Development of Comprehensive Community Mental Health Services: the Case of Emilia-Romagna

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EU COMMISSION MEETING
Promoting social inclusion and combating stigma
Lisbon, 8-9 November 2010
Question

• How services should be designed to:
  – Improve mental health and wellbeing
  – Promote social inclusion
  – Combat stigma

• Available
• Accessible
• Acceptable
A bit of history

• 1904: law on mental hospitals
• 1965: pilot CMHC (*secteurs*)
• 1968: pilot experiences (Gorizia, Trieste, Reggio)
• 1978: National Health System – Psychiatric Reform Law n.180
• 1995: MH plan, standards for CMHTeams
• 1999: Devolution
• 2009: Regional MH Plan (DGR 313/09)
Emilia-Romagna
Available and comprehensive

Community based
Health and social care
Adult, child MH and addiction services
Phases of development

1978
Mental Hospital

1997
Community Services

2008
<table>
<thead>
<tr>
<th>Service Type</th>
<th>1978</th>
<th>1993</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Hs beds</td>
<td>5.191</td>
<td>1.077</td>
<td>0</td>
</tr>
<tr>
<td>GHPW beds</td>
<td>103</td>
<td>175</td>
<td>237</td>
</tr>
<tr>
<td>Private clin. Beds</td>
<td>438</td>
<td>438</td>
<td>87</td>
</tr>
<tr>
<td>Residential short</td>
<td>258</td>
<td>344</td>
<td>802</td>
</tr>
<tr>
<td>Residential medium</td>
<td>331</td>
<td>676</td>
<td>340</td>
</tr>
<tr>
<td>Supported housing</td>
<td>307</td>
<td>312</td>
<td>1.050</td>
</tr>
<tr>
<td>CMHC N.</td>
<td>41/129</td>
<td>41/136</td>
<td>43/140</td>
</tr>
<tr>
<td>MH staff</td>
<td>?</td>
<td>3.036</td>
<td>?</td>
</tr>
<tr>
<td>Day care /PHC</td>
<td>4</td>
<td>46</td>
<td>58</td>
</tr>
</tbody>
</table>
Community services

Acute phase
- GHPW
- University Dpts.
- Private clinics

Subacute phase
- Residential short term
- Residential long term
- Prisons
- Forensic H.

CMHC
- DC
- ACT
- Home hospital.
- Self-help
Health and social care

- Prevenzione
- Istruzione
- Formazione
- Sussidiarietà
- Volontariato
- Inclusione sociale
- Benessere e salute
- Sistema di cura
- Lavoro
- Famiglia
- AMA
Health-social care

- Income
- Employment
- Housing
  - Ordinary
  - Sheltered
- Mental health promotion
- Prevention
- Self help
Department of mental health and substance abuse
Regional Plan (313/09)

Accessible

Community based

Primary care

Proactive
population in treatment

1.7% of total population, 1.9% > 18 population
4.0% immigrants
“G. Leggieri” PHC programme

- 4.000.000 ab.
- 400 psychiatrists
- 4.000 PHC - GP
  - 200 “nuclei” – 1/10 matching

- 25% patients in PHC with psychological or psychiatric problem
- Major public health issue
Regional Plan (313/09)

Human rights approach

Participation
Empowerment
Promotion
Participation

- Trust consulting body
  - Carers/users
  - Professionals

- Regional consulting body
  - 15 associations, users-carers
  - 12 professionals
  - 12 local communities, NGOs, private providers,
Empowerment

- Also community care can be too protective
- Users are more aware of their rights
- More ambitious goals (recovery)
- More control over their care
- Participation in planning and monitoring
- Self-help and “doing together”
- Health promotion
Working with the community

• The era of antistigma campaigns
• Now a local approach preferred
  – Responsibility in the community
  – Media
  – Sport
  – Arts
  – IT
Questo non è una radio

PSICORADIO
meno fumo più voci

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