

## Maryland Department of Health and Mental Hygiene Behavioral Health Administration

## **DATA SHORTS**

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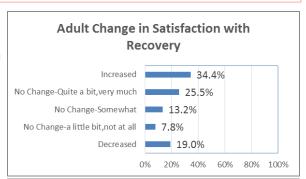
## Behavioral Health Recovery Measures and Supports in Maryland

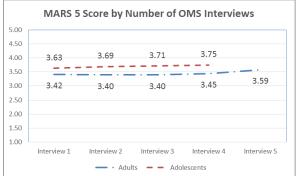
September has been designated by the Substance Abuse and Mental Health Services Administration (SAMHSA) as Recovery Month. In September 2009, a question about adults' satisfaction with recovery was incorporated into the Outcomes Measurement System (OMS). Beginning in 2015, an abbreviated version of the Maryland Assessment of Recovery Scale (MARS 5) was included in the OMS. This Data Short examines the results of these two items.

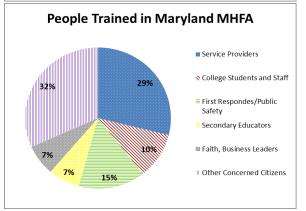
The first graph displays the FY 2016 change in satisfaction with recovery between the first and the most recent OMS interviews for all adults treated in the Public Behavioral Health System (PBHS), whether they received a mental health service, a substance related disorder service, or both types of services. The graph shows that the majority of OMS participants, nearly 60%, either increased their satisfaction or expressed "quite a bit" or "very much" satisfaction with their recovery at both their initial and most recent interviews.

The second measure of recovery in the OMS is the MARS 5. This instrument is administered to all adults as well as to adolescents ages 14 to 17. Scores range from 1 to 5, and a higher score indicates a greater sense of recovery. The second graph shows the average score on the MARS 5 based on the sequence number of the interview for the individual. That is, interview 1 is the average of everyone's score on their first OMS interview; interview 2 is the average of the second interview for everyone who had at least two interviews, etc. While the scale has only been included in the OMS for about 18 months and the increases are slight, they show a trend to increasing recovery as one stays in the system and continues in treatment.

Maryland sponsors many programs to foster and support recovery related activities. On Our Own of Maryland, Inc. (<a href="http://www.onourownmd.org/">http://www.onourownmd.org/</a>) and its local affiliates offer, among many other programs, Wellness Recovery Action Plan (WRAP) for its many members across the state. The Maryland Chapter of the National Alliance on Mental Illness (NAMI, <a href="http://namimd.org/">http://namimd.org/</a>) offers a variety of programs to individuals and their families including such programs as "In Our Own Voice". The Maryland Coalition of Families (MCF, <a href="http://www.mdcoalition.org/">http://www.mdcoalition.org/</a>) offers a variety of services such as assisting families in understanding and accessing resources and services. Maryland Recovery Net program is operated by the Behavioral Health Administration







and provides funding for specific needs and supports that include Recovery Housing, Continuing Care, Care Coordination, Recovery Community Centers, Peer Recovery Coaching, Adolescent Club Houses, and funding for transitional needs not covered by traditional sources (<a href="http://bha.dhmh.maryland.gov/Pages/Maryland-RecoveryNet.aspx">http://bha.dhmh.maryland.gov/Pages/Maryland-RecoveryNet.aspx</a>). Most Core Service Agencies also offer funding for those needs not covered elsewhere that are essential to an individual becoming established in the community. Maryland also offers an innovative program to assist people in dealing with someone who is experiencing a mental health issue, Mental Health First Aid (MHFA).

MHFA was developed in Australia in 2001. The purpose of MHFA is to educate people about actions that they can take if they encounter an individual who is experiencing a mental health issue until that individual can get the assistance and/or service that they need. It proved very successful, and has been implemented in many nations, including Canada and England. It was brought to the United States by Maryland as part of its SAMHSA funded Mental Health Transformation activities. Materials and activities were tailored to US needs and customs. Maryland eventually asked the Mental Health Association of Maryland (MHAMD, https://www.mhamd.org/) to become involved in the program. Since it began offering training in 2007, MHAMD has trained over 20,000 individuals in MHFA. Trainees have included behavioral and social service providers, high school and college educators and students, and first responders, among others. The breakdown of those receiving MHFA training in Maryland is shown in the final graph.