

DS-WA DEPARTMENT OF COUNSELING SERVICES NEEDS ASSESSMENT SURVEY REPORT 2016

Introduction

“Come to Me, all you who labor and are heavy laden, and I will give you rest. Take My yoke upon you and learn from Me, for I am gentle and lowly in heart, and you will find rest for your souls. For My yoke is easy and My burden is light.”

(The Gospel of St. Matthew 11:28-30, NKJV)

Our Lord and Savior Jesus Christ desires His children to approach Him for fullness and healing from lack thereof. The Church is the vessel in which the healing process takes place with Her use of the Holy Sacraments, prayers, trained practitioners (i.e. clergy) and the community. Centuries later, the Church continues to be a place of healing and love as She collaborates with God’s gift of science and the human understanding of how the mind and body works.

Several studies have shown that places of worship are often the first resources individuals use when struggling with mental health concerns. According to the National Alliance of Mental Illness (NAMI), one in five individuals in the United States experience a mental illness. Approximately 14% of Asian adults live with a mental health condition. Suicide is the 10th leading cause of death in the United States. According to the World Health Organization (WHO), India leads the world in the highest number of deaths by suicide per year. Mental health struggles impact all individuals, regardless of gender, ethnic background, age, socioeconomic status, etc. Despite this fact, studies have shown that less than just 10% of Asian adults use mental health services (NAMI).

The Diocese of South-West America (DS-WA) of the Malankara Orthodox Syrian Church (MOSC) began to notice the need to address the sociological and psychological issues of the community. With the blessing and guidance of the Diocesan Metropolitan His Grace Alexios Mar Eusebius, the DS-WA Department of Counseling Services created and published an anonymous survey in April 2016 to assess of the community. The following report provides a summary of the responses.

The DS-WA Department of Counseling Services hopes to use this information to promote mental health awareness, decrease mental health stigma, and increase access to mental health services. By doing so, the ministry hopes to keep the doors of the Church open to *“all you who labor and are heavy laden...”*

About the Needs Assessment

Creation & Distribution

The DS-WA Department of Counseling Services Needs Assessment was created by the office bearers of the ministry, appointed by the Diocesan Metropolitan His Grace Alexios Mar Eusebius. This survey was electronically distributed via the DS-WA Department of Counseling Services email account on April 17th, 2016 and remained open until June 22nd, 2016. The email was distributed to all parish priests and office bearers of various diocesan ministries. Included was a request to distribute to each parish member in efforts to capture all members of the DS-WA. The email included a PDF version of the survey for respondents who preferred to print, complete and mail to the diocese rather than submit electronically. Office bearers of this ministry provided periodic reminder emails requesting the survey to be completed. The survey was published on the DS-WA website as well. For a copy of this survey, please contact us (information below).

Responses

A total of 350 responses were received. The results were compiled from the Google Survey into a Google Spreadsheet. The spreadsheet did not record names or locations of each response, maintaining confidentiality of each respondent. For each submission, the spreadsheet documented the timestamp and the answer to each question. Only office bearers of this ministry had access to the data. Of note, respondents had the option to answer only the questions they felt comfortable answering in efforts to protect anonymity and promote trust. In the summary below, the number of respondents to each question is indicated by the value “n”.

Data Visualization

Pie charts and bar graphs were used to depict the responses for each question below. For some questions permitting free text, word cloud art is used (via worlde.net) to provide a visual representation of the frequency of words used in the response. The larger the word in the word cloud art, the more often respondents used that word to answer the question. Summaries are included for free text questions where a word art depiction would not provide enough context for analysis.

Key Findings of Survey

- More than half of the respondents reported having experienced level of mental health concerns personally.
- Majority of the respondents reported not taking action in response to MH struggles.
- Depression and anxiety were the two most commonly reported MH concern among the respondents.
- 31% of the respondents reported knowing someone within the community who struggled with thoughts of suicide.

- 13% of the respondents reported knowing someone within the community who attempted suicide.

Limitations

The DS-WA Department of Counseling Services acknowledges there are many limitations to this needs assessment. One such limitation includes that this survey was created and reviewed by the office bearers and the final draft was approved by the Diocesan Metropolitan His Grace Alexios Mar Eusebius. This report is not intended to be a formal research study, and therefore was not reviewed by a professional researcher.

It is also noted that majority of the dissemination efforts were via online venues (i.e. email, website, social media) due to the geographical location of each parish and the limited resources available to reach out to each parish in person. This may have resulted in a skewed population reached, which were the younger population who have access to, familiarity with, and are comfortable with the Internet.

In addition, it is worth acknowledging that this survey was only published in English, leaving out the number of DS-WA members who are most comfortable in responding to personal matters in their native language.

Conclusion

Given these limitations, it is worth stating that the DS-WA Department of Counseling Services is not implying that these results are representative of the community at large. The purpose of this survey was to begin engaging members of the DS-WA in the discussion of mental health – a topic that is often ignored among most Asian cultures despite its prevalence. The ministry hopes to use these numbers to foster a community within the parishes that is supportive of seeking assistance and guidance when needed. By bringing our true struggles to the Church, true healing towards Christ can take place.

For any questions regarding the survey, survey report or about the ministry, please do not hesitate to contact the DS-WA Department of Counseling Services at counselingservices@ds-wa.org.

In Christ,

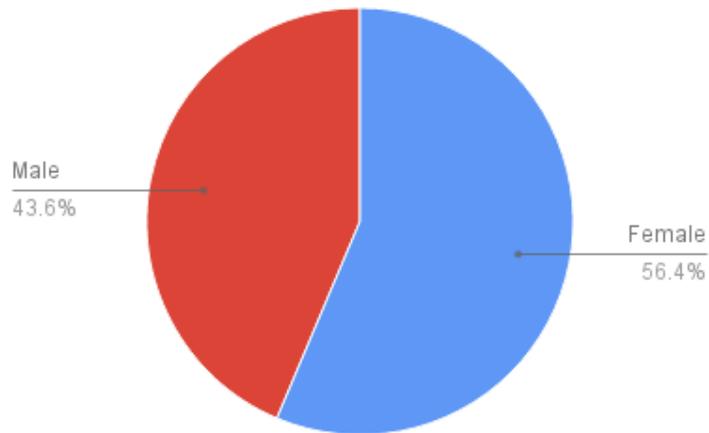
Fr. George Paulose
DS-WA Department of Counseling, Director

Ms. Susan Zacharia
DS-WA Department of Counseling, Secretary

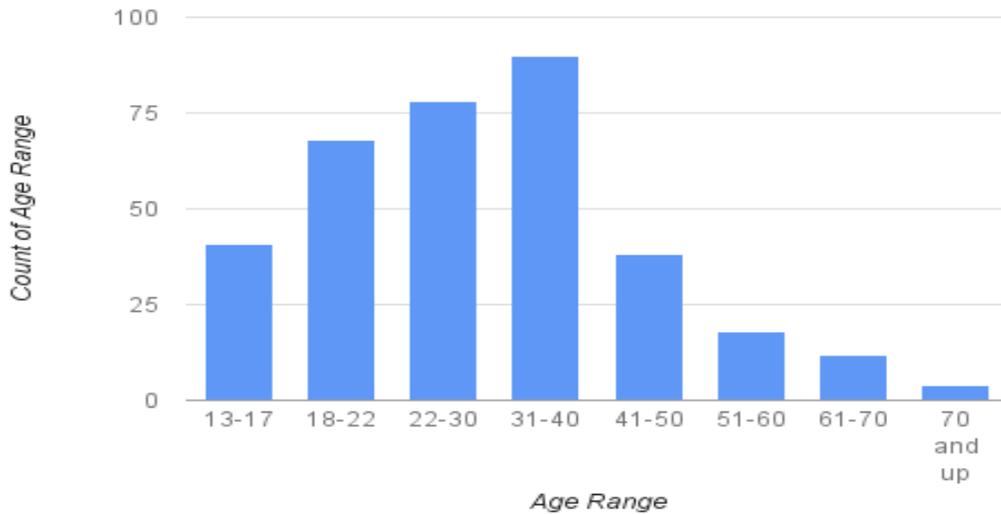
SUMMARY OF RESPONSES

Demographics

Gender (n = 346)

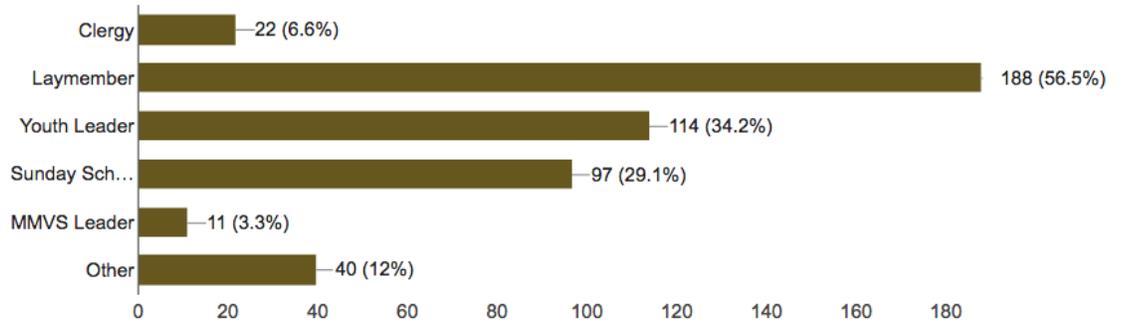


Age Range (n = 349)



**See above (under "limitations") for the analysis of limited responses from those over the age of 40.*

Which of the following describes your engagement with your parish? (n = 333)



**Of note, the terms above were not defined in the survey. Respondents were able to choose the option(s) they best identified with. Many respondents chose more than one option.*

**Of note, there may be duplicates to these answers as the question asked about the self, their immediate family as well as parish members. This question was posed to capture individuals and families that faced these struggle as well as awareness that individuals had about a parish member's struggle.*

What was done to address the concerns indicated above? (n=242)

**The following two questions were asked to assess the extent to which individuals sought help and the perception of available resources.*

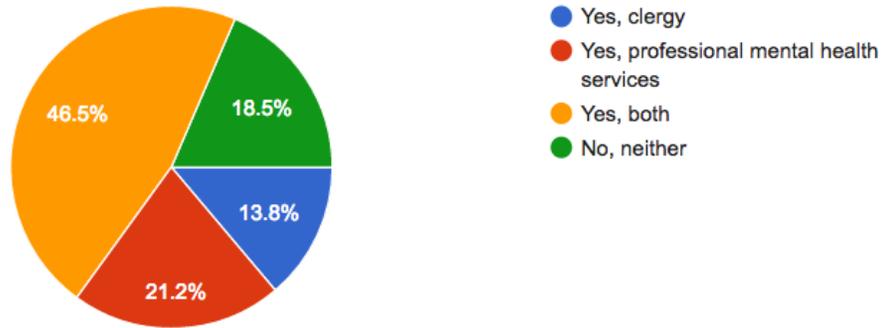
Out of the 242 responses received for this question, approximately 27% of the respondents generally stated that little to nothing was done on the part of the individual to address the concerns responding with words such as “nothing” or “none” or “not much.” About 30% of the respondents stated that they reached out for help to some extent, either by approaching professionals, members of clergy and/or family/friends.

What role did your parish (e.g. clergy, lay leaders, lay members, etc) play in assisting with the above? (n = 244)

Out of the 244 responses received for this question, nearly half of the respondents generally stated that the parish played little to no role in assisting with the matters indicated above. Themes that emerged from those that chose to elaborate included (in no particular order): 1) concern over lack of training 2) concern over trust/confidentiality 3) limited/ineffective follow up 4) personal/family choice to keep issue within the family 5) stigma. Approximately 40% of the respondents stated that the parish played a positive role in assisting with the concerns above. Themes of the responses included (in no particular order): 1) guidance 2) the Sacraments 3) support.

The Role of the Church

Would you utilize clergy and/or professional mental health services for assistance in times of sociological and/or psychological need? (n = 340)



**More than 80% of the respondents stated they would seek out some level of support when needed. Several studies show that less than 10% of Asians access professional mental health services (NAMI).*

Why or why not? (n = 201)

Trust and experience in clergy and/or professional mental health providers were the two factors that contributed to respondents answering the previous question.

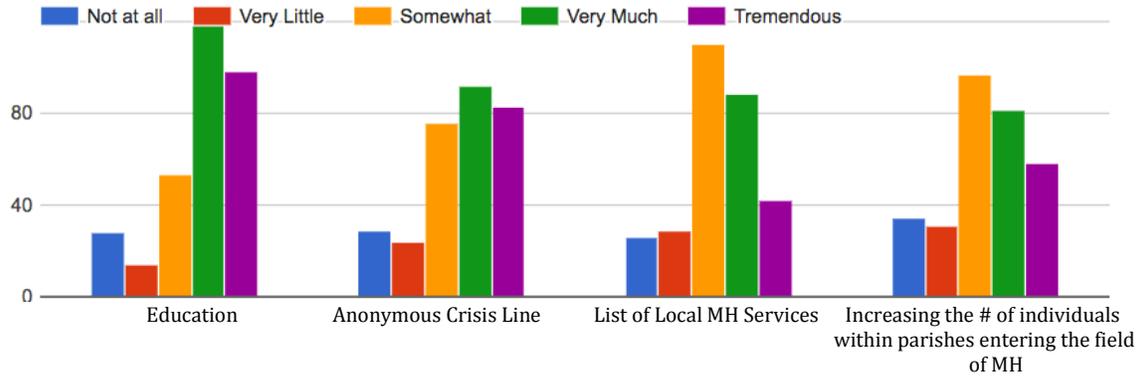
What would increase your likelihood of utilizing clergy and/or professional mental health services? (n = 205)



**The words "clergy", "professional", "mental", "health" were eliminated to find frequent words used outside of the question to answer.*

Increasing Access to Resources

What level of impact do you believe the following will have on increasing access to mental health services?



**Majority of the respondents reported having a list of local mental health services and educating the community would be either very much impactful or tremendously impactful.*