

**St. Louis Mental Health Training Cooperative
Local Congregation Survey and Self-Assessment**

The St. Louis Mental Health Training Cooperative (MHTC) is interested in understanding the mental health and substance abuse issues that you face in your congregation, as well as any desires for training you might have. This survey should take about 10-15 minutes to complete. We appreciate your time. Thank you.

Name of Congregation: _____

Address of Congregation: _____

Name(s) of Person(s) Completing Survey: _____

Position(s) of Person Completing Survey: Clergy Other Congregation Staff Lay Person
 Other: _____

Please identify the mental health and substance abuse issues in your congregation:

Substance Abuse or Mental Health Issue	How often this issue is present	How big a concern for you
Alcoholism/excessive drinking	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Drug use/substance abuse	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Anxiety	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Post-Trauma or Abuse issues	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Severe personality problems	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Depression	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Severe mental illness - bipolar disorder, schizophrenia	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Children's behavior problems	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Runaway or homeless youth	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Military veterans with mental health issues	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Distinguishing sin or willful behavior from mental illness	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Uncertain how to support families with mental illness	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Not sure when and where to refer someone for treatment	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Unavailability of housing	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major
Other: _____	<input type="checkbox"/> rarely <input type="checkbox"/> sometimes <input type="checkbox"/> often	<input type="checkbox"/> none <input type="checkbox"/> minor <input type="checkbox"/> major

Please describe the most pressing mental health- and substance abuse-related challenges about which you would like more information or resources:

Please indicate which of the following trainings would be useful for your congregation:

Substance Abuse or Mental Health Training	Interested in this training for your congregation?	(If interested) who would participate in the training?
Mental Health 101 – a 1-2 hour introduction to mental health	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Mental Health First Aid – a thorough 12-hour training on how to respond to mental illness	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Children’s Mental Health (1.5 hrs)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Education for families coping with mental illness (2-6 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Firsthand accounts - People present their experience with mental illness (1-2 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Clergy – Mental Health Clinician Consultations (1 hour)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Companionship Training – a team approach to helping people with mental illness (4 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Addictions 101 (1-4 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Substance Abuse and Dependence – 1 to 1.5 day workshop	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Setting up a substance abuse ministry (2 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Helping children living with addicted individuals (1-4 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Response to Trauma (1-2 hours)	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Other: _____	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other
Other: _____	<input type="checkbox"/> no <input type="checkbox"/> somewhat <input type="checkbox"/> very	<input type="checkbox"/> Clergy <input type="checkbox"/> Lay Persons <input type="checkbox"/> Other

May we contact you with information on available trainings?

email: _____ phone: _____