



**2024 Consumer Satisfaction  
Survey Final Analysis &  
Recommendations**

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**Prepared for:** Southwest Michigan Behavioral Health

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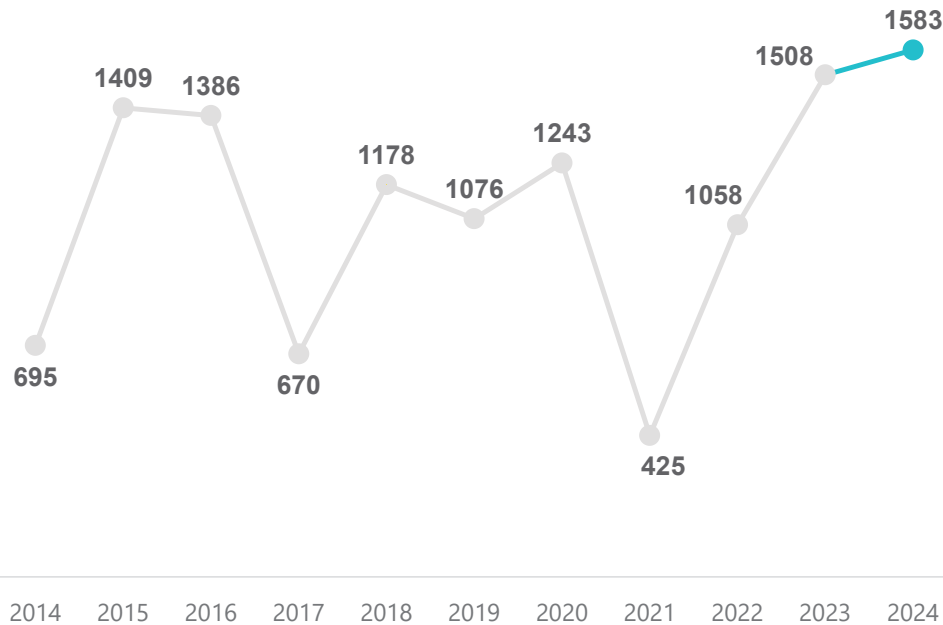
# 2024 Response Rates

Full methods breakdown available at end of report

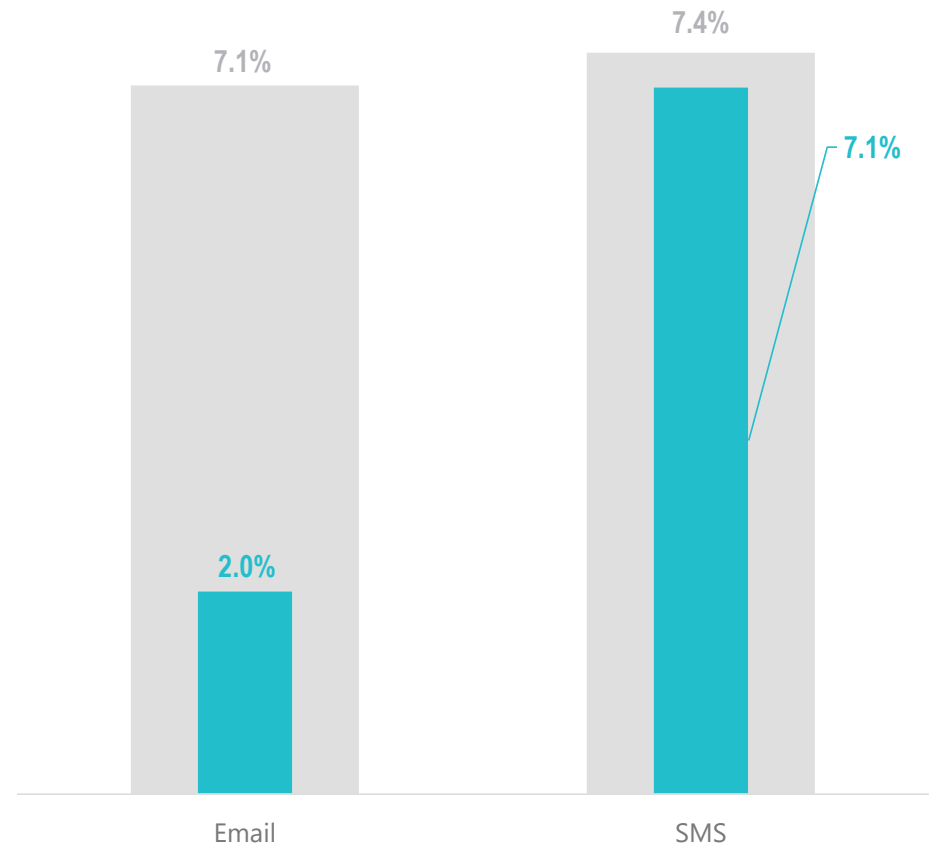
# Highest number of responses ever recorded for 2024 MHSIP

Email response rate dropped 5 points to 2% in 2024, but SMS response rate held steady

### MHSIP # of responses, 2014-2024



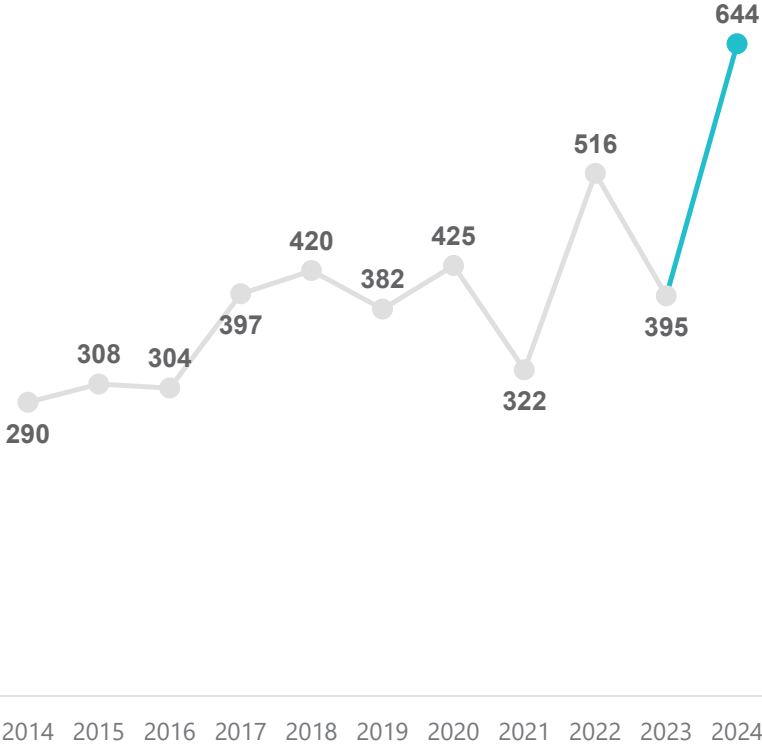
### MHSIP response rate by medium 2023 vs. 2024



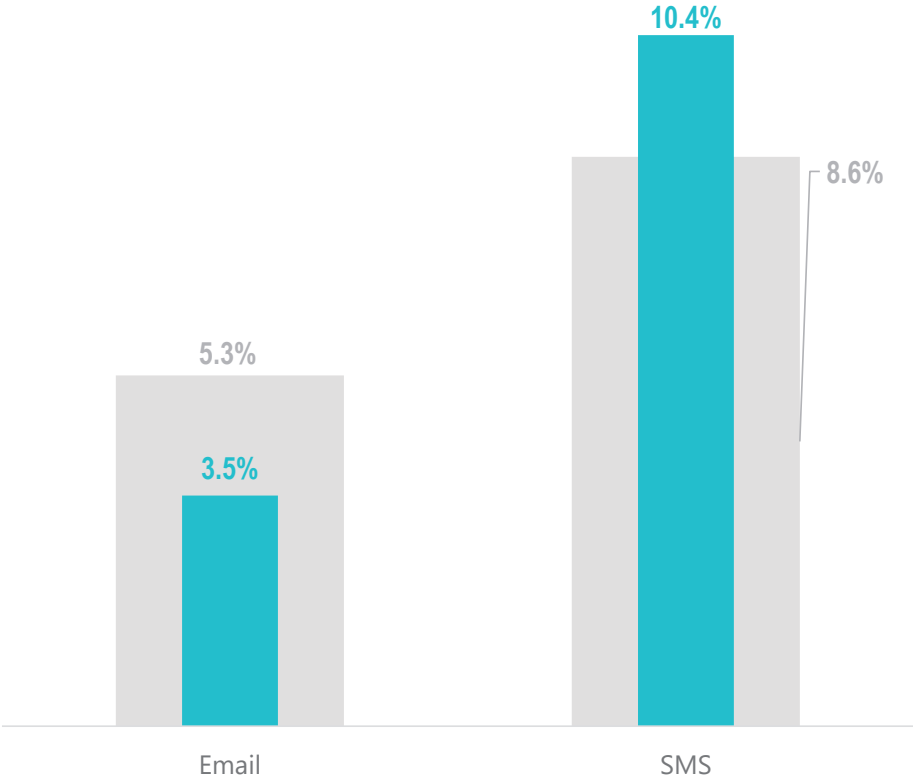
# YSS number of responses hit highest ever recorded in 2024

SMS outreach resulted in a higher response rate by ~2 points compared to 2023

### YSS # of responses, 2014-2023



### YSS response rate by medium 2023 vs. 2024



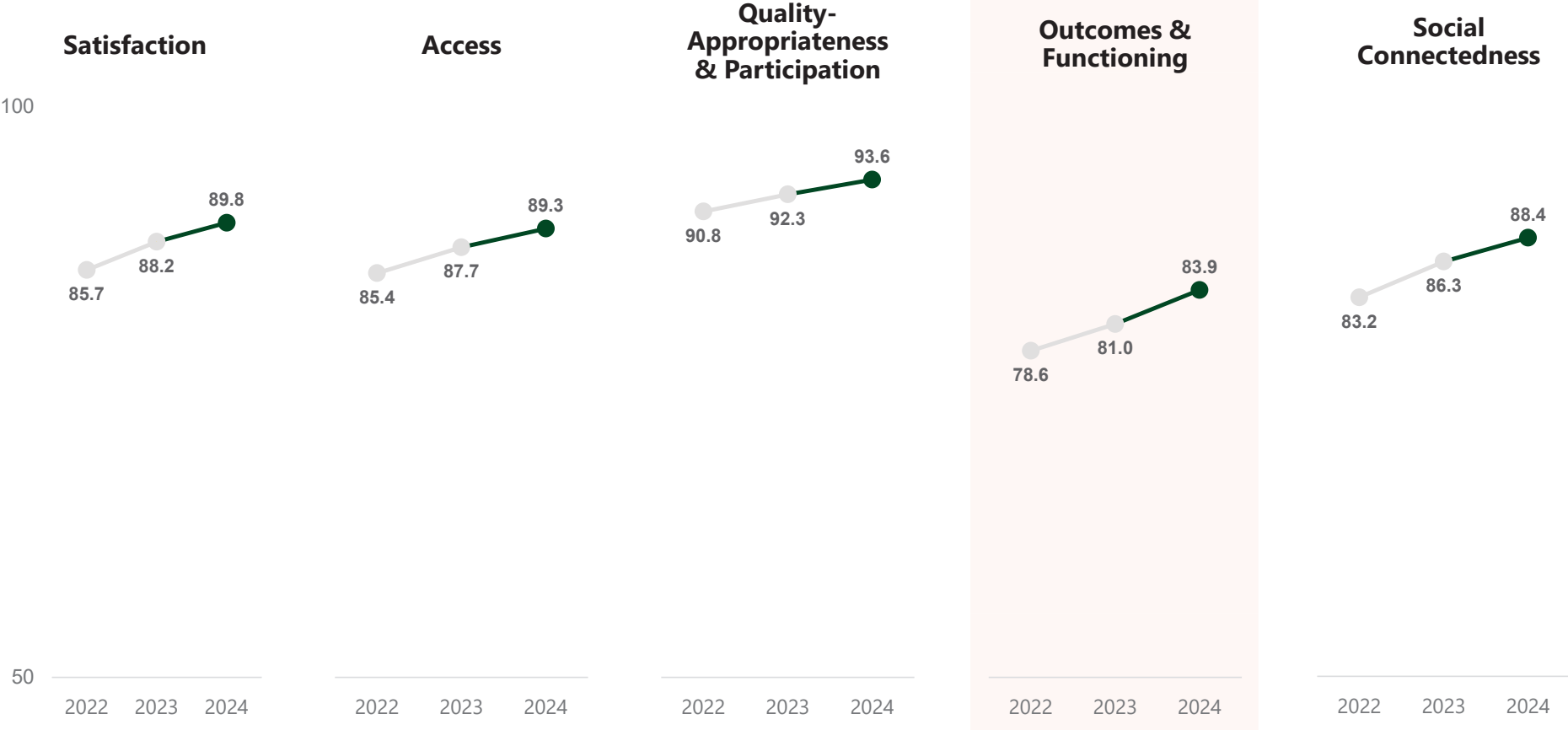


# Mental Health Statistics Improvement Plan (MHSIP) Revised Tool: 2024 Results

Sample size: 1583

# Adults' outcomes & functioning improved from 2023 to 2024

Difference in constructs other than Outcomes & Functioning not statistically significant at 95% confidence.



Statistically significant difference ( $p < .05$ ) between this year and previous year

# Consumers had life-changing accounts of benefit from their CMHSPs

“Seeing the people at Woodlands on a regular basis helped me be able to **set goals and manage my life** better. Even if I'm struggling I feel better knowing that **I have support if I need it** and **people I can trust** for advice.”

“I'm not being dramatic when I say this, but ISK **actually saved my life**...I can honestly say after nearly 3 decades, **my mental health hasn't been this under control** or handled like this before.”

“The staff have helped me to **no longer be disabled** and to **live a normal life** working full time while continuing monthly treatment. I have been getting treatment for over 7 years and **plan to continue**.”

“This has been a **life saving service!** They helped me realize I was in a DV situation and **supported me through the entire process** of getting myself and my children out of that situation... **literally saved our lives**.”

“Helped me to be able to **live my life again**.”

“It is good to have a check-in to remind me that **my life is improving**, even if it is bit by bit. **I'm extremely appreciative**.”

“I'm actually **accomplishing and achieving** my **name change goal** in my transgender journey.”

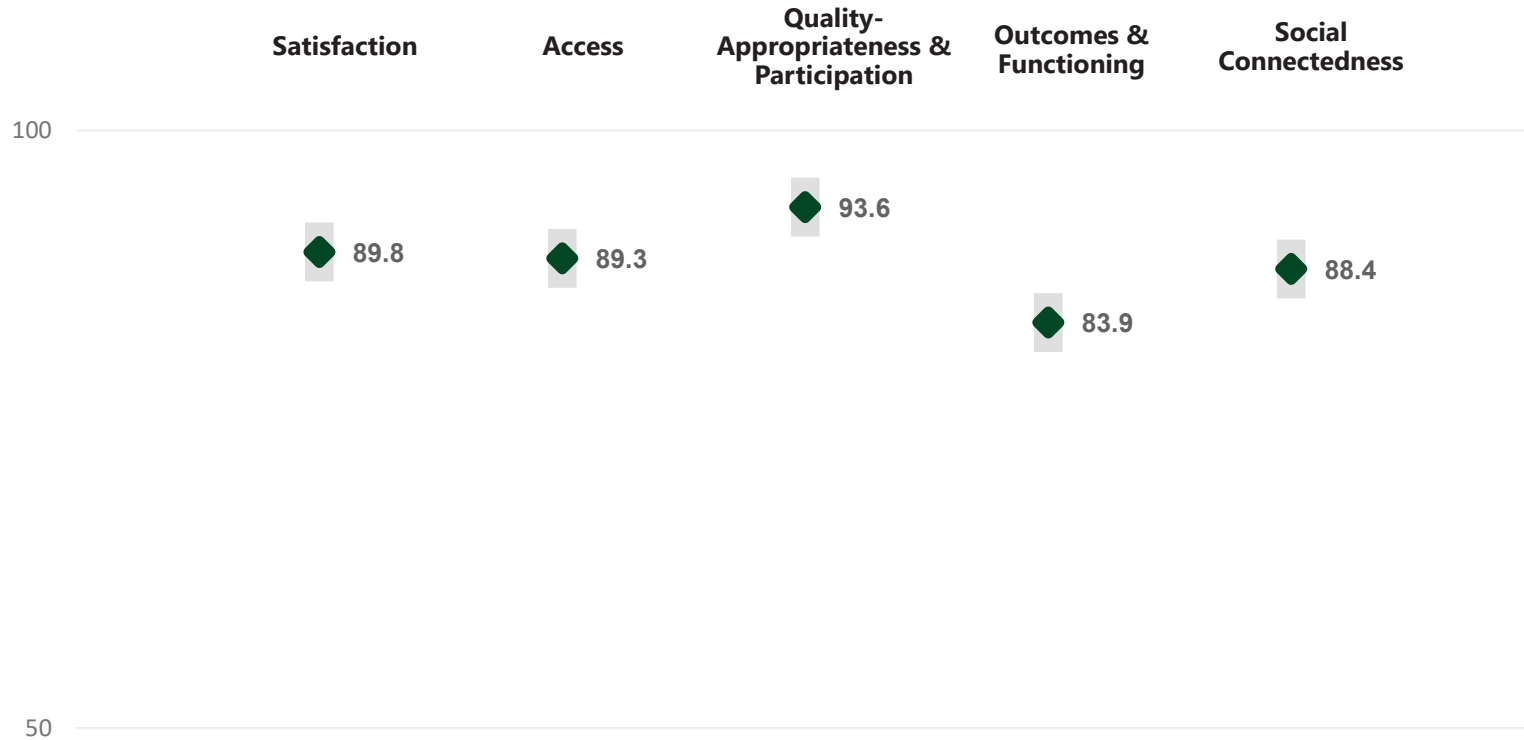
“My case manager is awesome. She has **helped me so much** in a short period of time. I now have **my own apartment**. I now have a **county ID card** and **Social Security card**. Those things are a big deal to me because I didn't have those things for a very very long time. **I would not have been able to do it without her**.”



# All SWMBH CMHSPs: 2024 MHSIP scores by construct

**Dark green** denotes the percentage in agreement for that construct's items

**Gray** bars denote the likely range where the true percentage for all SWMBH consumers might lie (i.e., margin of error\*)



95% margin of error for all CMHSPs:  $\pm 2.5$  pts  
n = 1583

# Race: Nonwhite consumers reported slightly lower scores

"Nonwhite" category comprises any race other than White, including Black/African American, Asian, Native American, Native Hawaiian/Pacific Islander, or any mix of races. This aggregation was done due to small sample sizes.



% stating "agree"

Statistically significant difference ( $p < .05$ ) between groups (Mann Whitney U)

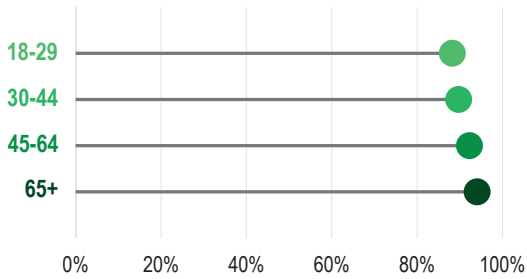
White n = 1,118

Nonwhite n = 361

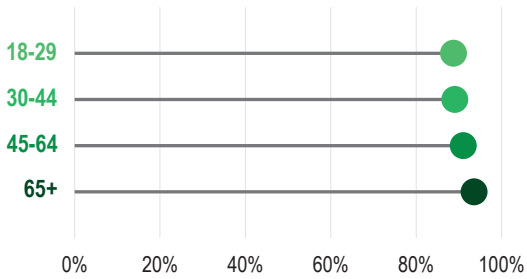
# Age: Younger respondents had lower ratings, except in social connectedness where they reported higher ratings

However, construct ratings were generally similar between groups, so practical significance is limited.

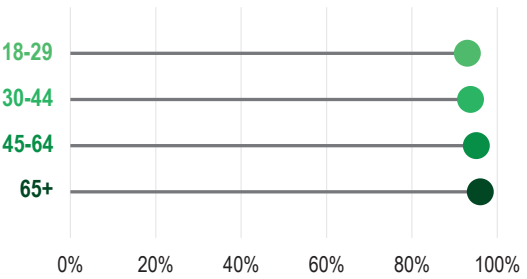
**Satisfaction**



**Access**

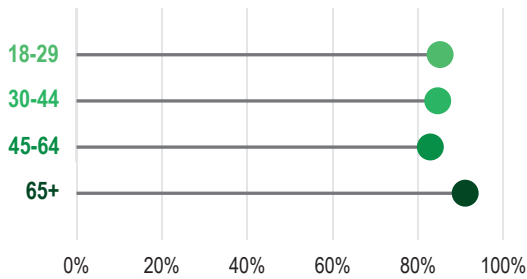


**Quality-Appropriateness & Participation**

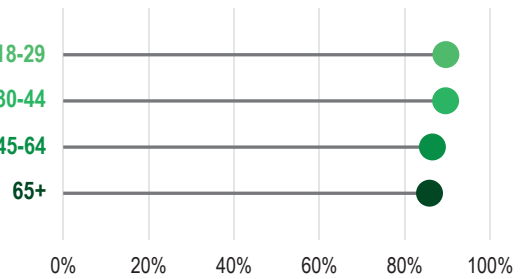


% stating "agree"

**Outcomes & Functioning**



**Social Connectedness**

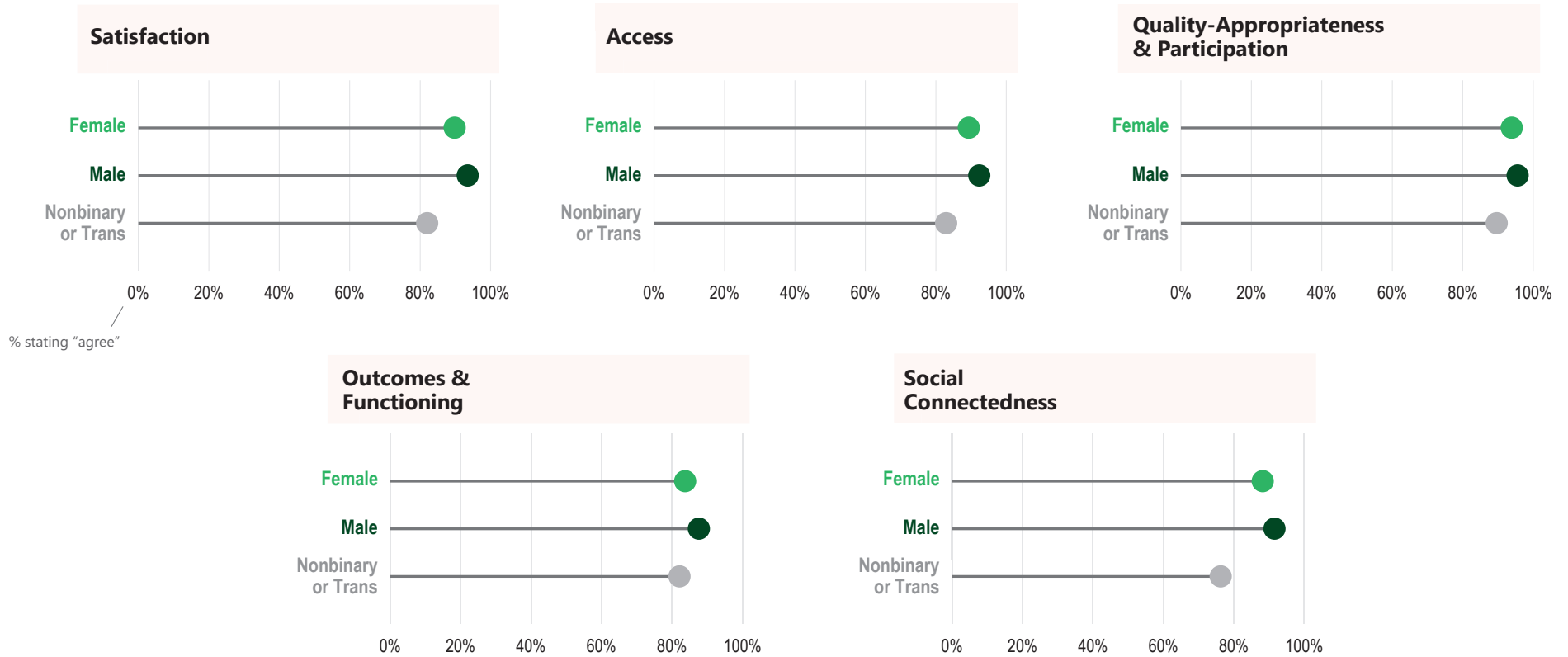


Statistically significant difference ( $p < .05$ ) between age groups (Kruskal-Wallis)

18-29 n = 396    45-64 n = 468  
30-44 n = 510    65+ n = 99

# Gender: Nonbinary & transgender consumers reported lower scores; men reported slightly higher scores

Male consumers reported higher scores than both groups in all constructs except Satisfaction and QA&P, while nonbinary and trans consumers reported lowest scores in Access and Social Connectedness



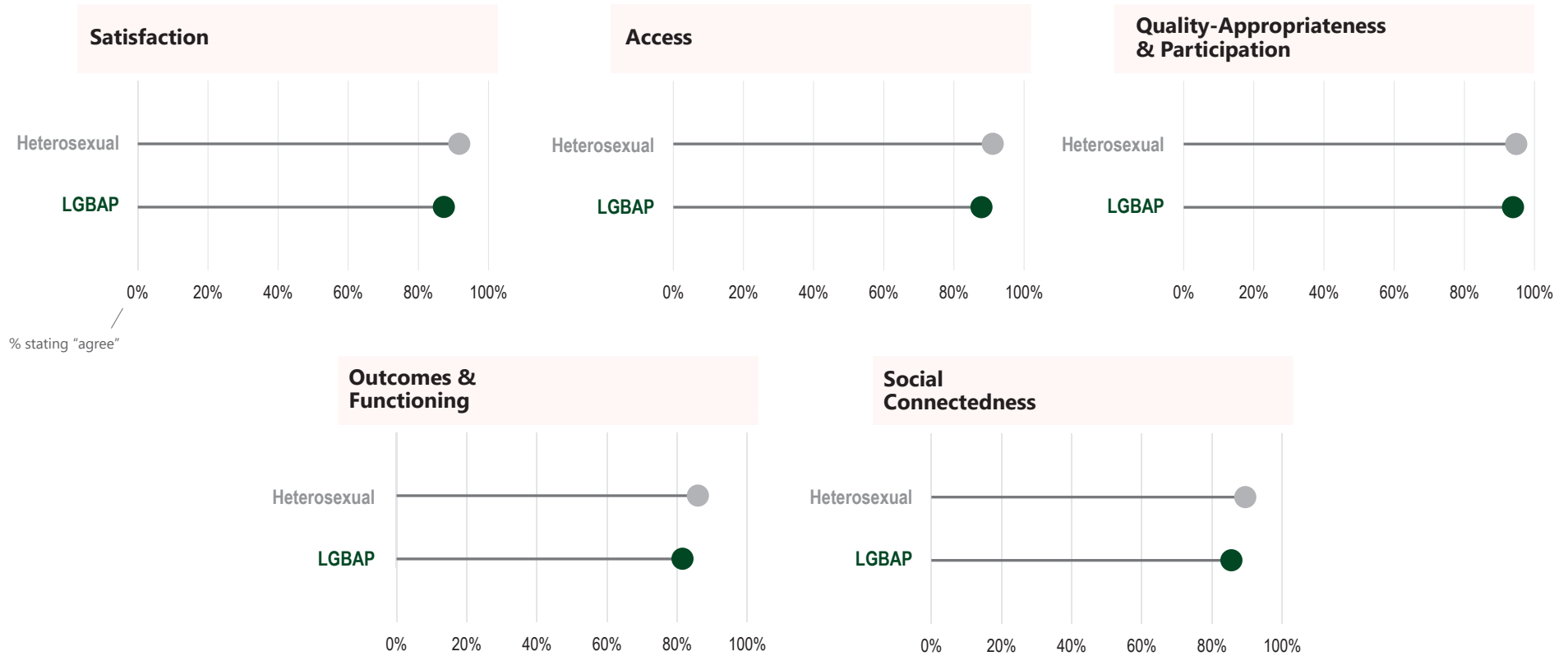
Statistically significant difference ( $p < .05$ ) between gender groups (Kruskal-Wallis)

Female n = 905  
Male n = 551

Nonbinary or Trans n = 67

# Sexual Orientation: **LGBAP** consumers report slightly worse ratings than heterosexual/straight consumers across all constructs

LGBAP includes consumers identifying as lesbian, gay, bisexual, asexual, or pansexual



% stating "agree"

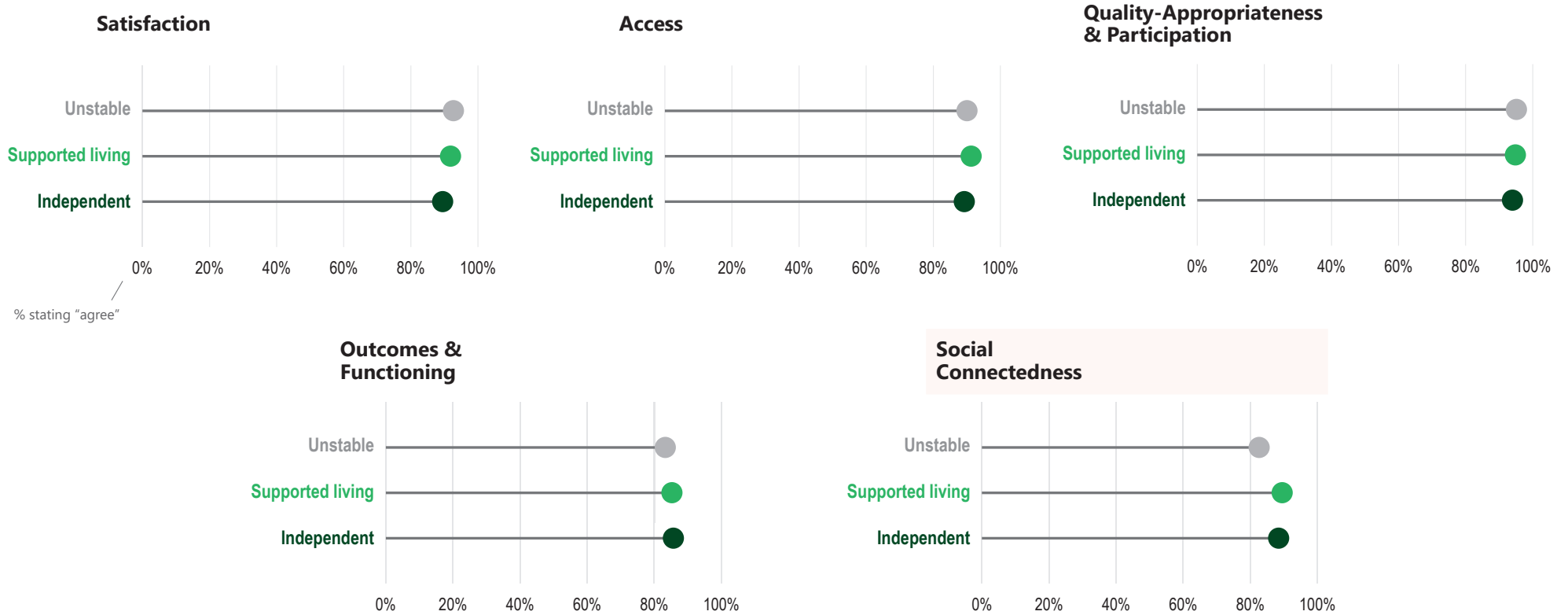
Statistically significant difference ( $p < .05$ ) between groups (Mann Whitney U)

Heterosexual n = 1,143

LGBAP n = 238

# Living situation: Those with unstable housing reported lower social connectedness; no other major differences seen

"Unstable" was indicated if the respondent reported living in a shelter, motel/hotel, vehicle, etc. "Supported living" included AFC, group homes, relying on financial support from a relative, or other supported independent living. "Independent" included all other living situations.



**Social Connectedness**

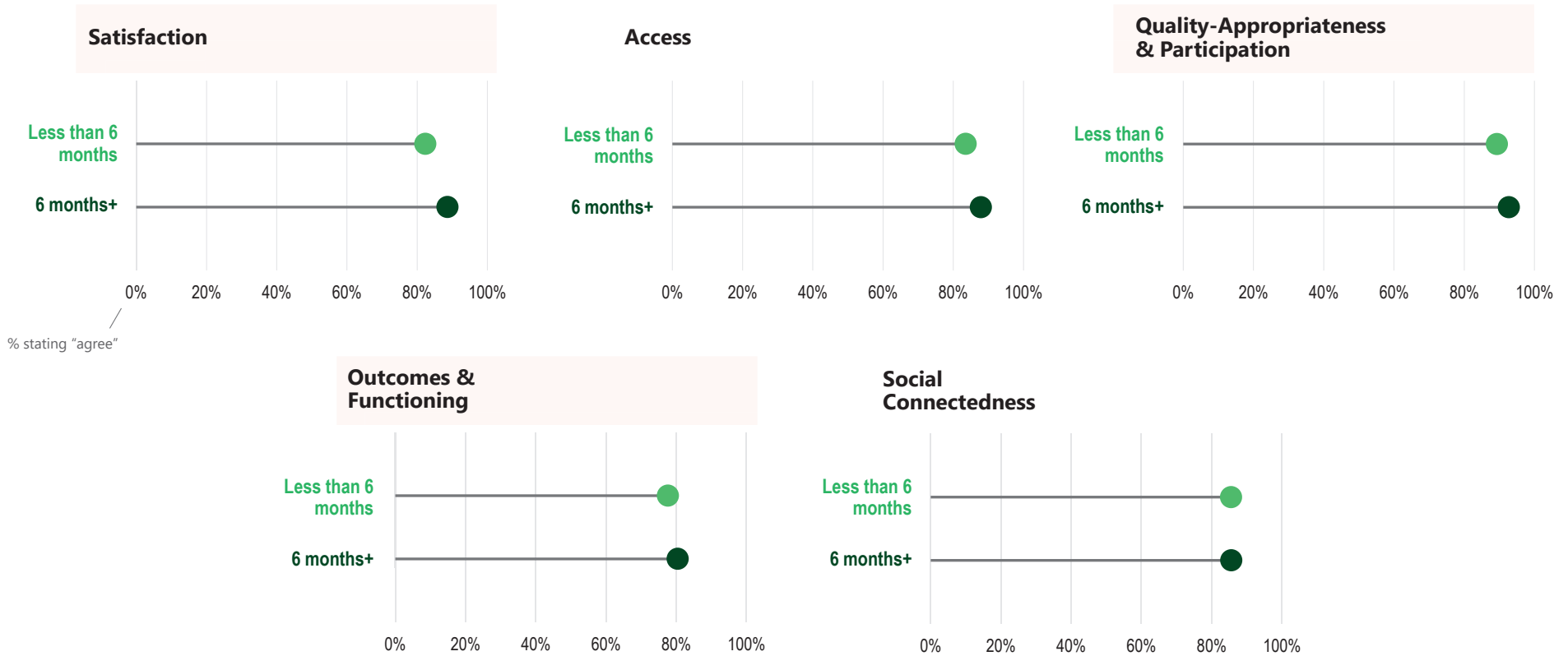
Statistically significant difference ( $p < .05$ ) between groups (Mann Whitney U)

Unstable n = 107  
Supported living n = 683

Independent n = 602

# Length of Services: consumers with 6+ months of services had higher satisfaction, Q-A&P, and outcomes than consumers with less than 6mo

Tests for access and social connectedness did not reach statistical significance.



% stating "agree"

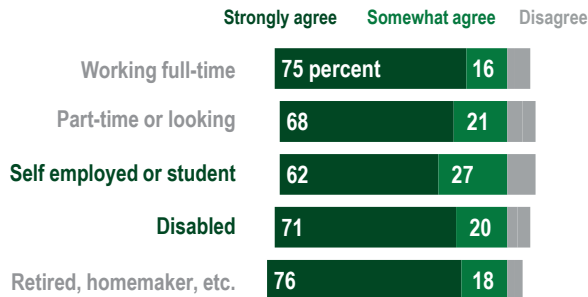
Statistically significant difference ( $p < .05$ ) between groups (Mann Whitney U)

Less than 6 months n = 345  
6 months+ n = 1,218

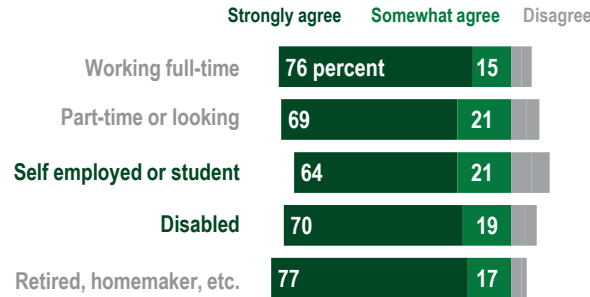
# Employment status: Students & self-employed had lower satisfaction, access, and outcomes; disabled had lowest outcomes & social connectedness scores

Those working full time or retired/not seeking a job generally had the highest ratings across all groups

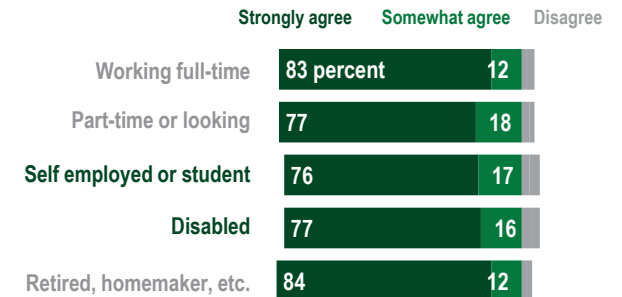
## Satisfaction



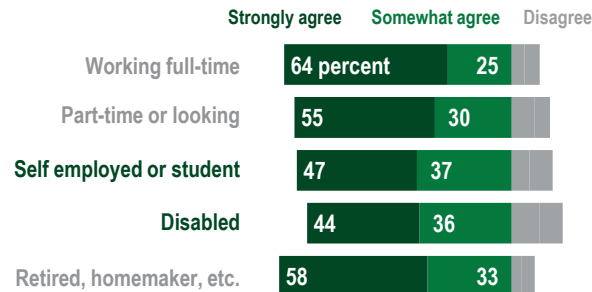
## Access



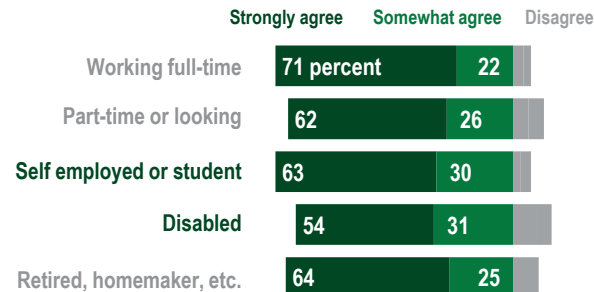
## Quality-Appropriateness & Participation



## Outcomes & Functioning



## Social Connectedness



Statistically significant difference ( $p < .05$ ) between age groups (Kruskal-Wallis)

Working full-time n = 308  
 Disabled n = 423  
 Part-time or looking n = 409  
 Self employed or student n = 125  
 Retired, homemaker, etc. n = 212



# Adult **LTSS** consumers reported better scores than **non-LTSS** adults in all constructs

**Dark green** denotes the percentage of LTSS (long-term social services) consumers in agreement for that construct's items  
**Gray** bars denote the likely range where the true percentage for all LTSS consumers might lie (i.e., margin of error\*)



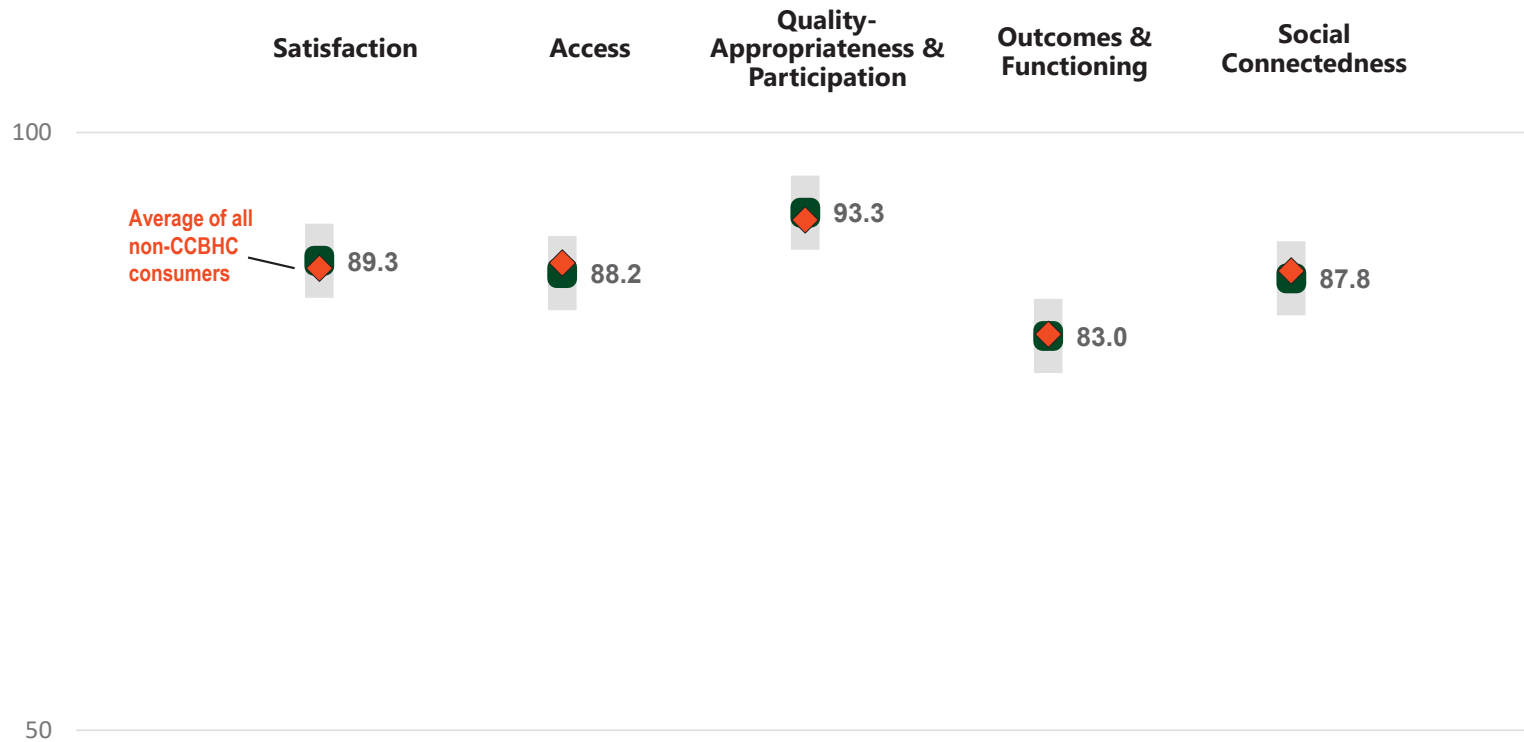
Average of all non-LTSS consumers

Statistically significant difference ( $p < .05$ ) between LTSS and non-LTSS

\*margin of error for **LTSS** adults:  $\pm 3.1$  pts ( $n = 1031$ )  
margin of error for **non-LTSS** adults:  $\pm 4.1$  pts ( $n = 580$ )

# Adult CCBHC consumers reported almost identical scores to non-CCBHC adults

**Dark green** denotes the percentage of CCBHC (certified community behavioral health clinic) consumers in agreement for that construct's items  
**Gray** bars denote the likely range where the true percentage for all CCBHC consumers might lie (i.e., margin of error\*)



# Opportunities for improvement in access to services, staff engagement with consumers,

Of MHSIP respondents who were *dissatisfied* with services, 5 major themes arose from qualitative feedback.

**Access to services & continuity of care**

45 comments

**Lack of compassion & consumer-centered care**

37 comments

**Medication management issues**

31 comments

**Staff competency & turnover**

26 comments

**Lack of transparency & communication**

19 comments

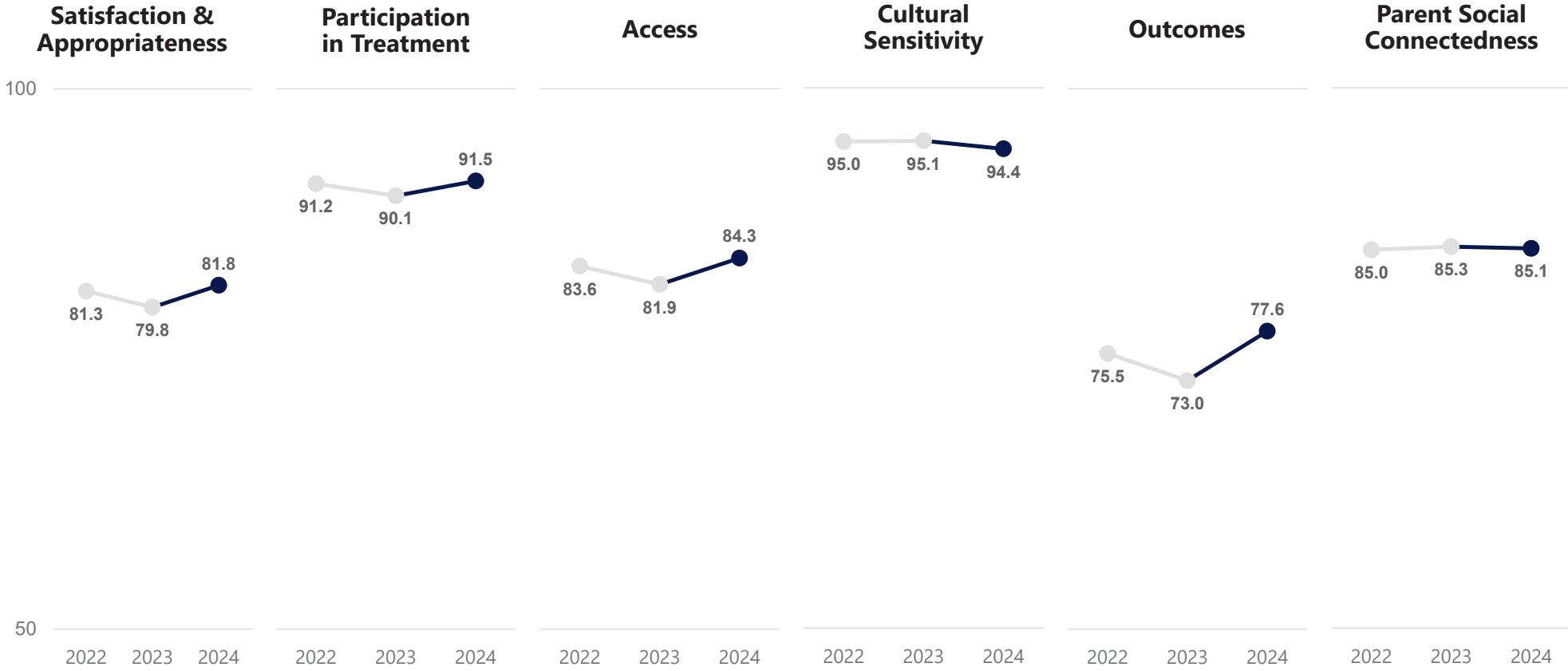


# Youth Services Survey for Families (YSS) Revised Tool: 2024 Results

Sample size: 644

# Overall, YSS saw similar ratings from 2022-2024 (no statistical difference)

YSS scores by construct for previous 3 years. Differences in constructs between years are not statistically significant.



## Positive highlights from the YSS comments section

“They really do research and **find things to help benefit you and your child's needs** they build a great relationship and **understand your kids needs and yours**. They **become family or a really great friend** to have along the way.”

“With mental health there are many highs and lows. Our ISK "team" has been there to **support not just my daughter, but our family** through every step and **provided us the services that we never know existed** until they came into our lives. I'm **so thankful** for each and every one of them!”

“The councilor works around my work schedule and my child enjoys going now. My child knows if she is feeling like hurting herself **she can call Riverwood and someone will answer**. I'm **very grateful** for the staff and services that are provided. As a parent it's very hard to watch your child self harm and not know where to turn. Now **I'm less stressed and my daughter is doing amazing** it's like having my little girl back!”

“Our case manager is an absolute blessing. She **stood by our side and helped us fight the injustices** my son was experiencing in school. She helped guide me and was **present for every meeting**. She helped my son get into the right school so **he could thrive**.”

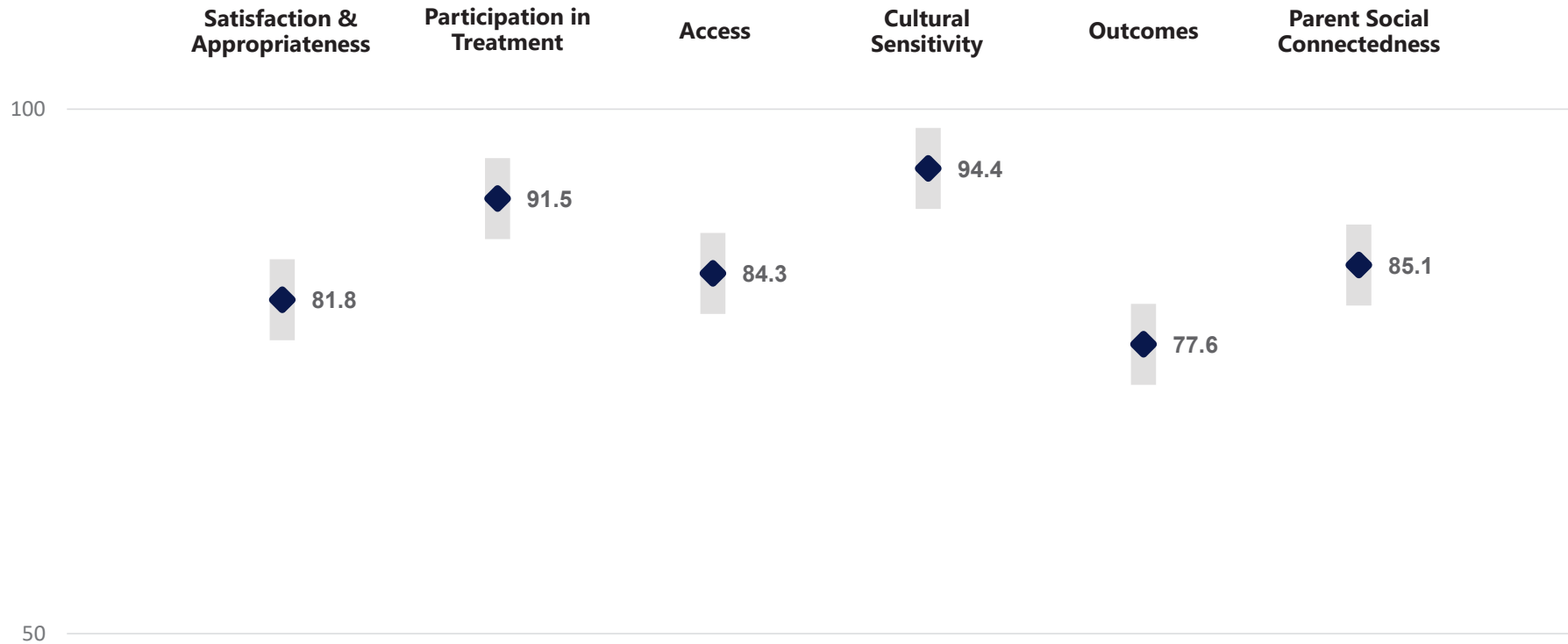
“Our son is **coming back to the ray of light** he always has been, and **he's seeing himself that way** now too.”

“The doctor is **amazing at talking to our child**. He always **includes him in the conversation** and **helps him understand** that this is a benefit having him on his meds. He is wonderful and that is **the reason we are still with Summit Pointe**.”

# All SWMBH CMHSPs: 2024 YSS scores by construct

**Dark blue** denotes the percentage in agreement for that construct's items

**Gray** bars denote the likely range where the true percentage for all SWMBH consumers might lie (i.e., margin of error\*)

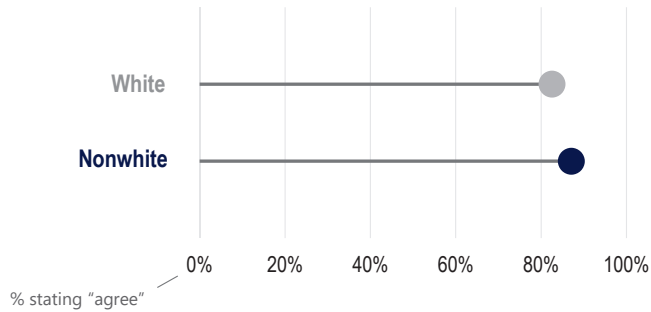


\*margin of error for all CMHSPs:  $\pm 3.9$  pts  
n = 644

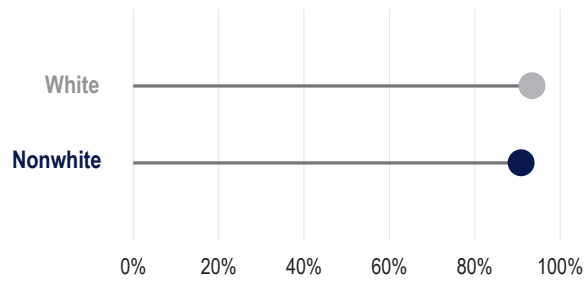
# Race: White youth had slightly better participation in treatment, but nonwhite youth had slightly better outcomes

"Nonwhite" category comprises any race other than White, including Black/African American, Asian, Native American, Native Hawaiian/Pacific Islander, or any mix of races.

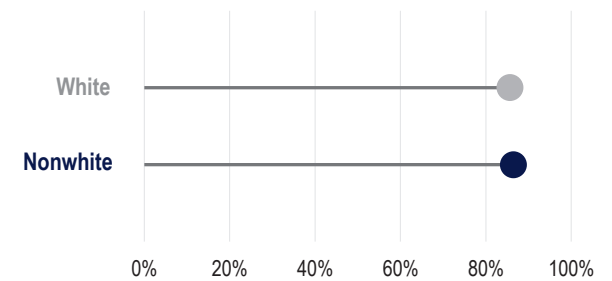
**Satisfaction & Appropriateness**



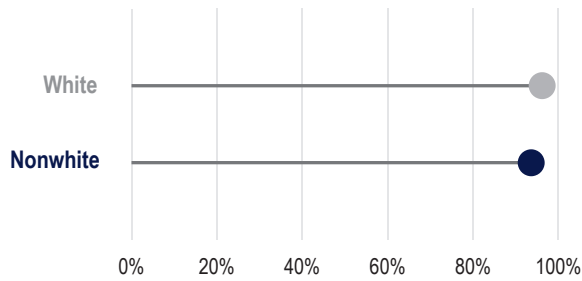
**Participation in Treatment**



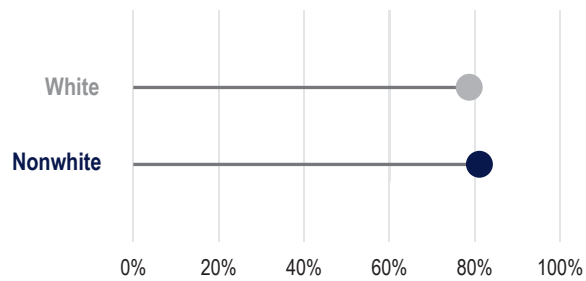
**Access**



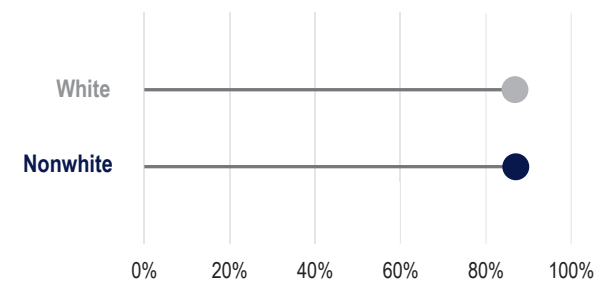
**Cultural Sensitivity**



**Outcomes**



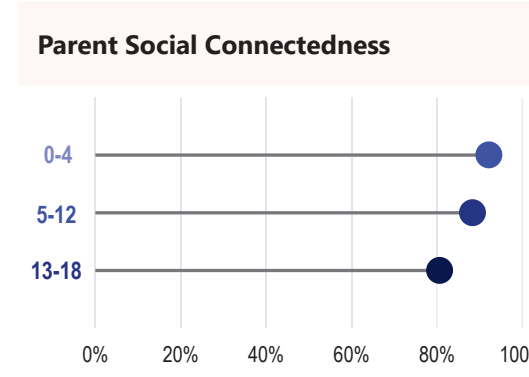
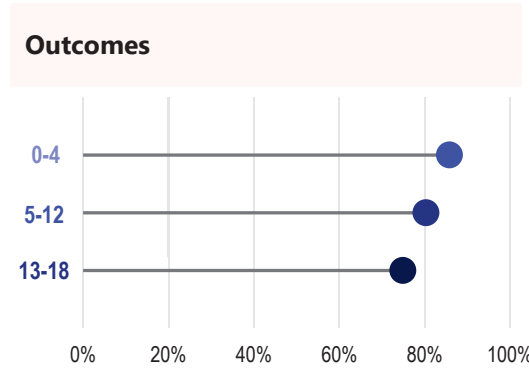
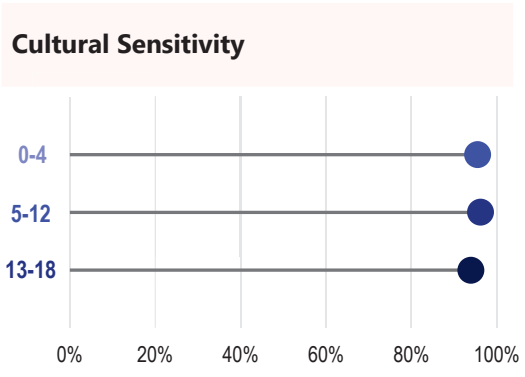
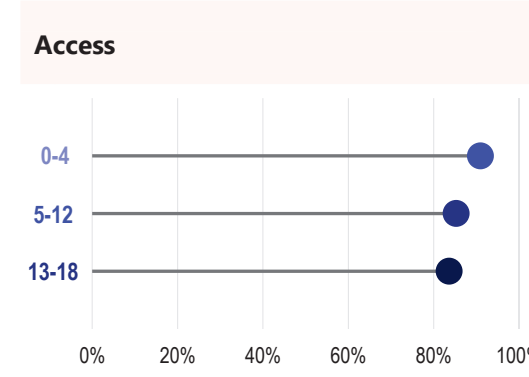
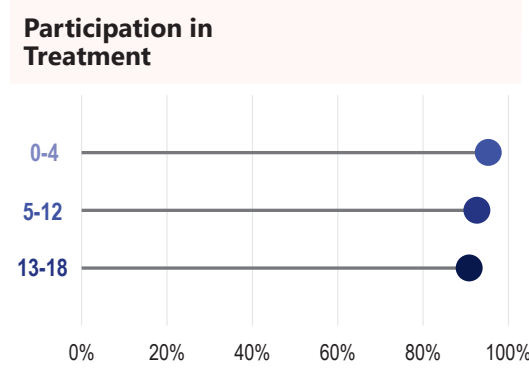
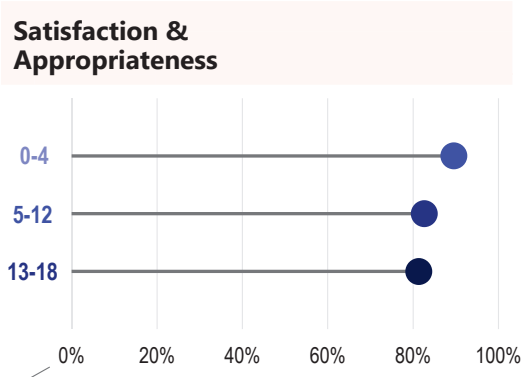
**Parent Social Connectedness**





# Age: Generally, the older the youth, the lower the survey scores

Lower scores were most pronounced in satisfaction, outcomes, and parent social connectedness.



% stating "agree"

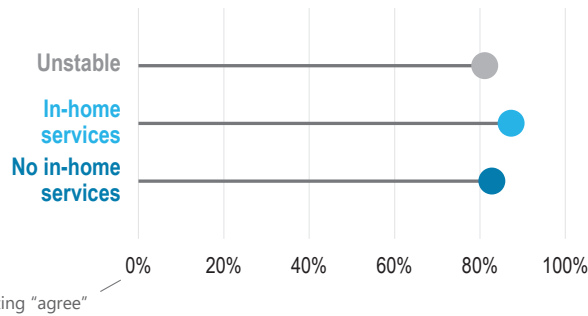
Statistically significant difference ( $p < .05$ ) between age groups (Kruskal-Wallis)

0-4 n = 68    5-12 n = 312  
13-18 n = 245

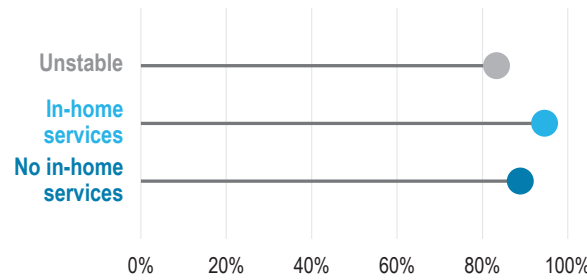
# Housing: Youth in an unstable living situation had lower reported outcomes

Otherwise, scores were statistically similar among the housing unstable, youth not receiving in-home services, and youth that did receive in-home services (included foster care, group homes, residential care, or other in-home services).

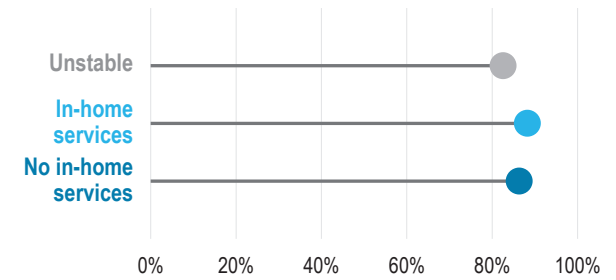
**Satisfaction & Appropriateness**



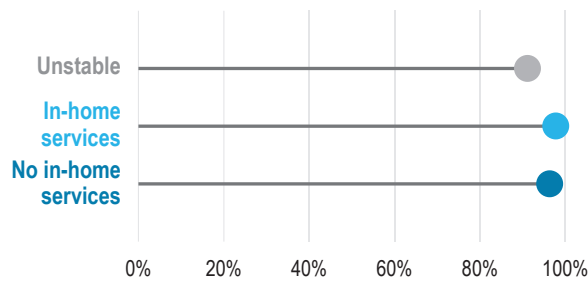
**Participation in Treatment**



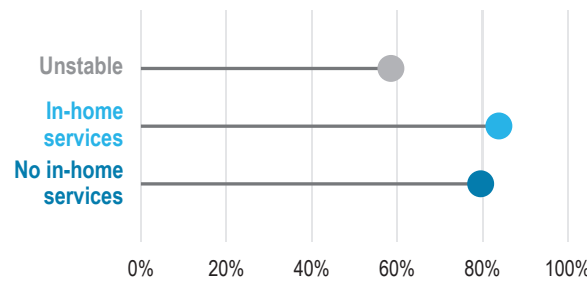
**Access**



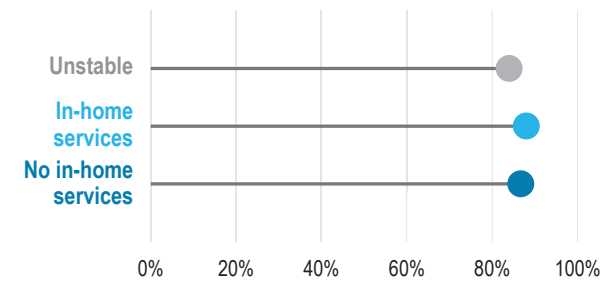
**Cultural Sensitivity**



**Outcomes**



**Parent Social Connectedness**

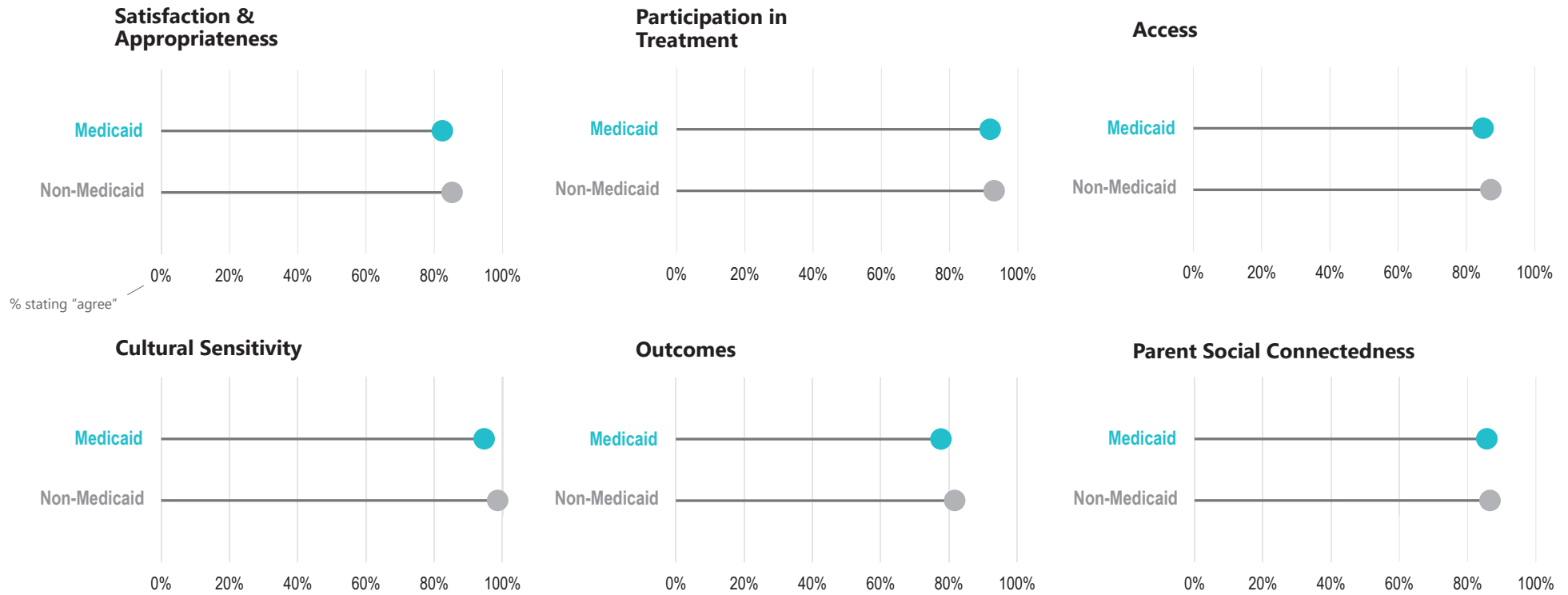


Statistically significant difference ( $p < .05$ ) between age groups (Kruskal-Wallis)

Unstable n = 14  
 In-home services n = 160  
 No in-home services n = 402

# Medicaid status: youth did not see different scores in 2024 whether they were using Medicaid or not

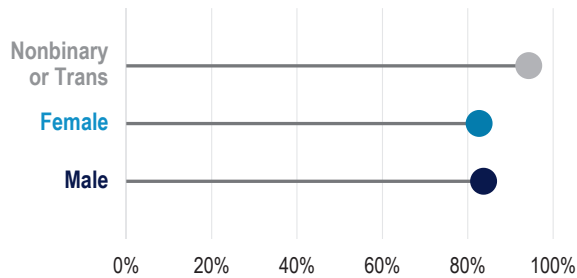
No differences between the two groups were statistically significant.



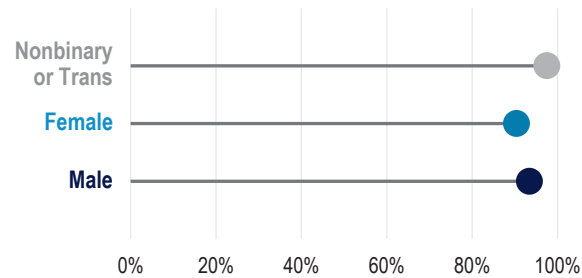
# Overall, youth did not report major differences between genders

Nonbinary or transgender youth did not have statistically different scores than male or female youth.

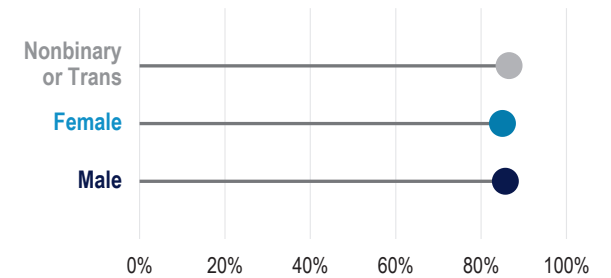
## Satisfaction & Appropriateness



## Participation in Treatment

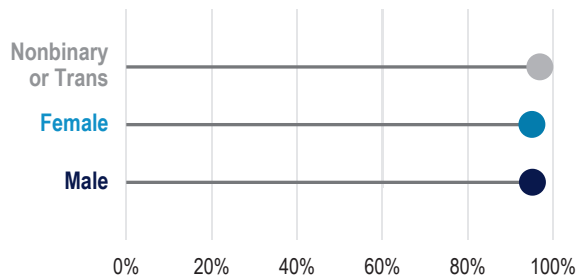


## Access

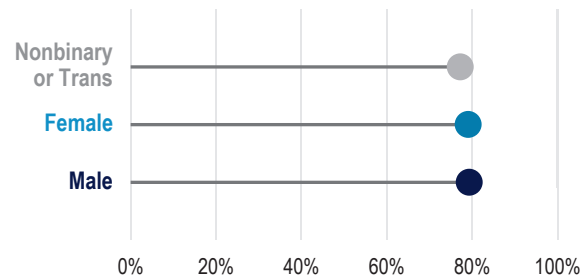


% stating "agree"

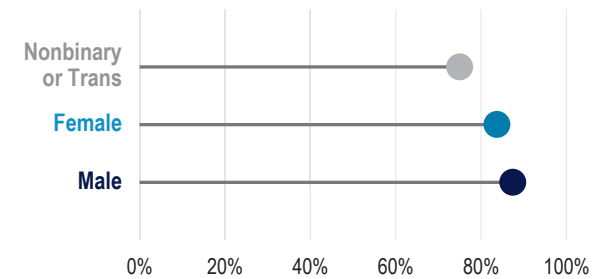
## Cultural Sensitivity



## Outcomes



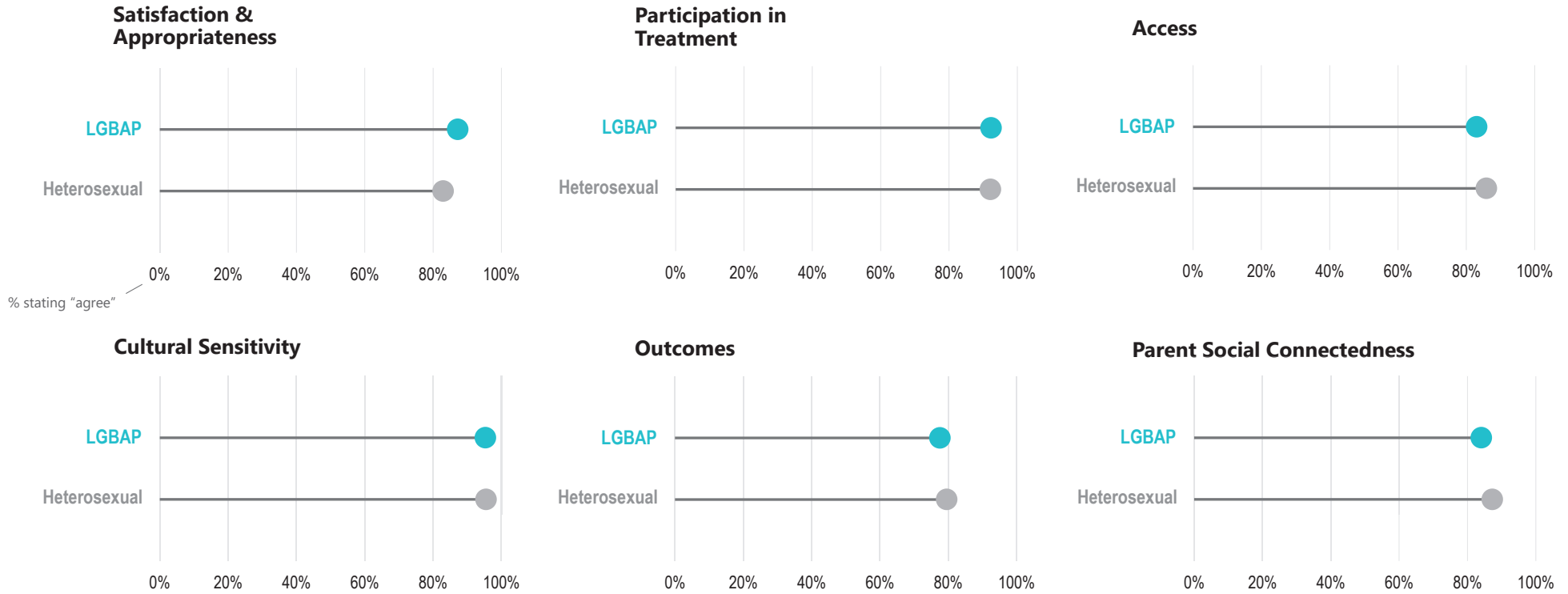
## Parent Social Connectedness



Nonbinary or Trans n = 15  
Female n = 237  
Male n = 369

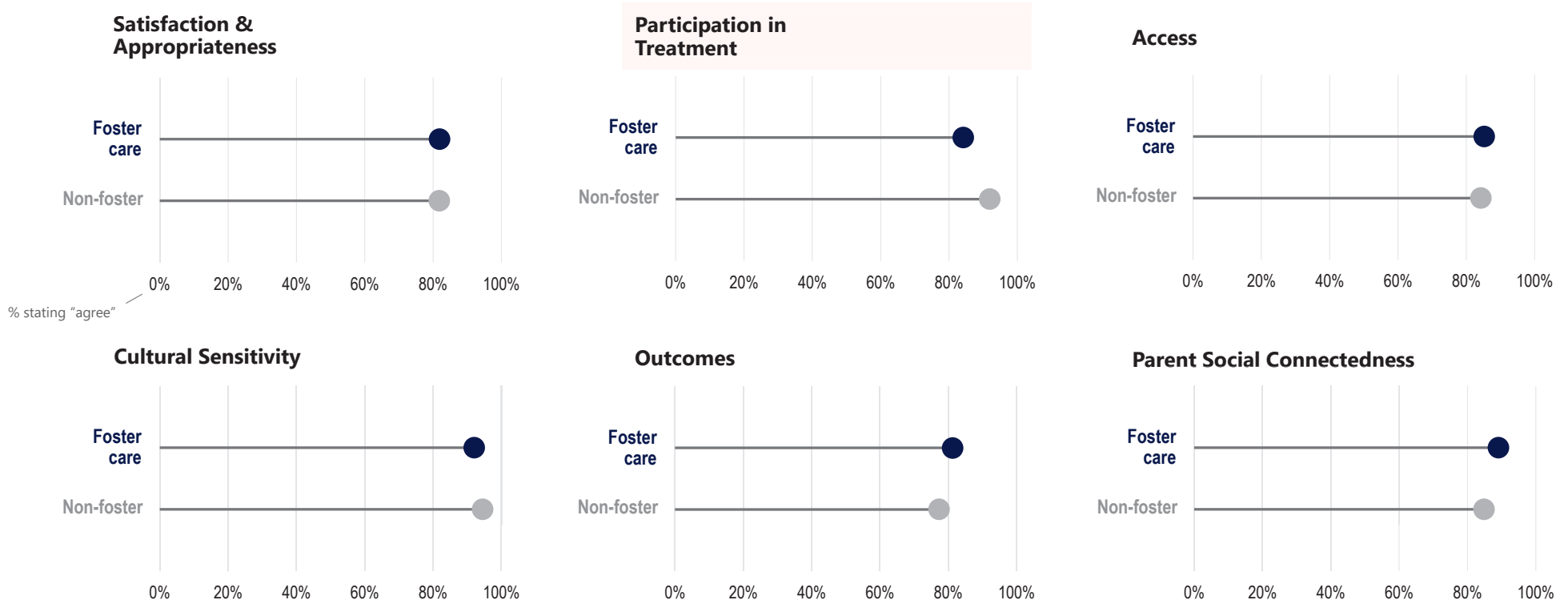
# LGBAP: youth did not see different scores in 2024 based on their sexual orientation

No differences between the two groups were statistically significant. LGBAP = lesbian, gay, bisexual, asexual, or pansexual.



# Foster care youth had less participation in treatment than non-foster youth

No other differences between the two groups were statistically significant.



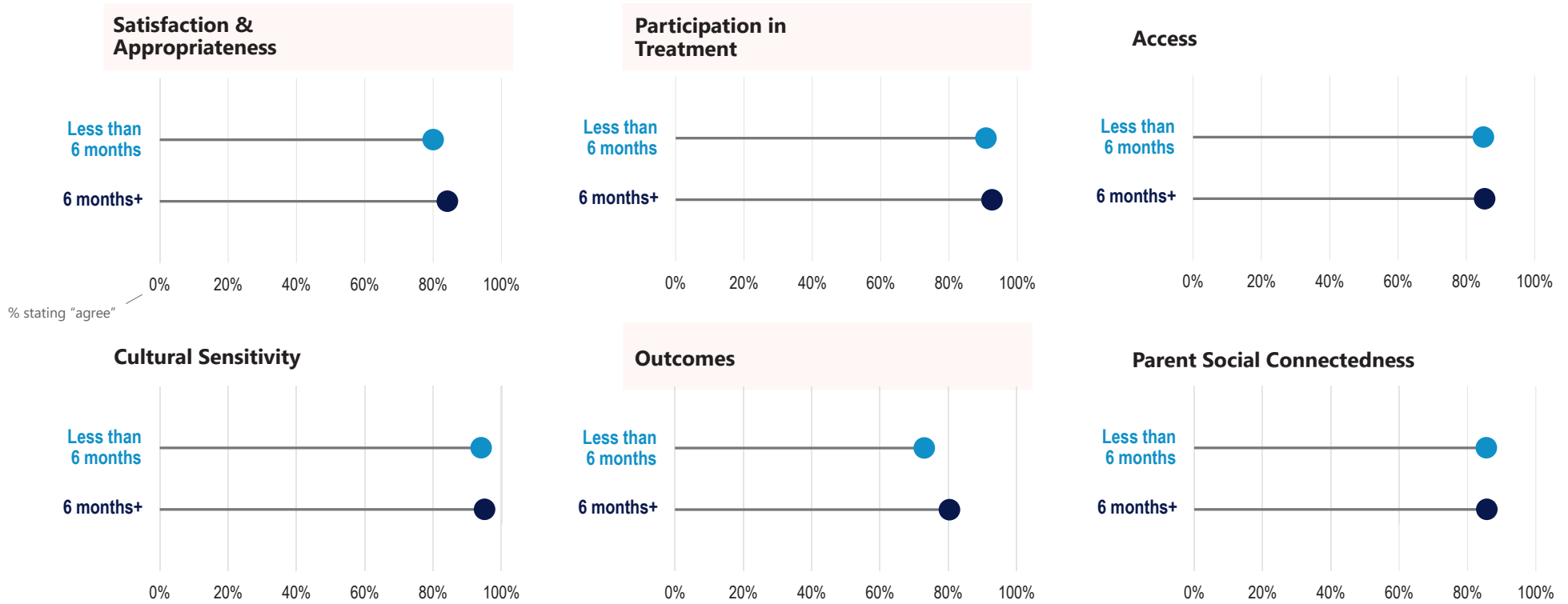
% stating "agree"

Statistically significant difference ( $p < .05$ ) between age groups (Mann Whitney U)

Foster care n = 44  
Non-foster n = 611

# Length of services: those getting services for longer than 6 months reported much better outcomes

They also reported higher satisfaction and participation in treatment, but to a lesser degree.



% stating "agree"

Statistically significant difference ( $p < .05$ ) between age groups (Mann Whitney U)

**Less than 6 months** n = 172  
**6 months+** n = 457

# Youth LTSS families report better scores in all constructs in the 2024 YSS

**Dark blue** denotes the percentage of LTSS (long-term social services) consumers in agreement for that construct's items  
**Gray** bars denote the likely range where the true percentage for all LTSS consumers might lie (i.e., margin of error\*)



Average of all non-LTSS consumers

Statistically significant difference (p < .05) between LTSS and non-LTSS

\*margin of error for **LTSS** youth: ±4.6 pts (n = 455)  
margin of error for **non-LTSS** youth: ±6.9 pts (n = 200)



# Youth CCBHC families report worse access than non-CCBHC consumers

**Dark blue** denotes the percentage of CCBHC (certified community behavioral health clinic) consumers in agreement for that construct's items  
**Gray** bars denote the likely range where the true percentage for all CCBHC consumers might lie (i.e., margin of error\*)



Average of all non-CCBHC consumers

Statistically significant difference ( $p < .05$ ) between CCBHC and non-CCBHC

\*margin of error for **CCBHC** youth:  $\pm 5.0$  pts (n = 377)  
margin of error for **non-CCBHC** youth:  $\pm 6.4$  pts (n = 231)

# Opportunities for improvement in access to services, staff engagement with consumers,

Of YSS respondents who were *dissatisfied* with services, 3 major themes arose from qualitative feedback.

**Lack of reliable communication from staff**

29 comments

**Limited access to services**

25 comments

**Lack of specialized care/understanding of needs**

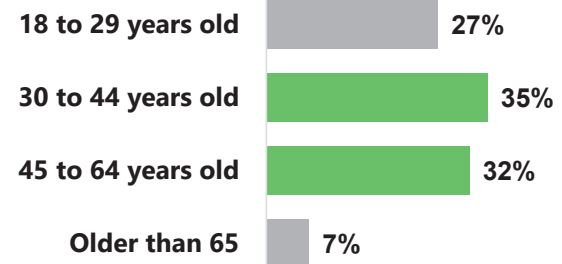
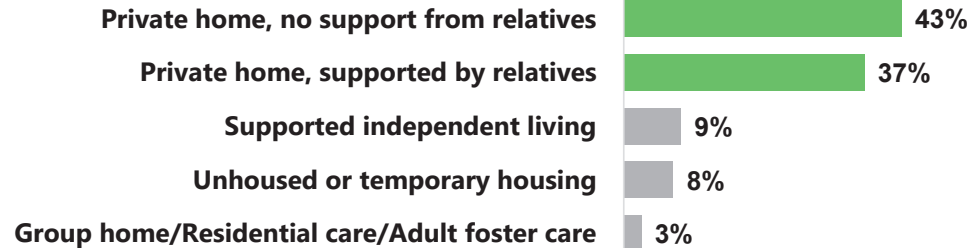
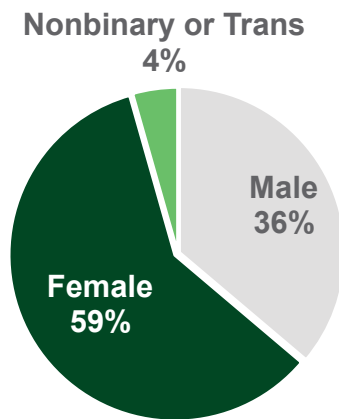
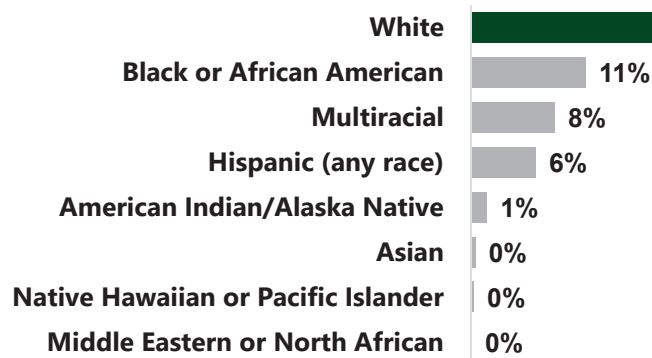
18 comments



# Survey Diagnostics

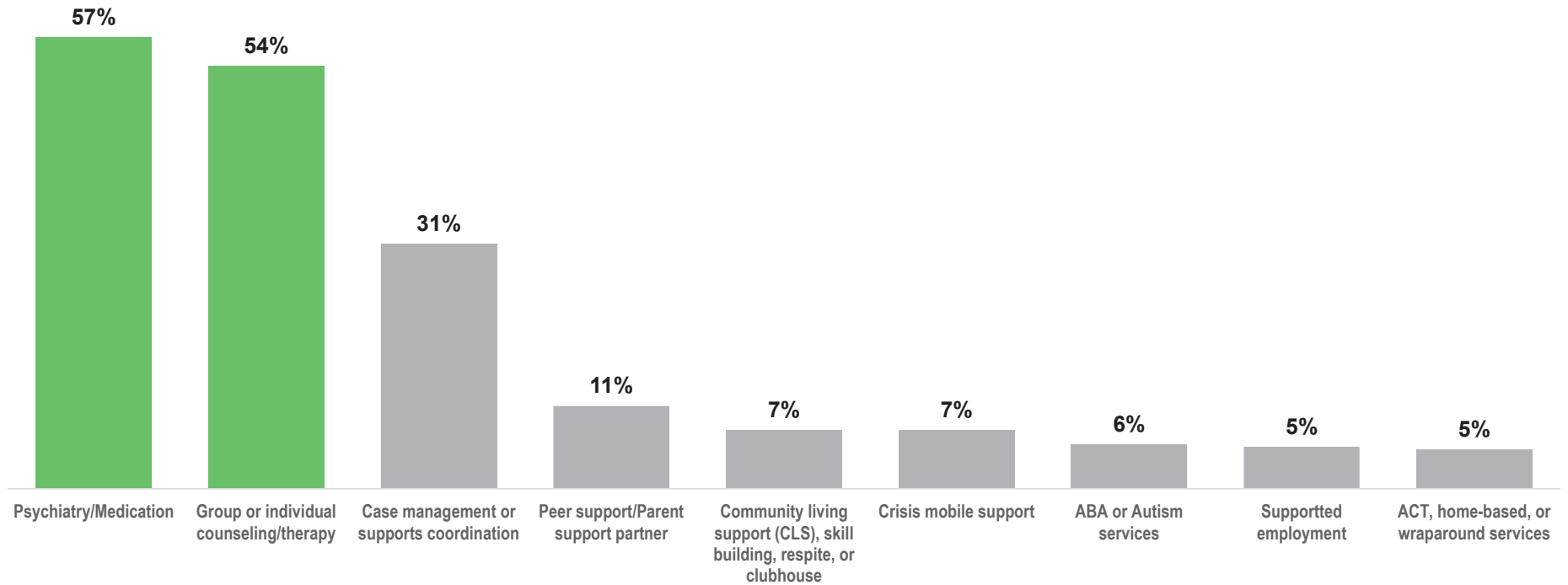
# MHSIP 2024 respondents similar in makeup to prior years

Question about sex assigned at birth allowed for identification of transgender respondents, around 2% of all respondents.



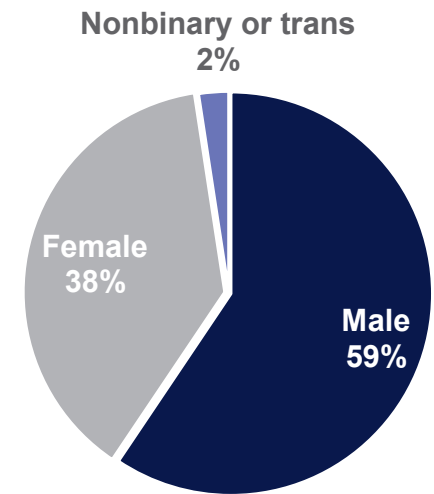
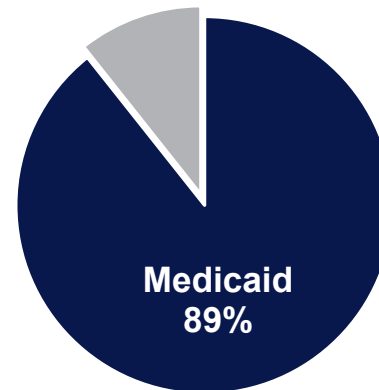
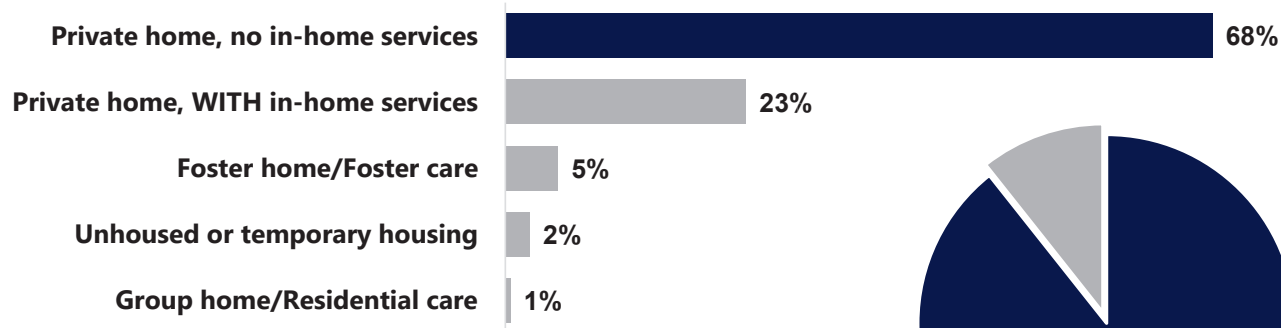
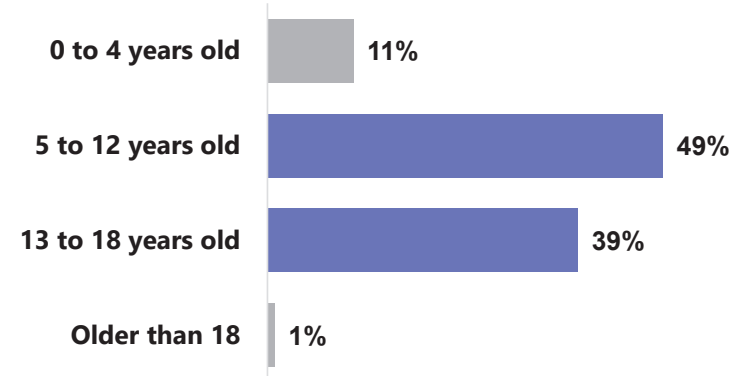
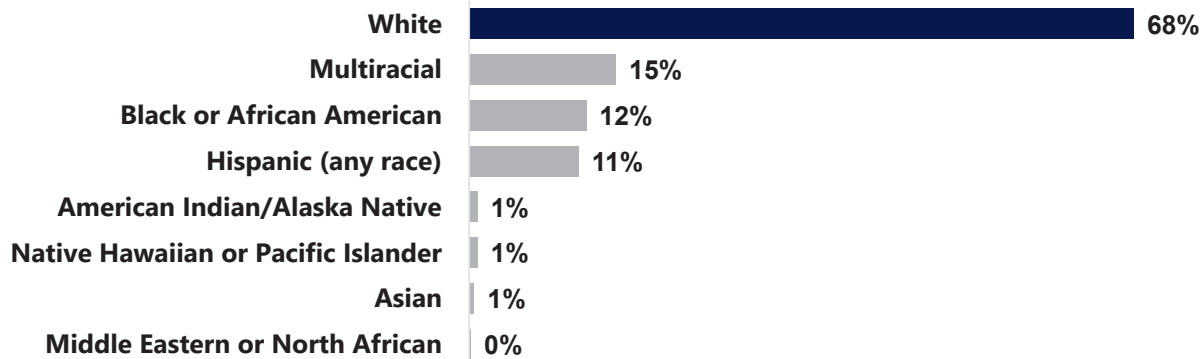
# Most MHSIP respondents utilized **psychiatry and therapy**, followed by **case management**

Percentages represent the proportion of consumers that used that service.  
This new question was asked in 2024 to identify the kinds of services used by consumers.



# YSS 2024 youth were similar in demographic makeup to 2023

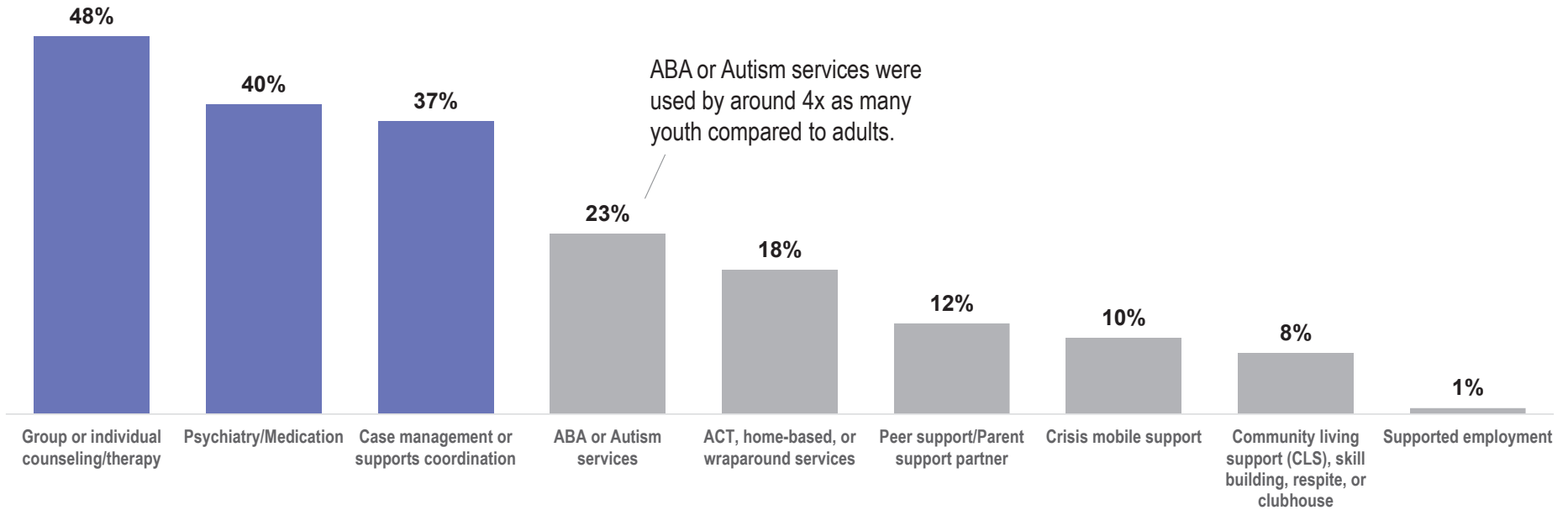
More male youth seemed to receive services than male adults, and non-Medicaid responses grew slightly.



# The plurality of YSS respondents utilized **therapy**, then **psychiatry**, followed closely by **case management**

Percentages represent the proportion of consumers that used that service.

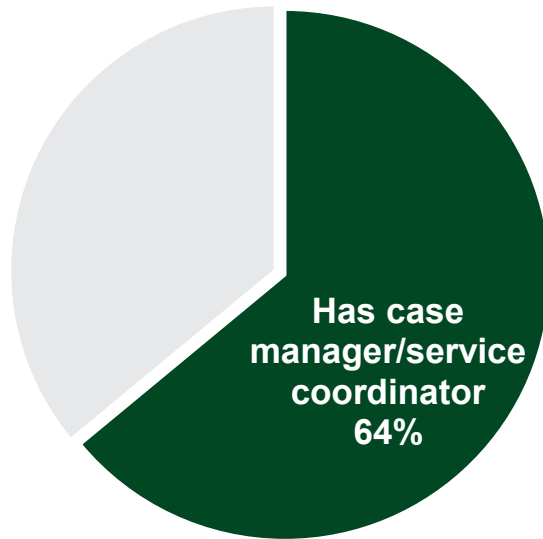
This new question was asked in 2024 to identify the kinds of services used by consumers.



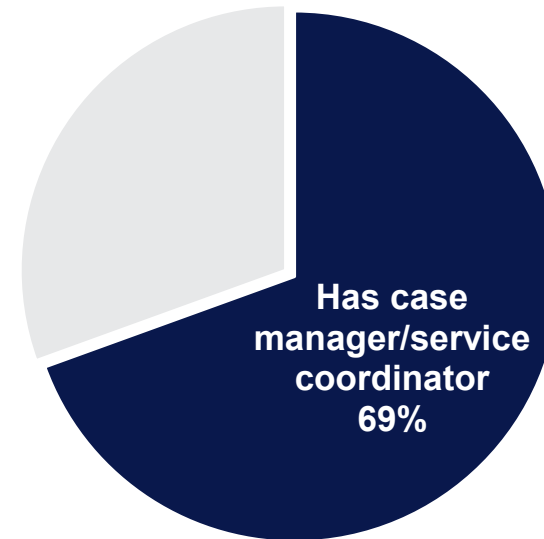
# More youth than adults reported having a case manager or service coordinator (LTSS) again in 2024

Same question was asked in "services received" question but had much lower percentages reporting yes.

## MHSIP



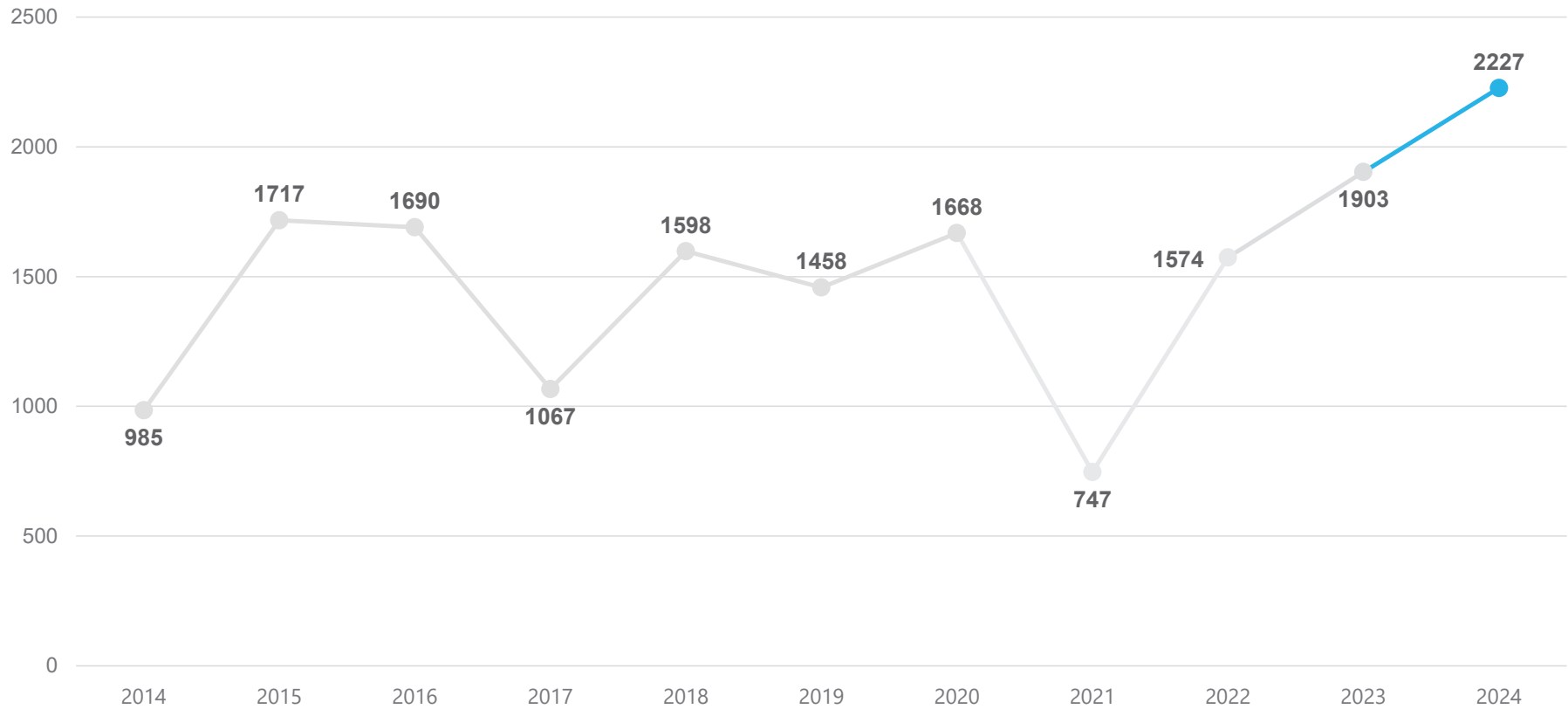
## YSS





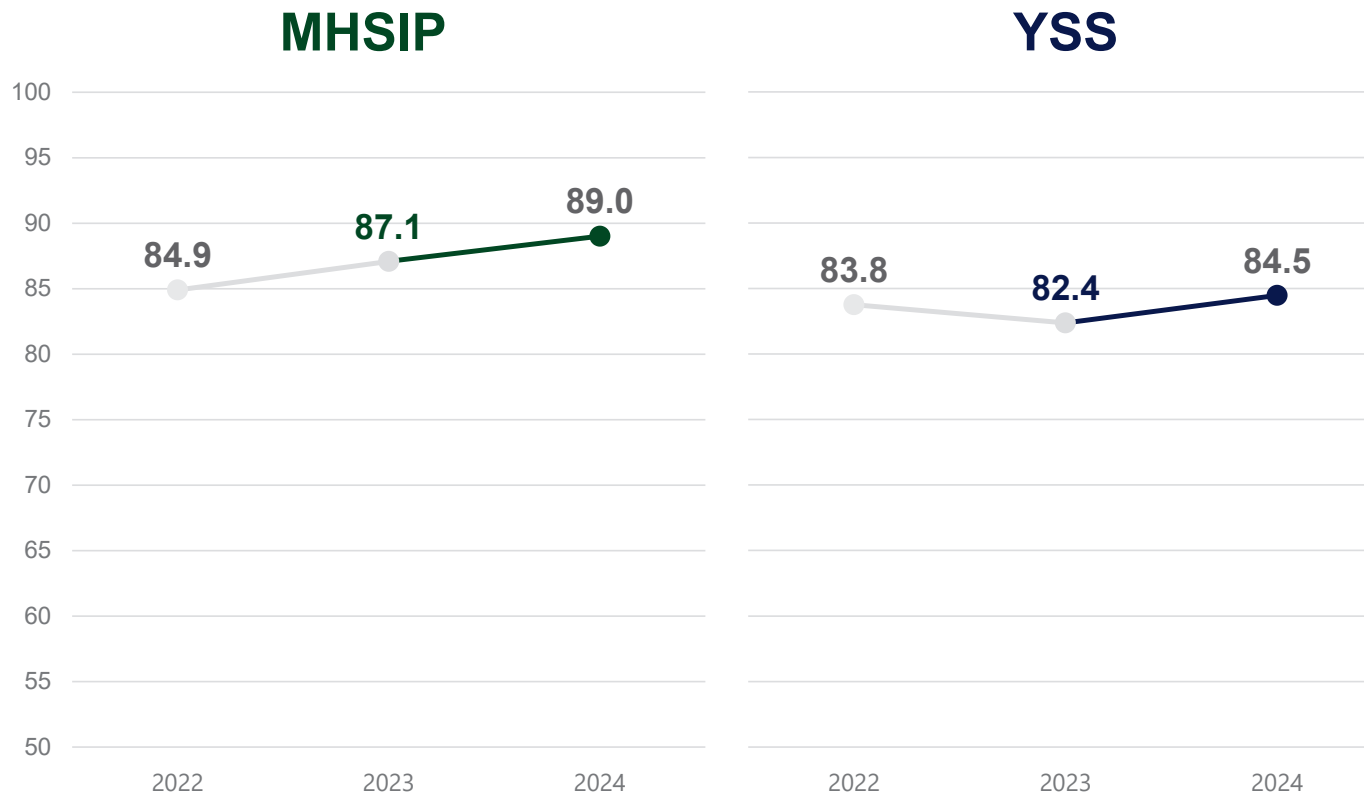
# Total cumulative completions reached highest point again in 2024

This year, both YSS and MHSIP responses were at all-time highs.



# Total aggregate average scores ticked up for both YSS and MHSIP in 2024

Still almost a 5-pt difference between adult and youth scores in the aggregate.





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