the planning process for state-funded peer support programs in New Hampshire. The survey supports the mental health block grant's National Outcome Measure (NOM) #8- Increased Social Support/Social Connectedness. It supports the President's New Freedom Commission Goal #2: Mental Health Care is Consumer and Family Driven, and SAMHSA's Strategy #4: Recovery Supports. The State Mental Health Authority (SMHA) selected Consumer Operated Services and Programs (COSP) for Peer-to-Peer Recovery Supports as the State priority for the block grant.

Individual agencies are able to use the data to inform their own discussions and decisions, guided by the input of the members, to shape future practices. See the Director's Comments for specific examples of how the survey responses are used to benefit the peer support participants. In addition to the overall report, Executive Directors receive a report filtered by PSA location for their organization.

The data supports the associated cost/benefit and effective State utilization management of the mental health block grant funds, to provide an alternative or adjunct to clinical services that would otherwise not exist in the state. Having outcome measures strengthens the rationale for the state to continue to allocate funds from the NH mental health block grant for contracts with these agencies. The PSAs are funded 60% by NH's mental health block grant and 40% by State general funds. The majority of the mental health block grant is directed to maintaining peer support in NH. At this time there are no other funding sources for the provision of these services.

The state report will be available on selected websites that serve the peer-to-peer recovery community and interested others. Individual agency reports are provided to each PSA. The agencies' contact information is at <http://www.dhhs.nh.gov/dcbcs/bbh/peer.htm>.

⁴ <http://www.cmhsrp.uic.edu/nrtc/pophome.htm>

Survey Description

The survey is a non-scientific, non-random sample of people who are members of Peer Support Agencies. This year, all eight PSAs chose to participate in the survey. Percentages are based on 100.00% (two decimal points) of responses, and rounded to whole numbers. The survey was open October through December of 2015.

Participation in the survey is voluntary but strongly encouraged. There is no respondent identification in the survey. Although the electronic survey is anonymous and confidential, anonymity and confidentiality cannot be guaranteed when the paper instrument is used. Individual comments are not solicited as they may identify staff, agency, and/or respondent. Data from paper surveys is entered on line by PSA or BBH staff from the Office of Consumer and Family Affairs.

There are 45 items in the four sections of the 2015 “What Do You Think?” NH peer support survey. The sections are:

- (1) Demographics
- (2) Health
- (3) Purpose
- (4) Community

The majority of items are from the Peer Outcomes Protocol (POP). The POP was a project of the University of Illinois at Chicago, National Research and Training Center on Psychiatric Disability directed by Judith A. Cook, Ph.D., director of the Program in Consumer Studies of the Program in Consumer Studies and Training at the Missouri Institute of Mental Health.

The POP was selected as the basis for the NH survey because: “The outcomes protocol can be used by peer support and consumer provider organizations to gauge the results of rehabilitation services delivered by and for peers with psychiatric disabilities. Widespread adoption of the protocol will (1) assist the consumer self-help filed to assess its own outcomes; (2) present service outcomes to public funding authorities and managed care organizations; (3) improve the organization and delivery of peer support programs”.⁵

Survey General Summary⁶

The survey was begun by 244 people and completed by 229. It is likely the 244 figure includes some false starts that were later completed. For comparison, the 2014 survey was completed by 488 respondents. The unduplicated count of PSA members is estimated to be 1900⁷ thus providing a 12% response rate compared to 26% in 2014.

The survey was taken by an almost equal number of males (43%) and females (57%). More than 54% of respondents are between the ages of 45 and 64 and 9% are under the age of 25. Veteran’s make up 8% of respondents and 91% of respondents are white⁸. These statistics are in line with the 2014 report.

A new question this year found that 7.23%, or 17 of 235 respondents, were homeless. We also saw the number of respondents without insurance coverage decrease to 6.7% versus 9.8% last year.

⁵ Peer Outcomes Protocol (POP): Psychometric Properties of the POP, Jean Campbell, Ph.D. et al., Missouri Institute of Mental Health, University of Missouri-Columbia, 2004, p. 3.

⁶ Calculations are based on 100.00% of the cohort being reported. Most items do not include “not applicable” or “no response”. Percentages are rounded. Incomplete surveys are not included.

⁷ Calculations based on SFY2013 monthly unduplicated onsite participation.

⁸ The US Census 2013 estimate for the White population of the state is 94%.

Peer Support Director's Comments

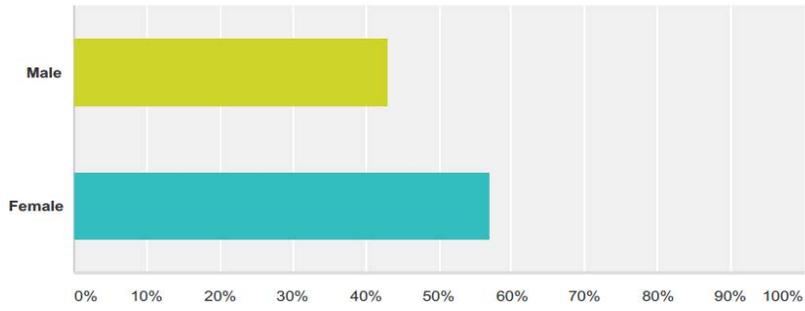
"The survey is an invaluable tool that we can use to reach out to individuals who could use our services"

"This survey plays a very important role in the ongoing assessment of our agency's effectiveness in specific areas. We utilize the data collected in the survey as the basis for internal conversations with staff and membership to see ways to improve our programming"

"The results derived from this survey have been very helpful in determining what areas, as an agency, may need strengthening on behalf of its members".

Q1 What is your gender?

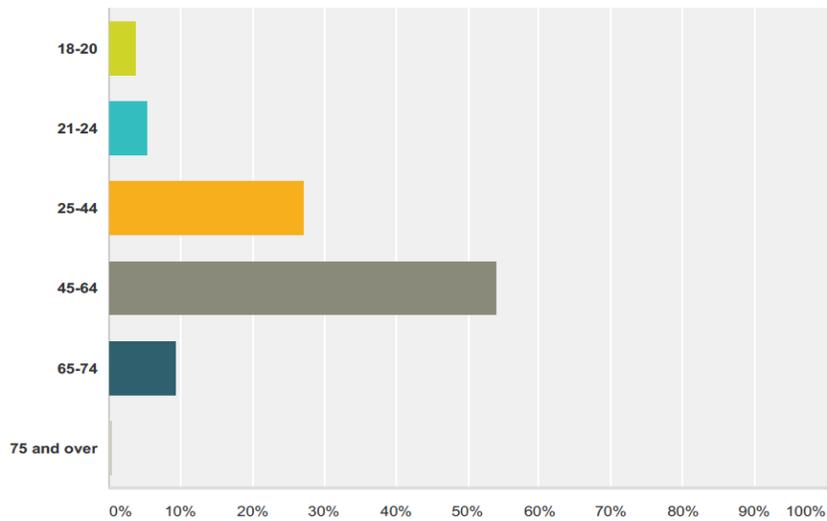
Answered: 244 Skipped: 0



Answer Choices	Responses
Male	43.03% 105
Female	56.97% 139
Total	244

Q2 What is your age, in years?

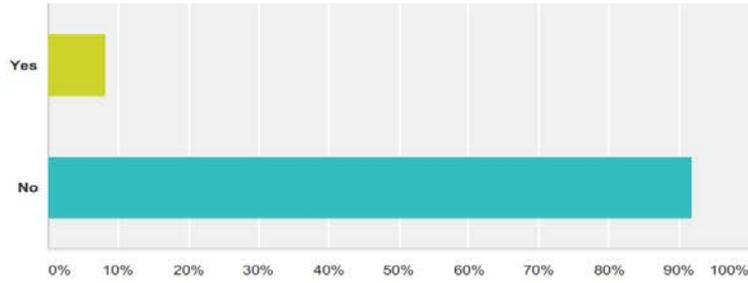
Answered: 244 Skipped: 0



Answer Choices	Responses
18-20	3.69% 9
21-24	5.33% 13
25-44	27.05% 66
45-64	54.10% 132
65-74	9.43% 23
75 and over	0.41% 1
Total	244

Q3 Are you a veteran of the Armed Forces?

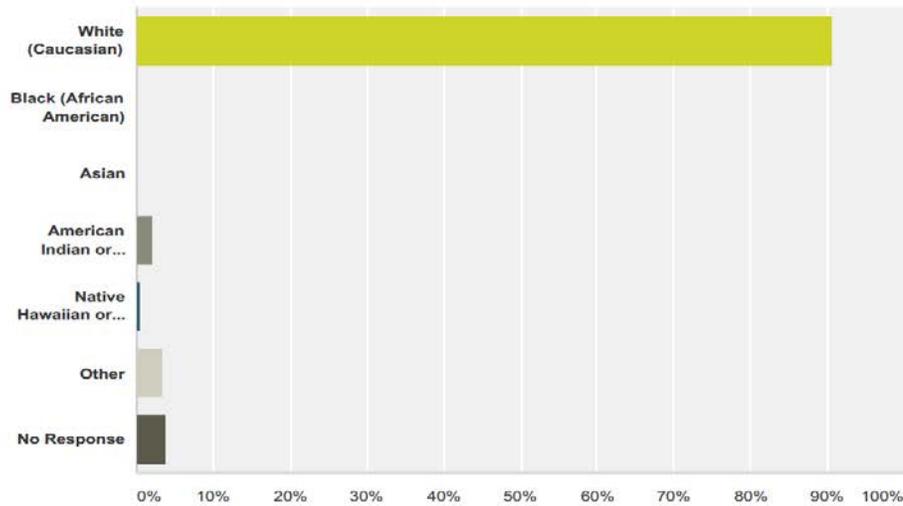
Answered: 244 Skipped: 0



Answer Choices	Responses
Yes	8.20% 20
No	91.80% 224
Total	244

Q4 What race do you consider yourself to be?

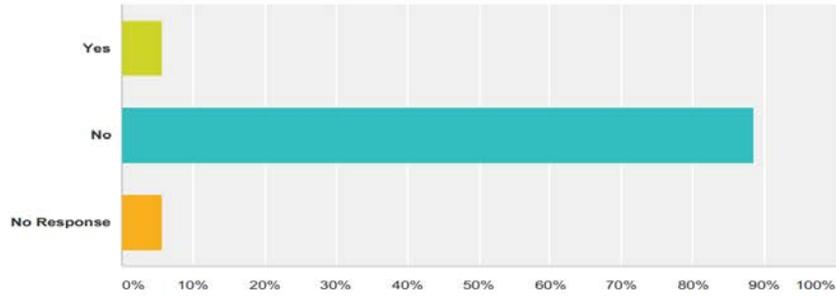
Answered: 244 Skipped: 0



Answer Choices	Responses
White (Caucasian)	90.57% 221
Black (African American)	0.00% 0
Asian	0.00% 0
American Indian or Alaska Native	2.05% 5
Native Hawaiian or Other Pacific Islander	0.41% 1
Other	3.28% 8
No Response	3.69% 9
Total	244

Q5 Are you of Hispanic, Spanish, or Latino origin?

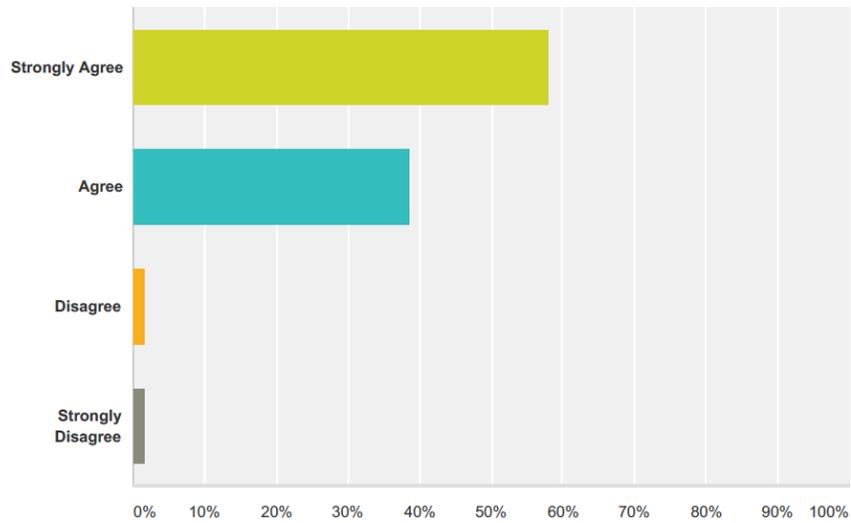
Answered: 244 Skipped: 0



Answer Choices	Responses	
Yes	5.74%	14
No	88.52%	216
No Response	5.74%	14
Total		244

Q6 I take an active role in decisions about my mental health care.

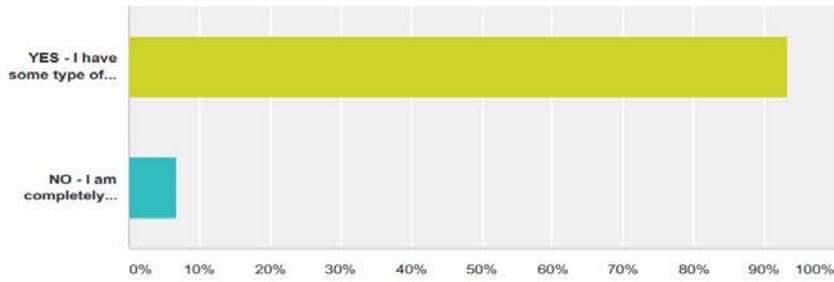
Answered: 238 Skipped: 6



Answer Choices	Responses	
Strongly Agree	57.98%	138
Agree	38.66%	92
Disagree	1.68%	4
Strongly Disagree	1.68%	4
Total		238

Q7 Do you have any health insurance coverage?

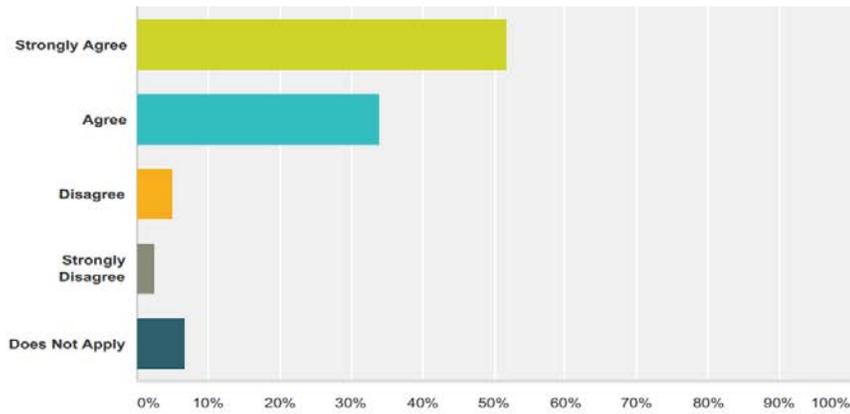
Answered: 238 Skipped: 6



Answer Choices	Responses
YES - I have some type of health insurance, such as private, self-pay, employer-sponsored, Medicaid, Medicare, military, or other coverage.	93.28% 222
NO - I am completely without any kind of health insurance coverage; I am uninsured.	6.72% 16
Total	238

Q8 Do you think this peer support center helped prevent emotional difficulties from turning into a psychiatric crisis during the past six months?

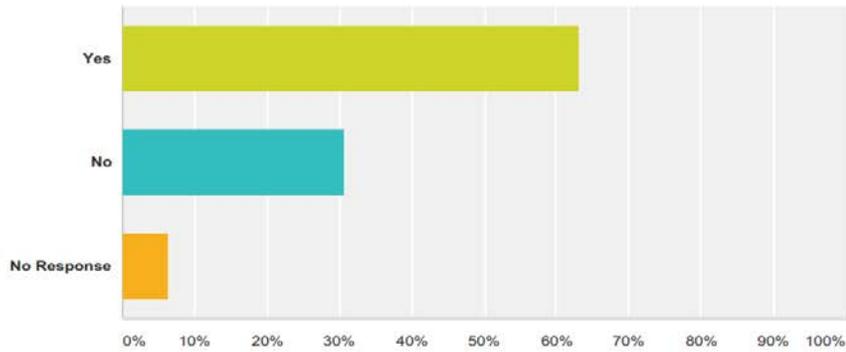
Answered: 238 Skipped: 6



Answer Choices	Responses
Strongly Agree	51.68% 123
Agree	34.03% 81
Disagree	5.04% 12
Strongly Disagree	2.52% 6
Does Not Apply	6.72% 16
Total	238

Q9 Have you ever been in the hospital for psychiatric reasons?

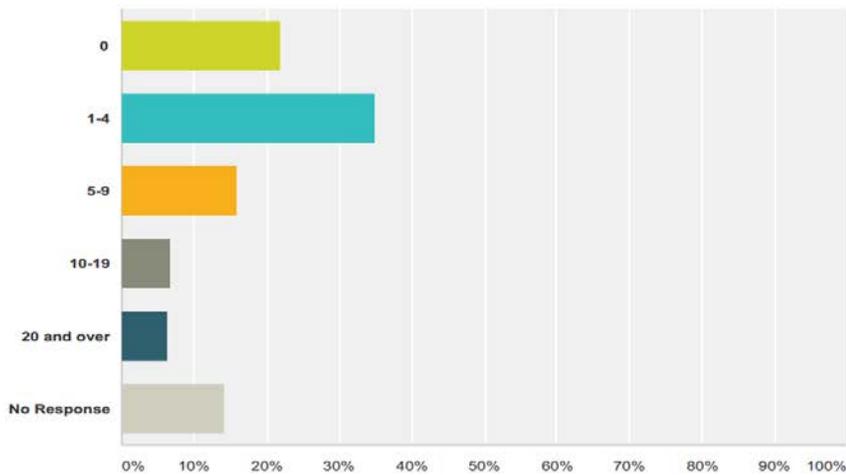
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Yes	63.03%	150
No	30.67%	73
No Response	6.30%	15
Total		238

Q10 How many times in your life have you been in the hospital for psychiatric reasons?

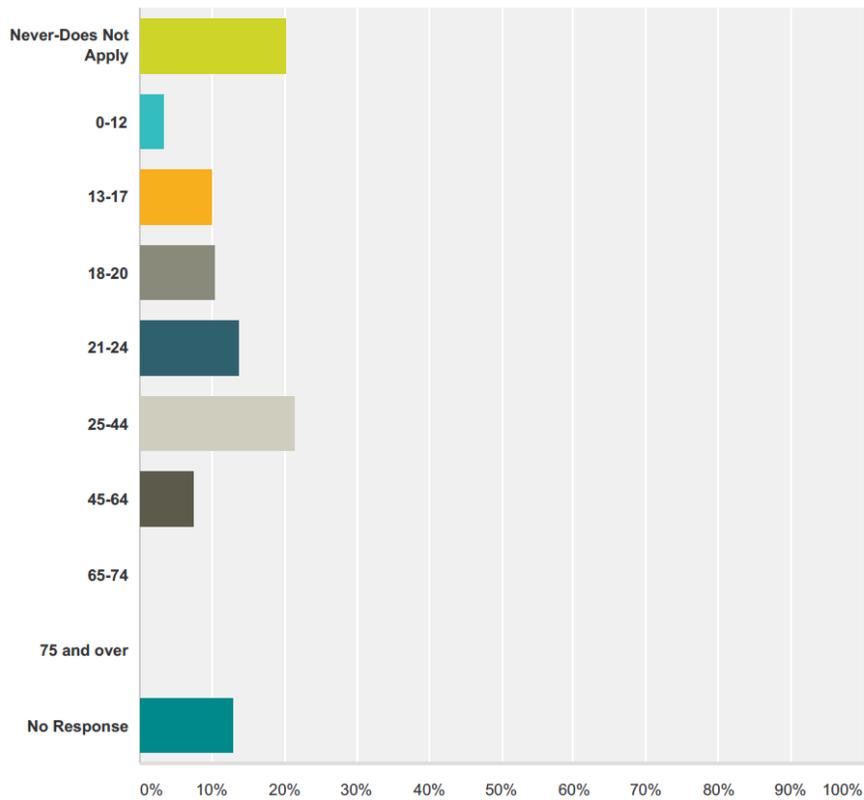
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
0	21.85%	52
1-4	34.87%	83
5-9	15.97%	38
10-19	6.72%	16
20 and over	6.30%	15
No Response	14.29%	34
Total		238

Q11 How old were you the first time you were in the hospital for psychiatric reasons?

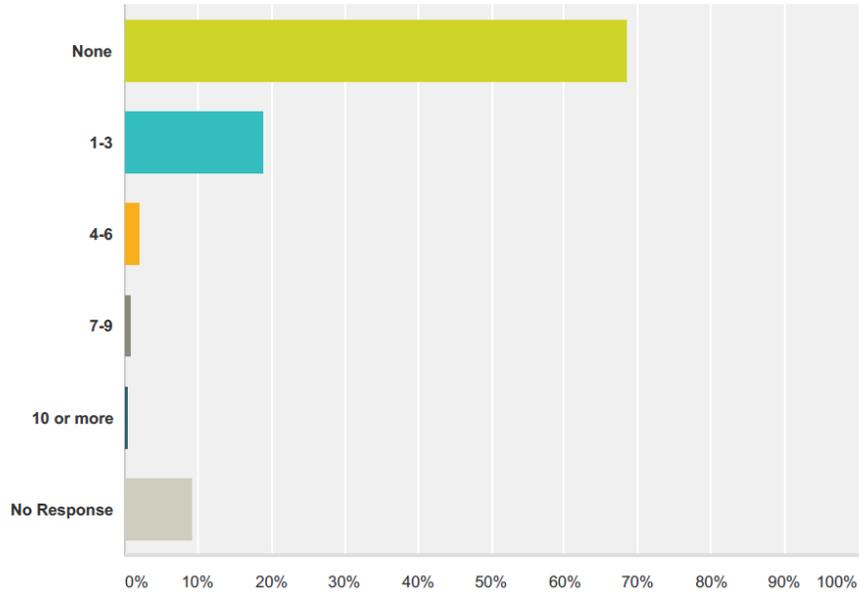
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Never-Does Not Apply	20.17%	48
0-12	3.36%	8
13-17	10.08%	24
18-20	10.50%	25
21-24	13.87%	33
25-44	21.43%	51
45-64	7.56%	18
65-74	0.00%	0
75 and over	0.00%	0
No Response	13.03%	31

Q12 How many times have you been in the hospital for psychiatric reasons during the past 12 months?

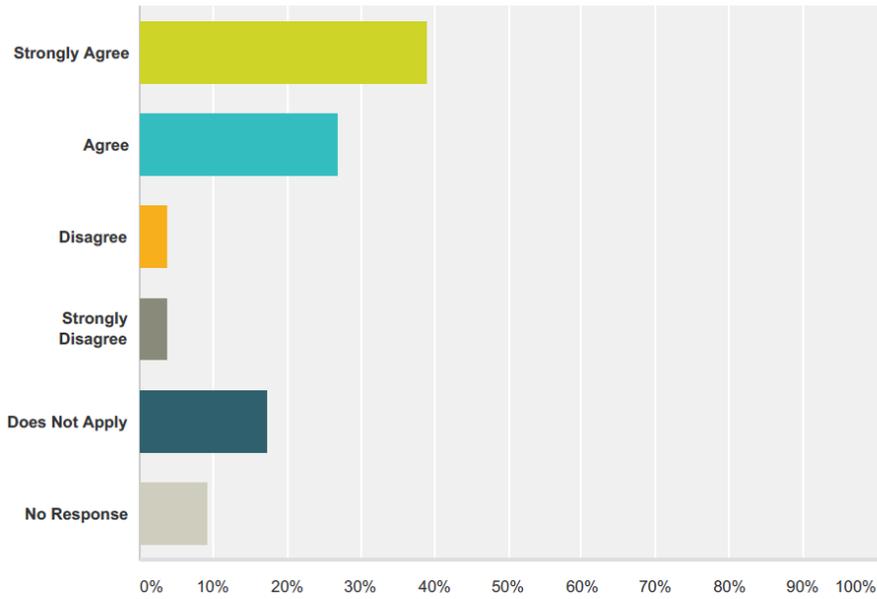
Answered: 238 Skipped: 6



Answer Choices	Responses	
None	68.49%	163
1-3	18.91%	45
4-6	2.10%	5
7-9	0.84%	2
10 or more	0.42%	1
No Response	9.24%	22
Total		238

Q13 This peer support center helped me to stay out of the hospital for psychiatric reasons during the last 6 months.

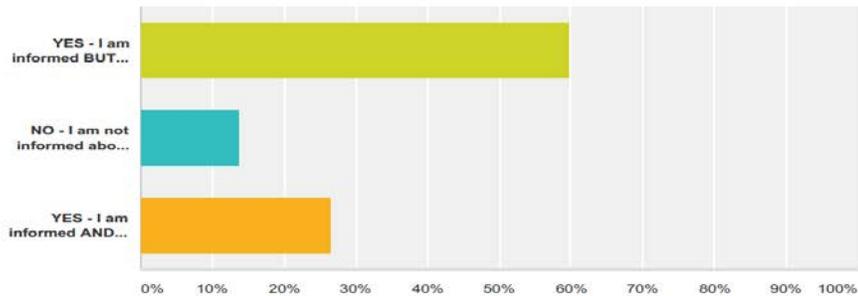
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Strongly Agree	39.08%	93
Agree	26.89%	64
Disagree	3.78%	9
Strongly Disagree	3.78%	9
Does Not Apply	17.23%	41
No Response	9.24%	22
Total		238

Q14 Are you informed about Peer-Run Crisis Respite?

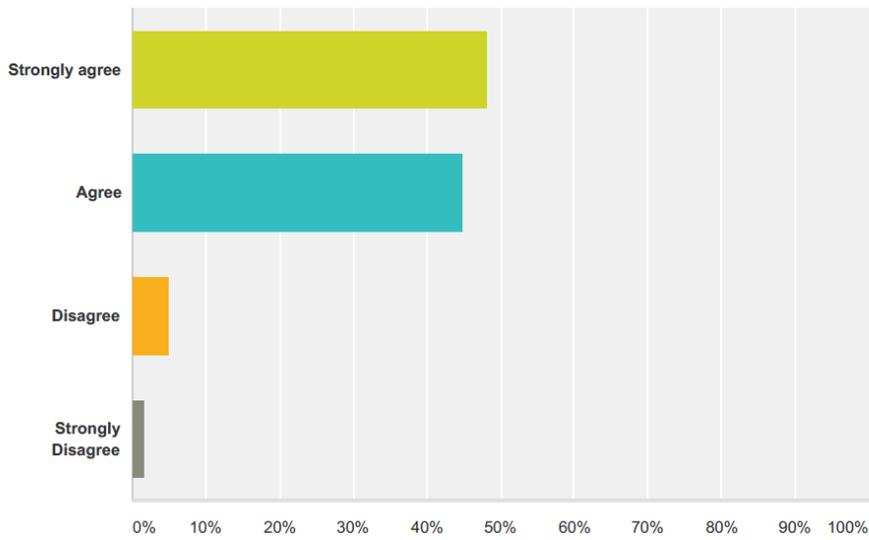
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
YES - I am informed BUT I do not have a pre-crisis plan.	59.66%	142
NO - I am not informed about Crisis Respite	13.87%	33
YES - I am informed AND I have set up a pre-crisis plan.	26.47%	63
Total		238

Q15 This peer support center helps me understand what recovery involves for me.

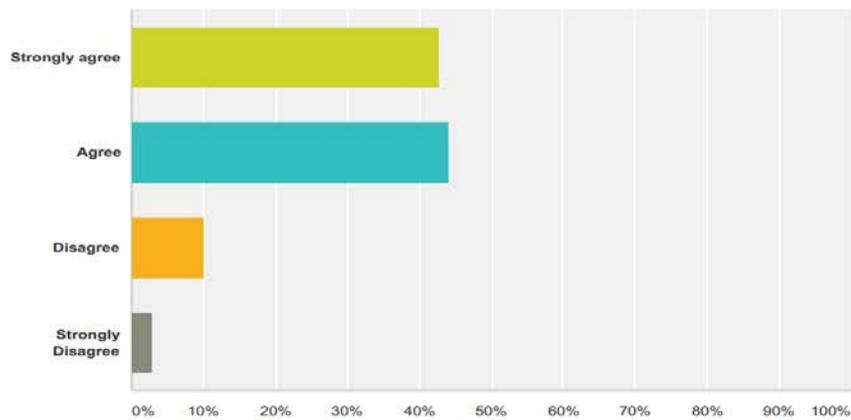
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Strongly agree	48.32%	115
Agree	44.96%	107
Disagree	5.04%	12
Strongly Disagree	1.68%	4
Total		238

Q16 This peer support center gives me hope that I will recover from mental illness.

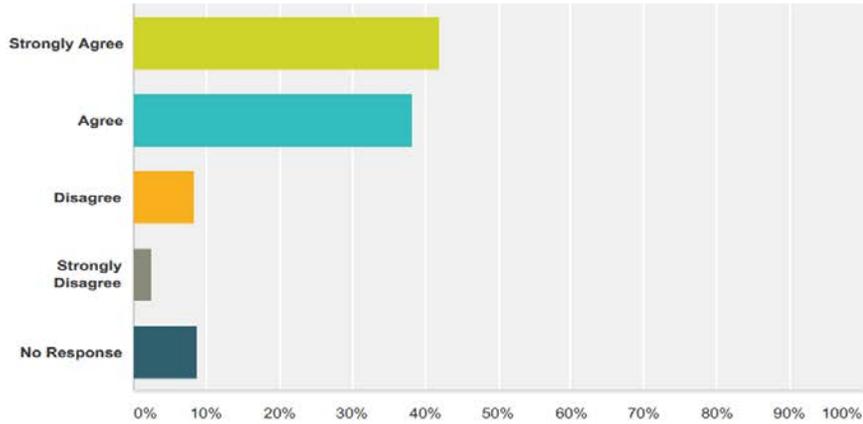
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Strongly agree	42.86%	102
Agree	44.12%	105
Disagree	10.08%	24
Strongly Disagree	2.94%	7
Total		238

Q17 Because of this peer support center my symptoms are not bothering me as much.

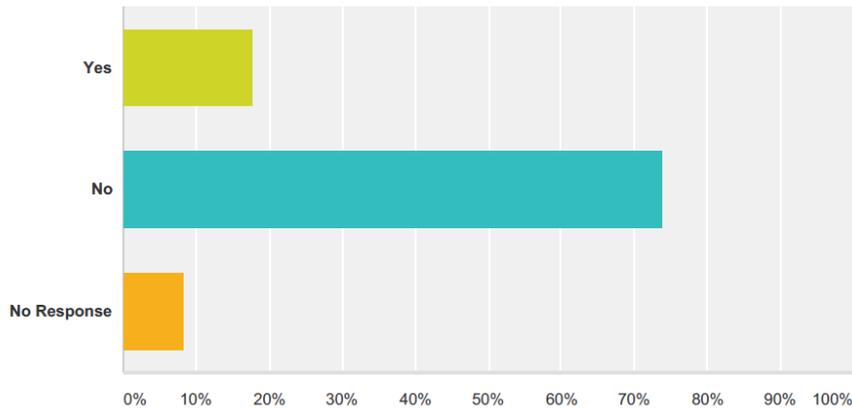
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Strongly Agree	42.02%	100
Agree	38.24%	91
Disagree	8.40%	20
Strongly Disagree	2.52%	6
No Response	8.82%	21
Total		238

Q18 Have you had any problems associated with alcohol or drug use in the past year?

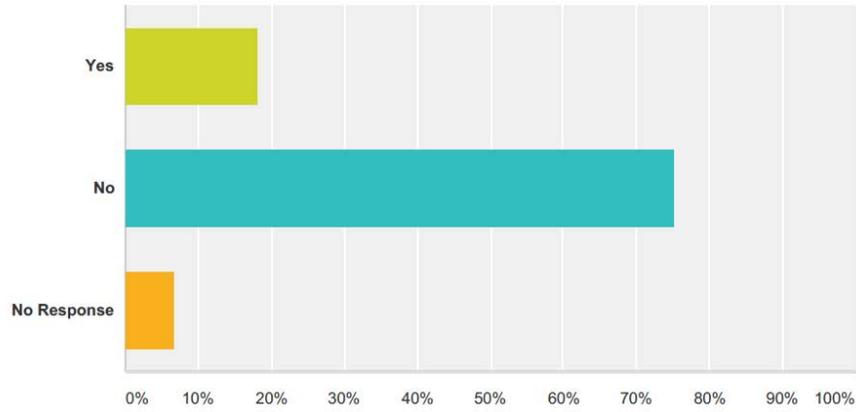
Answered: 238 Skipped: 6



Answer Choices	Responses	Count
Yes	17.65%	42
No	73.95%	176
No Response	8.40%	20
Total		238

Q19 Have you used crisis respite?

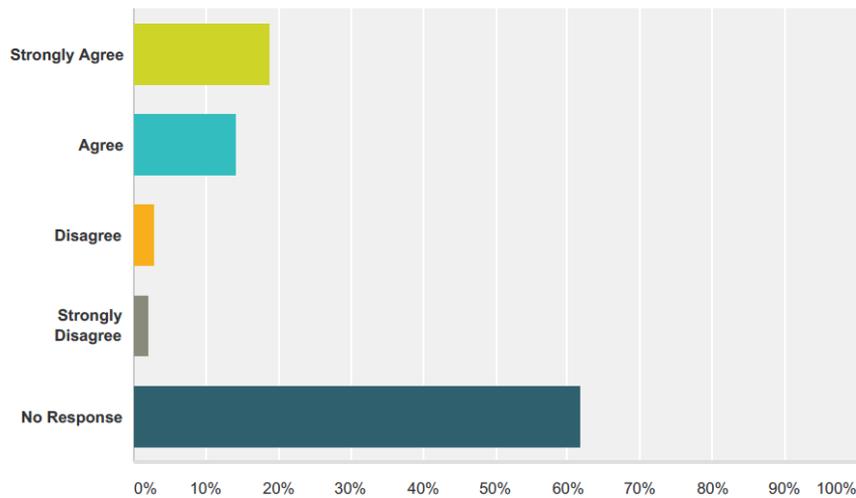
Answered: 238 Skipped: 6



Answer Choices	Responses	
Yes	18.07%	43
No	75.21%	179
No Response	6.72%	16
Total		238

Q20 Crisis respite prevented my emotional difficulties from turning into a psychiatric crisis

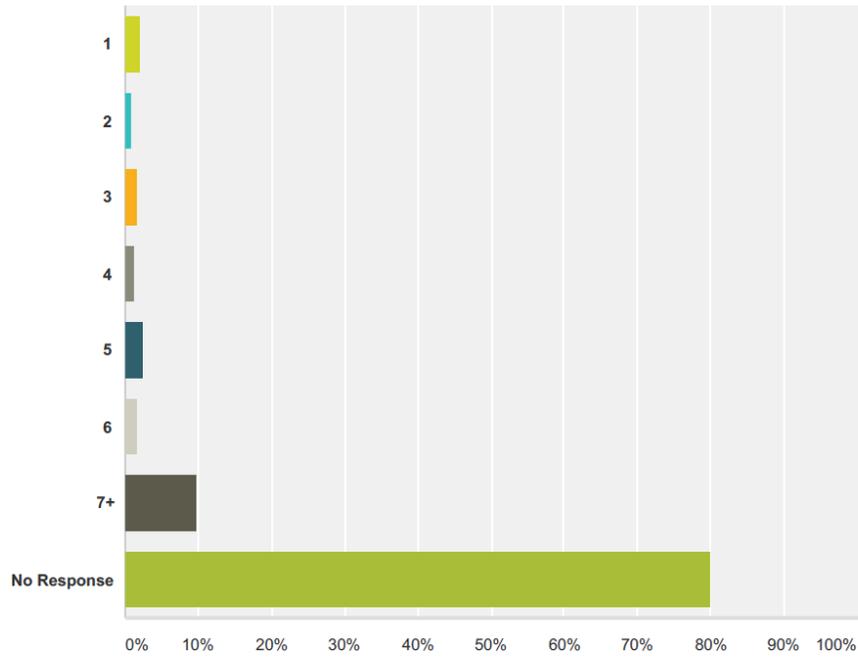
Answered: 233 Skipped: 11



Answer Choices	Responses	
Strongly Agree	18.88%	44
Agree	14.16%	33
Disagree	3.00%	7
Strongly Disagree	2.15%	5
No Response	61.80%	144
Total		233

Q21 I spent ____ days at crisis respite.

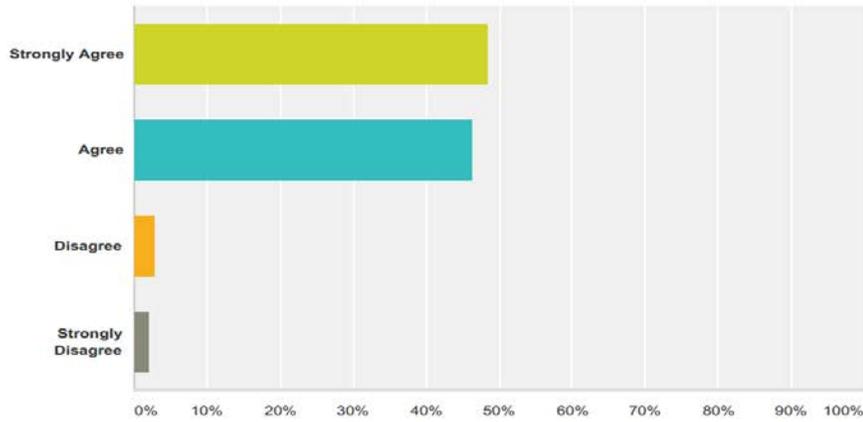
Answered: 234 Skipped: 10



Answer Choices	Responses
1	2.14% 5
2	0.85% 2
3	1.71% 4
4	1.28% 3
5	2.56% 6
6	1.71% 4
7+	9.83% 23
No Response	79.91% 187
Total	234

Q22 Because of this peer support center I am better able to take care of my needs.

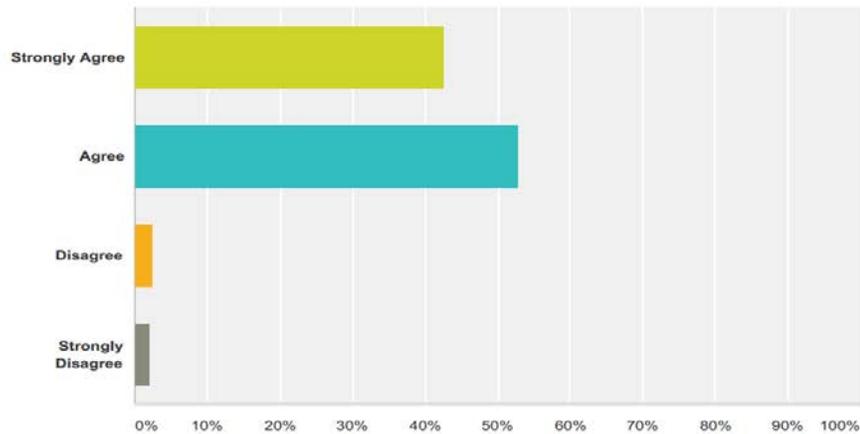
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	48.51%	114
Agree	46.38%	109
Disagree	2.98%	7
Strongly Disagree	2.13%	5
Total		235

Q23 Because of this peer support center I am better able to do things that I want to do.

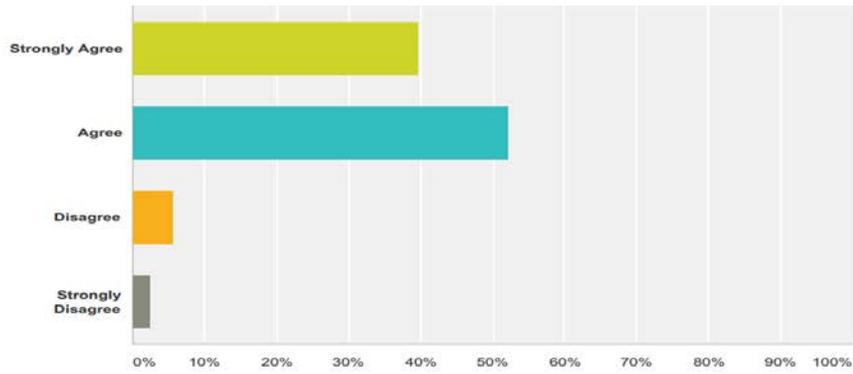
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	42.55%	100
Agree	52.77%	124
Disagree	2.55%	6
Strongly Disagree	2.13%	5
Total		235

Q24 Because of this peer support center I am better able to handle things when they go wrong.

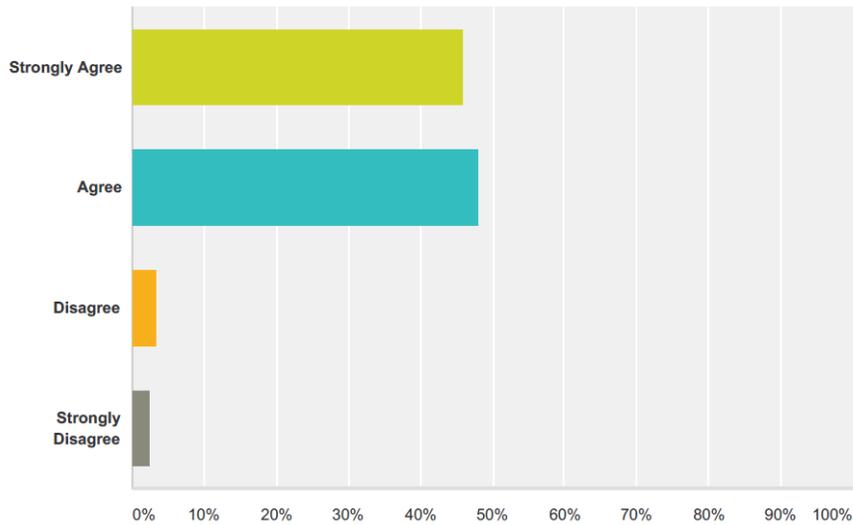
Answered: 234 Skipped: 10



Answer Choices	Responses	
Strongly Agree	39.74%	93
Agree	52.14%	122
Disagree	5.56%	13
Strongly Disagree	2.56%	6
Total		234

Q25 Because of this peer support center I do things that are more meaningful to me.

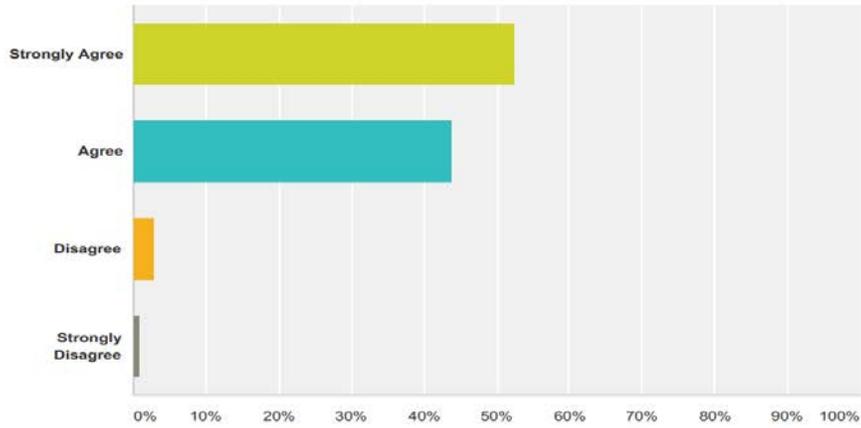
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	45.96%	108
Agree	48.09%	113
Disagree	3.40%	8
Strongly Disagree	2.55%	6
Total		235

Q26 I feel that I have contributions to make in life.

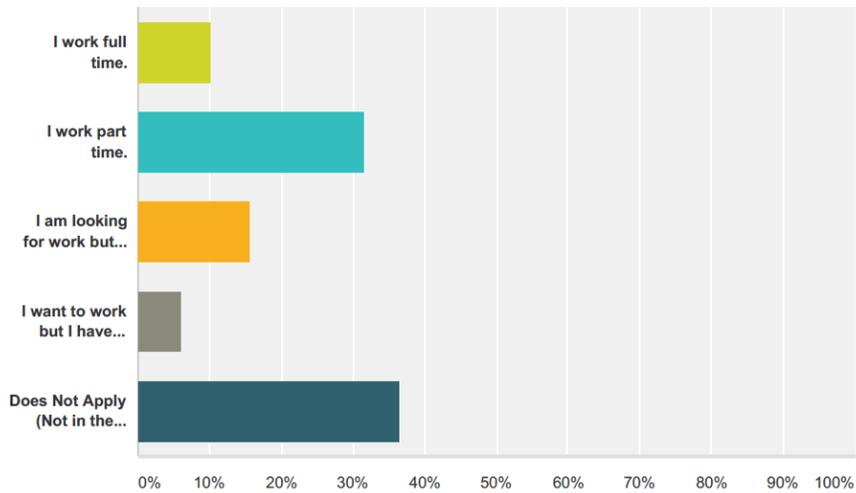
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	52.34%	123
Agree	43.83%	103
Disagree	2.98%	7
Strongly Disagree	0.85%	2
Total		235

Q27 Are you currently working for pay?

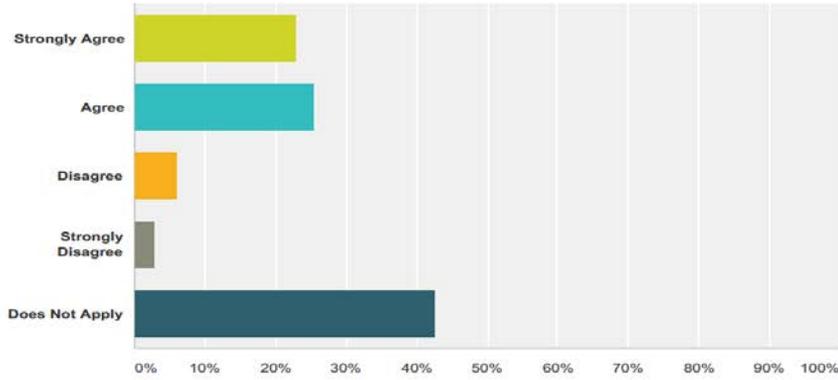
Answered: 235 Skipped: 9



Answer Choices	Responses	
I work full time.	10.21%	24
I work part time.	31.49%	74
I am looking for work but not working .	15.74%	37
I want to work but I have stopped looking.	5.96%	14
Does Not Apply (Not in the labor force)	36.60%	86
Total		235

Q28 This program is helpful with my employment needs.

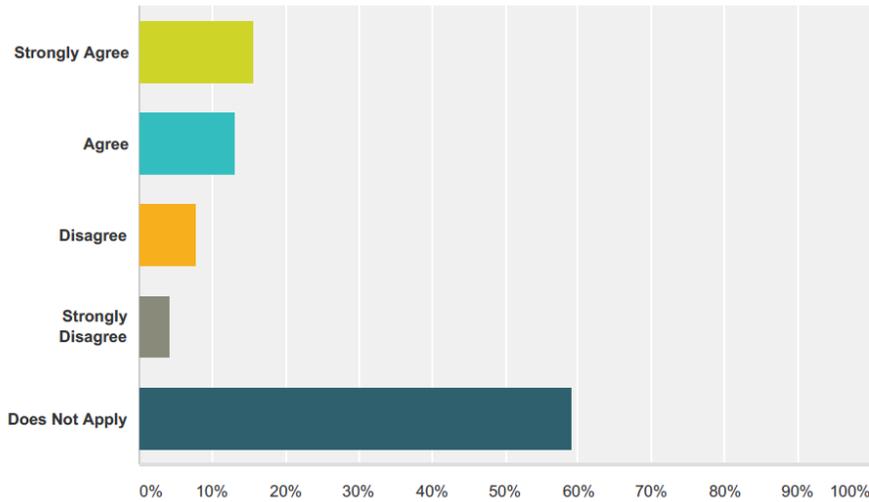
Answered: 235 Skipped: 9



Answer Choices	Responses	Count
Strongly Agree	22.98%	54
Agree	25.53%	60
Disagree	5.96%	14
Strongly Disagree	2.98%	7
Does Not Apply	42.55%	100
Total		235

Q29 This peer support center helps me with my housing needs.

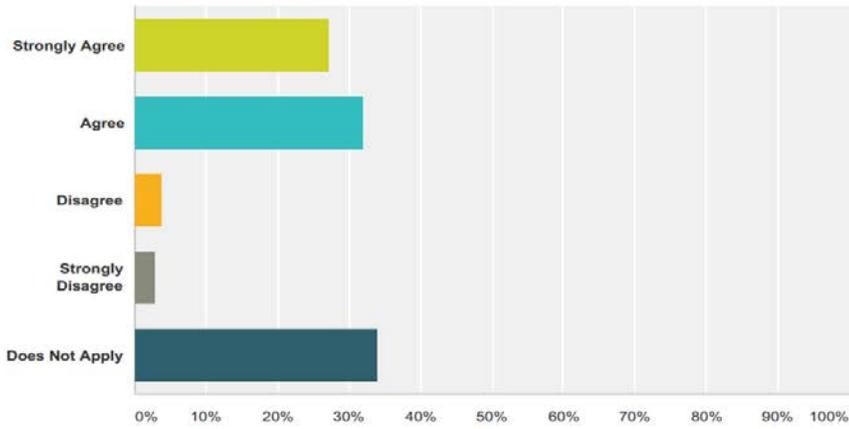
Answered: 235 Skipped: 9



Answer Choices	Responses	Count
Strongly Agree	15.74%	37
Agree	13.19%	31
Disagree	7.66%	18
Strongly Disagree	4.26%	10
Does Not Apply	59.15%	139
Total		235

Q30 This peer support center helps me conduct important personal business (for example, appointments, applications, navigating an appeal, managing or organizing things I need to do.)

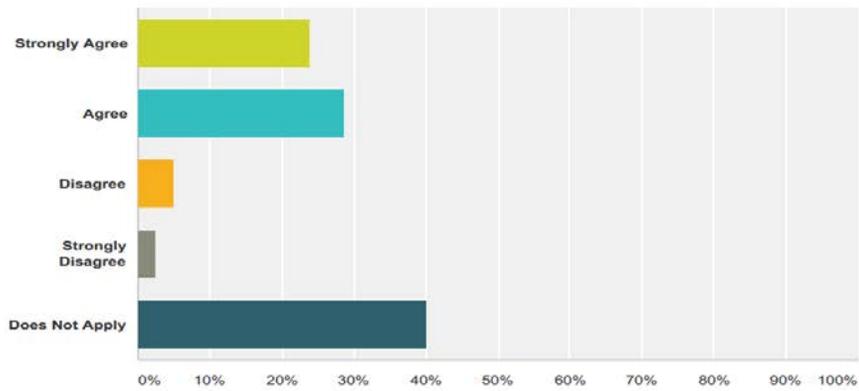
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	27.23%	64
Agree	31.91%	75
Disagree	3.83%	9
Strongly Disagree	2.98%	7
Does Not Apply	34.04%	80
Total		235

Q31 This peer support center helps me with my educational or training needs.

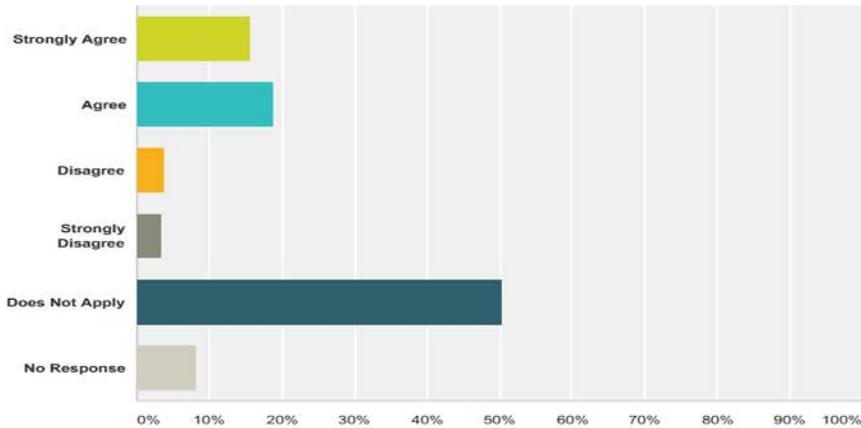
Answered: 235 Skipped: 9



Answer Choices	Responses	
Strongly Agree	23.83%	56
Agree	28.51%	67
Disagree	5.11%	12
Strongly Disagree	2.55%	6
Does Not Apply	40.00%	94
Total		235

Q32 This peer support center helps me find resources for dealing with an alcohol or drug problem.

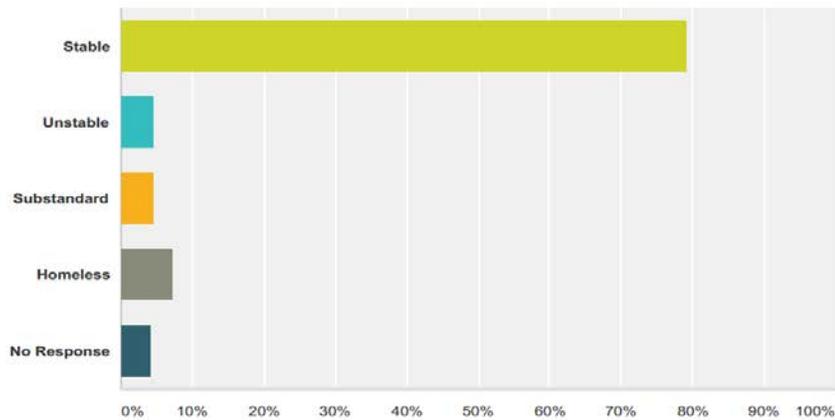
Answered: 235 Skipped: 9



Answer Choices	Responses	Count
Strongly Agree	15.74%	37
Agree	18.72%	44
Disagree	3.83%	9
Strongly Disagree	3.40%	8
Does Not Apply	50.21%	118
No Response	8.09%	19
Total		235

Q33 My current housing situation is:

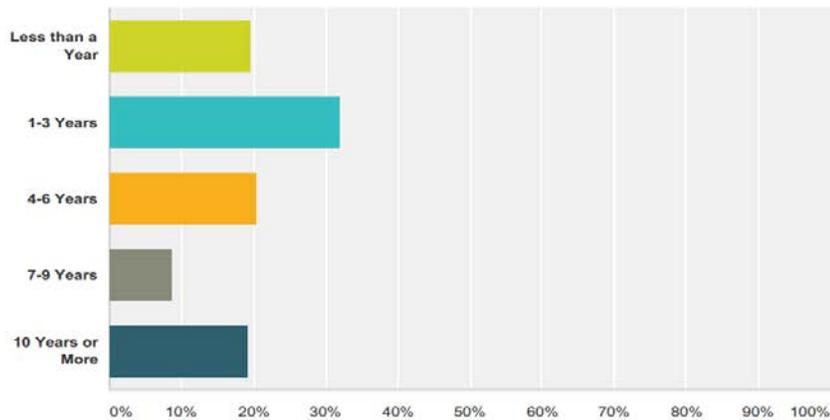
Answered: 235 Skipped: 9



Answer Choices	Responses	Count
Stable	79.15%	186
Unstable	4.68%	11
Substandard	4.68%	11
Homeless	7.23%	17
No Response	4.26%	10
Total Respondents: 235		

Q35 How long have you been coming to this peer support agency? (Or participate via Outreach)

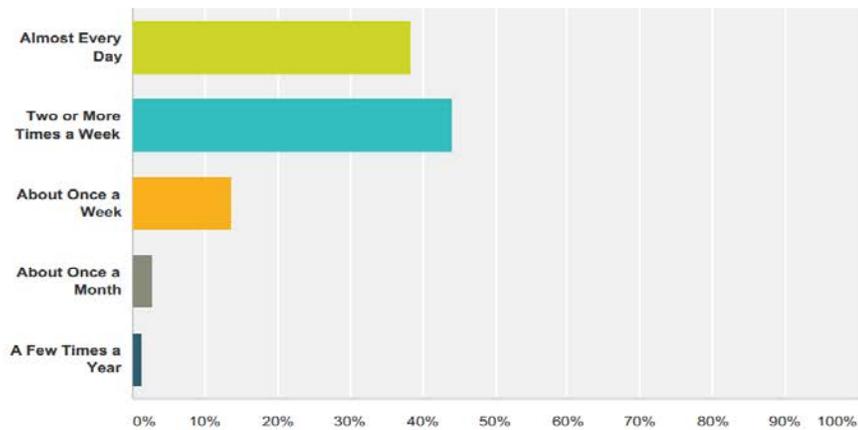
Answered: 229 Skipped: 15



Answer Choices	Responses	
Less than a Year	19.65%	45
1-3 Years	31.88%	73
4-6 Years	20.52%	47
7-9 Years	8.73%	20
10 Years or More	19.21%	44
Total		229

Q36 During a typical week, how often to you come to the peer support center? (Or participate via Outreach)

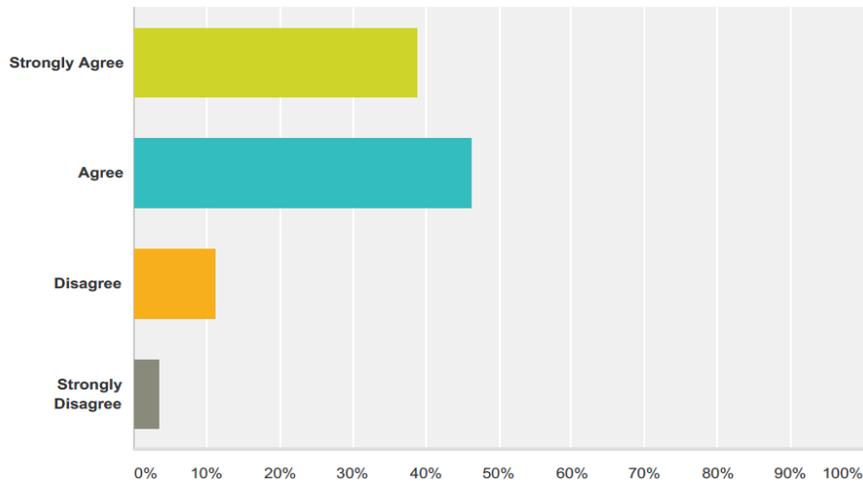
Answered: 229 Skipped: 15



Answer Choices	Responses	
Almost Every Day	38.43%	88
Two or More Times a Week	44.10%	101
About Once a Week	13.54%	31
About Once a Month	2.62%	6
A Few Times a Year	1.31%	3
Total		229

Q37 I feel that I am involved in the planning for this peer support center.

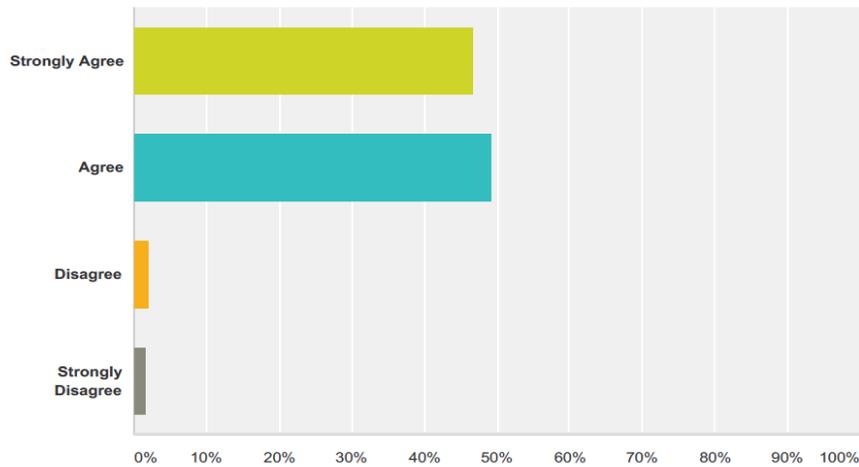
Answered: 229 Skipped: 15



Answer Choices	Responses	
Strongly Agree	38.86%	89
Agree	46.29%	106
Disagree	11.35%	26
Strongly Disagree	3.49%	8
Total		229

Q38 The peer support program services are useful to me.

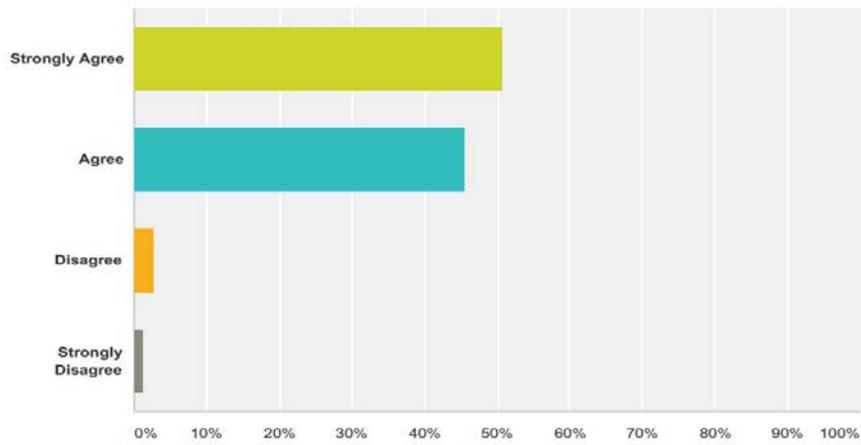
Answered: 229 Skipped: 15



Answer Choices	Responses	
Strongly Agree	46.72%	107
Agree	49.34%	113
Disagree	2.18%	5
Strongly Disagree	1.75%	4
Total		229

Q39 I have people I can do enjoyable things with.

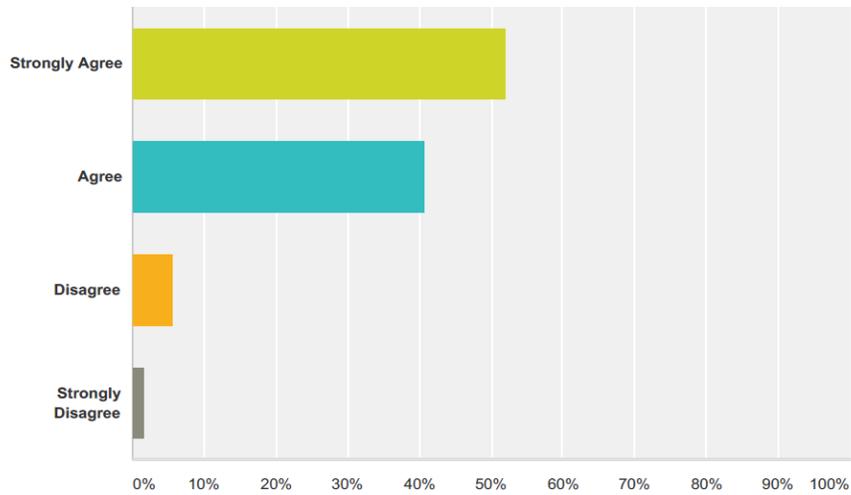
Answered: 229 Skipped: 15



Answer Choices	Responses	Count
Strongly Agree	50.66%	116
Agree	45.41%	104
Disagree	2.62%	6
Strongly Disagree	1.31%	3
Total		229

Q40 I am happy with the friendships I have.

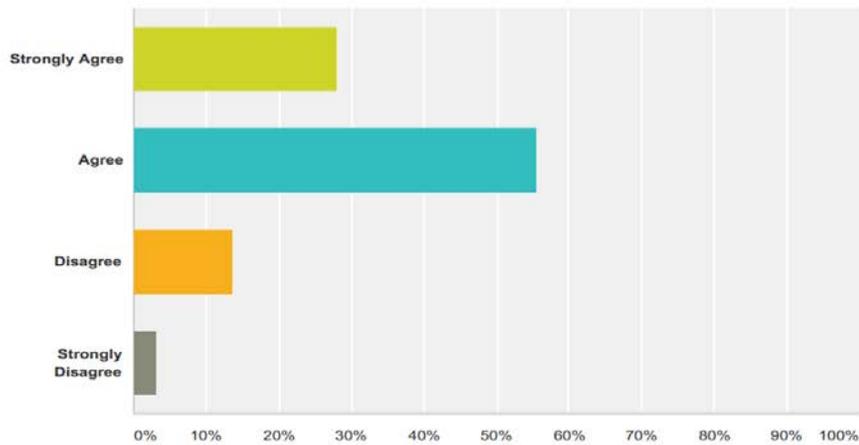
Answered: 229 Skipped: 15



Answer Choices	Responses	Count
Strongly Agree	51.97%	119
Agree	40.61%	93
Disagree	5.68%	13
Strongly Disagree	1.75%	4
Total		229

Q41 The social relationships I have with my neighbors are what I want them to be.

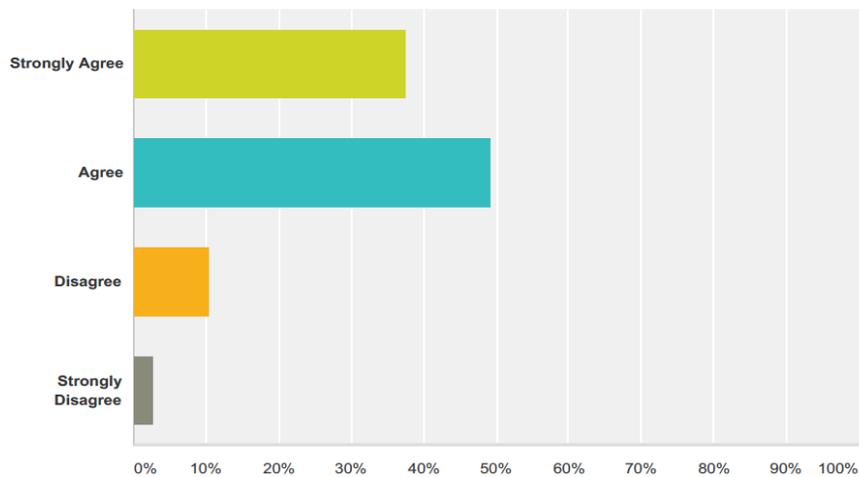
Answered: 229 Skipped: 15



Answer Choices	Responses	Count
Strongly Agree	27.95%	64
Agree	55.46%	127
Disagree	13.54%	31
Strongly Disagree	3.06%	7
Total		229

Q42 I feel I belong in my community.

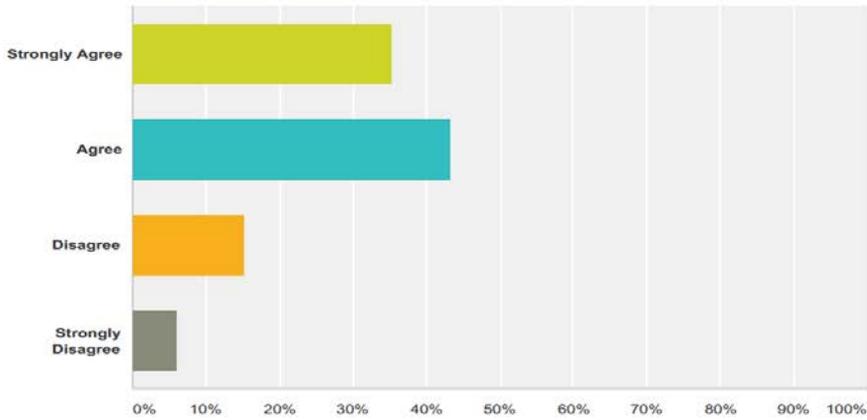
Answered: 229 Skipped: 15



Answer Choices	Responses	Count
Strongly Agree	37.55%	86
Agree	49.34%	113
Disagree	10.48%	24
Strongly Disagree	2.62%	6
Total		229

Q43 I am involved in activities that are not connected to being a participant in the peer support center, like sports, volunteer work, clubs, church events, or other types of community life.

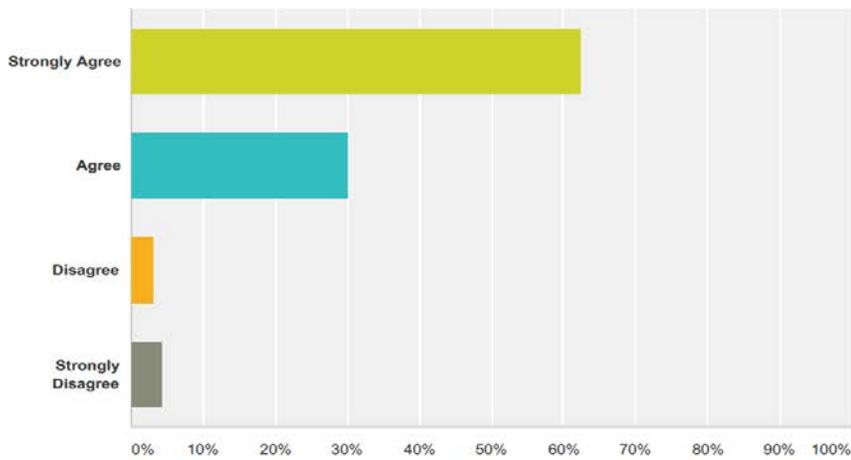
Answered: 229 Skipped: 15



Answer Choices	Responses	
Strongly Agree	35.37%	81
Agree	43.23%	99
Disagree	15.28%	35
Strongly Disagree	6.11%	14
Total		229

Q44 Overall, I am satisfied with this peer support center.

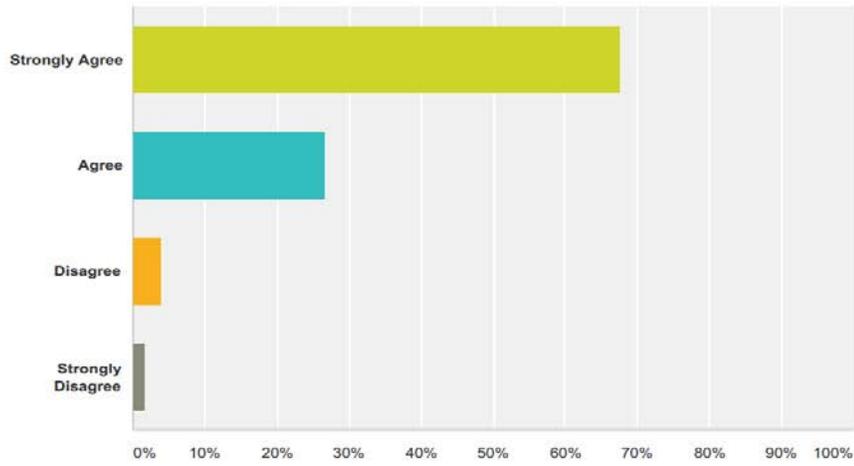
Answered: 229 Skipped: 15



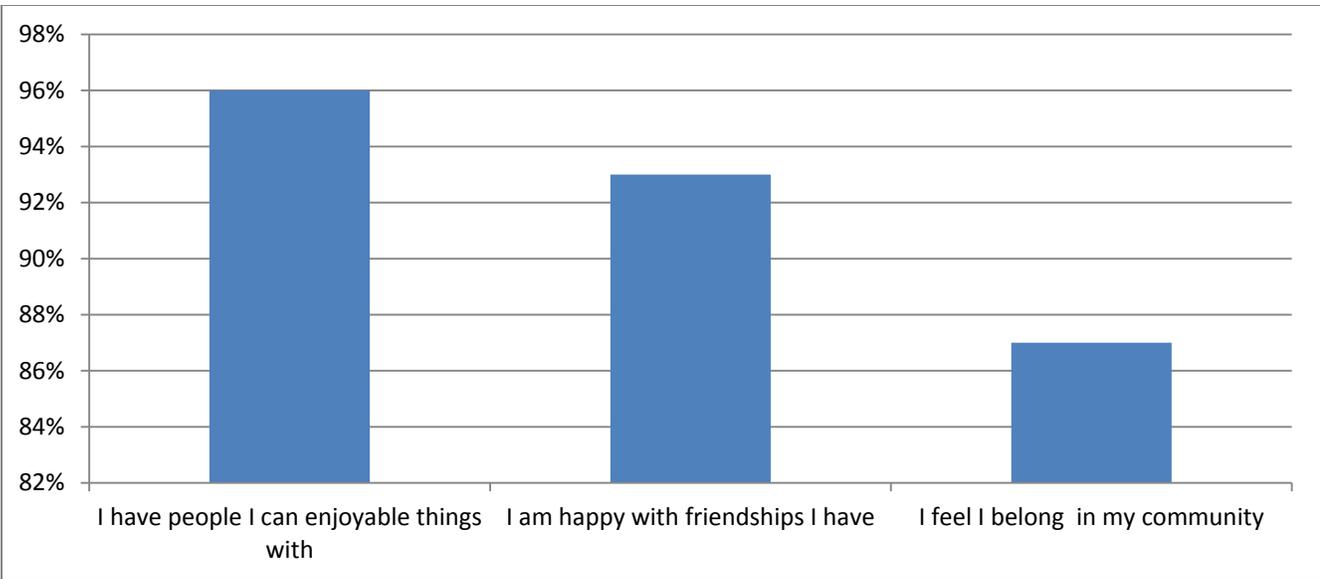
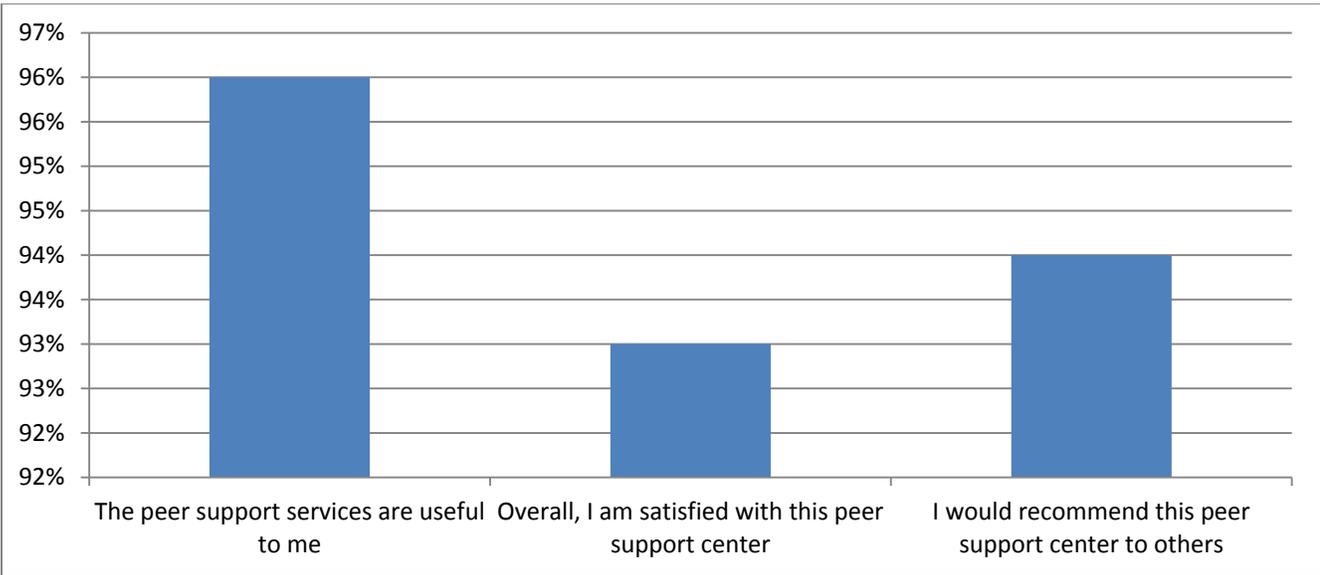
Answer Choices	Responses	
Strongly Agree	62.45%	143
Agree	30.13%	69
Disagree	3.06%	7
Strongly Disagree	4.37%	10
Total		229

Q45 I would recommend this peer support center to others dealing with serious mental health issues.

Answered: 229 Skipped: 15



Answer Choices	Responses
Strongly Agree	67.69% 155
Agree	26.64% 61
Disagree	3.93% 9
Strongly Disagree	1.75% 4
Total	229



SAMHSA Strategy #4 - Recovery

This strategy, particularly the elements of Health, Purpose, and Community, inform the NH State priority areas for the MHBG and the indicators for data collection via the annual “What Do You Think?” Peer Support Outcomes survey for New Hampshire’s grant funded peer support agencies. Below is the text from the FY14-FY15 MHBG Guidance for this strategy:

State authorities are encouraged to implement, track, and monitor recovery-oriented, quality behavioral health care services within their states as authorized under the SABG and MHBG.

Behavioral health care recovery support services include the following four major dimensions that support a life in recovery (the dimensions of recovery):

- 1. Health: Overcoming or managing one’s disease(s) or symptoms- for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem- and for everyone in recovery, making informed, healthy choices that support physical and emotional wellbeing.**
 - Promote health and recovery support services for individuals with mental and/or substance use disorders
 - Promote health, wellness, and resiliency
 - Promote recovery-oriented service systems
 - Engage individuals in recovery and their families in self-directed care, shared decision-making, and person centered planning.
 - Promote self-care alternatives to traditional care
- 2. Home: Stable and safe place to live**
 - Ensure that supported independent housing, and recovery housing are available for individuals with mental and/or substance use disorders
 - Improve access to mainstream benefits, housing assistance programs, and supportive services for people with mental and/or substance use disorders
 - Build leadership, promote collaborations, and support the use of evidence-based practices related to permanent supportive housing and recovery housing
 - Increase knowledge of the behavioral health field about housing and homelessness among people with mental and/or substance use disorders
- 3. Purpose: Meaningful daily activities, such as job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society.**
 - Increase gainful employment and educational opportunities for individuals with or in recovery from mental and/or substance use disorders
 - Increase the proportion of individuals with mental and/or substance use disorders who are gainfully employed and/or participating in self-directed educational services
 - Develop employer strategies to address national employment and education disparities among people with identified behavioral health problems
 - Implement evidence-based practices related to employment and education for individuals with mental and/or substance use disorders
- 4. Community: Relationships and social networks that provide support, friendship, love, and hope**
 - Promote peer support and the social inclusion of individuals with or in recovery from mental and/or substance use disorders
 - Increase the number and quality of consumer/peer recovery support specialists and consumer-operated/peer-run recovery support service provider organizations
 - Promote the social inclusion of people with mental and/or substance use disorders

These elements – health, home, purpose, and community – are central to recovery from mental and/or substance use disorders. Recovery support services include efforts such as self-directed care, shared decision making, peer-operated services, peer specialists and recovery coaches, wellness activities, supported housing, recovery housing, self-care, supported employment, supported education, warm lines, person-centered planning and family support, social inclusion, and rights protection.

Technical information

Representation of Peer Participants

It is important to note that while the survey respondents are believed to be representative of the larger PSA population, this is not a random sample. Opinions of non-respondents may differ from those of survey respondents.

Agency Non-participation

With strong encouragement, all agencies participated this year unlike in previous years. We did not, however, receive any responses from those only participating in Outreach.

Early Exits

Two hundred twenty-nine (229) respondents completed the survey to the end. All statistics are calculated from the completed surveys. There is no information as to why people exited the survey before finishing it, or exiting when they did. It is possible that some of the exits indicate false starts before returning to complete the survey.

Cross Tabbed Data

The survey contained 45 discrete items. Agency directors may request cross tabbing for items of interest, providing there are sufficient numbers of respondents to protect identity. Agency directors also receive individualized reports with the results for their agency, again, assuming there are sufficient numbers of respondents to protect identity.

A Note About Research

This is neither a scientific survey nor a research paper. The reader interested in learning more about peer support is encouraged to contact the Office of Consumer and Family Affairs at (603) 271-5045 or at 105 Pleasant St., Concord, NH 03301.

PEER SUPPORT AGENCIES OF NEW HAMPSHIRE

Region I

Conway Peer Support Center

Executive Director: Lauara Mekinona

6 Main Street

PO Box 241

Conway, NH 03818

Phone: (603)447-1765

Website: www.alcenters.org/conwayctr

Email: alcenters@gmail.com

Wolfeboro Outreach Program

Team Leader: Robin Liakos

Wolfeboro, NH 03896

Phone: (603)662-2140

Email: wolfeboroutreach@gmail.com

The Haven

Team Leader: Joanne Hill

27 Lombard Street

Colebrook, NH 03576

Phone: (603)237-4353

Website: www.alcenters.org/colebrookctr

Email: colebrookhaven@gmail.com

Serenity Steps

Team Leader: Ellen Tavino

567 Main Street

Berlin, NH 03570

Phone: (603)752-8111

Website: www.alcenters.org/berlinctr

Email: serenitysteps@gmail.com

Littleton Peer Support

Team Leader:

267 Main Street

Littleton, NH 03561

Website: www.alcenters.org/littletonctr

Email: littletonpsc@gmail.com

Main Website: www.alcenters.org

Warmline: 1-866-447-1765

Region II

Stepping Stone

Executive Director: Susan Seidler

108 Pleasant Street

Claremont, NH 03743

Phone: (603)543-1388

Next Step

Program Director: Mark Nichols

109 Bank Street

Lebanon, NH 03766

Phone: (603)448-6941

Website: www.stepsnextstep.org

Warm Line: 1-888-582-0920

Region III and IV

Concord Peer Support (Lakes Region Consumer Advisory Board)

Executive Director: Patt Fancy
55 School Street
Concord, NH 03301
Phone: (603)224-0083
Website: www.nhcornerbridge.org
Email: lrcab1@metrocast.net

Cornerbridge of Laconia

Program Director:
328 Union Ave
Laconia, NH 03247
Phone: (603)528-7742
Email: cornerbridge@comcast.net

Region V

Monadnock Area Peer Support Agency

Executive Director: Damien Licata
64 Beaver Street
PO Box 258
Keene, NH 03431
Phone: (603)352-5093
Website: www.monadnockpsa.org
Email: dlicata@monadnockpsa.org
Warm Line: 1-866-352-5093

Region VI

HEARTS Peer Support Center of Greater Nashua

Executive Director: Ken Lewis
5 Pine Street Extension
PO Box 1564
Nashua, NH 03061
Phone: (603)882-8400
Website: www.heartpsa.org
Email: kenl-hearts@comcast.net
Warm Line: 1-800-306-4334

Region VII

On The Road To Wellness
Executive Director, Warren Bouchard
13 Orange Street
Manchester, NH 03104
Phone: (603)623-4523
Website: www.otrtw.org
Email: Manchester@otrtw.org
Warm Line: 1-800-306-4334

Region VIII

Seacoast Consumer Alliance Peer Support Center

544 Islington Street

Portsmouth, NH 03801

Phone: (603)427-6966

Email: scapeersupportcenter@comcast.net

Warm Line: 1-800-809-6262

Region IX

Tri-City Consumers' Action Alliance

Executive Director: Martha Jo Hewitt

36 Wakefield Street

Rochester, NH 03867

Phone: (603)948-1046

Website: www.tricitycoop.org

Email: tricitycoop@metrocast.net

Region X

On The Road To Wellness

Program Manager: David Blacksmith

12 Birch Street

Derry, NH 03038

Phone: (603)552-3177

Website: www.otrtr.org

Email: derry@otrtr.org