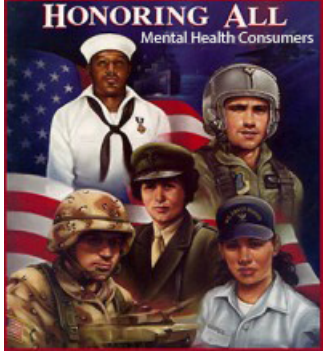
Veteran's Voice

Mental Health Consumer Council
VA Long Beach, CA



Mental Health Services Survey

1. Which Mental Health Program(s) have you participated in?

PTSD Mantram Relaxation Anger Management Healing Touch

Other _____ Doctor/Intern _____

2. How satisfied were you with the Mental Health Class/Program? (on a scale of 1-10)

Not at all Satisfied Very Satisfied

1 2 3 4 5 6 7 8 9 10

3. How effective was/is your Doctor or Intern in the Class/Program? (on a scale of 1-10)

Not at all Satisfied Very Satisfied

1 2 3 4 5 6 7 8 9 10

4. Level of difficulty finding a Mental Health Class/Program to sign up for? (on a scale of 1-10)

Not at all Satisfied Very Satisfied

1 2 3 4 5 6 7 8 9 10

5. Would you recommend the Mental Health Class/Program to other Veterans?

YES **NO**

Why or Why Not? _____

_____

Comments/Suggestions? _____

_____

veteransvoicelb.org **info@veteransvoicelb.org**