What is the Focus 2.0?
The Focus 2.0 newsletter highlights important issues in mental health, providing timely information on recovery, peer support, and the value of including people with lived experience in the mental health system of care.

Have a suggestion for a topic? Let us know!

Technology and Mental Health

We live in a time where technology has opened new pathways in mental health support. A variety of applications for mobile devices, smartphones, tablets, and computers are giving individuals, doctors, and caregivers new ways to access help, check progress, and increase awareness of mental wellbeing. The recent pandemic has caused many individuals to seek new ways of connecting with mental health resources. This perfect storm has caused many to seek out and more thoroughly utilize the technology available to them for management of their mental health needs. In part, because of the excitement surrounding telehealth, there has been a boom in the development of applications specifically geared towards mobile/telehealth.

In our modern society, anyone with a mobile device can send a message or video chat with a crisis center, doctor, peer support specialist, friend, or family member wherever or whenever they are in need. Telehealth benefits patients by providing care from the convenience of their own residences with added opportunities for safety, privacy, and convenience. Telehealth may offer a less stressful option for those who feel extra stress or anxiety when they leave the comfort of their residence.

Because attending a telehealth appointment is relatively new to many of us it is important to remember some basic guidelines about the process. For instance, treat virtual appointments in much the same way you would an in-person face to face. The rules for privacy, timeliness, attire and focus on purpose should still be followed as if it were taking place in person. Being prepared with symptoms,
questions, or concerns ahead of any appointment is always a good idea whether it is virtual or in person. Know what method of communication will be used for the appointment and have any required links for connecting to the session ready to go beforehand. Have a backup plan for how to communicate if the planned communication method is experiencing technical difficulties. This could be as simple as a phone call, text message, or email. Both parties should be aware of which backup method of communication will be used. Both parties should also be aware of any accommodations needed for those with specific needs or disabilities. Choose a spot that has good lighting, and avoid having a bright light such as a sunny window behind you as this can make it difficult to see you. Don’t be afraid to express your concerns and let the person you are meeting with know whether you are finding your telehealth appointments beneficial. You may need to find a balance between telehealth and in-person appointments.

In addition to remote telehealth appointments, there are many exciting features built into various personal and mental health apps. Some apps use the device’s built-in sensors to collect information on a user’s typical behavior patterns. If the app detects a change in behavior, it may be able to signal that help is needed before a crisis occurs. Some apps are standalone programs that help to improve memory or thinking skills; others connect to a peer counselor or to a health care professional. There are a variety of mental health apps available, and the number is continually growing. However, this new frontier includes some uncertainty. For one, there is currently little industry regulation in this arena. There is also little information on app effectiveness, which can lead consumers to wonder which apps they should use.

Telehealth and new app technology have a lot of potential for people in recovery and those that serve them alike. A few of the advantages include:

- **Convenience:** Treatment and support can take place anytime, anywhere, and may be ideal for those who prefer virtual appointments.
- **Anonymity:** Users may seek treatment opportunities without having to involve others.
- **An introduction to care:** Technology may be a good opening for those who have avoided seeking help in the past.
- **Cost:** Some apps are free or cost less than traditional care.
- **Time commitment:** There may be a reduced time commitment by eliminating travel or waiting room lines.
- **Service to underserved populations:** Technology can help mental health providers offer treatment to people in remote or underserved areas/populations or in times of sudden need.
- **Appeal:** Some technologies may encourage clients to continue therapy that they would discontinue otherwise.
- **Uniformity:** Technology can offer the same experience, options, and program to all users.
- **Support:** Technology can supplement traditional therapy by providing monitoring and support at any time of day as needed.
• **Objective data collection**: Technology can collect relevant information such as location, movement, phone use, and other information.

While telehealth and app technology offer great opportunities, they also raise some concerns. That’s why developers and mental health providers should be focusing on certain things, such as:

- **Effectiveness**: Ensuring that the technology is offering a treatment that works as well as traditional methods.
- **Privacy**: Apps often collect sensitive personal information, so app makers must ensure the privacy for their users.
- **Guidance**: There should be more industry-wide standards ensure apps or other telehealth technology is effective.
- **Overselling**: There is concern that if an app promises more than it delivers, consumers may not seek out more effective therapies.

There are also significant access barriers to consider in the deployment of telehealth app-based services.

- **Connectivity**: Some populations may lack access to hardware like smartphones, tablets, or computers, or sufficient cellular or internet coverage to support virtual services. This can be a particular challenge in low-income, rural, or frontier communities.
- **Cost**: Not only is cost a barrier for low-income users in paying for apps or telehealth, but the cost of internet and cellular service can be an issue as well.
- **Knowledge**: Some people lack internet literacy or technical skills needed to access services.

Here are some suggestions for finding an app that may work for your needs:

- Ask your trusted health care professional for their recommendations. Some larger providers may even offer their own apps.
- Check if the app offers suggestions for what to do if symptoms worsen or if there is a psychiatric emergency.
- Decide on the type of app you want. Are you seeking something that is completely automated or something that offers communication with a trusted provider?
- Search for information about app developer; check out their credentials and experience.

If you’re interested in an app, try it out, test it for a few days, and decide if it suits your needs and will be useful to you, especially before committing to an app or service with a cost.

New strides in app development offer many potential opportunities for those with mental health concerns. It is important to properly vet any app or remote service before committing fully to its use. CAFÉ TAC is here to help you sort through the options for virtual mental health support and services, and we look forward to delving into some of the specific apps available to help you on your mental health journey in future editions of Focus 2.0!
What Do You Want Employers to Know?

Did you know that October was National Disability Employment Awareness Month? As a person with a mental health condition, you might hear “disability employment” and think it doesn’t include you. But it does! Finding sustainable, quality employment is central to self-sufficiency, thriving in the community, and supporting recovery. That’s why SAMHSA has identified employment as one of the parts of recovery that its new Office on Recovery will focus on, as detailed in their recent blog post Celebrating National Disability Employment Awareness Month (read it here: https://www.samhsa.gov/blog/celebrating-national-disability-employment-awareness-month).

Here at CAFÉ TAC, we are committed to bridging the gap between people with lived experience of mental health conditions and employers of all kinds. We’re working on tip sheets for employers, but the conversation really starts with you! That’s why we’ve created this short anonymous survey to find out what you think about recovery and employment!

Please take a minute to complete to let us know a little about your employment status, and what you wish employers understood about hiring, supervising, and supporting workers with mental health conditions. Find the survey at https://www.surveymonkey.com/r/WDYWETK.

What’s Happening at The CAFÉ TA Center

Let’s Talk About Integrated Care

CAFÉ TAC recently hosted the second webinar in its ongoing Integrated Care series. It featured a conversation about one successful integrated care site in North Carolina, with perspectives from peers, funders, and clinicians. Check out the recording at https://cafetacenter.net/attend-the-next-webinar-in-our-integrated-care-series-integrated-care-integrating-peer-support/.

The growing trend among providers, funders, and state agencies to deploy peer support and the lived experience workforce as part of their services presents a tremendous opportunity for people and organizations that want to translate the expertise gained through lived experience into better, more recovery-centered services, but there are challenges and potential pitfalls to navigate as well. Please join us in upcoming inte-
grated care webinars to talk through the possibilities, and their implications for growing peer support and the recovery movement!

**Families Supporting Recovery**

CAFÉ TAC’s effort to help families better support the recovery of their members with mental health needs featured a recent webinar, *What’s this Recovery, Wellness and Well-Being Thing? How to Support Yourself and Your Family Member*. It included two family peers and family mental health experts sharing essential lessons they have learned on their own family journey, and in their work supporting parents and families of youth and adults with mental health conditions. Check out the recording at [https://cafetacenter.net/attend-a-webinar-on-family-mental-health-and-recovery/](https://cafetacenter.net/attend-a-webinar-on-family-mental-health-and-recovery/).

That webinar was followed up with a five-part learning community series that’s still ongoing. Find recordings and sign up to participate at [https://cafetacenter.net/family-mh-lc/](https://cafetacenter.net/family-mh-lc/).

**Join the Conversation**

We have some ideas about where we’ll go next, but it’s not about us. We want you to drive the bus! TA works best when people guide the process, and the topics addressed are identified by those that are in search of resources, insight, and support. So let us know what you want to know!

Please take a minute to complete a short survey at [https://www.surveymonkey.com/r/CAFETAC-survey](https://www.surveymonkey.com/r/CAFETAC-survey) to share your feedback.

You can also stay connected with CAFÉ TAC by joining our mailing list at [https://cafetacenter.net/join-our-mailing-list/](https://cafetacenter.net/join-our-mailing-list/), and you can find us on Facebook and Twitter too!

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**Capacity Corner: A Column about Capacity-Building for Your Peer-Run Organization**

*CAFÉ TAC is pleased to share this feature, a column from CAFÉ TAC Training Coordinator John Ferrone on leadership challenges within peer-run organizations, where many advocates with lived experience direct their efforts to promote recovery and inspire change.*

*This time the focuses is on how to create effective Committees.*

Last time in “Capacity Corner,” we talked about fundraising. The takeaway about fundraising was that if you have nothing to sell—as in, the ability to show the results of your efforts—then you can’t raise funding. In other words, you have to do what you say you’re going to do, and then use the results to say, “Look at what we did . . . isn’t it awesome? You should make a donation to our organization so we can do more of this great stuff!” Obviously, those aren’t the words you use, but that’s the truth in a nutshell.

So, fundraising comes down to showcasing what you’ve done. The next key question, then, is *How do you get things done?*
Often, a lot gets accomplished when there’s one person who is gung-ho about getting the work done. They do the program planning, pay attention to details, and make things happen. That person usually burns out in 18-36 months. That’s not a long time, and it goes fast.

Is there a better, more sustainable approach to getting work done? Yes! Through effective Committees. Let’s define what a Committee is, and then define the three variables related to how a Committee can be effective.

First, a Committee is a group of people who are focused on accomplishing a task. It could be a group of Board members, or volunteers, or staff members, or a mix. Anyone can be on your Committee, as long as they have the availability, and know the purpose, the tasks, and the timeline. A Committee within a Board is appointed by the Board Chair. Let’s use that scenario as an example to explore what it means for a Committee to be effective, but remember, these principles will apply to all Committees.

At the Board meeting, the topic of marketing is discussed. A lot of Board members toss out ideas, and as usual, it turns into a brainstorming free-for-all. It’s time for the Board Chair to step in and say:

*Okay, thanks for all of the input. We still have the task at hand, which is to create a marketing brochure. We heard ideas about it possibly being a tri-fold, or maybe a double-sided flyer, and possibly a postcard. We heard ideas about how to disseminate it. Great discussion.*

*Now we need to do something with all of this thought leadership. So I’m creating a temporary (non-standing) Committee to get this done. Jane, I’d like for you to lead the Committee because it’s one of your strengths. I’m asking that Joe and Donna also be part of it. Any others who want to participate can let Jane know. (Note: The Board Chair can certainly ask for volunteers, but the Chair should know which Board members have which talents and thus be able to hand off assignments to various Board members.)*

*What we need, Jane, is a proposal from this Committee to review at our next Board meeting. That proposal should include at the very least the following things: 1) A clear statement of exactly what we are marketing; 2) An explanation of the target audience(s); 3) A suggested format for the marketing piece; 4) A suggested marketing message for each target audience; 5) Suggested marketing channels for each target audience; 6) A ballpark cost to produce and distribute each marketing piece; and 7) A timeline for making this happen, such that the marketing material can be sent out within the next 60 days.*

Yes, your Board Chair should say things like that! If your Board Chair does not have the necessary insights with respect to marketing (or whatever the topic is), then the Board Chair needs to simply ask the Committee Chair to “provide a marketing approach that the Board can review,” and trust that the Committee Chair will know how to do that, and if not, research it and put it together.

So the first takeaway for effective Committees is this: **Scope the task, and allocate it to a specific person to be accomplished.**

The next thing is for the Committee to actually meet and get the work done. Jane has been appointed as the leader in this example. She needs to convene the Committee, solicit their input, conduct research activities,
and facilitate the discussion towards recommendations that she can document and share with the Board. If Jane does not make this happen, the work does not get done.

As an experienced organizational development consultant, I have to say this to our fictitious person, Jane: *If you don’t have time, or this is too complicated, or for whatever reason you cannot do it, then PLEASE say so in the Board meeting so that the right person can be tasked as the Committee Chair.* This goes for the Committee members, too. Committee members have to participate and get the work done. If they can’t do that, they’re keeping the organization from doing what it said it would do.

The organization stops making progress when its people do not accomplish what they are supposed to do. So the **second takeaway** for effective Committees is this: *Get the work done, and at the very least do not get in the way of work getting done.*

The **third variable** that impacts the effectiveness of the Committee is related to the first two: *Keep in mind what your organization’s Mission is, and use it to motivate yourself to get the work done.* If you don’t do the Committee work, the people you’re trying to assist will not receive what it is they are hoping to receive from your organization, and your organization won’t be fulfilling its Mission.

Scope and timeline, leadership and commitment, and motivation—these are the things that will position your Committee to be effective at getting the work done. What follows is your organization’s ability to see the fruits of its labor, and to tell the story of your impact.

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*Is there a leadership challenge you’re facing in your peer-run organization or advocacy efforts? We want to hear about it! Reach out to us at cafetacenter@gmail.com with your question or comment. We will be happy to help, and your challenge might just be the subject of our next Capacity Corner column! (Anonymously and with your consent, of course!)*