

***Amplifying messages of resiliency, hope and recovery across Illinois that can only come from Illinoisans with lived experience***



**SUPPORTIVE HOUSING PROVIDERS ASSOCIATION  
ANNUAL CONFERENCE THURSDAY NOVEMBER 8, 2018**

**RESIDENT BREAKOUT SESSION:**

**CONSUMER EXPERIENCE ROUNDTABLE DISCUSSION**

# **CONSUMER EXPERIENCE ROUNDTABLE DISCUSSION ABOUT THE PRESENTER**

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**Gloria Centeno, BS Recovery Support Specialist  
Next Steps Statewide Consumer Network (SCN) Interim Project Director**

Gloria has been involved in Next Steps, NFP since October of 2013. In October of 2014 she was elected president of the Board, position she held until March 31, 2018. In July, 2018, she became the Interim Project Director for Next Steps SCN. Gloria has a wealth of experience in community organizing and mental health advocacy. She has a passion to mentor and empower fellow mental health consumers. She is well known for her extensive work in the mental health recovery movement and for her passion to educate and inform others the impact that peer support has in the lives of many who are or have experience mental health challenges. She has significant connections with entities and individuals throughout the State of Illinois as well as outside of Illinois that advocate for the improvement of mental health services and consumer leadership and empowerment.

# Proposed objectives

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## Objectives:

- 1) Highlight overlapping needs for system-level improvements across Illinois:
  - IL systems for mental health, addiction treatment, homelessness and criminal justice
- 2) Introduce “Next Steps NFP” (not-for-profit) and our vision for improvement
- 3) Round table discussion : discussion of residents varying experiences navigating their mental health and well being and brainstorming ideas that will assist in enhancing and strengthening their leadership skills

# Proposed agenda

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- Speaker Introduction ( 5 min)
- System-level Improvements (10 min)
- Next Steps, NFP Introduction (10 min)
- Roundtable Discussion ( 1 hour)
- Evaluations & Survey Questionnaire ( 5 min)

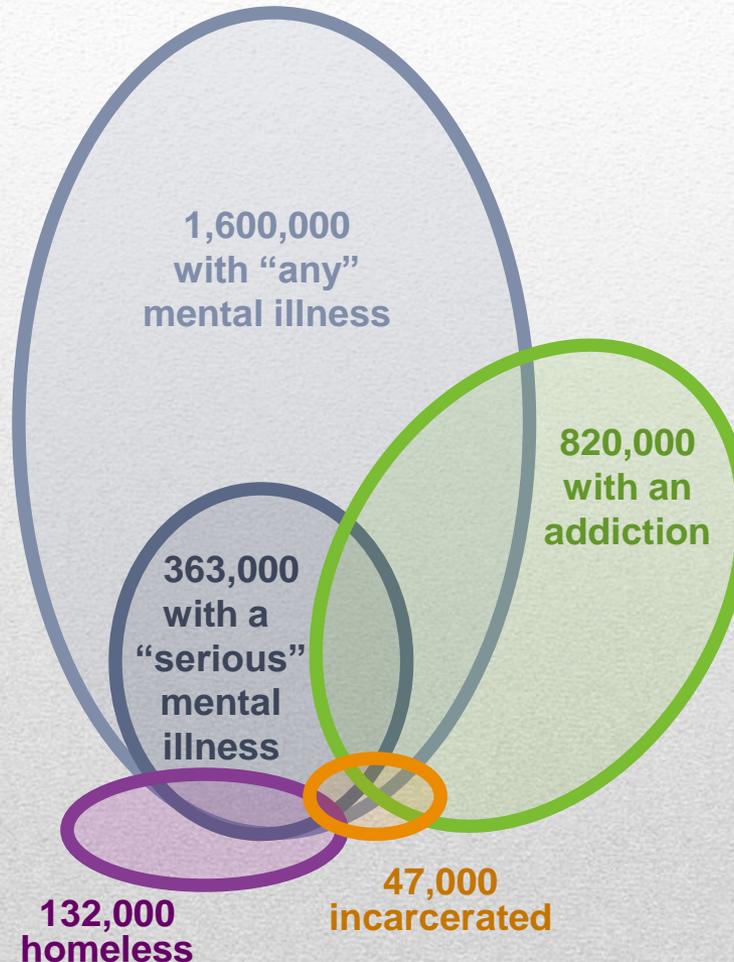
# >2 million in IL have a mental illness, addiction and/or are homeless, with high overlap in prisons

## Mental Illness

- ~1,600,000 Illinoisans age 18+ with any mental illness in the past year<sup>1</sup>
- ~363,000 diagnosed with “serious” mental illness<sup>1</sup>
- ~23% with an addiction<sup>2</sup>
- ~3% homeless shelter<sup>2</sup>

## Homelessness

- ~132,000 IL homeless<sup>8</sup>
- ~55,000 IL public school students are homeless<sup>8</sup>
- ~24% of homeless have a severe mental illness<sup>9</sup>



## Addictions

- ~820,000 age 12+ in IL meet addiction criteria<sup>1</sup>
- ~9% past month illicit drug use ages 12-17<sup>6</sup>
- ~39% also have a past year mental illness<sup>2</sup>
- <10% seek treatment<sup>6</sup>

## Crime/Incarceration

- ~47,000 IL prisoners<sup>7</sup>
- ~75% Chicago males arrested on illicit drugs<sup>3</sup>
- ~25-60% of individuals incarcerated have a serious mental illness<sup>3,4</sup>

# One Illinoisan's story: Ruthie

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## Serious Mental Illness

*"I suffer from depression"*

## Homelessness

*"I got really depressed and I didn't have anywhere to stay..."*

*"I was homeless for 20 years..."*

***19 hospital admissions  
within 16 months...***



## Addictions

*"In 11<sup>th</sup> grade I started hanging-out with the wrong crowd..."*

*"When I got hooked on drugs I was out in the wilderness, I was lost..."*

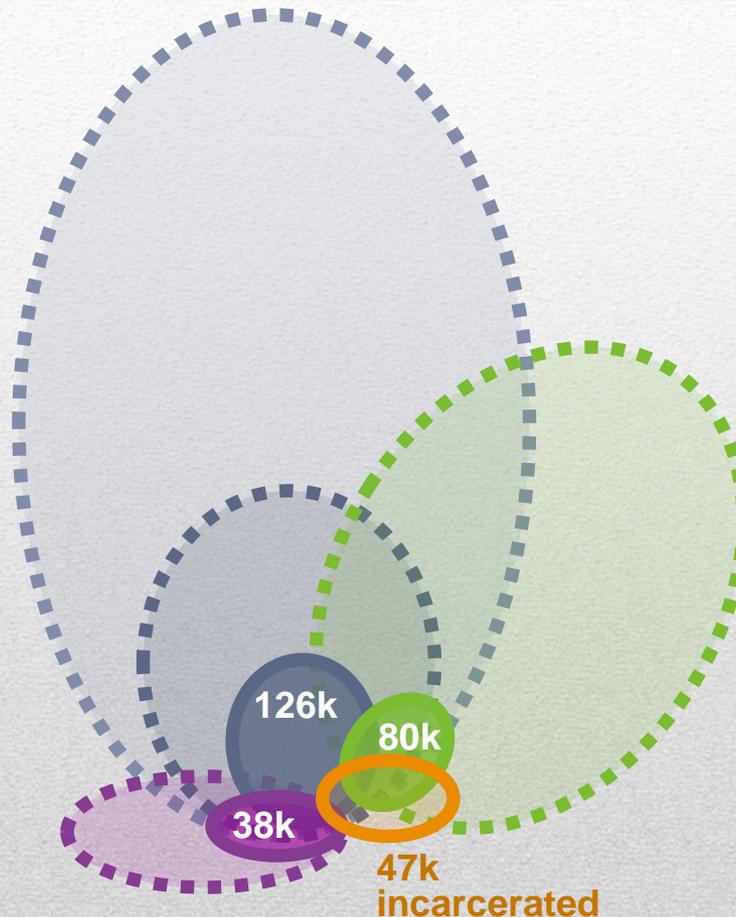
# The state of IL directly funds services to a minority but too many are “treated” in prisons

## Mental Illness

- 125,971 individuals in IL served by the State Mental Health Authority in FY2015<sup>1</sup>
- ~23% with an addiction<sup>2</sup>
- ~3% homeless shelter<sup>2</sup>

## Homelessness

- 38,036 individuals in IL received “comprehensive shelter services” funded by the state of IL from over 100 agencies across IL in FY2014<sup>3</sup>



## Addictions

- Among the ~820,000 Illinoisans age 12+ who meet addiction criteria:
  - only 5% addicted to alcohol receive treatment<sup>4</sup>
  - only 12% addicted to illicit drugs receive treatment<sup>4</sup>

## Crime/Incarceration

- 47,165 incarcerated individuals in IL prisons as of July 2015<sup>5</sup>
- 24% “identified” with a mental illness by IDOC<sup>5</sup>
- Many with an addiction

# Illinois spends far more to incarcerate versus to treat, rehabilitate or support our citizens

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## Incarcerations

- **\$1.7 billion** expenditures in FY 2010 by the Illinois Department of Corrections to incarcerate an average daily population of 45,551<sup>1</sup>
  - \$1.2 billion in direct prison expenditures by the Illinois Department of Corrections
  - \$566 million in prison-related costs outside the IDOC budget

## Mental Health Treatment

- **\$857 million** expenditures in FY 2014 for state hospital inpatient treatment, other 24 hour care and ambulatory/community care<sup>2</sup>
- Excludes uncompensated hospital costs and private sector costs

## Addiction Treatment

- **\$216 million** past Illinois DHS state appropriations for addiction treatment<sup>3</sup>
- 146,000 Chicago area drug-related emergency department visits in 2011<sup>3</sup>

## Homeless Support

- **\$50 million** expenditures in FY 2015 Illinois general revenue funds for emergency/translational housing, homeless prevention and housing services<sup>4</sup>

# Next Steps NFP was created to be a positive voice for change across these systems

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## Our History

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- 2001: advocated Chicago Continuum of Care to expand leadership to include “lived experience”
- 2005: persons who are homeless should have a voice
- 2010: expanded scope across Illinois
- 2013: expanded our mission across multiple systems in Illinois
- 2016: awarded a 3 year SAMHSA Statewide Consumer Network Grant

## Our Voices in Action

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- Fred, one of the co-founders of Next Steps, NFP became the first person with lived experience to chair a “continuum of care” in the U.S.
- Next Steps helps train Chicago City police officers for how to best interact with individuals experiencing symptoms of a mental illness
- Gloria was part of a team that became influential in the passage of the Community Expanded Mental Health Services Act in 2013. As a result, The Kedzie Center, the first community funded mental health center was opened in her community in October of 2014.

# **Our mission/vision is to amplify the voices of “lived experience” to improve these systems**

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Work to ensure that people with lived experience of homelessness, mental illness, substance/addiction and/or criminal justice experience lead the development and implementation of health care, housing and social policies at the state and local levels.

We need to be at every table, not just in treatment team meetings or social activity planning, but also as laws are made, when policy is discussed and decided, while funding is allocated, and where education is delivered.

Our work could be viewed as an ongoing process of finding and using our individual and collective voice. It is a three-part process:

- 1) Finding our individual voice.
- 2) Knowing how to use our voice
- 3) Amplifying our voice by joining and using the power of the collective voice of many

# We are currently five board members with three staff

## Board Members

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- 1) Richard Rowe (Board President)
- 2) Larry Smith (Secretary)
- 3) Margarita Gonzalez (Treasurer)
- 4) Robert Cunningham
- 5) Dorothy Yancy

## Staff

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- Gloria Centeno  
Interim Project Director the state-wide mental health consumer network
- Sandra Falcon  
Program Coordinator for the state-wide mental health consumer network
- Meghann O'leary  
Project Evaluator for the state-wide mental health consumer network

# **We were awarded a federal grant to build a state-wide mental health consumer network with the following goals:**

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- 1) Effect system change through collaborative efforts that highlight the role of consumers towards a system transformation that will increase the opportunity for consumers to achieve full recovery of healthy, fulfilling lives while residing in the communities of their choice and meaningfully participating in the enhancement of those communities.
  
- 2) Enhancing Consumer participation statewide
  - a) Voice
  - b) Leadership
  - c) Empowerment
  
- 3) Improve the quality of mental services health
  - Recovery-focused
  - Trauma-informed
  - Culturally relevant
  - Holistic
  - Resilience-oriented

# We are also expanding training and education as we build our new state-wide consumer network

## Strategic Objectives

- **Educate key stakeholders**
  - People with lived experience
  - Providers (communication, services)
  - Legislators (open minds, flexibility)
    - DCFS letters confirming homeless status
    - Peer Navigators excluded from grants
- **Train individuals with lived experience**
  - How to think strategically to get things done
    - Clear goals and objectives
    - Recruiting individuals
    - Partnering with other organizations
  - How to say what they need to say
    - Role playing and practicing, then doing it
    - Experiencing obstacles and overcoming them
  - How to be an effective board member
    - 101 Course: how meetings work
    - 102 Course: how to influence decision makers
  - How to influence policy and funding
    - Local (Aldermen) and state (Legislators)

*Our scope spans across these systems state-wide:*

- *Mental Health*
- *Addiction Treatment*
- *Homelessness Support*
- *Incarceration*

# ROUNDTABLE DISCUSSION

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- Consumers Experience navigating their mental health and well-being
  - Stories of successes
  - Stories of challenges
  - Stories of experiences with the mental health system
- Consumers Experience in dealing with factors associated with the intersections of gender, race, class status and geographical location
  - Any experience with barriers to access

# **WE WANT TO HEAR FROM YOU:**

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**BRAINSTORMING OF IDEAS FROM PARTICIPANTS ON TRAININGS OR INFORMATION THAT WILL BE HELPFUL TO CONTINUE STRENGTHENING THEIR LEADERSHIP SKILLS AS WELL AS AND MAINTAINING RESILIENCE, WELLNESS, AND HOPE WHILE FULFILLING THEIR LIFE GOALS**

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**THANK YOU EVERYONE FOR YOUR  
PARTICIPATION. WE ARE LOOKING  
FORWARD FOR FUTURE OPPORTUNITIES  
OF COLLABORATION AND PARTNERSHIP**