Consumer Operated Service Program (COSP): A Multisite Research Initiative

Over the past twenty years, consumers of mental health services have developed and implemented numerous self-help initiatives to improve their quality of life and to guide them to more promising futures. These programs have included drop-in centers, peer counseling, advocacy, training, peer support groups, and vocational and housing programs. While self-help and consumer-operated services have been beneficial and supportive for many individuals, little formal evaluation has focused on their effectiveness within the context of the broader range of mental health services. A better understanding of existing services and programs is needed to provide the empirical basis for creating effective partnerships between these programs and traditional mental health services.

In response to this need for both empirical data and a more in-depth understanding of consumer-operated programs and services, the Center for Mental Health Services (CMHS) funded a national research program from 1998 to 2002 entitled the Consumer-Operated Services Program (COSP) Multisite Research Initiative. This national study investigated the extent to which consumer-operated programs are effective in improving the outcomes of people with serious mental illness, when coupled with traditional services. Individual outcomes such as empowerment, housing, employment, social inclusion, satisfaction with services, costs and cost-offsets were measured at baseline and at three follow-up intervals (4, 8, and 12 months). Goals of the COSP included creating partnerships among consumers, service providers, and researchers and publicizing knowledge gained regarding the effectiveness of these programs. This four-year research project used a multisite, experimental design with random assignment and a common assessment protocol to study drop-in center programs, educational programs and peer support programs at seven research sites located around the United States (Connecticut, Florida, California, Illinois, Missouri, Maine, Pennsylvania, and Tennessee).

Over the course of the COSP study, the Coordinating Center for the Consumer Operated Services Multisite Research Initiative was a collaborative effort between multiple institutions: the Missouri Institute of Mental Health, University of Missouri-Columbia School of Medicine, the University of Massachusetts Medical School’s Center for Mental Health Services Research and Northrup Gruman Inc. (formerly ROW Sciences). Dr. Jean Campbell, a mental health consumer researcher and director of the program in consumer studies and training at the Missouri Institute of Mental Health is Principal Investigator of the Coordinating Center; Dr. Matthew Johnsen, a sociologist at the University of Massachusetts Medical School, is Co-Principal Investigator.

A major objective of the Coordinating Center is to implement and analyze a Common Protocol of longitudinal data collected from the seven sites that delivered consumer-operated services and supports to persons with serious mental illness. This involved coordinating a multi-site data gathering effort by providing support for meetings of the COSP Steering Committee composed of consumer representatives, the Principal Investigator from each study site, the Principal Investigator for the Coordinating Center, and the federal representatives and conducting data analyses outlined in the Request for Funding Application (RFA). Coordinating Center staff were also responsible for overseeing the design and implementation of the cost-study, monitoring data quality and project sites, developing and maintaining a storage system of collected data and providing technical assistance to the study sites for the cost component.
The St. Louis Empowerment Center and the Center for Psychiatric Rehabilitation Partner for the COSP Study

As one of the multisites in the Consumer Operated Service Program (COSP), Boston University’s Center for Psychiatric Rehabilitation formed a partnership with the St. Louis Empowerment Center (SLEC) to study the effects of attending a consumer-operated drop-in center. Services at the Empowerment Center are both managed and delivered by consumers.

The Empowerment Center has served the greater St. Louis area since 1996 by providing a peer-run drop-in center, community and facility-based self-help groups, individual peer support and a Friendship Line. The majority of program participants are men (70%) with 60% being of African-American descent. SLEC is a joint program of the Depressive and Manic-Depressive Association (DMDA) and the Mental Health Association of Greater St. Louis and is funded by the St. Louis City Mental Health Board. The Center is located in renovated space in the basement of an historic house that contains the administrative offices of the Mental Health Association of Greater St. Louis. SLEC provides a clean, safe, tolerant and drug and alcohol free environment with participatory decision-making. On a day-to-day basis, program participants are involved in peer support and usually attend one of several peer meetings as well as meeting one-on-one with peer staff members.

“I heard about the St Louis Empowerment Center through the Friendship Line. When I spoke with the person on the Friendship Line, I was invited to “come on down.” I use the staff for peer support and I volunteer in the kitchen with setting up for lunch and helping with clean up afterward. I like the Empowerment Center because I get a lot of support here and the people are nice. My son, Darrin, is handicapped and I often bring him with me. People have accepted both of us. Recently, I spoke at a rally to advocate for continued funding and not to cut dollars from our mental health services in St. Louis. I am very grateful for everything the Empowerment Center has done for me.”

—Tami, a program participant describing her involvement with the Empowerment Center
The Research Methodology for COSP Study at St. Louis Empowerment Center

Using an experimental research design for the COSP study, three research partners collaborated in St. Louis: two traditional mental health providers (BJC Behavioral Health and Places for People) and the consumer-operated program, the St. Louis Empowerment Center. The Empowerment Center was the experimental condition in which participants who were receiving traditional services were randomly assigned to either receive services from this consumer-operated program under study or to continue their mental health services as usual. The control condition consisted of study participants who used only traditional mental health services provided by either Places for People or BJC Behavioral Health, both of which are located in St. Louis. As stated, the goal of the study was to better understand the effects of consumer-operated programs on the outcomes of employment, housing, empowerment, social inclusion and satisfaction with services. In addition, costs were evaluated. Two hundred and forty three (243) consumers were recruited from the two traditional mental health providers. Both groups received traditional services as usual and the experimental group was invited to attend the St. Louis Empowerment Center.

Kathy DeForest, Project Director, emphasizes that the collaborative relationships with BJC and Places for People were key to the success of this site’s field operations for the study. These agencies cooperated in the recruitment of study participants, locating participants over 12 months time and provided needed space needed for interviewing. The research office was also fortunate to hire mental health consumers who had experience in conducting similar interviews with people with mental illnesses. Two of the interviewers and the office assistant remained with the project from beginning to end.

Participants often developed rapport with staff and requested to be interviewed by the same interviewer for follow up data gathering. In the final 9 months of the field work, 4 additional interviewers came on board. These college students, both graduate and undergraduate level, gained invaluable education and experience in the mental health field; but also added positive interactions with study participants. Although each interview was lengthy, (averaging 2–3 hours) and the study protocol used was extensive, over 160 pages, the great majority of participants welcomed the opportunity to talk about their individual lives—hopes, dreams, fears, and successes. It is expected that analysis of these data will provide a rich understanding of how persons with mental illness change over time and benefit from receiving self-help peer-run services.

Research support and technical assistance was also provided on an ongoing basis by Brian McCorkle, Research Specialist, Center for Psychiatric Rehabilitation, and Co-Principal Investigator of the COSP study at the St. Louis Empowerment Center.
The COSP Coordinating Center’s newsletter entitled *Communiqué* (Vol 2 Spring, 2002) announced that across all study sites research participant enrollment for the Consumer Operated Services Program study ended on September 30, 2001. The total research enrollment of 1,827 participants made this initiative the largest study of consumer programs ever undertaken. Also highlighted in this newsletter issue are COSP accomplishments including:

- The successful implementation of a multisite study design
- The development of a standardized protocol
- The creation of an interviewer training manual and video
- The design and maintenance of a multisite data repository
- The production of a data entry software program
- The creation of a communication infrastructure with web pages, a listserv network, and intranet; and
- The implementation of a fidelity assessment of the COSP programs

For readers who would like to learn more about the Boston University and St. Louis Empowerment Center collaboration and project activities contact:

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