Partnering with People with Lived Experience of Behavioral Health to Guide Reform Strategies: Firsthand Reflections

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Meaningful behavioral health reform requires authentic partnership with people who have lived experience navigating the behavioral health system. Ashley Jasko describes how the Center for Health Care Strategies (CHCS) worked with six consultants who brought both lived and professional experience to help develop resources for states.

Key lessons from the partnership:

1. **Prioritize trust and relationship-building**
   - Trust is foundational because many people with behavioral health needs have experienced stigma or tokenization.
   - CHCS intentionally created opportunities for personal connection and emphasized treating lived-experience partners as both individuals and professionals.
2. **Balance structure with flexibility**
   - Creating a partnership charter helped establish expectations, shared leadership, and co-facilitation.
   - The team learned that lived-experience partnerships often require more time for relationship-building and evolving roles than initially anticipated.
3. **Acknowledge mistakes and repair harm**
   - Missteps are inevitable, but transparency, accountability, and open dialogue are essential.
   - The authors emphasize that trust grows not from avoiding mistakes, but from addressing them honestly and collaboratively.

4. **Seek ongoing feedback**
    - CHCS used regular check-ins, a consultant liaison, and an anonymous survey to gather feedback.
    - The process reinforced that meaningful engagement is about relationship-building and authentic collaboration, not simply collecting perspectives.

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