

Focus Group
Consumers/Clients - MHCAN**
October 3, 2008

Interviewer: Jerry Solomon, Ph.D.

Goal: To obtain feedback from clients about their

- Experiences with the mental health system
- Reactions to the PEI workgroups recommendations
- Comments to the MHSA Steering Committee

Participants: MHCAN staff was contacted and they agreed to host and to assist in identifying clients who would be willing to participate in a focus group. Participants were offered pizza and beverages at the start of the group and were given \$10 food vouchers at the end of the group. Ten clients actively participated; equal numbers of men and women. Ages ranged between 25 and 60. All currently use MHCAN's services.

Format: The interviewer introduced himself to the group and explained the purpose of the two-hour meeting. He briefly described the PEI workgroup recommendations and then asked each participant to react to the following questions:

- What helped you the most in your recovery from mental illness?
- What aspect(s) of the mental health system was least helpful to you?
- Of the recommendations being made, which might have been most helpful to you and your situation?
- Is there anything that you want to make sure that the MHSA Steering Committee hears from you?

One participant suggested that it might be helpful to structure the feedback allowing each person five minutes to answer the questions. The group agreed to this.

Discussion: All participants agreed that it was important to create programs that addressed the needs of the mentally ill as early as possible in the process. All participants supported the recommended PEI programs. Most chose not to prioritize any one program because they all seemed equally important. Many believed they might have personally benefited if some of the proposed programs had been available to them.

They all agreed how important it is to receive services that are sensitive to their needs. There were varying reports of the effectiveness of providers that many had met along the way. While many benefited from the diagnostic process, most talked

about the importance of being listened to and feeling respected. "I want to explain to others, in my own words, what I am feeling." They all worried about limited financial resources and the recent loss of funding for many local mental health programs.

Many discussed their experiences with the absence of integration of services resulting in multiple treatment plans that were often contradictory. Many lamented the forced changing of helpful providers.

The clients universally gave their support to MHCAN and the safety they all experience there. Many clients felt strongly that it was important to continue programs such as Pioneer House that serve dual diagnosed people.

Conclusions: All agreed resoundingly that it was critically important to their recovery that providers listen and attempt to understand their experiences, rather than just diagnosing them.

For some the most important factor was having rapid access to psychiatric medications and therapy, especially while in jail.

Almost all agreed that change doesn't occur until the person makes a commitment to their own recovery. "Until that happens, nothing can change." But when that does happen those attending the focus wanted to be certain that you knew that, "Mental health programs work."

** When asked, most people who have used the mental health system prefer to be called "clients" rather than "consumers." Most found the label, "consumer," unacceptable.