Academia and Mental Health Practice Evaluation Partnerships: Focus on the Clubhouse Model.

By: Melissa Floyd-Pickard & Jodi Lorenzo-Schibley

Abstract:

In this article, the authors explore evaluation between a local mental health agency and a researcher from the local university with a focus on issues for ongoing inquiry in the unique clubhouse setting and special attention to maximizing member participation and comfort throughout the process. Due to grantor expectations and a growing culture of systematic evaluation of psychosocial rehabilitation, establishing and implementing outcome indicator protocols is important for the modern clubhouse. The authors and club members collaborated on developing a new outcome indicator protocol. After completing the process, information was gathered from members and the research team about their comfort level throughout the process. The university and the clubhouse can be effective evaluation partners; however, attention to important issues in clubhouse research must be a priority. Several important issues and tips for clubhouses considering program evaluation are included.

Keywords: clubhouse | psychosocial rehabilitation | program evaluation | outcome indicators | university practice partnerships | mental health | academia | mental health agencies

Article:

BACKGROUND

For the modern mental health agency, evaluation and the formation of outcome indicators has become especially important, particularly in light of increased competition for dwindling resources and the urgent need to show effects of service. University faculty, particularly newer faculty, share a complementary need to establish research sites, service relationships, and possible evaluation contracts with external agencies for research productivity, scholarship, and tenure. Partnerships between universities and mental health agencies additionally provide a cross-pollination between timely real-world practice issues and contemporary theoretical and research developments that benefits both entities. This article describes an evaluation partnership between a university faculty member in a Department of Social Work and a local mental health agency. The process the researcher and the agency (a clubhouse-model program) underwent in

completing the research has implications for fostering future relationships between universities and local agencies.

Clubhouse programs serve people with serious mental illness, which usually means a diagnostic history of either one of the schizophrenia illnesses, bipolar disorder, and severe forms of other mental illnesses that have resulted in hospitalization and a need for ongoing treatment. Clubhouse programs in mental health originated with the Fountain House in New York City in 1948 (ICCD, 2008). For many years, it was the only program of its kind, emphasizing a rehabilitative focus and deemphasizing "member" and staff hierarchy. In the seventies Fountain House received a National Institute of Mental Health (NIMH) grant that established a national training program to replicate clubhouses in other places (ICCD, 2008). In 1994, the International Center for Clubhouse Development (ICCD) was established and today there are clubhouses around the world. The ICCD certifies clubhouses as ICCD-model programs only if they meet 36 standards that highlight issues of member rights and preferences are paramount. ICCD defines a clubhouse as "a restorative environment for people who have had their lives drastically disrupted, and need the support of others who believe that recovery from mental illness is possible for all" (ICCD, 2002).

The emphasis on minimizing the hierarchy between members and staff in the clubhouse culture, added to the fact that many members may have had bad experiences in clinical settings, underlines the importance of members feeling safe from compulsory participation in research. This is especially important in light of the emphasis on "voluntarism" (Glickman, 1992) in clubhouses; however, it proves to be a unique challenge to getting evaluation done, especially using traditional research methods.

S. House was established in April of 2002. Consequently, the researcher, a new professor at the Department of Social Work at a local university, was preparing to establish a research agenda with an emphasis on consumer-centered mental health services, particularly clubhouse settings. Having worked previously in a clubhouse, she contacted the newly developing program. With the complementary aims of the researcher needing to establish research focus as a new professor, and the Clubhouse needing to demonstrate the effectiveness of services in the local community, the relationship quickly developed. There are few descriptions of these pairings in the literature, although Neese-Todd and Weinberg (1992) are an exception.

After a few preliminary contacts the study goal was finalized of establishing an outcome indicator protocol for S. House that relied heavily on consumer/member input.

OUTCOME INDICATOR PROJECT

It was concluded during the initial meeting of the project that the members of the clubhouse should be involved in as many aspects of the research as possible. It was agreed that the project would be conceptualized to include three stages: establishing outcome indicators for a protocol, implementing the protocol, and disseminating the results. Members would be involved at all

three stages. During the first stage the members would be asked to describe a "good clubhouse" and signs that a "clubhouse was working." Working from this information, as well as input from the staff, several outcome indicators would be generated. In the implementation phase, data would be collected on the indicators. Finally, in the dissemination phase, a final meeting with the clubhouse members and staff would take place to discuss the study process and future directions.

Establishing the Indicators

After obtaining human subjects approval from the University Institutional Review Board (IRB), the project began with two meetings with members to discuss the project as an effort to engage members in participating. The meetings took place at the clubhouse during the communal lunch-time meal. A short presentation was given specifying what would be involved in participating in the project.

As part of establishing indicators, members, staff, and researchers visited another area clubhouse to see how they measured success. These informal research activities gave the researchers relaxed times to interact with members. Individual interviews were also conducted with clubhouse members and information on outcome indicators was gathered. The following indicators emerged: Rates of hospitalization or decreased hospital days, increased employment, and increased interest in employment. Members were more likely to mention employment as an indicator and decreased hospital days were important to track for grant application processes and tend to be a more traditional outcome indicator in clubhouse evaluation (Threshold Clubhouse, 2002).

Implementation

Information on the indicators was gathered from the initial participating members with the plan to collect this data during annual and semi-annual updates for all members. Initially staff would enter data but the plan was for members to become trained in the software so that they, too, could participate in the data entry and analysis. Because the program was fairly new, the data collected was baseline in nature only and therefore, is not reported here.

Dissemination

At a final meeting, members who had participated were presented with their gift cards and publicly thanked. As part of the final dissemination phase, the researcher presented the process at an International Clubhouse Organization workshop where other interested clubhouse and drop-in centers attended to learn about the outcome indicator process. S. House staff and members continue to gather data in accordance with the established outcome indicator protocol.

VIEWS ON THE PROCESS

While the goal of establishing and implementing an outcome protocol for this new clubhouse was accomplished, some of the most useful information about this project was the process

undertaken. Knowing what the different stakeholders in the process experienced may be useful for other clubhouses and related evaluation partnerships. Along these lines, two members were asked to respond to some general follow-up questions several months after the end of the evaluation phase; one had participated and one had not.

One member was overwhelmingly positive: "I had no complaints about research done in our clubhouse." Along the same lines this member felt that evaluation was not in conflict with the mission of the clubhouse: "The clubhouse [effectiveness] in my opinion must be studied periodically." About the researchers specifically this member stated: "I was grateful that they were here because the clubhouse model, ours and others abroad, was being spread in different circles and other people will know that the clubhouse works."

The second member was more concerned about the process. She reported that her first thoughts and feelings about research in the clubhouse centered around, "Making open my charts and personal information," implying that this was a concern for her. This is an especially pertinent issue when using outside researchers. Accordingly, this member felt evaluation did not fit with the mission of the clubhouse as "it could be confused with therapy." She was also hesitant about the researchers: "They were pressured and we were pressured." This comment is especially important to consider because the researchers were very clear that participation was voluntary. This member clearly felt she should participate despite her feelings and reassurances to the contrary. The member had suggestions to perhaps next time "meet at the mental health center and share the results," perhaps indicating that a more neutral ground would feel safer to her.

CONCLUSIONS

For the modern clubhouse, evaluation of programs to demonstrate effectiveness is an important issue. Three major areas for attention emerge with related "tips" for developing evaluation partnerships.

Maintain a Strong Member Focus

The central focus of psychosocial clubhouse programs is the membership. Evaluation in the clubhouse needs to maintain this same focus, not just for philosophical reasons but because the evaluation is richer and more meaningful if member-directed. Issues of member participation are complex at times—it seems there is a fine line between encouraging members to participate and avoiding making the research appear compulsory. During this evaluation, most members were either eager to participate or at least willing with some encouragement. One barrier occurred when members who originally had been eager to participate were presented with written materials such as consent forms or releases of information. It appeared that written forms reminded this small group of institutional regulations and were greeted with distrust.

Clubhouses and researchers should also think carefully about using incentives. It is debatable whether the use of gift cards to thank members for participating and to encourage participation is consistent with the clubhouse philosophy. This issue was managed in this evaluation by presenting the incentives as being from the researcher, in this way endeavoring to keep the clubhouse as an entity out of the process. The decision to use incentives, however, should be reevaluated project to project in order to avoid issues of coercion with this vulnerable population.

Choose a Researcher Who is a Good Clubhouse Match

The choice of a researcher when working in the clubhouse setting has a lot to do with how smooth the process will be. Clubhouses should interview potential researchers carefully to ascertain their level of familiarity and commitment to clubhouse philosophy. The extremely busy researcher may not be willing or able to take the necessary time to become part of the clubhouse community. Additionally, special attention should be paid to the researcher's ability and desire to collaborate with both clubhouse staff and, most importantly, members. It is also essential to agree on the end products that the clubhouse will have at the end of the research project.

Match Research Strategy to Purpose and Goals

The selection of a research strategy depends on the purpose of the research and how the results are to be used. For this project, the goal was to develop a protocol that could track the same indicators of success over a period of years. For this reason, it made sense to spend the necessary initial time making sure that the indicators were largely member-originated. Focus groups had been originally planned but it became clear early on that it would be more natural and easier to approach members individually. Flexibility in both researcher and research strategy go a long way in ensuring a positive experience.

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