

Cross-cutting Issue 7: Public Expectations of the System Compared to What It Actually Can Provide and What It Should Provide.

Public expectations of Michigan's mental health system vary widely, depending upon which "sector" of the "public" you ask. If you have no direct experience or expertise in mental health issues, you may not know that: mental illnesses are brain disorders, like Parkinson's disease; they affect all ages, both sexes, and all races; 20% of Americans will be affected by a mental illness in any given year; or that new treatments work and recovery is a real possibility. You probably want the system to protect you from violent "psychos" and to somehow help those who would have been in state hospitals a generation ago.

If you are a state legislator trying to balance the budget, you probably do not understand the pluses and minuses resulting from the state's almost total reliance on Medicaid; that the mental health budget did not benefit from the tax surpluses in the 1990s (general fund contributions were, in fact, reduced or frozen) but has shared in reductions since FY 2001; or that the number of citizens that need services has grown despite the shrinking budget. You may think that the public needs to adjust their expectations to meet the reality of the shrinking general fund because everyone needs to shoulder their share of the burden.

If you are involved in the criminal justice system you have watched the number of juveniles and adults with severe mental illnesses in the criminal justice system dramatically increase. Your expectations of the system would likely include access to pre-and post-booking diversion, adequate screening and clinical assessment, access to adequate and appropriate treatment while incarcerated, and a unified system of coordinated and collaborative support that ensures smooth and successful transitions from incarceration to community treatment and care.

If you work in the public mental health system you base your expectations of the system on your understanding of the regulatory and funding constraints that result from Michigan's heavy reliance on Medicaid funding. As Douglas Morton, the CEO of Pathways CMHSP and PIHP in Marquette, stated in his public testimony: *"We are no longer serving those with mild or moderate levels of mental illness except for providing crisis intervention or emergency services...After meeting the needs of those we call our priority population, if we have funds left over, we can treat those with lesser forms of mental illness. Guess what? There is no money left over."*

If you are a current adult client of the system or have applied for services and been denied your expectations of the system will be based upon your treatment and social support needs not the system's budget limitations. You would want a system that is based upon the premise that recovery from mental illness is a real possibility; actively involves and is accountable to consumers and their families; promotes, protects and enforces the rights that the law says you have; provides screening for mental, emotional, and substance abuse disorders in primary care and other human service settings across your life span; provides access to culturally competent, quality care throughout the state; effectively utilizes evidence-based practices and technology; and facilitates access to necessary support services.

The Mental Health Commission, its recommendations, and the progress in achieving them can play a major role in creating new mental health “realities” in Michigan and bringing people from different perspectives and backgrounds onto the same page in terms of expectations. In particular, the major education/advocacy effort proposed by Work Group I can be very important here. Congruence between expectations and reality will also be enhanced by greater statewide uniformity of definitions, standards, practices, and services; new sources of revenue and flexibility that can support services to non-Medicaid individuals as well as prevention and early intervention; and a statewide rights protection network that has sufficient independence and enforcement authority to assure that promises made are not promises broken.