

## Outline for Client and Family Driven Transformation of the Mental Health System

### I. Background

During the past decade, the United States has made national progress in advancing mental health policy with the publication of the Surgeon General's Report on Mental Health in 1999, the Supreme Court's decision in Olmstead in 1999, and the President's New Freedom Commission Report in 2003. In California, Senate President Pro Tem Darrell Steinberg has led mental health reform efforts with AB 34, AB 2034, and ultimately with co-authorship of the Mental Health Services Act (MHSA) in 2004.

The MHSA is the culmination of client and family advocacy, both directly and historically, to challenge a history of inequitable, insufficient, unjust and, in some cases, abusive practices. The MHSA replaces this legacy with services and supports informed by a recovery model based in dignity and hope in which clients and families are fully empowered in their communities to move beyond the effects of even the most severe mental illnesses.

The MHSA contains many of the elements of a transformed mental health system. In the following analysis, current MHSOAC Client and Family Leadership Committee (CFLC) goals for a transformed mental health system are stated, relevant MHSA provisions to those goals are noted, the current status of the goals is summarized, and the CFLC makes recommendations about how to further the achievement of its current goals for a client and family driven transformation of the mental health system.

### II. Elements of a Transformed Mental Health System

#### a. Employment

- i. Goal: Clients and Families are employed in significant roles in the Mental Health System  
Goal: Clients are supported to participate fully in the workforce at all stages of recovery
- ii. MHSA provision: Welfare and Institutions Code (WIC) Sec. 5813.5(d) (2) provides, in part: "Planning for services shall be consistent with the philosophy, principles, and practices of the Recovery Vision for mental health consumers: (2) To promote consumer-operated services as a way to support recovery."  
WIC Sec. 5822(g) provides: "The State Department of Mental Health shall include in the five-year plan: (g) Promotion of the employment of mental health consumers and family members in the mental health system."
- iii. Current status
- iv. Recommendation

b. Policymaking

- i. Goal: Clients and families drive mental health care policymaking  
Goal: Mental health policy is informed by recovery principles, community needs and values and the lived experience of clients and family  
Goal: Clients get what they need to recover in a supportive network of care that is not fragmented  
Goal: Criminal justice and forensic systems are eliminated as entry-points or alternatives to community based mental health supports
- ii. MHSA provision: WIC Sec. 5878.1(a) provides, in part, “It is the intent of this act that services provided under this chapter to severely mentally ill children are accountable, developed in partnership with youth and their families, culturally competent, and individualized to the strengths and needs of each child and their family.”  
WIC Sec. 5822(h) provides “The State Department of Mental Health shall include in the five-year plan: (h) Promotion of the meaningful inclusion of mental health consumers and family members and incorporating their viewpoint and experiences in the training and education programs in subdivisions (a) through (f).”  
WIC Sec. 5846(e) provides “The commission shall ensure that the perspective and participation of members and others suffering from severe mental illness and their family members is a significant factor in all of its decisions and recommendations.”  
WIC Sec. 5848(a) provides, in part, “Each plan and update shall be developed with local stakeholders including adults and seniors with severe mental illness, families of children, adults and seniors with severe mental illness, providers of services, law enforcement agencies, education, social services agencies and other important interests.”
- iii. Current status
- iv. Recommendation

c. Mental Health Programs/Service Delivery

- i. Goal: Move towards recovery/resilience model  
Goal: Clients and family fully empowered in program settings  
Goal: Recovery-focused client-run programs and family supports integral part of the ‘system’
- ii. MHSA provision: the MHSA Section 2(e) provides, in part, “With effective treatment and support, recovery from mental illness is feasible for most people.”

WIC Sec. 5813.5(d) provides “Planning for services shall be consistent with the philosophy, principles, and practices of the Recovery Vision for mental health consumers:

- (1) To promote concepts key to the recovery for Individuals who have mental illness: hope, personal empowerment, respect, social connections, self-responsibility, and self-determination.
- (2) To promote consumer-operated services as a way to support recovery.
- (3) To reflect the cultural, ethnic, and racial diversity of mental health consumers.
- (4) To plan for each consumer’s individual needs.”

- iii. Current status
- iv. Recommendation

d. Education

- i. Goal: Education and relevant supports to advance job skills and return to the workforce is viewed as a central to recovery and program design
- ii. MHSA provision: See section 5848(a) above in part c, ii.
- iii. Current status
- iv. Recommendation

e. Community Planning Process

- i. Goal: Clients, families and others involved in served communities set local mental health goals and resource priorities
- ii. MHSA provision: See section 5848(a) above in part c, ii.
- iii. Current status
- iv. Recommendation

f. Stigma, Abuse and Discrimination

- i. Goal: Stigma is removed as a barrier to resources for mental health, help-seeking in the public, family well-being and personal recovery in the individual  
Goal: Abusive, dehumanizing and demeaning practices are eradicated from the system of mental health care  
Goal: Discrimination against people diagnosed with mental illnesses and their families is eliminated in health care settings, employment, housing, education, social or civic activities
- ii. MHSA provision: WIC Sec. 5840(b)(3) and (4) provide “The [PEI] program shall include the following components: (3) Reduction in stigma associated with either being diagnosed with a mental illness or seeking mental health services.

(4) Reduction in discrimination against people with mental illness.”

- iii. Current status
- iv. Recommendation

g. Prevention and Early Intervention

- i. Goal: Clients and Families assist with prevention and early intervention of mental illness
- ii. MHSA provision: WIC Sec. 5840 (b) (1) provides “The [PEI] program shall include...: (1) Outreach to families, employers, primary care health providers, and others to recognize the early signs of potentially severe and disabling mental illnesses.”
- iii. Current status
- iv. Recommendation

h. Specific Client and Family Driven Transformation Goals by Age Group

- i. Children
- ii. TAY
- iii. Adults
- iv. Older Adults