

Dear Mark,

This is a very eloquent and clear response. I do not get the sense that it precludes the monitoring of client outcomes. In fact, the success of this approach is demonstrated by the Village ISA having very good client outcomes relative to programs serving homeless people with severe mental illness throughout California.

Better outcomes are produced by the approach that you are articulating and promoting. There are ample data to support this.

In addition, by using this approach, medications become an essential component of these good outcomes. There are good data to support this as well.

I recommend that everyone look at how the Ohio Department of Mental Health makes its research relevant to practice. The following findings are from their, "Toward Best Practices: Top Ten Findings from the Longitudinal Consumer Outcomes Study, 1999."

- Consumer's perceptions that their needs are being met are the best predictors of positive mental health outcomes. *Mental Health outcomes were not related to the amounts or types of services that consumers received.*
- Consumer's perceptions of their level of service empowerment (e.g., their involvement in treatment planning and decisions about services) was the variable most highly correlated with the degree to which they felt their needs were being met.
- Consumers' adherence to medication regimens depends on their level of involvement in decisions regarding their medication, and whether they receive information about their medications and side effects.
- Consumers indicated that a variety of things help their progress toward recovery.

Medication	31%
Self-initiated activities	26%
Family support	22%
Medical personnel	15%
Friend Support	14%
Agency services/staff	14%
Spirituality	14%
Talking to someone	11%
Case Managers	9%
Counselors and therapists	8%

Also, anyone interested in my power point presentation, *Recovery Concepts and Models in Mental Health Care: Overview and Applications*, should let me know and I will email you a copy. It outlines and walks the reader through both Mark's and Ohio DMH's approach to Mental Health Recovery based service planning.