

Web Survey: SAMHSA Main Site v3

Navigation (1=Poor, 10=Excellent, Don't Know)

- Please rate how well the site is organized.
- Please rate the options available for navigating this site.
- Please rate how well the site layout helps you find what you are looking for.

Site Performance (1=Poor, 10=Excellent, Don't Know)

- Please rate how quickly pages load on this site.
- Please rate the consistency of speed from page to page on this site.
- Please rate the ability to load pages without getting an error message on this site.

Site Information (1=Poor, 10=Excellent, Don't Know)

Please rate the thoroughness of information provided on this site. Please rate how understandable this site's information is. Please rate how well the site's information provides answers to your questions.

Look and Feel (1=Poor, 10=Excellent, Don't Know))

- Please rate the visual appeal of this site
- Please rate the balance of graphics and text on this site
- Please rate the readability of the pages on this site.

Information Browsing (1=Poor, 10=Excellent, Don't Know)

- Please rate the ability to sort information by criteria that is important to you on this site.
- Please rate the ability to narrow choices to find the information you are looking for on this site.
- Please rate how well the features on the site help you find the information you are looking for.

Satisfaction

- What is your overall satisfaction with this site? (1=Very Dissatisfied, 10=Very Satisfied)
- How well does this site meet your expectations? (1=Falls Short, 10=Exceeds)

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0393, and it expires 03/31/2026. Public reporting burden for this collection of information is estimated to average 13 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 5600 Fishers Lane, Room 15E57A, Rockville, MD 20857.

- How does this site compare to your idea of an ideal website? (1=Not Very Close, 10=Very Close)

Future Behaviors

- How likely are you to return to this site? (1=Very Unlikely, 10=Very Likely)
- How likely are you to recommend this site to someone else? (1=Very Unlikely, 10=Very Likely)
- How likely are you to use this site as your primary resource for obtaining information about mental health and substance abuse issues? (1=Very Unlikely, 10=Very Likely)
- I can count on this agency to act in my best interests. (1=Strongly Disagree, 10=Strongly Agree)
- I consider this agency to be trustworthy. (1=Strongly Disagree, 10=Strongly Agree)
- This agency can be trusted to do what is right. (1=Strongly Disagree, 10=Strongly Agree)

Custom Questions

1. What best describes your role?
 - a. Academic/researcher
 - b. Educator
 - c. General public
 - d. Grantee
 - e. Health care professional
 - f. Government employee/contractor
 - g. Media/journalist
 - h. Parent/caretaker
 - i. Program/service provider
 - j. Social worker/counselor
 - k. Student
2. What is the main reason for your visit today?
 - a. Find a treatment program/facility or helpline numbers
 - b. Find grant information
 - c. Find SAMHSA's contact information (phone number or email)
 - d. Get help for mental health and/or substance use disorders
 - e. Get information on SAMHSA's programs, campaigns, technical assistance centers or resource centers
 - f. Get latest news, events or press releases
 - g. Get online training or other learning resources (such as webinars)
 - h. Get survey/statistical data or data reports
 - i. Learn about SAMHSA, including SAMHSA's policies and priorities
 - j. Order publications
 - k. Research information by issues/topics, including how to prevent, treat and recover from substance use disorders and mental illness
 - l. Other, please specify
 - i. Other Reason
3. Did you accomplish what you wanted to on this site?
 - a. Yes

- b. No
 - i. Please say more about why you were unable to accomplish your task on the site today
4. How frequently do you visit this site?
- a. First time
 - b. Daily
 - c. Weekly
 - d. Monthly
 - e. Once every few months or less often
5. What method did you primarily use today to find your information?
- a. Site search feature
 - b. Advanced search
 - c. Top navigation bar
 - d. Quick links in the pages
 - e. Site map
 - f. Just browsed the pages
 - g. Other, please specify
 - i. Other method
6. Please tell us about your experience with the site's search feature today. (Please select all that apply.)
- a. The search feature met my needs today
 - b. It was not clear to me how to use the search feature
 - c. I had issues with the search results I received (
 - i. What were your issues with the search results? (Please select all that apply.)
 - 1. Results were not relevant/not what I wanted
 - 2. I could not see much difference between the listings/items
 - 3. There was too little information in the results for me to decide which to choose
 - 4. The visual display of the results (such as image use, font color, and font size) was not helpful
 - 5. There were too many results
 - 6. There were not enough results
 - 7. There were NO results
 - 8. I had a different issue with the search results
 - ii. Please briefly describe the issue you faced with the search results.d. I had issues with sorting, filtering, advanced search, or lack of these options Please briefly describe the issue you faced with sorting, filtering, or advanced search options
 - iii. e. I had a different issue with the search feature Please briefly describe the issue you faced with the search feature
7. If you have a visual impairment, was the content accessible?
- a. Yes
 - b. No (Please share your difficulties regarding your experience.)
 - c. I do not have a visual impairment.
8. Were you able to access the content in the language of your choice?
- a. Yes

b. No (Please specify the language you would prefer.)

9. Is there anything else that is not covered above, which you feel is important for us to know?