

Report to the MHSOAC on 2010 Community Forums

Submitted by the Client and Family
Leadership Committee

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Introduction

- In 2010 the MHSOAC implemented the first series of MHSA Community Forums in five counties across California.
- The primary goal of the forums was to provide opportunities for the MHSOAC to hear firsthand about MHSA planning and implementation from persons living in those communities.

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Introduction continued

- The 2011 Client and Family Leadership Committee (CFLC) Charter requires that the CFLC provide a report on the 2010 Community Forums.
- Copies of this report are in your packets and we will present highlights of the report today.

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Ongoing Issues for Forums

- The 2010 Community Forums raised several ongoing issues.
- Issue 1: How can the MHSOAC preserve a sense of comfort for the participants at the Community Forums, and freedom from the fear of retaliation for public comments in particular, where the presence of governmental or other authorities might be seen to discourage critical feedback?

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Ongoing Issues

- Finding: After the Humboldt County Forum, some CFLC members wondered if the presence of the Humboldt County mental health staff discouraged individuals from speaking freely regarding their experiences with the MHSA.
- Response: Going forward, the CFLC decided to separate community program presentations from forum dialogue.

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Ongoing Issues

- Issue 2: How does the MHSOAC respond to the concerns of community members?
- Finding: It was not always clear who was responsible to address the concerns of the forum participants.
- Response: The CFLC will provide printed resource information at the forums, will invite members of County M.H. Boards to provide a resource during forums, and will refer individuals to the MHSOAC/DMH Issue Resolution Process.

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Ongoing Issues

- Issue 3: What will happen as a result of the Community Forums?
- Finding: Although much was learned from the 2010 Community Forums, the lessons did not result in policy recommendations.
- Response: The 2011 Community Forum report will be an opportunity to provide policy recommendations.

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Ongoing Issues

- Issue 4: How do we ensure diverse and robust participation in the Community Forums?
- Finding: With increased community outreach efforts, attendance increased at the community forums.
- Response: Outreach efforts will be expanded prior to the Community Forums in order to ensure all stakeholders in the area are aware of the events. A regional approach may be employed where counties bordering the “host” county are formally included in the forums.

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Highlights of Additional Findings

- Finding: Public comments at the Long Beach Community Forum ranged widely. Some individuals spoke about the MHSA, but most spoke about their particular experience with the mental health system.
- Response: The CFLC has determined that the Community Forums are a useful venue for citizens to tell their stories and express their feelings regarding their experience with the mental health system.

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Highlights of Additional Findings

- Finding: At several forums, people made comments about their lack of awareness of the MHSA or knowledge of its design and intentions. On some occasions such participants were later identified as being directly involved with MHSA-funded programs as clients or family members. This phenomenon led CFLC Chair Vega to make the comment that the forums are an opportunity to educate the public about the programs of the MHSA.

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Highlights of Additional Findings

- Response: The CFLC has determined that the Community Forums provide a great opportunity to disseminate information and educate the public about the MHSA and will make a concerted effort to increase such education at the Community Forums.

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Conclusion

- 2011 should see the Community Forums become a more effective tool for the MHSOAC to educate the public about the MHSA and to receive feedback from the public on the progress of the MHSA.
- Feedback obtained from Community Forums will provide the MHSOAC with input from the perspective of clients and families, including members of unserved, underserved and inappropriately served communities, for policymaking decisions.

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