Knowledge is the key to open new doors

Technical Assistance Guide

Consumer-run Drop-in Centers
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Introduction

Throughout the nation, people who have been diagnosed with mental illnesses have found support and empowerment in a type of service called a drop-in center (or self-help center or peer support center). Although some professionals operate services under these names, this Technical Assistance Guide examines drop-in centers run by people—calling themselves consumers, survivors, or ex-patients—who themselves have been diagnosed with mental illnesses. (This Guide will use the term “consumer.”)

Many people unfamiliar with mental health issues are surprised to learn that consumers are running successful services for other consumers. However, consumer-run drop-in centers are far more successful than professional services in achieving the overarching goal of consumer empowerment; at a drop-in center, consumers are not “patients” but instead manage and staff the center. Consumer-run drop-in centers provide an impressive array of services, including support groups, advocacy training, vocational rehabilitation, and socialization opportunities.

In this Technical Assistance Guide, we will describe some of the basic functions of a consumer-run drop-in center and show a cross section of the many activities that can take place in them. We’ll also examine the basics of running a drop-in center, such as securing funding, finding a location, and promoting its services. However, we strongly urge readers to consult our Technical Assistance Guide Consumer-run Businesses and Services for more detailed information about managing a consumer-run service.

Dedication

This Technical Assistance Guide is dedicated to the memory of Carmen M. Meek, who in 1987 pioneered Pennsylvania’s first consumer-run drop-in center, in Darby, and helped the model spread throughout the country; there are now more than 70 such drop-in centers in Pennsylvania alone. Carmen also wrote a technical assistance pamphlet on consumer-run drop-in centers for the Clearinghouse that is the predecessor to this Technical Assistance Guide.

Carmen worked tirelessly on behalf of consumers of mental health services, both as a dedicated advocate and a nurturing friend, while valiantly battling her own mental illness. She is deeply missed.
The role and function of drop-in centers

For many people who have been diagnosed with mental illnesses, drop-in centers have been an essential way of improving their quality of life. In addition to (or rather than) seeking treatment from clinical programs, consumers can visit drop-in centers to seek support from their peers, participate in social activities, seek help in obtaining services and benefits, or simply relax and have fun.

Although many drop-in centers do not consider themselves a part of the mental health system, all consumer-run drop-in centers fill a unique and important role in (or around) the mental health system. For a fraction of the cost of clinical mental health services, a drop-in center can provide a supportive environment for consumers who might otherwise resort to hospitalization or other costly services. Many drop-in centers offer services on evenings, weekends, and holidays, when clinical mental health services might be unavailable.

Drop-in centers also provide something that clinical services cannot: empowerment. By planning and directing the drop-in center’s activities, its consumer users learn practical lessons about planning, budgeting, and working. More importantly, because a drop-in center’s consumer staff does not assume a “superior” role to the center’s users, the users develop a sense of responsibility and self-worth that may be absent in traditional settings. Rather than focusing on treatment of an illness, drop-in centers stress personal values of recovery.

The role of drop-in centers in consumers’ lives

For those unfamiliar with the consumer self-help and advocacy movement, it might come as quite a surprise to learn that people diagnosed with mental illnesses are running a wide array of successful programs to help their peers. Given the stigma surrounding mental illness, reinforced by media portrayals, much of the public is unaware that consumers are capable of fully recovering and taking control of their lives.

Unless someone is familiar with mental health issues, specifically consumer perspectives, that person might well wonder, “What is a drop-in center?” Carolyn Wilson, the executive director of New Hope Drop-in Center in Miami, explains that her drop-in center is much different from clinical programs, in which consumers are expected to follow treatment orders rather than plan their own recovery. “A drop-in center is a consumer-run program, a program of choice. It’s non-structural and non-clinical.” The consumers who use the drop-in center “develop socialization programs and whatever other programs they want. There are no conditions, period.”

At a drop-in center, there are people, not patients. The same people who come in search of support also support others and help run the center. Because the consumers who use drop-in centers determine the programs that are available, each drop-in center fills a unique role in

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consumers’ lives. However, all consumer-run drop-in centers share some common features, such as supportive environments and social activities.

As drop-in centers have developed across the country, they have provided what Hikmeh Gardiner of Philadelphia’s Do Drop In calls, “a fun place where people with psychiatric labels and who have been rejected can get away to a warm, friendly, family atmosphere.” Some drop-in center coordinators might even describe their centers as primarily a social environment that offers consumers a chance to have fun and engage in recreational activities.

Drop-in centers do provide a supportive environment, and many of them are open on evenings, weekends, and holidays—times when other services are shut down, and times that many consumers find particularly difficult. Centers often provide basic needs such as food and clothing and link consumers with social support services.

However, as the consumer movement becomes more sophisticated, the concept of a drop-in center’s role has changed for many within the movement. Whereas the drop-in center previously was viewed as a place to provide basic supports, now many drop-in centers see themselves as a means of empowering consumers to take control of their own recovery.

Drop-in centers promote empowerment by allowing consumers to plan the activities that they themselves see as useful. This model is much different from that of traditional mental health services, in which the professional is in charge, and the consumer has limited responsibilities other than obeying rules and taking medications. At consumer-run drop-in centers, consumers create responsibilities for themselves. Consumers who use the center establish rules of behavior, work commitments, and event schedules.

In New Jersey, a number of “self-help centers” allow consumers to voice opinions that would be silenced in traditional mental health programs. The self-help center’s design “is intended to empower us as to what we can do,” says Lisa Negron, assistant advocate with Collaborative Support Programs of New Jersey. “We have no apprehension as to speaking our minds on the hurts we have been subjected to. It is a place where we can see others who have suffered the same stigma and discrimination and express our sympathy and empathy.”

Sue Mader, co-chair of the Gathering Place in Green Bay, Wisconsin, states that empowerment is central to the mission of her “skills building and activity center.” A management team composed of consumer volunteers runs the center. “The great part of The Gathering Place is that we are doing it all ourselves,” she said. Her organization’s informational brochure states, “The Gathering Place is excited to be part of a peer-support and self-help movement gaining popularity nationwide. . . a movement that promotes empowerment and independence. The Gathering Place is founded on the concept of consumer empowerment in which mental health consumers pursue their own recovery and rebuild their lives through consumer-run programs and the friendship, support and understanding of peers.”
Drop-in centers have also been far ahead of traditional mental health services in embracing the concept of recovery—the belief that consumers should focus on building better lives rather than simply treating symptoms. Our Choices Advancement League in Hazleton, Pennsylvania, is an example of a drop-in center that promotes its services based upon the recovery principle. As defined in the center’s literature, “Recovery is the development of new meaning and purpose in one’s life. . . . It is a way of living a satisfying, hopeful, and contributing life. . . .” By becoming involved with drop-in centers, consumers can begin to shed the labels and limits that they have experienced.

The role of drop-in centers in (or around) the mental health system

Clearly, drop-in centers play important and effective roles in the lives of many consumers, but what roles do the centers play in the mental health system? Many drop-in centers and other consumer-run services do not consider themselves a part of the mental health system, yet it is impossible to deny that the existence of successful drop-in centers can have a major impact on the mental health system.

Interacting with the traditional mental health system

Consumer-run drop-in centers often distance themselves from the traditional mental health system as much as possible. They don’t see themselves as treatment-based, but rather support-based. However, the reality is that drop-in centers cannot completely ignore the traditional mental health system and must instead use the system to their advantage. John Farmer, director of I CAN, which provides technical assistance to drop-in centers in Pennsylvania, suggests that consumer groups have a greater chance of success in starting drop-in centers when the groups promote the centers as a complement to the mental health system.

Most people who run drop-in centers report that traditional mental health programs, especially community mental health centers, are major conduits for consumers using drop-in centers’ services. Many drop-in centers actively promote their services to the people who use the local community mental health center, and many rely on professionals’ referrals of people to their program. In some states, consumer groups have even been able to establish drop-in centers on the grounds of state hospitals.

Because a true consumer-run drop-in center is a completely voluntary service, the drop-in center cannot see itself as part of a “treatment regimen” and will not make individual progress reports back to the treatment professional. Additionally, drop-in centers often make voluntary referrals to traditional services, but cannot make particular treatments mandatory without destroying the concept of consumer control.
A delicate balance must be maintained so as to offer services to those who want them without destroying the center’s appeal as a non-clinical, non-coercive environment. Donita Diamata founded Da Vinci Place in Portland, Oregon and says that her staff does not recommend particular courses of treatment and never conditions services on adhering to any particular course of treatment. To make traditional services more accessible to those who want them, the center does offer an “open clinic day” during which consumers may see a professional without an appointment if they so desire.

Drop-in centers and managed care

Cost-effectiveness is a major issue in today’s health care climate. Managed Care Organizations (MCOs) have become prominent in both the private and public health care markets and seek to control costs by limiting consumers’ access to services, especially hospitalizations, long-term therapy, and certain medications. (If you’d like to learn more about managed care, consult the Clearinghouse Technical Assistance Guide Systems Advocacy.)

With MCOs’ emphasis on cutting costs, it would seem as though consumer-run drop-in centers could provide an alternative to expensive traditional mental health care services. Clearinghouse executive director Joseph Rogers says, “Drop-in centers get involved in mutual support in a relatively low-cost way. At the Clearinghouse, we participate in research projects that show the efficiency and cost-savings of consumer-run services.” However, consumers must advocate for consumer-run services so that MCOs are convinced of their effectiveness and cost-effectiveness.

One example of a drop-in center that has benefited from managed care is New Hope Drop-in Center in Miami. Carolyn Wilson says that the introduction of managed care to Florida has actually increased her organization’s membership. “With Medicaid guidelines, people are supposed to recover” rather than continue to utilize expensive medical services, she says. Because “people are supposed to reach a certain level by a certain time,” there has been an increased demand for her center’s services, such as advocacy training, job programs, and self-help groups.

Of course, advocates must make certain that increased utilization is accompanied by increased funding. Maria Mar reports that in Sonoma County, California, decreased funding for traditional mental health services has not been accompanied by increased funding for the county’s only consumer-run program. This is causing “major stress” for the drop-in center’s staff, she says.

Clifford Thurston, one of a growing number of consumers nationwide who is working for MCOs, provides insight into why drop-in centers are getting funding from MCOs. “The bottom line is that these programs are being funded because they’re cost-effective. They reduce hospitalizations and get people back to work. MCOs try to control spending,” and therefore consumer-run programs appeal to them. If you’re trying to start a drop-in center, try to sell your
drop-in center as effective and cost-effective. The Clearinghouse can provide copies of research studies substantiating the effectiveness of drop-in centers.

**Types of activities at drop-in centers**

Drop-in center activities vary from place to place for the very reason that drop-in centers are so successful: the activities are determined based upon the particular wishes and needs of the consumers involved. Some of the many common activities are:

- **Self-help group meetings** (also called mutual support or rap sessions). Some drop-in centers offer formal programs such as Alcoholics Anonymous (AA) or MICA (Mentally Ill Chemical Abusers). Others set aside meeting times for specific groups, such as a bipolar support group or an anxiety support group. Remember that mutual support is key to every drop-in center, and consumers offer support to each other whether or not a meeting is in session.

- **Group meals.** For many consumers, drop-in centers serve as surrogate families, and as with any family, meals together can be a focal point for sharing time together. For consumers who have been in institutional settings, helping to plan menus, shop for food, and prepare meals is a step toward taking on responsibility for self and others. Many drop-in centers belong to local food banks, which enable them to obtain free food, especially around holidays.

- **Weekly or monthly socials or parties.** Even though many drop-in centers have shifted their focus from socialization to advocacy and empowerment, having fun is still important at every drop-in center. Most centers have a social calendar filled with events designed to bring consumers together. For example, in Green Bay, where Packers football is a way of life, the Gathering Place stays open for every Packers game and serves fan favorites like hamburgers and bratwursts.

- **Excursions.** Most drop-in centers also plan fun events outside of the centers. This involves planning rides or coordinating public transportation. Popular destinations include movie theaters, museums, zoos, etc. Often, drop-in centers are able to obtain donated blocks of tickets to sporting events, plays, or other special events. In Memphis, Our House Drop-In Center organizes a yearly camping trip for consumers, many of whom would not otherwise be able to go on vacations, says director Sherri Brown.

- **Consumer speakers’ bureaus.** Many drop-in centers educate the public about mental health issues and consumer perspectives. By organizing a speakers’ bureau, participants not only are able to present mental health issues to an audience, but also are able to demonstrate by example that consumers can be eloquent and capable speakers. The speakers’ bureau at New Hope Drop-In Center “speaks to colleges, police groups. . . wherever there’s a need,” says director Carolyn Wilson. In Santa Rosa, California, Helen Lara says that Interlink Self-Help
Center has had great success sending its speakers’ bureau to college psychology classes. For more information, see the Clearinghouse publication *Organizing and Operating a Speakers’ Bureau*.

- **Individual advocacy.** When consumers first visit a drop-in center, they likely feel powerless within the mental health system and society. Drop-in centers use advocacy to help consumers regain a sense of power and self-determination. Advocates might help consumers obtain help with Social Security benefits, housing, transportation, or other government services. They might help consumers obtain access to their medical records or write an “advance directive” dictating what treatments they will or will not accept. However, the ultimate goal of these advocacy programs is to teach consumers the value of self-advocacy: when consumers learn to assert their rights, they are much more successful in obtaining desirable results.

- **Systems advocacy.** In addition to helping consumers with their own lives, many drop-in centers teach consumers to become advocates for systems change. Hikmah Gardiner, who runs Do Drop In in Philadelphia, says that her organization helps to interest consumers in lobbying at the local, state, and national levels. Consult the Clearinghouse Technical Assistance Guide *Systems Advocacy* if you’d like to learn more.

- **A referral bank for mental health services.** Referring consumers to traditional mental health services is not really a core function of consumer-run drop-in centers. However, because drop-in centers serve as meeting places and places to receive help, they can also serve as places to obtain referrals for consumers who want them.

- **Computers.** Computers are an important part of everyday life, and for consumers to be fully empowered, they must be familiar with computers. Many drop-in centers now offer computer access and training. Flo Houston says that Our Choices Drop-in Center in Hazleton, Pennsylvania, offers consumer-led computer training and even issues its own certificate in Windows training. Drop-in centers have also connected many consumers to the Internet. Our Choices members have Internet access and e-mail addresses through the center. By connecting to the Internet, consumers can learn about mental health issues and become part of a growing electronic advocacy network. (For more information about consumers on the Internet, see the Clearinghouse Technical Assistance Guide *Advocacy and Recovery Using the Internet*.)

- **Employment services.** Some drop-in centers offer services such as help with résumés, practice interviews, and assistance with job placement. However, consumer-run drop-in centers do not operate as “vocational rehabilitation” programs: any decision by consumers to learn employment skills by volunteering or attending workshops is completely voluntary. Not every drop-in center offers vocational programs in its array of services—it depends on the members’ preferences.
• **Guest speakers/workshops.** Drop-in centers offer a wide variety of educational opportunities for consumers. Topics range from basic life skills such as sewing, cooking, and baking to alternative health topics like Reiki, hypnotherapy, and nutrition. Many drop-in centers across the nation offer the BRIDGES program, a 15-week course on the topic of recovery, developed by the Tennessee Mental Health Consumers’ Association (TMHCA). (See the back of this guide for information on how to contact TMHCA.)

• **Assistance with basic needs.** In addition to providing meals to consumers, many drop-in centers collect clothing donations for distribution to consumers. Housing services are also important and include providing supports for people transitioning to independent living and matching people with roommates or group housing. Some drop-in centers also help consumers with home ownership, educating them about the necessary steps and explaining public incentive programs for new homeowners.

• **Consumer-run businesses.** Some drop-in centers have small businesses that serve several purposes. They help raise money for the center, but more importantly they can provide vocational opportunities for members and also can provide free or low-cost services to other consumers. For example, some drop-in centers operate thrift shops or snack bars. John Farmer of I CAN in Pennsylvania says that one drop-in center even operates a moving service that helps consumers move when they find housing in the community.

• **Political events.** Farmer says that one drop-in center has a very successful “candidates night.” This is a non-partisan event in which the drop-in center invites all candidates in a local election to the center for a discussion of the issues. He suggests that a drop-in center contact the local League of Women Voters for assistance in organizing such an event. Another worthwhile activity is registering consumers to vote; you can also contact the Clearinghouse for information about a national voter empowerment campaign in which we are participating.

• **Outreach programs.** Many consumers who use drop-in centers find that peer support is a powerful tool in their recovery. In addition to in-house support groups, many drop-in centers provide outreach to consumers in state hospitals and prisons.
Running a drop-in center

Running a drop-in center takes a lot of hard work and might seem intimidating, but there are many sources of assistance that will help you make your drop-in center a success. The Clearinghouse has published a technical assistance guide, Consumer-run Businesses and Services, which provides an in-depth overview of running a consumer-run service such as a drop-in center. The guide includes:

- Internal decision-making;
- Financial management and budgeting;
- Marketing and promotion;
- Community relations and using the press;
- Evaluation of consumer-run services; and
- Workplace and staff issues.

We strongly recommend that you consult Consumer-run Businesses and Services and contact the Clearinghouse staff if you are interested in starting or improving a drop-in center. Here, we’ll take a look at some of the issues that are important to running drop-in centers, such as ensuring consumer control, finding and securing funds, finding a location, handling community resistance, and promoting your services.

Consumer control

Some mental health providers offer services that are called “drop-in centers” but are not consumer-controlled. In reality, this other type of service is very similar to any traditional mental health service that is planned and controlled by mental health professionals. Although these services can provide a supportive environment, consumer-run drop-in centers offer many other advantages.

One advantage is empowerment. Sue Mader, a consumer who is one of the founders of The Gathering Place in Green Bay, Wisconsin, says that consumer-run drop-in centers “empower people a lot more than professional services can. There is more peer support here. There are no labels like ‘client’ or ‘professional’—we are all equals.” The absence of a wall between “consumer” and “provider” makes consumers realize that they have the power to make their own decisions.

Another advantage is a comfortable environment. Jim Prather, a consumer working at a drop-in center in Massillon, Ohio, compares his center favorably to a nearby one run by a mental health agency. “We are a lot less rigid. We have an easier atmosphere, and this contributes to a happier
environment. The less structure, the less policing, the better.” This leads to a situation in which the members generally respect the rules and the staff rarely must intervene.

Consumer-run drop-in centers also may offer greater cultural competence and sensitivity than traditional mental health services. A consumer-run drop-in center will be more successful if its staff and volunteers represent the diversity of the community in which it is located.

Even consumer-run drop-in centers can begin to seem more like traditional mental health services if care is not taken to allow the consumers who use the center to continue to have input. When the staff—even if they are consumers—make all the important decisions, then a drop-in center is not truly consumer-run.

Donita Diamata, who founded Da Vinci Place in Portland, Oregon, says, “We have monthly membership meetings where the members set all of the rules and plan all of the activities. The staff will help them implement everything they enact as long as it’s ethical, legal, and financially possible.”

Diamata’s comments capture the essence of consumer-control: it is not enough simply to hire a consumer to run a drop-in center. Instead, consumer-run drop-in centers encourage as many consumers as possible—either as paid staff or volunteers—to get involved in every aspect of operations. In this way, the program meets the needs of its participants. For more information about ensuring meaningful consumer involvement, consult the Clearinghouse Technical Assistance Guide Consumer-run Businesses and Services.

**Funding**

A significant majority of drop-in centers obtain their funding in the form of federal block grants that are administered (or “passed through”) by state or local mental health authorities. Therefore, the best way to start looking for funding is by contacting your local and state mental health authorities, which are listed in the blue pages section of your phone book.

When you contact your local and state mental health agencies, ask questions so that you can learn who is responsible for funding programs. You also might want to inquire whether the state mental health agency has an office of consumer affairs (many do.)

You should not limit yourself to the “proper channels” when seeking funding. If the local or state agencies are hesitant to fund consumer-run drop-in centers, you might need to work harder. Maria Mar says that consumer advocates in Sonoma County, California, “had to buck the mental health system and get funding allocated by the county Board of Supervisors. We convinced them that it would be a wise expenditure and that the mental health director was on our side.”
Finding enough money to run a drop-in center will take hard work, but consumer groups are finding new ways other than relying on an annual budget from the county or state. In Oregon, a managed care organization (MCO) handles the state’s mental health services for people eligible for Medicaid. Donita Diamata’s Portland drop-in center bills the MCO for services to consumers. “We let people get comfortable with our services before we ask them for insurance information. We made a commitment to serve everyone, and we do not deny services to people whose insurance we cannot bill.”

Other drop-in centers have found ways to supplement the funding they receive from the county or state. As one director put it, “You can’t run your programs on what the state gives you.” A primary way of supplementing government funding is seeking the donation of “in-kind” goods and services from local agencies. Some drop-in centers receive accounting services, computers, office supplies, phones, etc., from local agencies such as Mental Health Associations (MHAs) or NAMI chapters.

Some drop-in centers hold bake sales, craft shows, car washes, and other fundraising events. Others even have full-time businesses such as thrift shops to raise money for funding the drop-in center’s activities. John Farmer reports that one Pennsylvania drop-in center has a great fundraiser: the center’s consumers offer free coffee at a highway rest stop. People make donations and can also pick up information about consumer-run services.

More and more drop-in centers have begun to seek supplemental funding from private foundations. If you have access to the Internet (or can get to a library with Internet access), you can find many foundations that will give small grants to social service organizations such as drop-in centers. You can also join the local United Way agency. For more information about using the Internet to seek funding, consult the Clearinghouse publication *Advocacy and Recovery Using the Internet.* To help you increase your chances of obtaining funding, the Clearinghouse also offers a publication titled *The Art and Science of Writing Proposals That Win.*

**Where to establish a drop-in center**

If you are starting a drop-in center, careful attention to your site can be a major factor in your center’s success. The type of building you choose, as well as its location, are both critical. Additionally, many consumer groups find that they must work hard to convince neighbors that the drop-in center will be a benefit to the community. Often, neighbors have preconceived notions of mental illness that make them resist a new drop-in center.
Finding a location

When searching for a location for your new drop-in center, you’ll have many factors to consider. You’ll have to consider the types of activities you’d like to offer, as well as the people you’ll be serving. The Clearinghouse Technical Assistance Guide Consumer-run Businesses and Services, offers detailed information about finding a location for consumer-run services, but some questions especially relevant to drop-in centers include:

• *How will consumers get to the drop-in center?* If you are opening a drop-in center in an urban or suburban area, you’ll most likely need to be located close to public transportation so that consumers who don’t have cars will be able to access your services. You’ll also need parking for consumers who do drive. In rural areas, public transportation is usually unavailable, but many rural drop-in centers are able to obtain some sort of transportation grant to pay for a van. You might consider locating a rural drop-in center near other facilities that consumers would like to use, such as a library or grocery store.

• *Is the building accessible?* You should ensure that your building is accessible to people with physical disabilities.

• *Is the location zoned properly?* Most cities have zoning laws that allow properties only to be used in certain ways, for example, residential, commercial, or industrial. You should find out whether your desired location is properly zoned or whether you’ll need a “variance” to open your drop-in center. If a variance is required, you’ll need to have an open hearing, and the community will have the opportunity to voice its objections. (More about this in Handling community resistance, below.)

• *Will the center be near mental health clinics?* Many drop-in centers find that a large percentage of their users are referred to them by community mental health centers or other clinics. If you are located close to such facilities, then consumers will be more likely to visit your drop-in center to explore its services.

• *How safe is the area?* Drop-in centers often operate in lower-income areas because many of the people they serve live in such areas. In urban neighborhoods, some blocks are safer than others, and you should consider what the neighborhood is like both during the day and at night. Check to see if the immediate area is well lit and whether there are obvious hazards such as abandoned buildings, drug houses, or alleys.

• *What type of building is right?* Consumer-run centers can be located in many different types of buildings. Lisa Negron, an assistant advocate with Collaborative Support Programs in New Jersey, works with self-help centers that are located in storefronts, office buildings, converted garages, former doctors’ offices, and basements. “The question is whether we have the facilities for our core functions of peer counseling, recreation, advocacy, and
socialization.” Based on the types of activities you’re planning, ask whether there will be enough room. Also, if you plan to serve meals, are the kitchen facilities adequate for preparing meals for large groups?

Handling community resistance

In addition to the practical considerations outlined above, another factor to consider when opening a drop-in center is whether community resistance will pose an obstacle to providing services. Most drop-in centers have managed to open their doors without incident, but some have had a rough time because of the NIMBY (“Not in my back yard”) syndrome.

Hikmah Gardiner, whose Do Drop In is located in urban North Philadelphia, says that her group had to work hard to win the community’s trust. “Before we opened, the officers from the local police station circulated in the neighborhood and warned people that ‘the crazies are coming.’ As a result, there was neighborhood apprehension. We held an open house. Our neighbors were pleased (and shocked) to see how gorgeous our center is. The neighborhood attitude gradually changed. Our center joined the local business association. We pay our bills on time; we keep our building in shape; we are now a part of the community.”

The lesson to be learned is that although opening a drop-in center is not always smooth sailing, there are ways of winning over a community. Gardiner’s advice raises two important points:

- **Don’t give people anything to object to.** Make sure in advance that you take care of zoning permissions, safety inspections, licenses and permits, and other legal requirements. You might be able to locate a lawyer who will provide pro bono (free) services in these areas. Also, make sure that you maintain your facility and work to prevent problems with neighbors before they happen.

- **Take proactive steps to win community support.** In addition to holding open houses, many drop-in centers participate in activities such as block clean-up events. Sherri Brown says that consumers at Our House Drop-In Center even mow their older neighbors’ lawns.

If you’d like additional advice about how to make a seamless transition into a new location, consult the Clearinghouse Technical Assistance Guide *Consumer-run Businesses and Services* and request a free copy of *Gaining Community Acceptance* from the Robert Wood Johnson Foundation (RWJF), which provides many useful strategies. To learn how to contact RWJF, see the back of this guide.

**Advertising and promotion**

Although drop-in centers are not run for a profit, advertising plays a crucial role in their success. Not only are many drop-in centers formally evaluated by funding sources based upon the number
of consumers who use the center, but showing that your service helps many people is also a great way to seek additional funding. Additionally, because peer support is fundamental to a drop-in center’s success, bringing new people into the fold means that there are more peers to offer their support.

Many drop-in centers report that “word of mouth” is their most successful form of advertising, but others have used fairly simple steps to greatly improve their profile in the community. Such measures include:

- **Brochures.** A brief description of your services that encourages consumers to use them can be a great asset to your drop-in center. Be sure to list your location (and directions), hours of operation, phone number, and some of the activities you offer. The brochure can be simple—many are printed on a single piece of paper folded into thirds, but you should carefully proofread it and make it look as nice as possible. Donita Diamata, who founded Da Vinci Place in Portland, Oregon, says, “Our members are our biggest advertisers. They pass out cards and brochures to people they meet on the street.”

- **Speaking engagements.** Many drop-in centers address groups of consumers in hospitals, clinics, psychosocial rehabilitation centers, residential programs, vocational rehabilitation programs, or boarding houses. Many drop-in centers also address groups of professionals or students to educate them about the consumer movement and consumer-run services.

- **Visiting professionals.** If you are unable to speak to groups of consumers who might be interested in your services, you should try to meet with professionals who work with them. You can describe the benefits of your services and encourage them to refer consumers to your drop-in center.

- **Printed business cards.** Business cards can be distributed to anyone, such as professionals, case managers, and anyone else who might refer consumers to your drop-in center.

- **Posters/flyers.** With permission, you can hang posters or distribute flyers to advertise your services at libraries, community mental health centers, private hospitals, boarding houses, benefit offices, houses of worship, and anywhere else where potential users might see them.

- **Networking.** By networking with professionals, government agencies, and other consumer groups, you not only gain valuable information about running your center, but your contacts can help you promote your center. You can also work together on advocacy goals.

- **Advertisement in the yellow pages.** Although a yellow pages listing costs money, it can capture the attention of someone looking for mental health services.
• *Press releases.* Newspapers are often willing to cover the activities of drop-in centers because people helping each other makes a nice story. The Clearinghouse is always happy to provide information about writing effective press releases.

• *Local media appearances.* Similarly, your staff and consumers can make themselves available for appearances on local talk shows, radio, television, and cable access.

• *Advertisements in a local newspaper.* Your drop-in center might want to investigate placing ads in a local newspaper. However, you can often get your special events listed in a “community calendar” or similar section free of charge. Flo Houston, of Our Choices Drop-in Center in Hazleton, Pennsylvania, says, “We’ve never done any paid advertisements, but we try to get into the newspapers as often as possible.”

• *Community events.* Some drop-in centers participate in events such as a “health fair” at a local mall. Events such as county fairs, block parties, etc., present an opportunity for you to distribute literature about your services. Your group also can “adopt” a stretch of highway, hold consumer art shows, and otherwise create positive visibility in the community.

• *Newsletters.* Ask for contact information from the people you meet and send them a newsletter (or a simple calendar of events) periodically. You will keep up people’s interest, and the people you’ve already reached will likely share the information with others.

• *Open houses.* Because drop-in centers are designed to let people stop by whenever they want, it might seem unusual to hold an “open house.” However, by inviting members of the public to see your drop-in center in action, you might reach consumers who otherwise might have been reluctant to visit. You can also show off your program to professionals and others who might refer consumers to your programs.

• *Community involvement.* By participating in block clean-ups, neighborhood coalitions, and other activities not specific to mental health issues, you demonstrate the diversity of what consumers have to offer. Some drop-in centers have placed staff members or consumers onto boards of local organizations such as residential programs.

For more information about promoting your drop-in center, refer to the Clearinghouse Technical Assistance Guide *Consumer-run Businesses and Services.*
Additional Resources

For information about ordering *Consumer-run Businesses and Services, The Art and Science of Writing Proposals that Win, Advocacy and Recovery Using the Internet*, and *Organizing and Operating a Speakers’ Bureau*, contact:

National Mental Health Consumers’
Self-Help Clearinghouse
1211 Chestnut Street, Suite 1207
Philadelphia, PA 19107
(800) 553-4KEY (4539)
http://www.mhselfhelp.org
info@mhselfhelp.org

For information about the BRIDGES education program, contact:

Tennessee Mental Health Consumers’ Association
PO Box 494
Church Hill, TN 37642
(800) 459-2925

For a free copy of *Gaining Community Acceptance*, contact:

Robert Wood Johnson Foundation
PO Box 2316
Princeton, NJ 08543-2316
(609) 452-8701
http://www.rwjf.org