Good Practices for Combating Social Exclusion of People with Mental Health Problems

A collection from Ten EU Member States resulting from Mental Health Europe's Transnational Exchange Project 2005-2007

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Good Practices for Combating Social Exclusion of People with Mental Health Problems

Project Leader

Partners involved in the project:

More information on the good practices is available at:
www.mentalhealth-socialinclusion.org

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Preface

On 01 June 2007, Mental Health Europe (MHE) launched the website of its transnational exchange project "Good Practices for Combating Social Exclusion of People with Mental Health Problems". The website was launched on the occasion of the presentation of the project's final outcomes in the frame of the MHE Conference 2007 in Vienna (31 May-02 June). It contains a database of small, local initiatives that are easily transferable to other European countries and that could help to end the stigma and social exclusion of people with mental health problems.

While good mental health can help people to be intellectually and emotionally fulfilled and integrated into social, educational and professional life, poor mental health can become both a cause and a consequence of social exclusion. Against this background MHE, together with project partners from 10 different EU Member States carried out the EU-funded project "Good Practices for Combating Social Exclusion of People with Mental Health Problems". The aim of the project was to raise awareness of the relationship between mental ill-health and social exclusion and to provide evidence and highlight the success of existing best practices that can contribute to tackling the inequalities that people with mental health problems encounter in access to health and social services, employment, education, training services, housing, transport, leisure activities as well as the protection of their civil and human rights.

One of the central outcomes of the project is its website (www.mentalhealth-socialinclusion.org), which includes an online database of good practices combating social exclusion of people with mental health problems. This publication presents a directory of all the collected good practices as well as MHE's conclusions and recommendations for policy and practice resulting from the project. The good practices are intended to serve as a source of inspiration for anybody who wants to learn about small, local initiatives that help supporting the social inclusion of people with mental health problems. MHE intends to constantly update this directory and database of good practices as well as to extend it in the future to include good practices also from other European countries.

MHE would like to thank the project partners and all those involved in identifying and collecting good practices for their significant efforts and input in this work.

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1. Introduction

Millions of people suffer from mental health problems. Some people are able to resolve them, but for others mental health problems can be both a cause and a consequence of social exclusion.

Social exclusion is what happens when society marginalises people so that they are not able to play a full and equal part in their community. Many people who suffer from mental health problems live in poverty and experience stigma and discrimination. They may find it hard to access employment or to find adequate housing. The result is that people can become seriously isolated and excluded from social and working life.

In the last few years, there has been some progress in addressing these concerns, but a great deal still needs to be done in order to further reduce the social exclusion of people with mental health problems.

With the EU-funded Transnational Exchange Project "Good Practices for Combating Social Exclusion of People with Mental Health Problems" (funded under the Community Action Programme to Combat Social Exclusion 2002-2006) Mental Health Europe (MHE), together with its project partners, wishes to provide evidence and highlight the success of existing best practices that can help to end the stigma and social exclusion of these persons.

1.1. Aim of the project

The project aimed to demonstrate the link between mental health problems and social exclusion. The focus was in particular on existing best practices that can contribute to tackling the inequalities that people with mental health problems encounter, in access to health and social services, employment, education, training services, housing, leisure activities as well as in the protection of their civil and human rights. Through transnational exchange and comparison of effective practices, policy proposals to support the social inclusion of people with mental health problems have been prepared.

1.2. Objectives of the project

The objectives of the project were:

- to identify, collect and analyse good practices combating social exclusion of people with mental health problems in the participating countries;
- to assess the transferability of the practices to other European countries, taking into account the major existing socio-economic and cultural differences;
- to organise exchange visits to selected good practices in the partner countries and to meet with policy makers, civil society and other stakeholders;

- to organise consultation at the European level with European NGOs active in the field of social inclusion in order to mainstream awareness about mental health issues;
- to establish an online database of best practices for combating social exclusion of people with mental health problems;
- to organise a European conference in order to raise the awareness of policy makers and to ensure that the findings are taken up in the Social Inclusion Process at the local, national and European level;
- to disseminate the results and to raise awareness at all levels: local, regional, national and European.

1.3. Project partners

The project gathered 10 partner organisations:

- 5 partner organisations from the EU-10 Member States: Advocacy Group for the Mentally Ill (Cyprus), Czech Association for Mental Health (Czech Republic), Coalition for Mental Health (Poland), Slovak League for Mental Health (Slovakia), Sent-Slovenian Association for Mental Health (Slovenia);

- and 5 partner organisations from EU-15 Member States: Flemish Association for Mental Health–VVGG (Belgium), Advocacy France (France), Mental Health Ireland (Ireland), Italian Association for Mental Health-AISMe (Italy) and Penumbra (Scotland).

1.4. European Advisory Committee

A European Advisory Committee was established, consisting of various European umbrella networks (AGE-European Older People's Platform; CEFEC-Confederation of European Social Firms, Employment Initiatives and Social Cooperatives; EUFAMI-European Federation of Associations of Families of People with Mental Illness, EAPN-European Anti Poverty Network, EDF-European Disability Forum, Eurohealthnet, Euro-Psy-Rehabilitation, FEANTSA-European Federation of National Organisations Working with the Homeless, Interminds, SMES-Europa, Social Platform-Platform of European Social NGOs). The Advisory body commented on the project developments and outcomes from their specific and European point of view and supported the dissemination of the outcomes of the project.

2. Conclusions and recommendations for policy and practice

The experience of the project showed that a number of factors influence the development and implementation of good mental health policy nationally. It was clear from the project that having a good policy structure was critical and that all the stakeholders should invest in this.

The project looked at the common features of good practice in the field of mental health and social inclusion and what follows were the critical issues identified as being those which crossed cultural and economic boundaries.

2.1. Factors influencing the development of good practices - POLICY

Achieve good relationships with relevant Ministries, regional and local authorities

This was a key factor for all the project partners, though was far more difficult for some to achieve than others. In some countries the policy makers were accessible and open to communication with services providers and NGOs, whilst in others it was difficult even to identify the right people to talk to, let alone get access to them. However, all agreed that investing the time into developing these relationships was critical and paid off in the long term.

Depending on the structures in each country it was also seen to be important to make relationships at local and regional levels as well as national levels. The extent of devolution varies between countries and it is therefore important to find out where decisions about funding allocation service development and policy making are made. This requires a significant investment of time and energy, which is not easy for all groups and organisations, and this again suggests that forming coalitions and partnerships to ensure that all get access and can share the commitment is a useful strategy.

There was general discussion about the value of all the stakeholders joining together to offer one voice to the policy makers, as is often requested by them, and the conflicting need that many organisations feel to present their own distinct views. There has been some positive experience of stakeholders working together on very focused and specific topics where they can come to an initial agreement that achieving consensus is the important goal and that not all points of view will be represented in the final communications. In this situation, there needs to be a level of trust between the collaborating parties and an acceptance that they may have to agree to differ and present a coherent final outcome.

Achieve authority and the means for stakeholder involvement

A consistent message from all the partners was that the involvement of all stakeholders was critical to developing good practice. The key issues were that stakeholders are fragmented, and not all recognise that they have a real role to play. For example employers, housing and transport authorities do not always see themselves as having a specific role to play or to acknowledge the importance of mental health issues in their sphere of activity.

The project showed how important the existence and support of active user groups is to ensuring that the experience and needs of users are considered carefully by all stakeholders.

The experience is that stakeholders often have to fight for both the authority and the practical support for this process. The project showed that using alliances between the range of stakeholders and internationally can be critical to ensure that authority is given to the various voices and interests in other situations and to assert the importance of it in this context.

Equally, all stakeholders must recognise that while mental health is a core issue for some groups and organisations, for others it is peripheral and there will be fewer resources available from those groups.

Achieve wide collaboration, cooperation and commitment among all stakeholders

The experience of this project showed that alliances are always worth investing in though some groups find them quite difficult, for example those between users and professionals or between mental health groups and those in the wider disability movement. In reality alliances are likely to be time-limited and linked to specific issues. People in organisations less central to mental health may need to be encouraged to recognise how key their services are, as they would not naturally see themselves as part of the wider movement.

Several partners identified the value of working together with a broad range of interest groups on issues of discrimination and stigma as elements of social exclusion. The experience of other groups could be both useful and facilitate access to people from the field of mental health.

It was recognised that there may occasionally be conflicts with other organisations and these need to be addressed clearly and openly, and not ignored.

It was agreed that to set up national networks it is necessary to identify a common goal while respecting the diversity of views and opinions. As noted above, it will be important for the stakeholders to agree how to differ and what may be left out of communications in order to present a view that policy makers can respond to effectively.

Invest in available public policies

The importance of utilising other policy frameworks in addition to working to achieve specific mental health policies and action plans was also emphasised. Thus, for example disability, employment, housing and income support legislation can all be used to support new activities and create new ways of working in the mental health field.

Again, this requires an investment of time and resources and might be most effectively done in a partnership or as a collaborative activity. This will also be strengthened by the wider stakeholder involvement as those involved in different fields will have a working knowledge of different policy and legislative areas.

2.2. Factors influencing the development of good practices - ORGANISATIONAL

Aim towards integration of all relevant community organisations

The project clearly showed the importance of all organisations working together. This often means working across boundaries and with groups which might not naturally be seen as allies. This is especially important in the context of working against social exclusion rather than specifically in the field of mental health or illness.

Aim for a common goal on specific issues among all stakeholders committed to social inclusion and recovery of people with mental health problems

The aim would be to create a situation in which all participants can gain something. As each participant will have a different set of interests and expectations it should be possible to achieve this by looking for a wide variety of gains and outcomes linked to these different agendas.

Commit to the bio-psycho-social-economic model

Several of the partners noted the obstacles created by the continued commitment of some professionals to the medical model. This was seen to severely limit the understanding of peoples experience and options offered to them. The 'Recovery framework', which gives individuals the primary control over decisions about their own care, encompasses this notion and ensures that people are looking to a positive future without limiting possibilities.

The view was that a model encompassing a bio-psycho-social-economic understanding would be more useful. This would acknowledge the importance of all these factors on people's lives, the fact that they all impinge equally and all need to be considered together. Developing practice and service models from this basis will create quite different types of services and ways of working with people.

Part of this approach will include the mainstreaming of individual experiences, the acknowledgement of difference and the ability to respond to individuals rather than cases or clients.

Also, this complex approach should be used to create simple services that are based on needs and good research not on whim and dogma.

Develop and maintain alliances between stakeholders

As noted previously the stakeholders will all have different interests and expectations. It is therefore critical to be aware of this and to be careful to ensure that alliances can be made and that consensus can be achieved on specific and identifiable topics.

2.3. Factors influencing the development of good practices - INITIATIVES

Ensure awareness raising

All the partners noted the impact of stigma and the need to campaign against it and raise public awareness. Many had tried different strategies involving different forms of media and education both in schools and with the wider public, with more or less success. One issue that came out consistently was the need to carry on developing anti-stigma campaigns and education, to measure their impact and to publicise this more.

The impact of 'public faces', famous people coming out as having experienced mental health problems, was widely recognised but in parallel also the importance of people simply telling their stories. These do not need to be celebrities but simply people talking about their own experience, the impact it had on them and how they have got through it. It was stressed that people who feel able to tell these stories are likely to deserve a lot of support, as it is not always easy to see your very personal experiences being re-told by journalists. In addition, it was felt that any such campaign or educational programme should have clear objectives and can benefit from being led by a 'champion' or charismatic leader.

Working with the media was seen to require focusing not just on stigma but also on human rights, not only on social exclusion but also on positive outcomes. The media need to be aware that social exclusion is a human problem and not limited to a small group in society. Some of the partners had developed a variety of ways of 'naming and shaming' negative practices in the media and at the same time promoting and publicising good practices and positive examples.

The whole project team agreed that working with the media was critical to influencing policy and structures, to creating and changing mindsets and that this required a significant commitment from the local organisations to offer consistent and clear communication to the media.

Commit to user involvement and empowerment

As one partner pointed out, people in user groups struggle with the impact of social exclusion and are then expected to contribute to the process of policy development and implementation with little real support. Clearly, professionals and the relevant authorities must ensure that these groups exist and are supported to become active partners in the process.

The presence and involvement of user groups is critical to the development of good polices and services and so they must be supported to ensure their continued existence. This includes paying users for their contributions just as other are paid, and ensuring accessibility and transparency of processes.

Simplicity and responsiveness are keys to transferability and sustainability

Services should always be designed in response to the particular needs of users and carers in a community and the particular local context. This should be backed up by research and evidence to ensure that resources are used effectively. However, simple structures that are based on human needs are more likely to be transferable both within a country and across borders.

Access to labour market opportunities

Unemployment is a serious problem for many people with mental health problems and a clear indicator of social exclusion. Despite legislation in some countries many employers find it difficult to even think about employing someone with an identified mental health problem. Work needs to be done to educate employers about issues like reasonable adaptations, what these might entail, as well as making basic information about the impact of mental health problems widely available.

The wider economic state of each country also has a huge impact on this; in countries where unemployment is high there will be little political interest in developing policies to ensure that people with disabilities get access to the labour market whilst successful economies requiring a lager labour pool will have a different set of needs.

Develop and maintain a positive outlook

The importance of honouring and publicising success stories and peoples recovery came up in a number of contexts. It was frequently emphasised that there are not enough stories of people's achievements and successes. The view was that often professionals and family members get caught into the negative impact of mental health problems on people's lives, reducing their expectations dramatically so that they can never then see any positive outcomes. The 'Recovery framework' is one way of addressing this in that it suggests that recovery is a realistic outcome and that it can encompass all sorts of activities and meanings for people. Individuals will find different ways to live with the consequence of mental health problems and this should all be honoured.

3. Good practices for combating social exclusion of people with mental health problems

In the course of the project, the project partners put much effort into collecting good practices, either by sending out requests for good practices or by directly contacting people or organisations that are carrying out potential good practices. The quality criteria that were used to determine good practices included:

- *Effectiveness*: to be selected for European dissemination a practice should give evidence of its efficacy;
- *Sustainability*: the anticipated impacts should remain in place after completion of the practice;
- *Innovation*: the practice should have the potential of covering an existing or about to exist policy and practice deficit;
- *Added Value*: it should make a significant contribution with regard to already existing practices and policies as well as identified needs;
- *Transferability*: the possibilities of the practice's results should be transferable to a different context;
- *Mainstreaming Potential*: the practice should entail the possibility for affecting national policy and up-to-date practices.

In addition to these quality criteria, it was decided to give preference in the search for good practices to those projects which are user-led or which at least include a high level of user involvement; projects which are characterized by a high level of stakeholder cooperation; and projects that operate mainly at the local level, and not large-scale national programmes, which are very costly and difficult to transfer from one country to another.

The identified good practices were then discussed in focus groups, which were organised in each of the partner countries and which involved (ex)users of mental health services, in order to select the best of all the collected good practices based on the project's agreed criteria.

BELGIUM

A comic strip for young children (9-12 years)

Description

A large psychiatric hospital, situated in a green nature environment is also the place where young children come to learn about nature (green classes).

They don't realise what is happening in the big building, they meet patients walking around.

The staff saw that the children started to ask questions and that their parents (who drive them to the venue) couldn't or wouldn't answer. Some parents didn't drive on to the parking, but left the children a few meters from the entrance.

In collaboration with the children and their teachers, with the patients and the staff a story was written about two young children solving a mystery that happened in the hospital. A professional designer coached the making of the comic strip.
Now all the children receive the strip before their coming to visit the premises.

Aims

The project aims to find a specific method to inform very young children (9-12 years) about psychiatry.

Areas

Education

Effectiveness

The children and their parents and teachers are no longer ignoring the big building in the park, and are no longer avoiding the contact with patients.

Sustainability

The comic strip is now available and tested with the children coming to the premises in Beernem. In a next stage, the comic strip will be distributed to other psychiatric hospitals.

Innovation

The young children are a target group which have been long forgotten. Now many staff members of the hospital have a tool to explain to their own children where they are working.

Added Value
Informing young children has a great multiplicatory effect (parents, teachers), and it working for the future.

Transferability
Easily transferable

Mainstreaming Potential
Integrating school activity in informing both children and their teachers and parents.

Costs of the Project
The production of the comic strip (all costs ware sponsored).

People involved in the Project (number of people and profession)
Staff members, patients, children and teachers of all the schools in the neighbourhood.

Strengths and Weaknesses of the Project
The strength is the interactive way the story was written and the strip was designed.

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The House of Sweets

Description
The project aims to sell self made desserts and sweets (and tomato soup) during the yearly open air jazz festival in Ghent (Jazz in the park).
The four days of the festival is the climax of six months working and preparation in the hospital:

- creating and decorating the stand;
- discussing and defining which products will be made and sold;
- learning to cook the products;
- organising the activity during the jazz festival;
- presence in the park.

Aims
Introducing patients to the local community, by organising a (kind of) commercial activity (production and selling). Introducing the patient and his capacities to the visitors of the festival.

Areas
Leisure

Effectiveness
The project answers to both the need of the patients to get in contact with the society and it shows the local community that patients are capable to deal with commercial activities.

Sustainability
The four days of the festival in September are only the culmination point of an activity that starts in May and is finished in December.

Innovation
Innovative is the introduction of the commercial aspect.

Added Value
Lots of visitors of the jazz festival do not expect to be confronted by patients. It informs these people of the capacities of patients.

Transferability
The project is easily transferable.

Mainstreaming Potential
Such projects are a perfect illustration that psychiatric patient can have a place in the commercial world and can not only be employed, but even initiators of the production and selling of their products.

Costs of the Project
Each year there is enough income to prepare the next year's activity.

People involved in the Project (number of people and profession)
Hundreds of visitors of the jazz festival
Patients of two wards

Strengths and Weaknesses of the Project

The strength is the organisation of a commercial activity, from beginning to the end, by the patients in dialogue with the organisers of the festival (from the local community).

Contact Person for the Project

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Working Together in Sleidinge

Description

In a small village in Flanders, a psychiatric hospital started a few years ago to organise a popular fair to bring together the inhabitants of the village, the patients and the staff.
In 2004 the village was shocked by a double murder (an ex-patient killed two inhabitants). This crisis was the start of a regular dialog between inhabitants and the institution, for the inhabitants to have a way to prevent or solve problems with the patients, for the institution to de-stigmatise and to inform the inhabitants about the activities of the hospital.
A committee was created (inhabitants and patients) to take steps towards better mutual understanding:

- Every tree months there is a meeting with all the volunteers involved in the initiative.
- There is a direct contact point where any inhabitant can complain if he or she thinks that there is a problem.
- The hospital guarantees that there will be immediate action; sometimes they will try to explain what is happening, sometimes to correct the behaviour of patients.
- There is a magazine shop run by patients.

Aims

For patients and the inhabitants of the village to live peacefully together by:

- reacting very quickly to any complaint of an inhabitant about disturbing behaviour of a patient.
- informing the inhabitants about the life in the hospital.

Areas

Social services

Effectiveness

One year after a major incident (the killing of two people by an ex- patient) the inhabitants of the village have (again) accepted to live in close proximity with the patients and the staff of the hospital; they have common projects and common activities.
1.000 families (4.000 inhabitants) and 500 patients and staff members of the hospital participated in one or more activities.

Sustainability

Patients (and staff of the hospital) do participate in social life in the community.

Innovation

A modern psychiatric hospital tends to be a more or less (socially) isolated industry, concentrated on its core business: the cure off and the care for patients. The contact with the neighbourhood is forgotten, until an incident wakes up everybody.

Added Value

Care for and cure of patients is not something that can be reduced to the pure hospital settings, but is a social process where the whole community is concerned
A hospital is a part of the community; life doesn't stop at the gates of the hospital. A local community can't deny the fact that there are patients in the streets participating in social life.

Transferability

The project can easily be transferred.

Mainstreaming Potential

Both the policy of the local community as well as the policy of the hospital were concerned and adjusted.
Both had lived too long separately: a community where a psychiatric hospital is located, must consider to involve the inhabitants with the fact of patients being around.
A psychiatric hospital must consider that there are daily contacts of the village inhabitants and the patients.
Only when politicians and decision-makers on both sides are working together, there are no problems.
The project is a great example that if there is a good collaboration between patients and the community, even extreme incidents, e.g. the murdering of two people, does not have to stigmatise a whole group (of psychiatric patients).

Costs of the Project

The project had no special costs, since the whole action was incorporated in traditional activities, within the village (the yearly fair), and within the hospital. All work is done by volunteers (15 at the moment). The aim is to have 30 volunteers next year.

People involved in the Project (number of people and profession)

The whole community, the associations of the village and the patients of the hospital.

Strengths and Weaknesses of the Project

The strength is the involvement of the whole community, of all inhabitants. The weakness is the fact that it couldn't start until a major incident (killing of two people) occurred.

Contact Person for the Project

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CYPRUS

Open Telephone Line

Description
Responding to the needs of people with mental health problems/disabilities as well as their families/carers on general everyday issues that affects their quality of life, through encouraging user involvement and procedures bringing together different stakeholders active in the area of mental health care and social issues. Due to specific need for knowledge in legislation and other expertise in the field the implementation of this service is carried out by a person affiliated to the programme who coordinates cooperation of different consultants and professionals in various areas, giving solutions or promoting the issues arising.

Aims
The project aims to involve users in their own empowerment to become active citizens.

Areas
Health, Social services

Effectiveness
It responds to the needs of users, provides bridges for communication, and offers practical solutions.

Sustainability
The project responds to the needs of users.

Innovation
It covers many aspects of the gap in services.

Added Value
The project accomplishes a significant part of the therapeutical process for users through, and it informs, combats stigma and contributes to prevention of mental ill health by encouraging for seeking professional help whenever needed.

Transferability
It is easy to transfer to other geographical area where there are not many established institutions for information and advice.

Mainstreaming Potential

It is easy to integrate with other methods and policies adding and accomplishing values of existing services.

Costs of the Project

The costs of the project are under the operating cost of the organization.

People involved in the Project (number of people and profession)

One person to respond to the telephone line advocacy and legislative and other consultants on the field.

Strengths and Weaknesses of the Project

The strength of the project is that it gives a voice to the people who have the need for expressing problems and difficulties.

Contact Person for the Project

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Supported Employment for people with special needs

Description

Supported Employment helps people with special needs to obtain and keep a job in the open labour market .
Any kind of support is being offered on a personal level from a trained job-coach and its duration may be long term or shot term depending the degree to which it is needed.
Any kind of employment can be offered in different economic sectors within the open labour market. So far employment has taken place at supermarkets, factories, restaurants etc.
The special services that help people to obtain or keep a job in the open labour market are mainly the personal support, which may mean finding the employer, negotiating the work conditions, escorting the person to the workplace, helping to learn the task and offering any other kind of technical or personal assistance.

Aims
Supported Employment Contributes to the economic welfare and social integration of the candidates.

Areas
Employment, Social services, Training, Transport

Effectiveness
An employers' survey to measure erasure effectiveness was conducted in 1997 and repeated in 2006. According to 1997 response 35% of the employers who were committed to the project said that the employees with disabilities satisfied real needs of the company. In the 2006 this estimate increased up to 41%. Similarly in 1996, 22% of employers reported that employees with mental disabilities produced a work of similar quality compared to other employees (without disabilities). After 10 years this estimate became 41%.

Sustainability
The project has been sustained for more than 10 years in Cyprus (original started in 1996). No matter the quantitative increase of job coaches and consequently the increase in employment of disable persons there has been little improvement in terms of quality. There is a sustainability of drawbacks in the operational structure and professional practice.

Innovation
The project is very innovative since it replaces the traditional shelter places of work. Compared to the latter model, Supported Employment is mainstreaming and more dynamic.

Added Value
Supported employment is one of the few models that is effective for the employment of people with mental disabilities. Recent projects funded by EU which provide incentives to employers (subsidy of salaries) turned to be not attractive.

Transferability
Supported Employment is mainly applied with mental disabilities (retardation). However, it is recommended for any type of disability Employers seem to prefer the long term support of a job coach than the salary subsidy of the employee.

Mainstreaming Potential
Supported Employment guarantees mainstreaming.

Costs of the Project

£10,000 (ca. €18.000) per job coach, per year. Every job coach supports at least 5 persons.

People involved in the Project (number of people and profession)

Governmental bodies and NGOs.

Contact Persons for the Project

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Vocational Rehabilitation Unit

Description

This Vocational Rehabilitation Unit (V.R.U.) was established in Nicosia 4 years ago and is run by the State Mental Health Services.

Project Aims

The V.R.U. aims at assisting the individual with mental health problems to enter employment in the following ways:

- by making the opportunity for employment available;
- by offering evaluation for employment potential;
- by assisting in applying for work (with discovering placements, with applications, interviews, negotiations);
- by raising the awareness of employers about stigma and prejudice;
- by assisting in training people at their place of work and supervising and supporting their progress.

Area

Employment

Effectiveness

In the last four years the V.R.U. has assisted about 40 people per year to enter employment with beneficial results with regard to the social inclusion of these people. Some people have remained in long-term paid employment and others used the centre's services more than once. The practice is easily accessible to those people with mental health problems who have received care from state mental

health services, but not readily accessible to any person with mental health problems living in the community due to various problems (for example, lack of information, lack of mobility).

Sustainability

All local studies and evaluations point out to the need that people with mental health problems be given opportunities for paid employment as a means of protecting their dignity and self-esteem and as a means for wider social inclusion. Improvement in these areas is the practice's anticipated impact. At a cost of about 2000 Euro per year per person served, the practice is viable and efficient provided that a substantial number of the persons served remain in employment for at least a few years or that the experience they receive enables them to have useful years of employment in the future. At this moment detailed statistics are not available.

Innovation

This is the first vocational rehabilitation centre to provide services to people with mental health problems in Cyprus. Particularly innovative may be the part that both prevocational and vocational training take place at the actual work setting, with the active involvement of the V.R.U. staff. During the first two weeks the trainee works part-time together with a supervisor (who is a functionary of the centre) while the employer is given time to evaluate the trainee. The supervisor remains with the trainee at the place of work for a further two weeks. Employees enter employment in a protected manner and while being in a relatively secure environment.

Added Value

The practice's activities, methodologies and impacts make a significant contribution with regard to access to employment and social inclusion. At the same time, employers are being helped to become more sensitive to the human rights and actual employment potentiality of people with mental health problems and therefore prejudice is being combated in an important field with multiplying effects.

Transferability

The practice is potentially transferable to other countries and communities and can be adapted to local conditions, especially with regard to such a centre's co-operation with other existing governmental and non-governmental employment agencies and can be tested in a variety of working environments. In larger cities and communities, with greater numbers of people with mental health problems in need of work, the practice may be more cost effective. In Cyprus, there is scope for establishing a similar centre in every major town.

Mainstreaming Potential

In view of the experience gained by the V.R.U. national and local policies should encourage people with mental health problems to be in employment and also encourage employers to give employment opportunities to these people.

Cost of the Project

Approximately 83000 Euro per year.

People involved in the Project

1 Project Co-ordinator (Clinical Psychologist)
1 Psychologist (part-time)
1 Psychiatric Nurse
1 Occupational Therapist
2 Job Coaches

Strengths and weaknesses of the Project

Strengths: Vocational evaluation/guidance and training at the actual place of employment with continuous support is seen to be effective.

Weaknesses: There is the need for more incentives to be given to prospective employers (for example tax exemptions or the subsidy of productivity). Some people with mental health problems are discouraged from seeking employment, as their monetary allowance from the state will be withdrawn if they enter employment. Therefore allowance policies must be revised (for example, allowance could be withdrawn gradually and after they are well settled in paid employment). Inspectors are needed to monitor and evaluate the long-term progress of people using the centre's services. A web page has been established to inform people of the centre's services.

Contact Person for the Project

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CZECH REPUBLIC

Cirkus Bombastico Fokus

Description
This Circus is a kind of one-shot activity, which is at the same time more individually focused at the characteristic and possibilities of the client who takes part in the project. It offers effective therapy by circus. It provides an opportunity of presenting the inner world of clients in an acceptable and comprehensible way. During the training, the therapists make use of the individual talents of each client; roles and character are chosen through which this special talent is present in an original way.

Aims
The goal of this project is to connect the world of people with mental health problems and of whole society and the de-stigmatisation of mental health problems. There are also partial goals therapeutical and rehabilitational – a combination of ergo therapy, art therapy, drama therapy, dance and movement therapy, music therapy and narrative therapy in the group or for individuals.

Areas
Health, Social services

Effectiveness
The project started in 1998, and it takes place approx. 3-4 times a year. 16-25 clients join in, 4 therapists of Fokus, 4 external lectors and musicians. There are 50-120 spectators at performances.

Sustainability
Financial instruments are gathered from grants and funding.

Innovation
Non-traditional approach to treatment of mental illness. It is realized in the form of a week-long stay out of the traditional institution. Clients and therapists practice together components of the show, they make masks, costumes, they learn how to operate with fire, etc. Clients are also participating at organising this stay. It finishes with a public performance - and the important appreciation and acceptance by the public.

Added Value
The project combines elements of expressive therapies in the approach to clients (it connects ergo therapy, art therapy, drama therapy, dance and movement therapy). The presence of family members as spectators during the performance is at the

same time part of a family therapy, where the client shows himself in role unknown and undiscovered by the family. Rehearsal and training for the performance is at the same time rehearsal of practical and communication skills.

Transferability

The Circus is led by an international team of German and Czech lectors. The connection of the Czech and German world gives great benefit to the project. Art and creativity is a common language, which opens field for deepening and increasing cooperation between providers of social services in the area of mental health care in the Czech Republic and in Germany.

Mainstreaming Potential

Public performances are always organised with the cooperation of local authorities (promotion of performance, help with organisation etc.). This cooperation at the same time fulfills the goal of the project in terms of de-stigmatisation. Participation of the Circus at a festival in Germany in 2002 and 2005 was a great evaluation of the clients' work in the international sphere.

Costs of the Project

The Circus is financed from grants and funding.

People involved in the Project (number of people and profession)

1 leader of the atelier in Fokus Praha
1 coordinator cooperating with co-workers from the community center Fokus Praha - these are three therapists who know the clients from therapeutics programs. The author of the basic idea of the performance is a German co-worker and leader of the Circus. In the German team there are two more therapists.

Strengths and Weaknesses of the Project

Strengths: the project's uniqueness, work in the community, a good idea and inspiration for similar bridging activities, dimension of de-stigmatisation.
Weakness: it is focused only on a small group of clients.

Contact Person for the Project

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Don't Remain Alone With It

Description
A self-help group for clients with eating disorders. It helps them to start a therapy by providing information about context of this illness, helping to understand it, taking away the fear or shame to look for professional help. This self-help group operates in the South-Moravian region and its organiser, the civil society organisation Anabell, covers through this missing service of this kind.

Aims
The aim of the project is to provide help to clients to start a therapy.

Areas
Health, Social services

Effectiveness
Quantitative results: from 11/2005 to 30/4/2006 the project provided help (contact, education, consultation) to 1466 clients. Web pages are visited by 2700 visitors per month. Qualitative results were presented by extracts of clients´ positive feedback to the organisation.

Sustainability
For the realisation of this project, the main issue is to acquire financial aids. The project is currently financed by the EU programme PHARE.

Innovation
In the Czech Republic, there is no other organisation attending in such amount to people suffering from eating disorders. There is innovation not only in the idea itself, but also in the approach and dimensions of services offered. People who have or had experience with eating disorders are working in this service and therefore understand the situation of the clients.

Added Value
There is specificity in the target group, people with eating disorders. They are also in danger to become socially excluded, mainly at the time when they are in circle of illness and they don't try to make any change.

Transferability
The basic idea of project is not to refuse or blame clients, to give a helping hand, make a bridge between client and expert, help with information and orientation on this issue, set priority goals in the process of change etc., which is all connected to the time of treatment and after. In case of an empathetic approach, willingness to

learn new things and an adequate mindset of the worker in the helping profession, the project is rather easy to transfer. Conditions: ability to address the target group, knowledge of the problem, financial basis, sufficient information.

Mainstreaming Potential

In the South-Moravian region, there is no other similar institution offering consultancy for this target group, people having eating disorder or their relatives. Anabell is the only organisation offering services in consulting, education, and support for families, relatives of this target group. The realisation of this activity is very beneficial for whole region; it allows for greater social integration of the target group in the region and offers support in also in the labour and in the social environment.

Costs of the Project

The project is financed by the EU programme PHARE.
The estimated cost is 60 000 Euros.

People involved in the Project (number of people and profession)

1 Leader of project
1 Assistant of project
1 Psychologist
0,5 (part-time) Nutritive therapist
0,5 (part-time) Social worker
Editor of Report (10 hours per month)
External: webmaster, accountant, two supervisors, authors of articles for reports

Strengths and Weaknesses of the Project

The main strengths of this project are its uniqueness, the mediating character of the activity, and the very good involvement of volunteers with own experience of eating disorder.
Weaknesses concern the problem of effectiveness and its measurement, difficult sustainability and non-linking at other services.

Contact Person for the Project

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Juridical Counselor

Description

It is a manual, which comprehensibly familiarizes people with mental health problems and their relatives with situations, with which they may be confronted in the course of the mental disease. It informs about the rights of clients during ambulant care, hospitalization, at the period of leaving hospital, as well as in context of subsequent care.

Aims

The aim of the project is to familiarize people with mental health problems and their relatives with situations, with which they may be confronted in the course of the mental disease. It informs about the rights of clients during ambulant care, hospitalization, at the period of leaving hospital, as well as in context of subsequent care.

Areas

Health, Human rights, Social services

Effectiveness

Five thousand copies of the manual were printed and offered free of charge. The larger part of it was out of stock very quickly. Some organizations wanted 100 copies at least (for example Community center Jordan in Trinec). The manual was delivered to organizations and institutions working in area of mental health care.
Qualitative indicator of success was good feedback given by organizations as well as individual clients.

Sustainability

The project is financed through resources of the Ministry of Health of the Czech Republic and the OSF foundation Prague. For its realization, the cooperation of experts with knowledge in the social and juridical field, health service and mental health care is of key importance.

Innovation

This manual is unique in its extent and form. It is aimed at people with mental illness, not only for counselors or social workers. It is focused at themes which are important for people with mental illness. It familiarizes step by step with the rights of patients with regard to ambulant care, hospitalization, their rights and duties. This way it offers a basis for more independent decision-making; it is also of great importance in the field of human rights.

Added Value

The manual gives more independence to people with mental health problems with regard to their rights, social benefits and other possibilities given to them; and it also offers instructions for their relatives, about how to help and support them. The manual is also very useful for professionals working in this area.

Transferability

The manual gives more independence to people with mental health problems with regard to their rights, social benefits and other possibilities given to them; and it also offers instructions for their relatives, about how to help and support them. The manual is also very useful for professionals working in this area.

Mainstreaming Potential

The project increases knowledge of the problems faced by people with mental illness as well as about their rights.

Costs of the Project

The complete expenses for the project was 136 255 Crowns (ca. 5.000 Euro). This includes graphic processing and print, salaries for workers, etc.

People involved in the Project (number of people and profession)

An editor - he set up the text for this manual and also consulted with other experts in the area of social consulting, health service, mental health care about the text.

Strengths and Weaknesses of the Project

The main strengths of this project are its use and practical dimension, clarity for non-professionals as well as the possibility to use it as educational material. Another positive aspect is the cooperation of the editor with other stakeholders. On the other hand there are potential problems with the updating of laws and financial information.

Contact Person for the Project

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Kašna - Sheltered Workshop

Description
Kašna is a sheltered workshop for people who are physically and mentally handicapped. The activity is being operated by non-professionals in the area of mental health, i.e. a person efficient in the area of mental health care, not an organisation. In this sheltered workshop candles and brushes are being produced.

Aims
Emphasis is place on the fact that the employees of workshop have work, they have their everyday duty. Work is not about performance, but about the feeling that everyone is needful also for the benefit of others. Created products are sold at markets and other occasions. Clients know that their work goes beyond play or therapeutics group sessions.

Areas
Employment

Effectiveness
There are permanent customers for products made in the workshop; some of them are big and famous firms (for example Czech Airlines Prague, Brewery - Velke Popovice, Staropramen, Nymburk, Pardubice, etc.).
Qualitative indicator: integration of people with different types of health handicap. Most important is the fact that they know there is a need for their work, and so they have possibility of self-realization.

Sustainability
Financial resources are various, gains from the selling of products made in workshop to firms, at markets, etc. There is also support from grants and foundations.

Innovation
The work is organized with focus on the integration of people with mental illness into society and their integration with other workers with different handicaps. Reality shows that all clients feel better when they see that others are also confronted with problems and difficulties.

Added Value
The clients are not socially excluded; most of them obtain full or partly disability pension. Due to their handicap, sometimes it is difficult for them to ask for other social benefits. The amount, which they obtain in the workshop as salary is not substantial, but it can help to become more economically independent.

Transferability

The procedure of a manual workshop is easy and easily applicable to different institutions of this kind. The technological process of this workshop is also not very difficult.

Mainstreaming Potential

The basic idea of this project is to help to people with a handicap. In Prague there are more similar projects of this kind, but this project gathers people with different handicaps. The leaders of this project try not only to create good working conditions, but also keep good relationships among employees. The project is not based on the question of economic benefit, but the benefit of people with a handicap.

Costs of the Project

Expenses not specified.
Financial resources are various: gains from selling of products made in the workshop to firms, at markets, etc. There is also support from grants and foundations.

People involved in the Project (number of people and profession)

The project leaders, Mr. and Mrs. Novak, working therapists. There is also cooperation with ex-working therapists of employees, with their working counselors, in some cases with special doctors.

Contact Person for the Project

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Meeting at Half-Way

Description

The project is based on the idea to connect the training of people with mental health problems with services for the whole society in the form of a café. The project aims to provide all clients support for returning to the labour market and to offer services in compliance with the individual needs. It is suitable especially for clients in the first stage of psychotic illness.

Aims

The aim of the project is to provide all clients support for coming back to the labour market and to offer services in compliance with the individual needs.

Areas

Employment, Health, Social services

Effectiveness

Quantitative indicators of success: capacity of programs organized by Green Doors is 85 clients; in 2005 there were 138 clients. 85% of clients are 23-35 years old (year 2005). Approximately 60% of clients continue after the work rehabilitation and work in the open job market. Another indicator is the attendance of cafés and the amount of cultural activities organized there.
Qualitative indicators: work in a café as a natural form of work, without creation of any special protected conditions, support and integration of clients into the community. Increasing of working and social abilities of clients through training and following programs. Promoting tolerance and co-existence in the community, decreasing of stigma connected with mental illness by help of an accepting atmosphere. Work with employers, improving of the position of people with mental illness.

Sustainability

The condition for work in Green Doors is a university degree or expert education in a relevant field, ergo therapy, social work, psychology, special pedagogy, as well as practical experience in this field. Another condition is regular supervision. Other important aspect for the realization of project:

- cooperation with offices and local authorities;
- good choice of place for café, nice atmosphere, design;
- exigent investment at the beginning of project - equipment, spaces;
- great demands from management and coordination of the whole project, bringing in line care of clients, operation, quality of care for clients, culture events;
- demands from workers versatility, work at the bar, therapeutical work with clients, attitude to café culture, etc.

Innovation

Main innovative aspect is in the connection of offering of services for the public and services for clients; emphasis is put on openness and integrative style of programs. There are three cafés run by Green Doors, each one has its specificity according to the needs of the community in which they are operating and in accordance with the approach to clients. Green Door cooperates also with other organizations offering some activities (treatment, education, psychotherapy, protected housing, free-time activities, etc.). Current evaluation of rehabilitation process is done after every shift. There is a possibility for self-financing.

Added Value

Inspiration for other similar project that started in the Czech Republic and abroad. The project was replicated for clients with mental illness as well as for another target groups. Green Doors is well recognized by the professional and academic public. There are students coming for scholarships. Green Doors was one of the first

organizations, which focused at a specific target group - young people with little experience.

Transferability

Transferring the practice to other countries is possible, but the replication of the method and of the system of the cafés is not so easy. Green Doors offers an education module about the system of cafés as well as possibilities to obtain scholarships and short-term involvement.
The system of the cafés has its specificities also in terms of how people in the countries spend their free time, what is the approach to work of people with mental illness, etc. This kind of work may vary from country to country, but there is always possibility to adapt it to local conditions.

Mainstreaming Potential

Effort to connect as much as possible social services with life in community, including organization of cultural activities for the public and offering of work training in non-protected conditions; to inform public about issue of mental illness; to reduce stigma and the taboo of madness.
Contribution not only for people with handicap; it is based on the principles of community care as an alternative to institutional care. The natural surrounding of the café offers a possibility to meet with people with mental health problems and to show the local community that these people do not have to live outside of society, in sanatoriums or in institutions.

Costs of the Project

Finances are arranged from income of the café (35%) and from foundations (65%).
8.550.000 crowns (ca. 300.000 Euros) per year - personal costs: 6.400.000 (230.000 Euros) including salaries of clients; services: 1.570.000 (55.000 Euros); material costs: 360.000 (13.000 Euros); cultural projects and publicity: 220.000 (8.000 Euros).

Strengths and Weaknesses of the Project

The project aims to provide all clients support for returning to the labour market and to offer services in compliance with the individual needs. It is suitable especially for clients in the first stage of psychotic illness.
Work in a café as a natural form of work, without creation of any special protected conditions, support and integration of clients into the community. Increasing of working and social abilities of clients through training and following programs. Promoting tolerance and co-existence in the community and decreasing of stigma connected with mental illness by help of an accepting atmosphere.

People involved in the Project (number of people and profession)

Arrangement of the project: team of experts and organizing workers, executive director, head of rehabilitation, methodical worker, head of project, reception and working therapists, PR, production worker.

Condition for work in Green Doors is a university degree or expert education in ergo therapy, social work, psychology or special pedagogy, as well as practical experience in this field. Another condition is regular supervision.

Contact Person for the Project

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Patients' Confidence

Description

In this project, the main aspect is the informational support of patients with psychiatric disease. Users of the self-help organization Kolumbus aim to improve the knowledge of patients about medical institutions, to mediate with the outside world, and to provide access to juridical help to the patients, to activate them, get a feedback about psychiatric hospitals, and to engage them in the long-term also in the evaluation of the care system.

Aims

To improve knowledgeableness of patients in medical institutions, intermediate a contact with outside world, an access to juridical help to this patients, to activate them, get a feedback about psychiatric hospitals, and to engage them in the long term also to evaluation of system of care in context.

Areas

Health, Social services

Effectiveness

Quantitative indicators:

- there were 400 patients of psychiatric hospital addressed in 2005, from this number half of these became clients of this project and its services was offered;
- patients confidents have own experience with mental disease, so they have great feeling and patience for quality offering of this service, which can be taken also as psychotherapeutics treatment;
- regular supervisions facilitate increasing of erudition of patients confidents and so to make this kind of care better.

By good mental health care the time in hospitalization can be decreased and so return of patients to their families and society would be much easier.

Sustainability

Project is arranged by members of Kolumbus org., who have juridical education or they are educated in courses of juridical minimum. They are also trained in work with

patients, and they are supported by professionals having experience with people with mental disease. There is also possibility of supervision.
The project is financed from grants and foundations.

Innovation

Innovation of this project is in creation of this kind of service in Czech Republic, which contributes to innovation of therapeutic methods in psychiatry; its added value is also in possibility of social integration of people with mental disease to society. By this integration these people get opportunity to assert themselves at the job market.
Innovation can be found also in fact, that self-helper organization Kolumbus, thanks to own experiences with illness can solve problems of patients, who have no possibility during stay in hospital to defend their rights and interests.

Added Value

Added value is seen:

- in an individual approach to each patient in psychiatric hospital and thanks to patients confidents of this project get to upgrading of mental health care and at the same time increasing of their social integration;
- in a reduction or elimination of discrimination of people with mental disease by advocacy of their rights and interests
- in that psychiatric hospitals help to solve patients problems social workers, who are very busy in accordance to great amount of clients and other duties. They cannot solve patients´ orders deeply in way patients´ confidents do.

Patients´ confidents collect experiences and knowledge from others confidents in Czech Republic, so they can offer to users of psychiatric care needful information about solving of problems and to advise competently and to refer about examples of solving problems in different hospital.

Transferability

Project is transferable to other psychiatric wards in Czech Republic. There is still trying to extend this project to more hospitals, at the same time there are limits given by financial situation of organization and arrangement of suitable candidates for this activity. Kolumbus organization cooperate with Global Initiative Psychiatry at publication about this project called Patients´ confidents, which is going to be distribute in countries of former Soviet Union. Because this project is kind of fieldwork, expenses are not so high. Patients´ confidents can do administration work at home and at the same time to spare financial resources needed for this activity. For replication of this project, it is necessary to establish a self-help corporation of people with same health handicap and on the basis of their own experiences to find out needs and interests of similarly handicapped people and to promote these needs and interest in medical institutions.
There is also emphasis at education of confidents.

Mainstreaming Potential

At the basis of this praxis and notes about talks with clients to promote rights, interests, needs of people with mental handicap to community policy, policy of self-government and to complex law about mental health.

Costs of the Project

Assumed expenses for 2006 are 334.000 Czech crowns.

People involved in the Project (number of people and profession)

Members of Kolumbus org., who have juridical education or they are educated in courses of juridical minimum. They are also trained in work with patients, and they are supported by professionals having experience with people with mental disease (number is not specified).

Strengths and Weaknesses of the Project

Valuators perceived similarity of this project to Vidacentre and contrary. They saw main positive in direct work of users and their direct experience with disease, good transferability of project and clear filling of white place among services mainly in regions, where Kolumbus visits psychiatric hospitals. They recommend for next time to elaborate more carefully delivered application; it was not elaborated concretely and there were mentioned services, which are not ensured by this organization.

Contact Person for the Project

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Social Firm Junuv Statek

Description

The social firm offers housing and catering services and disposes of 25 working places, which convey to people with mental illness, who do not master very well the conditions of free labour market. Working positions are adapted to possibilities and competences of individual clients.

Aims

To offer a working place to people with mental illness, to integrate them into society, and to offer a safe place for work.

Areas

Employment

Effectiveness

There are 25 work places for people with a health handicap (psychiatric diagnosis). For a period of operation of the social firm there were 41 clients employed. During

this period there were 6 clients who left for non-sheltered working places; there are still 10 clients employed for 5 to 7 years.

Sustainability

Finances are obtained from grants and foundations. Financial resources: own resources (29%), the rest from foundations.
For starting the activities of the social firm there is need to study the local labour market, and considering the possibilities of the target group with regard to future working possibilities of the clients.

Innovation

Before establishing the social firm, supply for the target group was time limited (supply was focused mainly at working rehabilitation in sheltered workshops). After the rehabilitation, clients had problems to find an employment and if they were successful only a small percentage stayed in employment for a longer time period.
The social firm now offers employment in normal working conditions, without any time limits. Working places are adapted to clients´ possibilities and their working progress (for example to completely non-sheltered conditions) is being held naturally in accordance to their capabilities and abilities.

Added Value

The social firm follows-up the functioning of training institutions and sheltered workshops. Clients of these training schemes have sometimes problems to integrate into the mainstream, non-sheltered job market. The social firm is able to give working fulfillment and possibility of working as well as personal growth.

Transferability

The social firm supplements the casual commercial firm in one way - the employment of people with mental health problems. So, this model should be very easy to transfer to different countries with developed enterpriser background. The basic idea is to employ people, who are handicapped in the mainstream labour market, giving them equal opportunities. It offers a possibility to use the working potential of the healthy handicapped, to lower their dependence for state support and to integrate them into normal life. This kind of integration, through providing employment on a continuous basis, lower the financial and personal requests of state support as well as it enhances integration.

Mainstreaming Potential

The social firm follows-up the usual business background in the Czech Republic, with adding one social element - the employment of people with mental health problems. The effort of every firm is to generate enough financial resources for their own activities. Financial and personal expenses and expenses for integration of people who suffer from social exclusion are lower than in the usual sheltered working places. The social firm strives to lower its dependence from state subsidy, to be as self-sufficient as possible. It lowers at the same time dependency from social grants and state subvention.

The social firm became at the same time an important cultural and social partner of the city Sedlec (location of the social firm).

Costs of the Project

4.988.000 crowns (ca. 180.000 Euros) in 2005.

People involved in the Project (number of people and profession)

The team of the Social firm consists of 9 people (7 full-time and 2 part-time). They are professionals working in different areas (cook, waiter, electrician, service man etc). All of them are at the same time educated for work with people with mental illness.

Strengths and Weaknesses of the Project

This project has facilitated social integration and de-stigmatisation. People with mental health problems enter employment, initially only for a short period, but if it works, people stay to work for longer time.

Contact Person for the Project

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Studio Citadela-Bohnice Theatre Company

Description

This project combines in an experimental way theatre production and alternative psychotherapy. Its goal is to incorporate a new type of theatre into the company, the so called "social theatre". People with mental health problems are part of its target group as well as the whole society, which is invited watch this artistic activity as a benefit for their own lives.

Aims

To incorporate a new type of theatre into the company, the so called "social theatre". People with mental health problems are part of its target group as well as the whole society, which is invited watch this artistic activity as a benefit for their own lives.

Areas

Education, Leisure, Training

Effectiveness

Quantitative indicator: This project is a small initiative, but it has a major effect. Qualitative indicator: The project was awarded the prize by Prof. Vondráček in 1993 for apparent improvement of health conditions of many of the clients; positive feedback from the public at performance not only in Prague but also in other cities in the Czech Republic, Belgium, Germany and Poland.

Sustainability

The project is overviewed by experts in the field of theatre.
It is worthwhile to undertake a financial evaluation of participants of project - ex-patients who became after two or three years of drama therapy members of the dramatic ensemble with financial evaluation for work during rehearsal and public performances.
Financial costs are covered by grants.

Innovation

In this project, opportunities for employment of psychiatric patients can be found, who would find it difficult to otherwise enter this kind of exercise. In the style of social theatre, this is a promising new field evolving.

Added Value

The benefit of this project is given through the opening of new perspectives for psychiatric care. In the case where usual psychotherapeutic methods are failing, there is the possibility to apply practices of this project.

Transferability

Methods and approaches used in this project are very usual in professional theatre ensembles and thus can be developed and implemented by every theatre ensemble in every European country. The only basic premise is the fact that the project should be led by theatre creators with empathy and openness towards psychiatric patients. Medical supervision is an essential part of the work in case of acute states.

Mainstreaming Potential

Bohnice theatre company has become an important part of Prague's culture. It performs in the whole of Czech Republic as well as at theatre festivals throughout Europe.

Costs of the Project

The project is financed from grants.

People involved in the Project (number of people and profession)

Experts in theatre, art-therapists (number is not specified).

Strengths and Weaknesses of the Project

The project is characterized by its uniqueness and inspirational aspect. It has a strong dimension social inclusion and de-stigmatisation. Studio Citadela has become a part of Prague's culture. The continuation of this activity in a longer run and its effectiveness are further strengths. A problem may be the financial sustainability.

Contact Person for the Project

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Vida Center

Description

Information-counselling centers giving information and advice in the area of mental health and disorders. People with psychotic disorders are mainly working here; they use their own experience in their work in the centre and do not hesitate to speak openly about it. They learn themselves at the same time how to work in a structured way, according to rules; they learn what it means to have responsibility for themselves as well as is for a system of care for people with mental disorders.

Aims

Provide information and advice in the area of mental health and disorders, about the system of mental health care, providers and users of services.

Areas

Health, Social services

Effectiveness

Quantitative indicators: 390 clients and 483 demands in 2005 (64% women, 36% men); 69% users, 11% parents and relatives, 4% experts from different area, 16% from general public.
Qualitative indicators: every contact in the Vida Center is documented with the anonymity of clients assured. The activities of the Vida Center are evaluated once a month by a coordinator and workers of Vida. Vida and its representatives work at the moment on developing a system of quality control and standards of work.

Sustainability

The expenses of Vida Centers in the whole of Czech Republic in 2005 were 45.000 Euros (salaries, deliveries, energy, traveling expenses, services, etc.)
A strategic work plan is made for 3-5 years; this plan is actualised every year according to the present situation and concretised for that year.

Innovation

Development of users' activities in the Czech Republic is very gradual; new groups are arising only very slowly. This project can show how users' activity can have a positive influence on style of care and living conditions. In 2002 already, it filled a gap in the system of care of people with mental disorders. Services of Vida Centers are utilised also by parents and relatives, sometimes professionals and other people who are interested in this area.

Added Value

People with mental disorders are endangered by social isolation, stigmatisation and discrimination in the field of work. The project enables a change of this adverse state caused by mental illness by increasing the possibility of available information about the issue of mental health and the system of care. At the same time it connects the users, which leads to their activation, taking over responsibility for themselves and for the whole system of care. It supports the independence of care from professionals and the development of users groups. Workers of Vida Centres are somehow a bridge between users, parents, relatives and public institutions. Vida Centres fulfill a system of care of people with mental disorders; they offer the own experience of the workers, which has quite a different dimension than the experiences of professionals.

Transferability

This project is transferable to different target group (for example physically handicapped) as well as to other countries. Organisations in Lithuania and Slovakia decided to establish in accordance to this model users´ information centers as well. There is low complication at the time of implementation of the project into praxis.

Mainstreaming Potential

Direct involvement of users is very essential to the formation and assertion of all official documents and methodologies in the area of mental health care. This way, and the immediate feedback of the people who are concerned by the documents is ensured. And thus, this project obtains its very important role for national as well as local policy.

Costs of the Project

Expenses of Vida Centers in the whole of Czech Republic in 2005 were 45,000 Euros.

People involved in the Project (number of people and profession)

There are eight Vida Centers in the Czech Republic. In each, there are on average 4-6 workers (users), 1 coordinator (professional), 1 expert consultant and deputy workers (users).

Strengths and Weaknesses of the Project

The strengths of the project are its sophistication and clarity for clients. They like the fact that it is a kind of activity "they do for themselves" (in the sense of a self-help initiative). Users evaluate this project as a good initiative, filling a gap among activities in the area of mental health and enforcing existing cooperation with professionals. Weaknesses of the project could be seen in its sustainability and financial aspects.

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FRANCE

A New Dynamic: The Process of Inclusion

Description

The need trains and helps people with special needs (e.g. reading and writing impairment) to increase their chances to find a job. A task group consisting of two training institutions, two CATs (C*entre d'aide par le travail*, i.e. work-based support centre) and the *Permanence du Jard* worked for four years to produce a guidebook for a new vocational training methodology. This guidebook was also based on various vocational training experiments in various fields and institutions. A guidebook for a new vocational training methodology was produced. It can be reused for other vocational training leading to qualifications suitable for employment.

Aims

A broad majority of people cared for by the *Permanence du Jard* have low professional skills and are often impaired in learning processes, especially in terms of reading and writing. Nevertheless, the *Permanence du Jard* social workers firmly believe in vocational training as an instrumental factor in socio-professional integration. Therefore, each person should enjoy the same opportunities to acquire and update the necessary skills for taking an active part in the society. However, this issue shall not be addressed only through specialized answers, but rather through solutions found or built within the bounds of the common law.
Initial goals:

- Support people impaired in reading and writing and/or learning to acquire knowledge and qualification.
- Help training institutions to accommodate, train and qualify these people.

Areas

Training

Effectiveness

Diffusion of the guidebook at the European level through the European Inclusion programme. Some vocational trainings are still operational (for instance grapevine pruning).

Sustainability

New vocational training methodology is now operational.

Innovation

The people with special needs themselves were consulted during the production of this guidebook.

Transferability

The guidebook production and diffusion are funded by the Europe Inclusion programme. The vocational training experiments (organization, teaching and guidance) are funded by specialized institutions like the AGEFIPH (non-profit organization for the management of the state fund for professional integration of people with special needs). The Region Council has recently contributed to the funding.

Mainstreaming Potential

This tool was elaborated with the help of vocational training institutions ruled by the common law. Besides, this guidebook is now in use beyond the field of persons with special needs. It helped to change the way the vocational training professionals, among other people, consider their job and practice it.

Costs of the Project

2002-2005, FSE: 103 450 Euros
Public funding: 145 898 Euros

People involved in the Project (number of people and profession)

Professionals of vocational training and specialized care institutions
20 Social workers of the *Permanence du Jard*
75 disabled people

Strengths and Weaknesses of the Project

Fulfilling the requirements stated in the guidebook is not an easy task for many vocational training institutions.
The need remains to have a state diploma delivered after successful completion of such trainings. For instance, this would require some monolithic French diplomas to be broken down into rough equivalents of O levels which could then be covered individually by these kinds of trainings.

Contact Person for the Project

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Community Health and Training of Carers

Description

Awareness raising actions: Theses actions are means to take advantage of a useful activity to inform the people cared for by the organization and to stimulate their interest in health problems. Activities such as footbaths, toilet set distribution, well-being workgroups, community talks allow people to better handle their own health problems. These activities go beyond the specific issues addressed to aim for a global well-being of the persons. They are a way to inform these persons and strengthen their bonds with the organization.

These experiments were discussed within the organization and lead to new projects of awareness raising actions, such as working on meal quality, not only to address dietetic issues, but also to share a moment of pleasure; resting beds that must not be mistaken for infirmary beds.

A whole new field remains to be explored regarding such actions, e.g. for homeless women who are especially lacking lodging and may have experienced mistreatment. The organization has also worked on the links between health and insertion problem, thus exploring the meaning of the "I" in RMI (revenu minimum d'insertion, a kind of social welfare allowing a minimal monthly income in exchange of an agreement to try and regain an active social role. Insertion is meant in this context as the process of regaining an active social role, mainly through employment).

As varied as they are, these experiments must focus on the community health principles to gather useful experience.

Aims

The community health approach discussed here started with an action centred around HIV/AIDS with the *ARCAT SIDA* project, where 120 employees and helpers were trained. This experiment showed that AIDS prevention was not a major concern inside the EMMAÜS organization, even though the training project raised a considerable interest. Members were interested both by the acquisition of new skills in AIDS prevention and cure and by the way health issues were addressed through a person-centred approach.

The information and training process through community talks was itself a community-based process, implying a more person-centred approach, health being only an aspect of global problems. Obviously, such a mode of operation requires a re-organization of the departments and human resources, which can only be gradual, in the following areas:

- Social and medical needs of the people cared for by the organization;
- Global health care and security policies;
- Evolution of social and medical policies;
- Adaptation of professional and institutional patterns.

Areas

Health, Housing, Social services, Training

Effectiveness

Inclusive experiments were conducted on two occasions, even though they were not identified as such: public health care professionals mobilised themselves to allow people taken care of by health lodges to benefit from medical check-ups, adapting schedules and freeing dedicated time. A similar experiment was conducted around mental health problems.

Sustainability

People living in the street have lost all practical means to exert their fundamental and social rights, including those related to health. Even though the health lodges are accustomed to weave links both between various EMMAÜS departments and the suffering people and between these people and the health care organizations, the public health system (hospitals, medical practices and laboratories) should also welcome this population that does not have much resources.

Innovation

People living in the street have lost all practical means to exert their fundamental and social rights, including those related to health. According to the principle of inclusion, health professionals, health lodges and the whole EMMAÜS NGO shall make sure their fundamental rights are respected.

Added Value

The added value of the project is guaranteed:

- Since it allows the participation of deprived people, who can acquire skills and improve their social conditions through training and voluntary work.
- Because this process contributes to an increase in self-esteem of local populations, especially the deprived people who can regain control of their lives and health-related choices.
- Because all actors on a given territory are involved (helpers, professionals, institution employees, politicians and the people themselves).
- Because it conveys a potential for dissemination (awareness raising, training, outward communication) and mainstreaming.

Transferability

The community care model exists in other countries in Europe.

Mainstreaming Potential

The principles of this model can be mainstreamed, provided they are validated internally by the organization wanting to start such actions and externally by the local powers and institutions involved in the process.
An analysis of other EMMAÜS actions could show the changes brought by the community health approach to the attitude of public institutions implementing the common law toward the most insulated people.
The inclusive approach also works for representation since in case of extreme discrimination victims are simply ignored. In that case, the main goal becomes to prevent this disregard from the public institutions.

People involved in the Project (number of people and profession)

Professional social workers and head of departments, helpers recruited among strongly alienated people such as homeless or immigrants cared for by the NGO, partner institutions, professionals from the medico-social sector, research or training institutions, local political instances.

Strengths and Weaknesses of the Project

Difficulties could arise with the change in the involvement and representation of homeless people and the model of assumption of responsibility. Increasing these actions requires at least new ethics and resources.

Contact Person for the Project

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L'Espace Convivial Citoyen

Description

The project creates a place where people suffering from social exclusion caused by mental health problems can practice peer support/peer advocacy in order to recover the ability to exercise their rights as citizens. The Espace Convivial Citoyen (ECC) is a place of socialising and mutual support for people suffering from their mental state and/or isolation, where autonomy and responsibility are encouraged. The best efforts are made to keep the place welcoming and warm, to create the conditions for free expression and creativity.

Aims

Many people with mental health problems suffer because of isolation, discrimination, and a general lack of care and comprehension from the general population. The ECC has the following aims:

- Beyond a purely medical answer, people with mental health problems need a dedicated place where they can exist as full human beings instead of mere patients.
- Advocate for disadvantaged people.
- Defend the rights of people with special needs.
- Increase awareness of public authorities on the subject.

Promote human solidarity through accepting differences.

Areas

Leisure, Social services

Effectiveness

Users and carers alike are involved in the choice, implementation and animation of social activities, e.g. theatre, drums, plastic art, paper writing, thematic talks, concerts, gardening, hiking, cooking. The ECC is open on all days (also during holidays).

Sustainability

The ECC is approved as a self-help group (law 11.02.2005) and financed (75000 euros) partly by the state.

Innovation

In France, stigma and discrimination towards people with mental health problems and their spaces are very prevalent. It is therefore necessary to support participation and citizenship. The very aim of the ECC is to allow disadvantaged people to regain the exercise of their full rights as citizens.
The structure welcomes all people without distinctions and attempts to create or strengthen bonds between groups of citizen.

Added Value

The ECC helps to support autonomy, more social integration and a more rewarding social life. Other positive outcomes of the ECC are:

- To regain dignity, identity, skills and limits, and hope.
- Development of initiative, self confidence and self respect.
- Exercising responsibilities based on mutual confidence.
- Individual and collective acknowledgement.
- Getting involved in actions to relieve the suffering.
- Rediscovering own abilities.
- Exercising freedom of choice.
- Experiencing friendship, solidarity, tolerance, comprehension.
- Complementing the traditional health care.

Transferability

This model exist in many European countries: other similar experiments already took place in Italy, Greece and England under the condition to gather a sufficiently large group of people interested in the concept and raising sufficient funds.

Mainstreaming Potential

These spaces are approved by local and national instances (who also contributed to the funding) with the aim to:

- Working towards a better acknowledgement of mental health problems in the society.
- Increasing the weight of directly concerned people in political decisions.

The opinion of the patient is required - cf. the notion of the global approach of the person-House of the Handicap (in the new law for disabled people 2006).

Costs of the Project
100.000 euros

People involved in the Project (number of people and profession)
80/100 persons in each place, users, volunteers and NGO employees

Strengths and Weaknesses of the Project
It is very important to accompany this project by a program by self-training of the users, self-directed evaluation by research-action; to be open to the social community and not to create a "ghetto"; to achieve a balance between supporting people and "running" their project.

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The Wonderful Garden

Description
The project is about building and setting a vegetable garden that is run by people with mental health problems. Patients or former patients of mental institutions, people suffering because of their mental state and members of ARDES, a non-profit organization, jointly proposed the creation of a vegetable garden on a parcel of land owned by the town of Louvigny. An official agreement was signed between the town and both NGOs ADVOCACY and ARDES.

Aims
The project has the following aims:

- To cater the need of people with mental health problems to be involved in economic activities outside of the convivial space.
- In doing gardening work, to put peoples' skills to use for the community.
- Allowing a group of people from the Advocacy NGO to run a vegetable garden. A portion of the vegetables will be kept for personal use, another portion will be used for collective meals in Caen's Convivial Space of Citizenship and another portion will be sold at low prices to members of the same NGO or outside.
- Designing the garden as a place for all members of the convivial space, where people suffering from their mental health can relax and socialise.
- Opening the garden to all inhabitants of Louvigny through events organized by partner organizations or elementary schools (artistic displays, sharing of

gardening skills, various activities like manufacturing of nesting boxes and so on).

The garden will be full accessible for disabled people, especially those who are in wheelchairs.

Areas

Employment, Leisure

Effectiveness

The wonderful garden, stretching over 1,800 square meters, is located in a place called "the big fold" in the outskirts of Louvigny, where a gardening hut already stood. The initial layout consists of a 500 m² vegetable patch and decorative flowerbeds on the parcel dedicated to relaxation, on which a 20 m² log cabin, courtesy of the Town of Louvigny, will be built. The garden will be outfitted for persons with reduced mobility (wooden flower boxes at wheelchair height, etc).

Sustainability

This program is included in the citizens' convivial space of CAEN, which is approved and financed partly by the state and local authorities, and wants to develop actions with local institutions beyond the field of mental health care. The goal and the objectives are achieved and it is an evolving project, which allows the people to take responsibilities and to be a social actor.

Innovation

The garden is open to all. It allows people involved in mental health problems to interact with all citizens on an equal footing. This activity is not a sheltered work (i.e. it does not fall under the special regulations for employment of people with legally acknowledged disabilities). It is a form of community management involving the town, profit and non-profit organizations. An ever increasing number of people are getting involved, although the outcome will only become visible in months to come.

Added Value

The experiment is still in progress.

The initial group in charge of the garden has grown and is going on to develop steadily. This activity is an example of what can help people to shift from a passive consumer to an active producer. People are free to get involved as mere visitors or by taking part in the collective activity. The location of the garden in the outskirts requires them to use the common transport system, instead of relying on special mini-vans used to carry them to the convivial space, thus regaining a freedom of movement. The added value is moreover achieved through:

- Self management of the parties involved.
- It is a very new activity on the job market, neither traditional business, neither sheltered workhouse, both with disable people and with solidarity.

Transferability

Conditions for repeating this experiment are easily met provided a suitable patch of land is available in the outskirts of a sizeable town. The necessary presence of a citizens' convivial space - itself confined to relatively densely populated city areas due to accessibility - may prove to be a problem in scarcely populated areas. Cooperation with local authorities (i.e. Town Councils) is advisable for a smoother integration among the local population.

Other conditions for transferability:

- Obtaining a suitable patch of land is the only mandatory constraint.
- This activity is by essence dependent of the climate.
- During the year 2005, the ground was prepared for spring sowing once per week by the gardening team together with ten other members of the convivial space, assisted by City Hall technical personnel and landscape designer.
- The DASH NGO helped study the building of the log cabin.

Employees of the LONDEL Company lent their skills for initial layout of the vegetable garden and flowerbeds.

Mainstreaming Potential

This activity is for now ruled by the regional policy level. One aim for improvement would be to shift it to the national level. It follows the current stream of thought about the disability issue. ADVOCACY works closely with local political instances and non-profit organizations at city and region level to promote these concepts.

Costs of the Project

The parcel has been lent by Louvigny's City Hall. The gardening is done by the members of the convivial space. The gardening small hardware has been bought by ADVOCACY. The log cabin construction was funded by the Regional Council. Funding for some additional gardening wear (boots, gardening suits) by a local bank is planned. A small part of the vegetables will be sold publicly at moderate prices to cover the running expenses.

People involved in the Project (number of people and profession)

20 persons - users, volunteers and NGO employees

Strengths and Weaknesses of the Project

All problems have been resolved in due time thanks to the help of various partners, such as the Town ARDES and ELAN NGO or private companies like the LONDEL horticultural warehouse. Strengths: the project is carried out in co-operation with different NGOs.

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Training Methodology for ADVOCACY Helpers

Description

This project is an organic necessity of the Citizens' Convivial Spaces. These spaces are in essence places where the capacity for self-management and self-organization are primary goals. To convey this approach to new users and helpers, the need arose to create a training framework to help understand and handle the daily work in these structures. Furthermore, it appeared that advocacy and developing self-assertion were not common practices in France. In mainstream structures like semi-open mental health institutions, this capacity for autonomy is not encouraged and alien to users. This training was thus needed to avoid reproducing the "usual" methods, where animation and care are the exclusive prerogatives of professionals.

In the initial stage of the project, trainers defined a general framework, including main goals (i.e. welcoming newcomers and helping them to express themselves freely) and a list of concepts and methods to be explained. Writing some basic documents as an initial canvas for training proved extremely useful. It allowed summarising the main concepts while complying with the Citizens' Convivial Spaces approach: the training originated from a collective thinking of the users themselves, through collective talks. The knowledge or concepts they wanted to elaborate on were then collected and summarized by the trainers.

Once the training framework was finalized, the training itself started. Written documents, although important, are a mere starting point. The users themselves will adapt what has been written, add some concepts and define the directions of the training. Each participant will contribute with his own experience and feedbacks. Thus the training is permanently adapted to its target.

Once a training session is complete, the concepts are well interiorised. Each session is unique and adapted to users, depending on their expectations and the way they react to the training. One can say the methodology used complies with the principles or Action-Research. The main achievement was the active and continuous involvement of the users. Thanks to the regularity of the sessions and the open-mindedness of the exchanges, users became the main actors instead of simple consumers.

The assessment method:
Assessment is based on debriefings where users elaborate on the way they perceived the training, what were their acquisitions, the points raised, the items to be revised. Summaries are written to keep the users informed and to incite them to take part in it. The training is continuously adjusted after the conclusions of these assessments. It is important to stress the continuous aspect of the assessment. Trainers do not merely expect a final judgement; they expect the assessment to be part of each meeting, and are ready to adapt the framework accordingly.

Areas
Training

Effectiveness
Another achievement was the evolution of the training contents. The initial training framework was improved and adapted during sessions. The end result is a more consistent training, well adapted to mental health care users. Each new user will be better trained since the framework was finalized by peer mental health care users. It is an example of successful collective work.
But individual successes shall also be taken into account: it appeared some users were able to become trainers themselves. They managed to capitalise on their own experience to welcome new users, animate collective talks and speak in public, thus overcoming severe impairments due to their psychic state. These achievements are a practical case of peer emulation.
This training is also a milestone in the organisation's roadmap toward re-enabling mental care users to regain an active role as citizens and members of the global society. During all the training process, users have been considered as persons in their own rights, whose experience and individual lives are worthwhile contributions not only to the training, but to the society itself.

Sustainability
Consistent with the global methodology, the users themselves perform the assessment. This is an instance of the self-assessment method.

Innovation
Some of these helpers are now considering employment opportunities based on this experiment. Moreover, considering the innovative aspects of this training, where users are involved at all stages, the experiment can be seen as a social laboratory leading to new employment opportunities, thus representing extra potential benefits to be taken into account outside the sole cost of the initial project.

Added Value
Advocating for users and helpers becomes an integral part of the NGO daily work. The methodology developed by this training is put into action and evolves continuously.
The benefits are visible in each Citizens' Convivial Space through the improvement they brought to various activities. Newcomers may be introduced to the structure by many users, instead of relying on professionals only. These users use their own words, but convey the essential concepts of the organization.
The benefits are also obvious during various internal or external collective talks. Some users are able to better assert themselves, to animate some talks and allow other users in turn to express their own ideas and opinions.

Transferability

The limited funding hindered meetings between geographically distant regional instances of the Citizens' Convivial Spaces: one general meeting per year while two or three would be necessary, not counting newly created structures.

Mainstreaming Potential

The principles used in this approach can be transferred in numerous care and help processes for various persons with social problems or suffering from a broad range of impairments or discriminations. However, some requirements are to be strictly met, such as:

- Interaction with the trainees.
- Trainees taking part in the main project phases - definition, implementation and assessment.
- Taking into account the specificity of each participant.
- Adapting continuously the project to the target population, its expectations and different learning capabilities.

Costs of the Project

Main funding originated form the Advocacy NGO, who partially funded 2IRA. The DRJS (regional delegation of the Ministry for youth and sports) and DGS (global state delegation for health) contributed to the funding. Cost of training sessions: 2000 Euros for five meetings.

Considering its effect on the Citizens' Convivial Space users, the project cost is very acceptable. As previously stated, this training is an integral part of the main ADVOCACY goal. Its benefits are twofold: it not only provides an opportunity to train self-assertion and regain control of one's own life, but also reveals new peer emulators who can increase impact and efficiency of the training. Once trained, users become vectors for the training. The initial costs will thus decrease, since these new peer emulators will implement the training at no cost. However, non-profit help, though an important part of the project success, remains to be valorised.

People involved in the Project (number of people and profession)

Voluntary contributions were needed, both from Advocacy and 2IRA, to fill these gaps and 2 professional trainer-researchers accompanying this research-action.

Strengths and Weaknesses of the Project

Such an approach requires time, open-mindedness and a capacity for summarising. But these are what make the experiment worth the while. The continuous interaction between trainers and users, both in the implementation and evaluation phases, is a complex process. It appeared adaptability and reactivity was the key to success.

Here the training method is not rigidly imposed by the trainers. The trainees are not forced to adapt completely to the training to benefit from it. On the contrary, it is the training itself, due to the method used, which adapts to the specific needs of each trainee. In broader terms, this is not an integration process (where the individual gives up his specificities to be cast into a common mould), but indeed an inclusion process (where the individual retains his specificities and uses them to find a place in

the society). Here the individual does not adapt itself to the system (i.e. the training). On the contrary, the system adapts itself to each individual and benefits from these adaptations.
This approach tends to turn prejudicial and discriminative behaviour into an acknowledgement of the skills of all involved people.

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Urbanités

Description

A group of non-profit organizations is pooling its resources to facilitate the exercise of citizenship for persons suffering various forms of discrimination (against impairments, ailments, migrants, women, etc.). Each person contributes with his personal skills to design two festive events each year (in winter and spring). These events are focused on a given neighbourhood and intended to involve the local population in various activities: drawing, painting, dance, participative outdoor theatre. Everyone assumes responsibilities, accepts to confront foreign gazes and to meet others. Some professional performers or artists are called upon this common work, which creates opportunities for new acquisitions. The collective in charge of the events makes sure the authorizations to occupy the public spaces are granted by the local authorities. The collective also coordinates the various artists and performers. For people with mental health problems it is an opportunity to regain confidence and discover their potentials and to face the outside world.

Aims

Create opportunities for all kinds of people to meet in a prejudice-free environment, to learn more about themselves by taking part in a creative and recreational form of socialisation.

Areas

Leisure

Effectiveness

Since the events started 3 years ago, participation of the local population increased steadily. Some local inhabitants took part in last June's assessment of the previous event together with discriminated persons. Some impaired persons were able to come up with personal projects for social integration or employment based on the experience gathered on these occasions.

Sustainability

The action takes place twice a year on a regular basis since 2004.

Innovation

It is not a common practice for non-profit organizations to pool their human and material resources. The cultural and artistic sphere is usually out of the reach for people who are discriminated, especially the physically or mentally impaired.

Added Value

These festive events create opportunities for open debates and public information involving local inhabitants on themes such as public health, citizenship or more specific topics.

Transferability

The action can be easily transferred after assessment of local resources with minimal financial and logistic requirements. Believing in the potential of individuals is the key element, considering the positive outcomes for inclusion, exercise of citizenship and struggle against discrimination.

Mainstreaming Potential

The "politique de la ville" national framework (actions centered on local development and participation of local inhabitants) supports initiatives for strengthening social ties in local urban areas. Funding is devoted to improve the capacity to live in harmony and prevent isolation, exclusion and violence.

Costs of the Project

These projects are mostly relying on voluntary participation. The yearly funding amounts roughly to 10,000 Euros for hardware, coordination meetings, advertising and conviviality expenses (food, drinks and such).

People involved in the Project (number of people and profession)

About 100 people with different professional backgrounds.

Strengths and Weaknesses of the Project

This action offers numerous possibilities for local partnerships, involvement based on mutual confidence in the capacity of all kinds of individuals. New partnerships are to be created with local authorities and institutions.

Contact Person for the Project

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IRELAND

Cara House Members Club

Description

Cara House was established as a direct response to cater for the needs of people who had experienced mental health problems. Initially established as a drop-in centre, it has now expanded considerably to meet the social, recreational and educational needs of its members as well as offering opportunities to the wider community.

Cara House is a community based members club which promotes and supports health and well being through social, recreational and educational activities. Initially established as a direct response for people who had experienced mental health problems, the club is not confined and is integrated fully into the community.

The club has particularly targeted those who have experienced mental health problems; the elderly who live in isolated, rural areas as well as offering activities specifically for the Active Age Group; a Men's Social Group and a Women's Social Group.

Aims

Cara House Members Club aims to:

- Promote and support health and well being through social, recreational and education activities.
- Promote social inclusion through a range of integrated activities.
- Challenge the stigma of mental illness.
- Raise awareness and understanding of mental health issues.
- Develop life skills in a non-stigmatised environment.

Areas

Education, Health, Social services, Training

Effectiveness

Cara House provides access to a range of social, educational, health and training services in an informal community setting in a non stigmatised environment. Cara House addresses barriers which may contribute to social exclusion e.g. access to social activities on a financial basis. All activities offered in the Club are free of charge although a donation if offered is accepted.

The activities of Cara House support the needs of people with mental health problems by adopting a members-led approach to club activities thereby providing the members with the opportunity of self-determination and empowerment.

The activities of Cara House supports the needs of people who have availed of mental health services through a normalisation process of offering activities and new opportunities in a supportive environment. As the activities are not confined to people who have or are currently using the mental health services but are open to all members of the community, there is a normalised environment to support a recovery

model as opposed to a medical model. Through the on-going opportunities and activities availed of members can improve skills, confidence and self-esteem.
The success of Cara House is based upon the involvement of members who meet regularly to determine the activities and social events. Members learn from and support each others needs and work together to reduce stigma and raise awareness of mental health issues by encouraging the general community to support and avail of activities within Cara House.

Cara House is based in the centre of Letterkenny town and is easily accessible to members as:

- activities are widely advertised locally,
- referral is not necessary and attendance is on a personal member basis,
- the members establish their own club rules which is self regulating,
- Cara House has a no alcohol policy,
- all members receive regular updates of activities through a monthly newsletter,
- members are encouraged to share their own skills in the club,
- all courses offered are free of charge thereby ensuring that members are not excluded on the basis of financial need,
- transport is provided to attend social activities.

As this is a member's club all financial costs are in relation to supporting the activities provided. Income generated either through donation, fund raising or grants is solely for the funding of the events offered to the members. The range of activities varies from month to month and will be determined by the interest and need of the members. For example one month's activities included the following:

- creative writing group,
- computer classes,
- keyboard skills,
- internet and email introduction,
- mobile phone use,
- arts and crafts,
- painting on canvas,
- drawing,
- needlecrafts,
- patchwork,
- indoor and outdoor activities for young men,
- walking group,
- indoor bowling,
- circle dancing,
- active age group,
- men's social group,
- women's social group.

As well as offering a wide range of interests and activities which are stimulating, energising and creative, members can avail of Cara House purely as a social venue.
Opening on Christmas Day in 2005 proved a huge success to those who did not have a family or community network.

Sustainability

The activities, methodologies and impacts of Cara House Members Club have made a significant contribution to the members. As this is a member led club, Cara House is strongly meeting the members' expressed needs. Members determine their own areas of interest and activities and are also members of the management committee which encourages total responsibility for the activities, venue, current policy and future direction of Cara House.

Ongoing consultation and feedback from the members is obtained through the regular members meetings, feedback from events and activities is significant in meeting the needs as outlined by the members.

Innovation

The innovated aspects of Cara House include:

- member led approach,
- informal community setting,
- non stigmatised environment,
- inclusive of all members of the community,
- wide variety of activities,
- on site catering facilities,
- on going development of innovative activities to encourage participation,
- members are encouraged to share their own skills by having a training input into activities.

The evaluative approach has confirmed that an informal, supportive social environment such as Cara House can cater effectively for people who have experienced social exclusion by increasing self esteem and confidence; increasing social interaction which in turn can contribute to overall health and well-being.

Added Value

Cara House has contributed significantly to the community activities in the town and environs of Letterkenny. In addition to the activities already outlined there is an encouragement to the community to support the activities and to volunteer skills where possible. This ensures a continuous range of innovative events and personnel to ensure that interests are being met.

Transferability

The activities at Cara House are transferable to other communities with modification to take into account the expressed needs of its members.
The model is based on local resources and does not demand a high degree of human or financial support.

Mainstreaming Potential

The activities at Cara House respond to the policy to address social exclusion which is identified in the NAPs. The activities meet the social, educational and training needs of the members which in turn has a positive impact on health needs by providing an optional support structure in the community.

Costs of the Project

This year Cara House received funding from the following sources:

- 27,000 from the Health Services Executive
- 5,000 for a men's course
- 3,000 from the local partnership
- 2,000 from the local MHA
- 8,000 in fundraising and donations

People involved in the Project (number of people and profession)

All the people involved in the project are voluntary members. Course tutors are paid the official department rates. 100 people avail of activities of which 50 have mental health problems. 15 older people have completed Level 3 computer courses - the oldest to date is 75!

Strengths and Weaknesses of the Project

Strengths of the project include:

- diverse range of activities,
- normalisation process as part of the wider community,
- centrally based in an urban centre and therefore very visible,
- member led at all operational levels

Weakness of the project include: Funding to support activities is an on-going concern.

Contact Person for the Project

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Chairde Le Chèile (Friends Together) Social Club

Description

Chairde Le Chèile was established as a response to cater for the needs of club members with mental health problems. Initially the group catered for a small group to provide Sunday afternoon outings.

Over time this group expanded as the number of club members increased, due to its success.

The club meets on two nights a month, and once a month on a Sunday. Special outings are held at to mark seasonal events such as at Christmas time.

The Club provides social activities and support to members who experience mental health problems and are at risk of isolation.

Aims

Chairde Le Chèile (Friends Together) Social Club

- Promote and support the club members, through social and recreational activities.
- Promote awareness of mental health issues.
- Promote social inclusion and independence in planning the club activities and outings.
- Assist club members in personal development.

Areas

Health, Leisure, Social services

Effectiveness

An indicator of success is based on attendance. Qualitative indicators support Chairde Le Chèile as providing an opportunity and an outlet for leisure activities, educational opportunities and social support to its members. The club members are empowered to develop and plan the outings.
New relationships have developed where club members have come together outside of the club activities encouraging normalisation, integration and social inclusion.

Sustainability

The participation in activities for Chairde Le Chèile club is on an individual optional basis. Important aspects for the sustainability of the project are the support of the local voluntary mental health association to facilitate co-operation and fund-raising of activities.

Innovation

The main innovative aspect is in the connection of offering an opportunity to socialise outside of mental health service provision. Emphasis is put on empowerment in relation to the choice of activities the members want to pursue. Evaluation is on the basis of the members' satisfaction in relation to the project which is constantly reviewed to ensure interest levels are sustained.

Added Value

Participation in the project encourages the members to seek external social support which in turn enhances their quality of life.

Transferability

Transferring this social project is attainable as the system requires very little by way of resources and is deemed effective by the interest levels of the members themselves. The social process may vary on a cultural basis but that be adapted accordingly.

Mainstreaming Potential

A connection with other social clubs in the community would further ensure the social inclusion of people with mental health problems to integrate into the community through the socialisation process.

Costs of the Project

Finances are arranged from fund-raising and from voluntary donations from the members. The costs involved are minimal and dependant on the activity undertaken and whether transport is required. As this is a voluntary social club there are no staffing costs per se.

People involved in the Project (number of people and profession)

The number of people involved in the project can vary depending on attendance at the club at any time.

Strengths and Weaknesses of the Project

The strength of the project is to provide a social outlet outside of the formal mental health services support structure. The support and integration of members into the community encourages empowerment, independence and sociability.
The weakness of the project is the limited time offered to members and the dependence on voluntary financial contributions.

Contact Person for the Project

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Failte Isteach (Welcome In) Drop in Centre

Description

The Failte Isteach Drop In Centre is a social club which meets on Mondays from 10 a.m. to 12.30 p.m. As a direct response to cater for the needs of people who had experienced social exclusion. The participants are mainly those who have experienced a mental health problem and are living in supported accommodation in the community.

Aims

The Failte Isteach Drop In Centre aims to:

- offer an opportunity to meet and avail of social and recreational activities in an informal community setting;
- promote social inclusion through a range of activities.

Areas

Health, Leisure, Social services

Effectiveness

Helps the residents of a local high support hostel to maintain contact with the local community through a range of community social activities.

Sustainability

The social club has been in existence for a number of years. Participation in activities is on an optional basis. An important aspect for the sustainability of the project is the support of Celbridge Mental Health Association to facilitate the activities undertaken.

Innovation

The innovation of the project is to encourage residents of a high support hostel in the community to consider and develop a range of personal interests to participate in.

Added Value

The added value to the project is the input of local community volunteers who participate in the club's activities. This is turn encourages the process of normalisation and integration into the community through social events.

Transferability

Transferring this social project is attainable as the system requires very little by way of resources and is deemed effective by the interest levels and participation of the members themselves. The social process may vary on a cultural basis but that can be adapted accordingly.

Mainstreaming Potential

A connection with other community clubs and activities in the area would further ensure the social inclusion of the members through an integration socialisation process.

Costs of the Project

The costs of the project vary depending on the activities undertaken and the numbers participating. Financial support is offered by Celbridge Mental Health Association.

People involved in the Project (number of people and profession)

Persons living in Grove House High Support Hostel.
The volunteers are members of Celbridge Mental Health Association.

Strengths and Weaknesses of the Project

The Club is open to the general public and advertised locally, but no people other then the residents of the high support hostel attend.
The strength of the club is that the members enjoy the contact, company and activity.
The volunteers always happy to be involved, 6 volunteers are organised 3 to each Monday.

Contact Person for the Project

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North Dublin Befriending Project

Description

The North Dublin Befriending Project is a voluntary service available to people who have or have had a mental health problem. The project is a one-to-one befriending project focussing on the person's particular needs, goals and potential and assists the person to re-integrate into their community.
A trained volunteer (a befriender) is matched with a person with a mental health problem (a befriendee) with similar interests and /or life experience for a social relationship which is monitored and supported by the project co-ordinators. The project brings people together for a positive, supportive relationship to help reduce the social isolation often felt by those experiencing a mental health problem and to empower those using the mental health services to reintegrate into their community.
With the help of the befriender, the befriendee will be encouraged to access training and education and build social networks minimising the negative impact of social exclusion.
Befriendees have been referred by the community mental health teams and their own General Practitioners. All befriendees are long-term users of the mental health services and have expressed feelings of isolation as a consequence of their long-term mental health problems. The age range is between 20 and 60 years of age.

Aims

The North Dublin Befriending Project aims to:

- support the befriendee to identify and achieve their own personal goals (e.g. using public transport, socialising etc.),
- provide an opportunity for the befriendee to participate in interests and hobbies,
- support the befriendee to access community resources such as training and education.

Areas

Education, Training

Effectiveness

The project addresses the social inclusion and re-integration of those with mental health difficulties into the community through an informal supportive social network. By identifying their own interests to pursue, participation is giving a voice to the befriendee and respecting their choices. The project aims to support the befriendee in their efforts to re-integrate into their community, giving them support to try new activities such as sports, leisure, training and educational courses. The project has a voluntary advisory committee of eight members and two project co-ordinators who work seventeen hours a week.

Sustainability

On-going consultation and feedback from the participants indicate that the impact of the Befriending project is significant in encouraging participation in regular social activities.

The project is easy to access and implement and is relatively inexpensive. The only financial outlet is for expenses incurred by the volunteer as well as the running costs of the project. Funding for the project was sourced through the Dormant Account Fund (Department of Community, Rural and Gaeltacht Affairs) by Mental Health Ireland. Volunteers are trained in listening and communication skills, boundaries and health and safety policies as well as information on mental health issues. On-going training is provided to the volunteers.

The project has links with the mental health services as well as the local mental health associations (NGOs) in the North Dublin area.

Innovation

Those who are or who have experienced mental health problems may find themselves isolated with limited possibilities to interact with the community around them. Participation in initiatives, such as the Befriending project, with the support of trained volunteers is innovative in motivating, supporting and empowering the participants to identify their own needs, make their own choices and maximise the potential to achieve their own identified goals.

Added Value

The project's activities, methodologies and outcomes make a significant contribution with regard to existing practices and policies in the area of social inclusion emphasising the underlying principles of choice, participation, equality and respect.

In the recent Report of the Expert Group on Mental Health Policy, "Vision for Change" a holistic view of mental illness is proposed and an integrated, multidisciplinary approach to addressing the biological, psychological and social factors which contribute to mental health problems is recommended. The Report proposes a person-centred treatment approach which addresses each of these elements through an integrated care plan, reflecting best practice, which has been developed and agreed with service users and their carers.
The Report states that interventions should be aimed at maximising recovery from mental health problems and build on the resources within the service user's immediate social networks to allow them to achieve meaningful integration and participation in community life.
The befriending service is an opportunity for the person to socialise outside of a medicalised environment and as well as meeting the individuals needs, is also supporting the principles for change as recommended in the policy document a "Vision for Change".

Transferability

The practices and procedures as developed are potentially transferable to other communities as they are flexible and adaptable to facilitating the ethos of empowerment. There are several befriending services in Ireland, in rural and urban communities, and although very different in approach, all share the same aims and objectives of social integration and interaction for people with a mental health problem. The differences will depend on the area and the resources available to the project.
The befriending project is a very practical and simple one which trains volunteers to support befriendees who are, or have been, users of the mental health services to re-integrate socially into their communities.

Mainstreaming Potential

The social context of mental illness has often been overlooked with the result that very little help has been offered to individuals in terms of managing and negotiating their needs "back into the community". One consequence of this shortcoming in support has been a high rate of relapse and readmission. Over 70% of all admissions to a psychiatric hospital are re-admissions.
As people experiencing mental health difficulties are not a homogenous group, it is important that there is a person-centred approach with as much consultation and input from the service users as possible. "The ideal mental health service model should be one where there is a balanced range of options provided which includes medical, psychological and social interventions. The range of specific interventions will vary from individual to individual but all three interventions should have equal importance in the lives of the service users." *Vision for Change*
In mainstreaming the project caution would be expressed in ensuring the volunteers do not displace paid employees.

Costs of the Project

The Befriending Project is run by two part-time Co-ordinators, each working 17 hours per week. Their job is to recruit, train, match, monitor and support befrienders and also to match, monitor and support befriendees. The co-ordinators are responsible for fundraising, training, and administration of the project.

The cost of the project over two years was 98,000 euro of which 70,000 was salaries for the two co-ordinators.

People involved in the Project (number of people and profession)

There are two part-time Co-ordinators and there are 34 trained volunteers.

Strengths and Weaknesses of the Project

The strengths of the project include:

- the empowerment of the befriendee to achieve their own personal goals;
- the involvement of volunteers in supporting members of their community;
- the reduction of social exclusion.

The weakness of the project is predominantly resources as the project relies heavily on volunteer involvement for sustainability and current funding is not guaranteed.

Contact Person for the Project

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Serenity House

Description

Serenity House is a community educational resource centre which is committed to a way of life and a means of working towards change and support in society.

Areas

Education, Social services, Training

Effectiveness

Serenity House has a long history of positively targeting people with mental health problems through our education programmes and leisure activities in a caring, non threatening environment. We aim to reach out to people with mental health problems and encourage them to participate and integrate in community activity.
There are approximately 500 people attending a variety of courses at Serenity House on a weekly basis and we find that clients in the mental health service mix very well

with the rest of the community thus breaking down the stigma attached to mental health problems.

Sustainability

Serenity House feels that for people with mental health problems, the first step towards accessing any service is often the most difficult. We provide programmes that are suitable for all sections of the community but are structured in such a way that they can be taken up by people who may initially lack confidence, self esteem, motivation etc. to encourage them to participate in activities which will improve skills and knowledge as well as providing a social outlet.

Innovation

Those experiencing mental health problems may find themselves isolated with limited possibilities to interact with the community around them. The innovation in the activities offered at Serenity House is to offer an environment which is conducive to supporting social inclusion through learning, involvement and socialisation.
While we have a core of leisure and education programmes over the years we have always responded to differing needs, now interest in email and internet is being met with courses for former long stay psychiatric patients.

Added Value

When people feel comfortable coming into the house, they develop the confidence to approach any of the staff about any difficulties they have regarding issues of health, social services etc. We have a good relationship with medical and public health personnel, citizen's information service, Money Advice and Budgeting Service (MABS), etc. The Family Resource Centre is also located at Serenity House so they can also assist people in any personal difficulties which may require advice or support.

Transferability

We feel that as a community based centre which responds to the needs of the local community, networks with other agencies and provides a safe non threatening centre for people (including vulnerable people) thus making us a good model for replication. The model has a proven track record of effectiveness and as such is possible with modifications to be replicated in any community.

Mainstreaming Potential

Serenity House has been addressing the concerns of social exclusion of people with mental health problems through the provision of a range of appropriate activities since its establishment. The range of activities and diversity of the participants contributes to tackling the inequalities that people with mental health problems encounter. It is well accepted that mental health is not just about the presence or absence of mental illness but is about the broader issues of mental health and well-being at both personal and social levels.
The recent report of the Expert Group on Mental Health Policy "Vision for Change" proposes the development of a balanced and integrated modern mental health

service responsive to the disparate needs of those with mental health problems whether home-based, community, in-patient, or forensic. The report emphasises the underlying principles of social inclusion of choice, participation and equality.

Costs of the Project

The cost of the project is approximately € 30,000 excluding administration costs.

People involved in the Project (number of people and profession)

Administrator, Course coordinator, 12 tutors, 2 house keepers and 4 voluntary staff.

Strengths and Weaknesses of the Project

The strengths of the project: Volunteer input; involvement of community; status in community.
The weakness of the project: the on-going issue of securing funding is always an issue, as well as securing resources such as extra equipment and facilities to accommodate larger groups.

Contact Person for the Project

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Solas Drop-in Centre

Description

The Solas Drop-in Centre, based in Monaghan, was established in 2003 as a direct response to the needs of people with mental health problems living the Monaghan area, who, on discharge from the mental health services, identified social exclusion as being one of the major barriers they have to face.
The Solas Drop-in Centre represents the social needs of mental health service users in the area. Solas is a drop-in centre which is a user led, user run facility for those with mental health problems to provide them with a social outlet.

Aims

The project aims to:

- represent the social needs of users of the mental health services in the Monaghan area;
- support users of mental health services through a social drop-in facility;

- encourage a user led, user run facility which represents the interests of the centre users;
- promote recovery through social inclusion;
- provide access and information to support services such as education, training and employment opportunities.

Areas

Education, Employment, Social services, Training

Effectiveness

The Solas Drop-In Centre supports the needs of people with mental health problems by empowering the members to identify their own social needs and to take responsibility for running the club. This in turn improves skills, confidence and self esteem to progress to mainstream social activities.

The Drop-In Centre is available to people with mental health problems in the Monaghan area and is accessible to all on a member basis. This offers a practical solution to effectively addressing social exclusion by overcoming the difficult barriers of participating in a social environment. The members' skills and confidence are developed through taking responsibility for their own activities. The club's steering committee is user led.

There is an informal "open door" drop in policy which enables any member to participate in activities of their choice.

Sustainability

The drop in centre provides access to social and leisure activities and has made a significant contribution in addressing the needs of people with mental health problems. As this is a user led project individual needs are met as well as addressing barriers to participation therefore preventing deterioration in mental health. The members who attend can avail of free public transport although the club is in a central location for ease of access.

Innovation

The innovative aspects of the project are:

- member led approach as consumer led and driven;
- members actively involved in identifying activities;
- non clinical setting;
- supportive environment conducive to building self esteem and self confidence;
- access to information regarding employment, training and education services.

Anecdotal evidence suggests that those who participate in the Drop-In Centre experience increased self esteem and confidence which improves their overall health and well-being.

Added Value

Members who have had experience of mental illness feel more active and empowered to determine their own social identity. The members gain self confidence and skills in planning, finance, record keeping, meeting procedures etc. enhancing already existing practices.

Transferability

The model of drop in centres is one which can be transferred and replicated. The members should be encouraged to determine their own programme of activities and be independent of the mental health services. This builds on an independent approach and encourages greater uptake of activities.

Mainstreaming Potential

This is a community based programme which encourages and supports social inclusion. This approach is in keeping with the future direction of the mental health services to be more independent and community based. National policy advocates the importance of encouragement leading to self determination.

Costs of the Project

Cost of the project is approximately 7,000 to support running costs of the centre and activities.

People involved in the Project (number of people and profession)

There are ten members involved at present.

Strengths and Weaknesses of the Project

Strengths of the project include the active and sustained promotion of social inclusion while respecting the choices of the members.
The main weakness of the project are resources both financial and premises. The centre is small and cannot cater for large numbers. As the demand for members is increasing it will be necessary to consider a larger premises.

Contact Person for the Project

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ITALY

Hearing Voices Self-Help Group and Relatives Self-Help Group

Description

This project has been established in Prato by AISMe with the support of the city council and of the mental health service. At the beginning, the user group has been formed within the service, in a second phase it has been transferred in a place owned by the city council. The relative group has been established later in accordance with the user group in order to involve everyone in the project in this new methodology (inspired by M. Romme).

Aims

The project aims to help people to cope with their voices (both users and relatives) and to fight the stigma, since in Italy people hearing voices are considered very seriously mentally ill.

Area

Education, Health, Social services, Training

Effectiveness

The project's activities, methodologies and approaches are useful with regard to the needs of people with mental health problems, in access to health and social services, education, training services, as well as in the protection of their civil and human rights.

The project's costs (human and financial resources) correspond to the benefits (increased social inclusion) resulting from it.

Sustainability

The project's impacts are in line with the needs of people with mental health problems.

There are some necessary capabilities or inputs of the organisation implementing the practice (knowledge regarding this new methodology, financial and human resources, cooperation with all stakeholders, long-term strategic planning) that are needed to ensure that the project's sustainability.

Innovation

There are innovative aspects of the project and its methodology of delivery to people with mental health problems. It is effective in terms of quantitative and qualitative results.

Added Value

The project's activities, methodologies and impacts make a significant contribution with regard to the needs of people with mental health problems.

Transferability

The practice and its related materials are potentially transferable to other countries and communities, yet flexible and adaptable to local conditions facilitating the feeling of ownership. There are many examples abroad. It is practical, low in complexity, manageable within local resources and reasonable with regard to human resources and financial costs.
The practice contains guidelines for replication, including statements as to which elements in the programme are vital for maintaining its effectiveness and which elements are open for adaptation to local needs. There is an international network "Intervoice" which allows exchanges of experiences and supervision.

Mainstreaming Potential

The practice is relevant to national and local policy and it has an added value compared to policies deficits.

Costs of the Project

15.000 Euros per year

People involved in the Project (number of people and profession)

3 professionals (1 from AISMe and 2 from the service), 10 voice hearers an 7 relatives

Strengths and Weaknesses of the Project

Strengths of the project: self-help for the people; fighting the stigma.
Weaknesses of the project: dominance of the medical model.

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Local Mental Health Systems

Description
A self help centre run in collaboration with mental health users has been established in Prato and Florence. One of the main activities is the organisation of exchanges of experiences and monitoring of different models of interaction at the local level among associations, services and local governments. There is an informal network of local committees composed of users, relatives, service providers, local politicians and managers. Each year, since 2002, a Local Mental Health Systems seminar is organized in Prato to allow all the participants to come together.

Aims
The project aims to monitor and help the development of better ways to help people with mental heath problems at local level through the joint collaboration of users, relatives, service providers, local politicians and managers.

Areas
Education, Training

Effectiveness
The project's activities, methodologies and approaches are useful with regard to the needs of people with mental health problems.

Sustainability
There are some necessary capabilities or inputs of the organisation implementing the practice (knowledge in research both clinical and sociological, financial and human resources, cooperation with all stakeholders, long-term strategic planning that ensure that it is suitable for the purpose).

Innovation
There are many innovative aspects of the project and its methodology of delivery to people with mental health problems. Associations, users and relatives are actively involved in the project since late 1980s.

Added Value
The project's activities, methodologies and impacts make a significant contribution with regard to the needs of people with mental health problems, in access to health and social services, employment, education, training services.
The practice's activities, methodologies and impacts make a significant contribution with regard to already existing practices and policies in the area of social exclusion.

Transferability
The practice and its related materials are potentially transferable to other countries and communities, yet flexible and adaptable to local conditions.

Mainstreaming Potential
The practice has an added value compared to policies deficits.
There is a coherent strategy of the practice's incorporation into respective policies.

Costs of the Project
20.000 Euros per year

People involved in the Project
Associations, professionals, users, relatives, universities, local authorities

Strengths and Weaknesses of the Project
Strengths of the project: to provide adequate theories and methodologies for innovative practices.
Weaknesses of the project: dominance of the medical model and of the therapeutic approach.

Contact Person for the Project
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Supported Housing

Description
The project offers mutual support amongst people with mental health problems in finding flats in the community where to live together. The flats usually belong to the users and to their families, sometimes to the municipality. The project is run by AISMe with the support of the local health and social services.

Project Aims
The project aims to give more choice and autonomy to people with regard to housing.

Areas
Health, Housing, Social services

Effectiveness

The project's activities, methodologies and approaches are useful with regard to the needs of people with mental health problems who are living for many years in rehabilitation services and wish a live more independently.
The project's costs (human and financial resources) are very high but correspond to the benefits (increased social inclusion) resulting from it.

Sustainability

The project's impacts are in line with the needs of people with mental health problems, in access to housing.
Financial and human resources are necessary and may come from the health and social services. It is necessary that cooperation is established between all stakeholders (users, relatives, services and municipality).

Innovation

For Italy and Tuscany this project is innovative as well as its methodology of delivery to people with mental health problems.
It is not very effective in terms of quantitative results but very effective in terms of qualitative results (better autonomy and choice, increased social inclusion through better coordination of services and associations). There are many benefits of the innovative approach for people with mental health problems at individual and collective level.

Added Value

The project's activities, methodologies and impacts make a significant contribution with regard to the needs of people with mental health problems, in access to a wide range of services, health and social services, employment, education, training services, transport, leisure activities etc., and with regard to already existing practices and policies in the area of social exclusion.

Transferability

The project and its related materials are potentially transferable to other countries and communities, yet flexible and adaptable to local conditions facilitating the feeling of ownership.
It is practical, i.e. low in complexity, manageable within local resources and reasonable with regard to human resources and financial costs.
The project does not contain general and accredited guidelines for replication, including statements as to which elements in the programme are vital for maintaining its effectiveness and which elements are open for adaptation to local needs.

Mainstreaming Potential

The project is relevant to national and local policy; it has an added value compared to policies deficits and there is a coherent strategy of the project's incorporation into respective policies.

Costs of the Project
30.000 Euros per year

People involved in the Project (number of people and profession)
AISMe, three users and related family members

Strengths and Weaknesses of the Project
Strength of the project: independence of people with mental health problems.
Weakness: intrusion of relatives.

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Women with Mental Health Problems in Prisons

Description
The project works with women with mental health problems who get time off from the Florence prison three times a week. A place has been organised where it is possible to carry out some social activities.

Aims
The project aims at the social inclusion of women who are going to live back in their social environment.

Areas
Education, Health, Social services

Effectiveness
The project's activities, methodologies and approaches are useful with regard to the needs of women with mental health problems, in access to health and social services, education, leisure activities as well as in the protection of their civil and human rights.

The project's costs (human and financial resources) correspond to the benefits (increased social inclusion) resulting from it.

Sustainability

The project's impacts are in line with the needs of women with mental health problems.
There are enough necessary capabilities or inputs of the organisation implementing the practice (financial and human resources, cooperation with all stakeholders, long-term strategic planning) that ensure that it is suitable for the purpose.

Innovation

There are many innovative aspects of the practice and its methodology of delivery to women with mental health problems.
It is effective in terms of quantitative results (small number of people - they need special permission from the judge - with better access to health and social services, education, training services, transportation, leisure activities etc.) and qualitative results (e.g. increased social inclusion through better coordination of services).

Added Value

The project's activities, methodologies and impacts make a significant contribution with regard to the needs of women with mental health problems as well as with regard to already existing practices and policies in the area of social exclusion.

Transferability

The project and its related materials are potentially transferable to other countries and communities, yet flexible and adaptable to local conditions facilitating the feeling of ownership. It is necessary, however, to compare the legal systems in the different countries.

Mainstreaming Potential

The project is relevant to national and local policy.
It has an added value compared to policies deficits.
There is a coherent strategy of the practice's incorporation into respective policies.

Costs of the Project

20.000 per year

People involved in the Project

5-7 women from the prison, 2 volunteers, 2 professionals

Strengths and Weaknesses of the Project

Strengths of the project: fight against stigma.
Weaknesses of the project: complexity at a legal level.

Contact Person for the Project

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POLAND

Language of Psychiatry in Everyday Life, Marketing, Media and Politics

Description

The project covers a series of "round table" discussions in groups consisting of people with psychiatric history (ex-users and users of psychiatry) as well as professionals (psychologists, psychiatrists, sociologists, social workers, nurses, specialists in linguistics, philosophers and scientists involved in communication studies, marketing specialists), journalists and politicians. Conclusions from the previous series of discussions are also taken into account in their subsequent rounds. Discussions are tape-recorded, authorised and published.
The project is realised by the Coalition for Mental Health and TOPOS Centre, in co-operation with other NGOs and different supporting stakeholders (for example the Warsaw Royal Castle Museum).

Aims

The basic aims of the project are expressed in its subtitle: overcoming social exclusion at the level of education, information and knowledge systems. In contemporary societies these factors have a decisive influence on social exclusion in other areas (for example in the area of employment).
The content analysis of the records of the discussions indicates hidden links between social exclusion and some social clichés and stereotypes concerning mental illness and mentally ill persons. Such stereotypes and clichés often become inherent constituents of self-identity of many people. This also refers to people with diagnosis of mental illness and has an impact on their ability to cope with their problems and to develop a recovery approach.
Social exclusion means, first of all, exclusion from participation in social communication. The project creates opportunities for people with mental health problems to participate in public discussions and to initiate social dialogue on crucial questions related to social exclusion and inclusion.
The project aims also include:

- describing and making apparent to the wider public clashes and conflicts of opinions, beliefs and valuations concerning social exclusion and inclusion and their impact on education, information and knowledge systems.
- showing, that such conflicts could be solved in an open way, by discussion and introduction of a more reflective approach to these areas of social life, which are governed by social stereotypes.
- Existing practice of discourse between professionals in mental health and "lay" persons is usually somewhat paternalistic. The project is aimed at organising discussions on a partnership basis and at creating friendly relations between participants. It is expected that participants of the discussions will play significant roles in changing information, knowledge and education systems concerning mental health.
- the most desired effects of the project are innovative activities, inspired by the discussions (or by reports from discussions), changing the real life of

people with mental health problems and their families, helping them to overcome social exclusion in different areas (education, employment, housing, etc.). For people with mental health problems and their families participation in the project means sometimes learning about possibilities of successful living with the disease and a recovery approach.

Areas

Education

Effectiveness

The effectiveness of the project is measured by questionnaires and semi-structured interviews. It is assumed that participation in such a form of social dialogue has long-lasting effects. Such participation can bring about transfer of information, knowledge and skills as well as a shift of attitudes and values. An impact of printed publications and especially internet publications is not as strong as personal participation in a debate, but publications are addressed to a wider range of interested people.

Sustainability

The project belongs to the important wave of activities of large groups in contemporary societies, involved in building more coherent, clear and verifiable information and knowledge systems on mental health and their application in education systems. The long lasting effects of the project are connected with the application of publications produced in its framework as educational materials and a starting point of other, similar projects. Long-lasting effects of the project are also related to "experienced knowledge" of individual participants. Even small changes in experienced knowledge may have a significant impact on activities and forms of participation in everyday life situations that enable people to overcome social exclusion.

Innovation

Topics included in the project were usually discussed only in literary circles or among mental health professionals. In the framework of the project new participants were introduced and acknowledged as partners in such discussions.
A new approach to solving conflicts of opinions, beliefs and valuations in the area of mental health has been developed.

Added Value

Some round table discussions organised in the framework of the project became a kind of a "theatre" and appeared to be very attractive to participants and to observers. The discussions became a pattern for many similar events, organised by interested organisations and were repeated many times.

Transferability

Such projects are transferable to different social contexts, but success is only possible in some cultural conditions.

Mainstreaming Potential

In case of this project mainstreaming means, a/o:

- its impact on education systems (a/o different forms of health education and education of professionals);
- its impact on conflict resolution by open discussion; hidden clashes, games and fights are normal in many areas of social life, a/o in the area of social exclusion and inclusion; a culture of "open discussion" develops slowly, but seems to be very effective in contemporary societies;
- its potential impact on language of public discourse, language of marketing and political debates;
- its potential impact on self-awareness or self-identity of users and professionals in the area of mental health and health care;
- bringing about better, more sophisticated articulation of inclusion approach in civil society and local communities.

Costs of the Project

All interested people participated in the project on a honorary basis (including professors of psychiatry, linguistics, etc.).
Rooms in the Warsaw Royal Castle were offered at very little (symbolic) costs; tea and coffee during the breaks was accessible in Castle's restaurant. It was only necessary to cover postal expenses and some editorial and publishing expenses.
It would be much easier to organise such a project and especially to spread out its results having indispensable resources.

People involved in the Project

About 30 persons participated in the round table discussions as speakers and about 400 as observers.
Professions of participants:

- computer specialists, actors, musicians, teachers, farmers, clerks, etc.
- psychologists, psychiatrists, sociologists, social workers, nurses, specialists in linguistics, philosophers and scientists involved in communication studies, marketing specialists.

Strengths and Weaknesses of the Project

Strengths: Spontaneity and experience of many participants, among them so called "users and ex-users" of psychiatry. Both participants and observers of discussions enjoyed the meetings. Discussions were really interesting for all participants. Some participants described them as similar to a theatre play. Some users and especially family members of mentally ill people reported the experience of something like catharsis.
Involvement and support of many people from literary circles and professors of psychiatry and linguistics, of journalists, etc.
Some selected papers (or parts of them), prepared by winners of the competition "Mental health - our problem", played an important role as a background for discussions.
Weaknesses: Insufficient resources to involve some paid technical assistants and "PR" specialists. Such means would help to achieve broader and better effects, especially in relation to marketing.

Contact Person for the Project

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Theatre Against Social Exclusion

Description

The project is realised by a theatre group, which has been active since 1995. The two expressions used to describe this activity are: "To feel self-fulfilled on the stage" and "Open theatre group".
There are 10-20 people actively participating in the group. About half of them have been in the mental hospital for several times. The others are students of the Music Academy in Wrocław.
The project consists of two parts. The first part is a theatre spectacle and the second is a dialogue with the audience just after the performance, carried out by the group members (mainly by non-professional actors with mental health history) and workshops for the target groups of spectators. So far they have included groups of social workers and students of social work, policemen, municipal guard workers, nurses and priests.
The performances have been attended already by thousands of spectators. In Wrocław the group usually performs on the stage of the Music Academy of Wroclaw. It was also hosted by local theatres in other cities (Bydgoszcz, Lodz, Cracow, Warsaw), e.g. the prestigious Centre of Contemporary Art in Warsaw.
Some of the plays performed by the group (e.g. "Windaerotherapy", "Where you are", "Psycho-dancing") have adopted texts written by persons with a mental health history. The group prepared among others "Faust" by Goethe and "Don Quichotte" by Cervantes.
The group works within the framework of the Lower-Silesian Association of Active Rehabilitation ART. It is supported by the Musical Academy in Wrocław, the Municipal Council of the City of Wrocław, the Wrocław Mental Hospital and the Fund of Civil Initiatives.

Aims (relating to social exclusion)

The project has the following aims:

- Combating social exclusion by changing social stereotypes of persons diagnosed as mentally ill. Introducing new methods of action in this area (combining theatre performance with dialogue with the spectators and education workshops for target groups).
- Providing new possibilities of participation in the activities against social exclusion of people with mental health problems (as co-authors of the screenplays, lay actors, speakers in the dialogue on social exclusion and solidarity, presenters during the education workshops).
- Introducing new non-conventional forms of education for the groups of professionals which can be very effective in preventing and combating social exclusion.

Areas
Education, Leisure

Effectiveness
With relatively small expenditure it was possible to achieve remarkable effects under this project:

- due to significant involvement of all the members of the theatre group;
- due to their long experience and qualifications obtained in the course of the group's activity;
- due to support of professional institutions and mainly the Music Academy.

Sustainability
Social stereotypes, including that of a mentally ill person are long-lasting and resistant to the changes. They are very difficult to abolish by discursive methods only. It is art, influencing different areas, that brings about required results, non-achievable otherwise.
In order to accomplish the durability of the effects of the project, it is necessary to promote them and to continue and develop the project as such, preferably in co-operation with other similar groups.
Both the theatre group and the Association ART have been well prepared for the project and seem to be well prepared for its development and continuation.

Innovation
The innovative nature (on a national scale) can be seen in the participation of persons diagnosed as mentally ill and students who have not had any experience with psychiatry. Non-professional actors, persons with psychiatric history and students of music therapy, work together to fulfil certain tasks, but not in the patient-therapist relation.
The innovative character with reference to social exclusion is also present in combining theatre performance with dialogue with spectators and education workshops for target groups.

Added Value
The realization of the project has been initiated in the period of the implementation of the Mental Health Protection Act and its following amendments (the last one took place in January 2006). The project is highly appreciated as a good source of information concerning mental health problems and could have an influence on the policies in this area.
The theatre group realizes practically what its members try to convey during the dialogue and workshops accompanying performances, the integration of persons with psychiatric history and persons without such experience.
Successful theatre performances influence the achievement of other goals of the project and effective workshops. Persons with psychiatric diagnosis revealed not only literary talents and perfect acting skills, but also responsibility and discipline without which the artistic success of prepared spectacles and success of the workshops would be difficult to achieve.

The members of the theatre group of Art Association are recognised to be experts in the area of information on mental health.

Transferability

The goal of combating social exclusion can principally be accomplished by any other theatre group engaging people with mental health problems. There are a few groups of this type in Poland performing at a high artistic level. Sometimes they seem to prefer to introduce the audience into some other, specific world or subculture of the mentally ill than to demonstrate their possibility of recovery. It is difficult to decide whether such an attitude promotes their inclusion or just the opposite - adding to their social exclusion. Discussion and research in this area is needed.
Positive results could be brought about by encouraging a greater number of theatre groups to actions aimed at combating social exclusion. Their joint efforts and presence in many towns all over the country or even Europe could result in shaping the attitudes of politicians, artists, journalists, social workers, doctors etc.
The participation in the project on "Good practices combating social exclusion of people with mental health problems" can be helpful in undertaking such actions.

Mainstreaming Potential

The project follows the postulated mainstream of the mental health policy described in the national programme, which is in accordance with the mental health act in force (adopted in 1994 and amended recently in 2006).
This project, carried out in Wrocław, had a good effect on the mental health policy in the city of Wroclaw and in the region. It should be widely promoted so as to exert influence in the scale of the country.

Costs of the Project

The funds for 8 recent series of education workshops completed by theatre performances have been gained by the Lower-Silesian Association of Active Rehabilitation ART in the amount of 18000PLN. The resources were provided b the municipal authorities.

People involved in the Project

Among the project participants there are non-professional actors who took part in the first performance some 10 years ago. New people with mental health history are also joining.
They are at different ages (from 18 to 60), with different levels of education and social-economic position. Some young people who left school after the crisis have been able to restart secondary school and higher education. For others success on the stage provides motivation for taking a job in accordance with their qualifications and a chance to return to normal life. For all the participants this project means a form of mutual assistance and self-help, but also helps to discover their abilities and talents as writers, actors etc. Frequently it leads to higher self-evaluation and self-assurance.
The project initiator is a psychologist, music therapist and theatre director. For three years now she has co-operated with a person who has pedagogical and bibliotherapy education and has undertaken the tasks of the manager of a theatre group. All the other members of the group are students of music therapy at the Music Academy

who can gain experience of contacting persons with mental health problems not in the patient-therapist relations but as partners in common tasks. In this way they acquire skills and knowledge indispensable in therapy, which stimulates return to active life (based on the so called recovery approach).

Strengths and Weaknesses of the Project

Strengths: co-operation between the association, many individual people and prestigious institutions under the project; the project allows people with mental health problems to speak about their problems in their own way.
Weaknesses: too modest resources assigned to project promotion; too little discussion and not enough effort to use the experience and skills of the members of the group to introduce (on wider scale) creative occupational therapy in Poland in view of taking a job and to return to "normal life".

Contact Person for the Project

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SCOTLAND

HUG Communications Project

Description

HUG, the Highland Users Group, is a collective advocacy group, which represents the interests of users of mental health services across the Highlands. The group's main aims are to improve the way in which users of mental health services are treated by campaigning to improve the rights, services and treatment of people with mental health problems and challenging stigma and discrimination through the work of the Communications Project.

The HUG Communications Project was established in 1999 as people with mental health problems living in the Highlands identified stigma as being one of the major barriers they have to face.

Aims

The aim of the project is to challenge the stigma of mental illness, and to raise awareness and understanding of mental health issues.

The main strands of work of the Communications Project are to:

- Support users of mental health services to speak out about their lives.
- Deliver a mental health educational programme for young people.
- Deliver user-led mental health awareness training to professionals, such as psychiatrists, social workers, teachers.
- Media and PR work to increase public understanding and to challenge negative, irresponsible reporting on mental health issues.
- Produce training DVD's based on users' personal testimonies.
- Using Information Communication Technologies to explore innovative ways of involving people.
- National and International Work. To share good practice in user-involvement and anti-stigma work throughout Scotland and Europe.

Areas

Education, Training

Effectiveness

The work of the Communications Project supports the needs of people with mental health problems by:

- Giving a voice to people with mental health problems.
- Reducing stigma and discrimination.
- Improving the skills, confidence and self-esteem of service users.
- Increasing knowledge and understanding of the issues faced by people with mental health problems.
- Improving the wellbeing and personal/social development of users of services.
- Improving attitudes and understanding of young people.

- Ensuring accurate and responsible reporting of mental health issues in the media and educating the wider general public about the lives and experiences of service users.
- Improve communications (and ultimately service delivery) between people with mental health problems and professionals.
- Increasing understanding of how people with mental health problems wish to be treated and encouraging good practice in the treatment and care of mental health service users.
- The success of this work is based upon the unique involvement of trained and supported users of mental health services, who work in a collaborative way with our key target groups to learn from each other and work together to reduce stigma and raise awareness of mental health issues.

HUG reaches out to people with mental health problems across the Highlands of Scotland and finds solutions to combating their exclusion by overcoming psychological and geographic barriers to participation, and promoting inclusiveness and equal opportunities by:

- Paying full user-involvement expenses (e.g. childcare, subsistence, travel).
- Meeting people in their local communities (overcoming barriers of rural isolation/lack of transport or confidence).
- All communications in understandable English.
- Newsletters, minutes and reports on tape/large print if requested.
- Members' skills and confidence developed through training, work placements and shadowing.
- Ground rules for meetings to ensure safety.
- Volunteer placements support full volunteer rights and good practice, such as induction, training, and on-going support/supervision.
- Fully accessible office.

Other ways in which HUG ensure accessibility and equality of opportunity:

- Structure of HUG network: To ensure that HUG was accessible it was agreed that it wouldn't be centrally located, except for the administration, but it would generate a network of groups across the Highlands (branches) and meet where people felt comfortable.
- Reports: Are written in plain English and describe the full range of opinions of the members: opposing points of view are welcome in recognition of the fact that we are all different individuals and hold a variety of differing beliefs.
- Steering Group: the HUG Round Table is 100% user-led.
- Open-door policy: HUG operates an informal open-door policy which enables any member to express their views and feelings about the work and the way in which the project is run and managed.
- Encouraging participation: a questionnaire is sent to all new members detailing the wide range of ways to be involved. Workers follow up by visits to individuals (in their own home/communities if needed) to discuss opportunities for involvement.

In terms of value for money and outcomes/impact this work is extremely effective and efficient. The work of the Communications Project is carried out by two part-time workers (= to 47 hours per week), a core group of 20-25 HUG members and the vital and strong partnership links we have with other agencies (particularly statutory agencies) which enables the project to undertake a substantial volume of work.
It is also important to view this work in the context of the geography and culture of the Highlands.

Sustainability

Ongoing consultation and feedback from the members (collated via HUG reports, branches meetings, independent focus groups, self-reflection forms and informal feedback to staff) and decision makers/statutory service managers strongly illustrate that the impact of the Communications Project is significant in meeting the needs of service users.

The necessary capabilities or inputs of the organisation implementing the practice are:

- Consultation and involvement at all levels and areas of work.
- Direct involvement of core group of members.
- Dedicated staff time.
- Workers have unique relationship with members due to shared understanding of living with mental illness.
- Partnerships with other agencies.
- Core project funding ((£75-90,000 per year)

The economic impact of mental illness and stigma is huge: only 21% of people with long-term mental illness were employed - the lowest of any disabled group. The cost to the economy of missed employment opportunities is £23bn a year. Less than four in 10 employers said they would recruit someone with mental health problems.
By reducing stigma and giving users the skills and confidence to access employment the negative economic impact can be reduced.

Innovation

The users of mental health services can play a crucial role - they are the ones who experience mental illness and can give a unique and realistic perspective that will not be found elsewhere.
HUG members are directly involved in all aspects of the work of the Communications Project, including: participating in training to professionals; educating young people on mental health issues; speaking to the media; speaking at conferences and facilitating workshops and seminars; planning DVD/video production; producing HUG newsletters; developing website; being committee and board members.

The effect of changing attitudes and reducing stigma across the Highlands include:
Quantitative results:

- 25-30 HUG members are actively involved in delivering the key elements of the Project.
- 320 HUG members are empowered to speak out about their experiences through consultation, use of technology and getting their views across in HUG publications.
- 6-8 HUG members take part in training, e.g. media and communications skills.
- 4 new members shadow workers and active HUG members, e.g. training.
- Media and PR campaign reaches out to the 1 in 4 of the population who will experience mental health problems at some point in their lives.
- Monthly reporting on mental health issues in the local or national media
- 4 feature articles bring mental health issues into the public domain.
- 12 user led training sessions delivered to professionals.
- 150-200 professionals hear direct testimony from users.
- 10 young people are involved in the Peer Education project.

- 200 young people via Personal Social Education classes, 150 young people through the interactive drama.
- Increase in the number of young people accessing help and support through child and adolescent services.
- Produce 3 educational/training DVD's of direct personal testimony reaching 200 professionals/young people.
- 3-4 newsletters will be produced (by HUG member on supported placement) and distributed to 600 people.

Qualitative results:

- People experiencing mental health problems will feel less isolated within their communities, be more active citizens and no longer feel ashamed or stigmatized as a result of their illness.
- HUG members will have increased confidence and gain specific skills e.g. communications and group work skills.
- Users of services will have a louder and more effective voice in speaking out directly to improve services and treatment and challenge stigma/discrimination.
- People experiencing mental health problems for the first time will seek help earlier.
- Professionals will develop good practice in the treatment and care of service users.
- There will be improved communications (and ultimately service delivery) between people with mental health problems and professionals.
- Young people will gain a greater understanding of mental health problems and issues and will act with greater empathy towards people experiencing mental health problems.
- Young people experiencing mental health problems will feel more confident in receiving support and understanding from their peers and encouraged to access professional services if required.
- The media will report on mental health issues in a more responsible, accurate and balanced way.
- A reduce in rural isolation and strengthening of the Highland-wide communications by utilizing a range of Information Communication Technologies (including an accessible and interactive HUG Website).

HUG members report an overwhelmingly positive effect of the HUG's anti-stigma work, with people reporting: increased self-confidence; enhanced self-esteem; feeling more valued; being more proud of who they are; experiencing improved social networks; sense of empowerment; reduction in stigmatising actions and attitudes, and recovery from illness.

"[getting involved] in training was a therapy ... a way of giving something back and gaining self-worth and self-esteem ... it is empowering."

Young people credit people with mental health problems as more 'credible' in the messages they convey and professionals consistently state that the direct personal testimonies of HUG members is unique within their training experiences and can (and does) improve professional practices.

Added Value

The work of the Communications Project contributes to, and adds value to, the following Highland, national and European practices and policies:

- National Programme for Improving Mental Health and Wellbeing of the Scottish Population, Scottish Executive.
- See me (Scotland's national anti-stigma campaign around mental illness).
- Choose Life (Scotland's Suicide Prevention Programme).
- Mental Health Action Plan For Europe

National policy consistently advocates the importance of developing and sustaining a preventative agenda; Choose Life: A National Strategy and Action Plan to Prevent Suicide in Scotland; National Programme for Improving Mental Health and Wellbeing.

Transferability

This work could be transferable providing it is lead by an independent user organisation with skilled and committed workers (who, ideally, have direct experience of mental illness themselves as this builds up strong trust and a unique relationship with staff and users).

Financially there is an on-going issue with gaining sustainable and longer term funding as none of this work is funded by government/statutory agencies and is dependent on annual fundraising.

The work also requires strong project management skills and an ability to work under pressure, and most importantly to support and enable the involvement of people in the midst of mental illness.

HUG has produced a number of reports detailing the work of the Communications Project, which is part of its commitment to sharing good practice and helping others learn from its experiences and the key lessons learnt over the last 7 years.

Mainstreaming Potential

There is a strong regional, national and international policy commitment to eradicating stigma and promoting the social inclusion of people with mental health problems. National and European directives advocate the importance of sustainable and proactive preventative and educational work within this field.

The work of the Communications Project is incorporated into Highland and Scottish policy documents.

Costs of the Project

£75-90,000 per year

(core running costs = £60,000 with project costs variable depending on work undertaken)

People involved in the Project

Two part-time HUG project development workers (= 47 hours per week) and core group of 20-25 HUG members.

Partnership work is essential to this project e.g. with staff from voluntary and statutory services, including child and adolescent services, education services, schools and community group.

Strengths and Weaknesses of the Project

Strengths:

- User-led
- HUG members receive on-going support and training
- Breadth of experience of our members
- Willingness and commitment of members to give personal (often painful/emotional) testimony
- Strong trusting relationship between worker and members
- HUG has strong reputation locally and nationally
- Supported by workers with experience themselves of mental health problems
- HUG's approach is not confrontational but is about learning and sharing from each other i.e. users and professionals
- Strong partnerships with statutory and voluntary agencies

Weaknesses:

- Capacity of HUG members i.e. relatively small pool of very active members
- Capacity of staff to support greater user involvement
- Unpredictable nature of mental illness
- Lack of time for planned project development
- Wide geographical area
- Cost of involving users of services - again due to geography/distances to travel
- Secure, long-term funding

Contact Person for the Project

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http://www.hccf.org.uk/projects/HUG/HUGcom.html

HUG Communications Project - 'Free Your Mind' (Youth Education)

Description

HUG, the Highland Users Group, is a collective advocacy group, which represents the interests of users of mental health services across the Highlands. Our main aims are to improve the way in which we, as users of mental health services, are treated by campaigning to improve the rights, services and treatment of people with mental health problems and challenging stigma and discrimination through the work of the Communications Project.

The HUG Communications Project was established in 1999 and aims to challenge the stigma of mental illness and to campaign for greater awareness and understanding of mental health issues. Over the past 5 years a key target group for this work has been young people (14-18 years old).

Aims

"The work you all do at schools is brilliant as it challenges the stigma that is still around with children. I was involved with the school work a few years ago at Wick High and will never forget the experience." HUG Member

"...your direct work with young people has borne much fruit. Education, Social Work and Health staff have all become not only better informed, but report being more confident and competent when they address mental ill-health as an issue as a consequence of your input. The testimony of young people themselves illustrates the positive impact made on them and their future lives." Integration Manager, Inverness

Aims of the young people's work are to:

- Raise awareness and understanding of mental health issues with young people.
- Challenge stigma and discrimination.
- Help young people to discuss mental health issues with greater confidence and create an open, tolerant environment.
- Provide relevant, accessible information on a wide range of mental health issues.
- Provide insight and understanding into the lives and perspectives of people who experience mental health problems.

By:

- Working with young people (14-18 years old) via the Personal Social Development curriculum in schools.
- Piloting a peer education project in one secondary school.
- Using interactive drama (Eden Court STIGMA play) to explore issues of self-harm, teenage depression, attitudes and misconceptions, and treatment and recovery.
- Working with youth theatres where young people research, write and perform a play on mental health themes.
- Working in partnership with the child and adolescent psychiatry via the Self-harm Forum.
- Providing support and advice to schools in mental health issues.

Through this work young people:

- Gain greater knowledge of a range of mental health issues.
- Are more understanding and tolerant of people experiencing mental health difficulties.
- Act with greater compassion and empathy towards their peers experiencing emotional and mental health problems.
- Acquire the language, skills and confidence to talk about emotional and mental health issues.
- Act with greater sensitivity and awareness towards young people who self-harm.
- Develop more supportive peer relationships.

Young people experiencing difficulties are able to ask for information, advice and support at an early stage.

Areas

Education, Health, Leisure, Social services

Effectiveness

1) Users of services - The impact of involvement for HUG members currently taking part in work with young people report an overwhelmingly positive reaction due to the active role they play in challenging stigma/stereotypes. People have highlighted a wide range of effects e.g. developing confidence in communicating with young people; enhanced self-esteem and skills; being able to raise awareness about subjects that were previously taboo; increased self-worth and a sense of achievement that they are making a difference to people's lives, as these comments from two HUG members demonstrate:

"... it has increased my confidence since and given me a greater sense of purpose to my life. My personal life experience has been validated."

2) Young people - The language that young people use to talk about mental health issues is at best confused and unclear, and at worst disturbing and extremely inaccurate:

"Psychopaths, serial killers, paedophiles, schizophrenic."
"Crazed people capable of inhuman things."

Yet, these same pupils, following a session with HUG, said that their attitudes had changed and that now:

"I understand more about the illnesses."
"I understand mentally ill people much more ... they just seem normal."

Our experience over the last few years has shown that young people are very receptive to learning about mental health issues and are often less set in their attitudes than adults:

Through this work young people gain a greater understanding of mental health problems and issues. Improved awareness of mental health issues and an open, tolerant society will help young people in their relationships, their ability to make decisions and how they make sense of life experiences. Young people experiencing mental health problems will feel more confident in receiving support and understanding from their peers and encouraged to access professional services if required.

3) School staff benefit from this project by having a greater knowledge of mental health issues, feeling more able to support young people experiencing mental health difficulties, and will have an enhance their ability to respond appropriately and will know where to access help and support.

HUG reaches out to people with mental health problems across the Highlands of Scotland and finds solutions to combating their exclusion by overcoming psychological and geographic barriers to participation, and promoting inclusiveness and equal opportunities by:

- Paying full user-involvement expenses (e.g. childcare, subsistence, travel)
- Meeting people in their local communities (overcoming barriers of rural isolation/lack of transport or confidence)
- All communications in understandable English
- Newsletters, minutes and reports on tape/large print if requested

- Members' skills and confidence developed through training, work placements and shadowing
- Ground rules for meetings to ensure safety
- Volunteer placements support full volunteer rights and good practice, such as induction, training, and on-going support/supervision
- Fully accessible office

Other ways in which HUG ensure accessibility and equality of opportunity:

- Structure of HUG network: To ensure that HUG was accessible it was agreed that we wouldn't be centrally located, except for our administration, but would generate a network of groups across the Highlands (branches) and meet where people felt comfortable.
- Reports: Are written in plain English and describe the full range of opinions our members have: we happily include opposing points of view in recognition of the fact that we are all different individuals and hold a variety of differing beliefs.
- Steering Group: the HUG Round Table is 100% user-led.
- Open-door policy: HUG operates an informal open-door policy which enables any member to express their views and feelings about the work and the way in which the project is run and managed.
- Encouraging participation: a questionnaire is sent to all new members detailing the wide range of ways to be involved. Workers follow up by visits to individuals (in their own home/communities if needed) to discuss opportunities for involvement.

In terms of value for money and outcomes/impact this work is extremely effective and efficient. The young people's work is carried out by one part-time workers (= to 26 hours per week), a core group of 8-10 HUG members and the vital and strong partnership links we have with other agencies (particularly statutory agencies) which enables us to undertake a substantial volume of work.
It is also important to view this work in the context of the geography and culture of the Highlands.

Sustainability

On-going consultation and feedback from our members (collated via HUG reports, branches meetings, independent focus groups, self-reflection forms and informal feedback to staff), practioners and decision makers/statutory service managers strongly illustrate that the impact of the work with young people is significant in meeting the needs of service users.

The necessary requirements for implementing the practice include:

- Consultation and involvement at all levels and areas of work.
- Direct involvement of core group of members.
- Dedicated staff time.
- Workers have unique relationship with members due to shared understanding of living with mental illness.
- Partnerships with other agencies.
- Core project funding ((£40-55,000 per year)

The economic impact of mental illness and stigma is huge: Only 21% of people with long-term mental illness were employed - the lowest of any disabled group. The cost to the economy of missed employment opportunities is £23bn a year.

Less than four in 10 employers said they would recruit someone with mental health problems.
By reducing stigma and giving users the skills and confidence to access employment the negative economic impact can be reduced.

Innovation

As users of mental health services we can play a crucial role - we are the ones who experience mental illness and can give a unique and realistic perspective that will not be found elsewhere.
HUG members are directly involved in all aspects of the work with young people.

In this work HUG members and young people work together to reduce the stigma of mental illness and raise awareness of mental health issues. The direct involvement of HUG members in communicating/interacting with young people is crucial, as people experiencing mental health problems often face social exclusion and lack skills and confidence; this project helps to break down these barriers and provides opportunities for adults and young people from diverse backgrounds and experiences to come together and learn from each other.

By encouraging open discussions about mental illness and an opportunity to hear directly from users of mental health services, HUG believes young people will feel more able to discuss their emotional and mental health needs and be less discriminatory towards those who experience mental illness.

Working in mental health can be emotionally rewarding, and also potentially emotionally draining both for pupils and workers. When discussing mental ill health with young people, we aim to balance the reality of the unpleasantness of people's experience with a positive, more hopeful message that something can be done.

The effect of changing attitudes and reducing stigma across the Highlands.
Quantitative results:

- 1000 young people (13-18 year olds) annually participate in STIGMA play (play and workshops delivered to 13-14 secondary schools each September/October).
- 10-15 young people involved in peer education project.
- 8-10 young people (16-18 years old) involved in senior Youth Theatre - with an educational DVD and teachers' pack distributed across Highlands.

Qualitative results:

- People experiencing mental health problems will feel less isolated within their communities, be more active citizens and no longer feel ashamed or stigmatized as a result of their illness.
- HUG members will have increased confidence and gain specific skills e.g. communications and group work skills.
- Users of services will have a louder and more effective voice in speaking out directly to improve services and treatment and challenge stigma/discrimination.
- People experiencing mental health problems for the first time will seek help earlier.
- Young people will gain a greater understanding of mental health problems and issues and will act with greater empathy towards people experiencing mental health problems.

- Young people experiencing mental health problems will feel more confident in receiving support and understanding from their peers and encouraged to access professional services if required.

HUG members report an overwhelmingly positive effect of the HUG's anti-stigma work, with people reporting: increased self-confidence; enhanced self-esteem; feeling more valued; being more proud of who they are; experiencing improved social networks; sense of empowerment; reduction in stigmatising actions and attitudes, and recovery from illness.

Young people credit people with mental health problems as more 'credible' in the messages they convey and professionals consistently state that the direct personal testimonies of HUG members is unique within their training experiences and can (and does) improve professional practices.

Young people experiencing emotional and mental health difficulties are able to access help and support earlier and have more supportive peer relationships.

Added Value

The young people's work contributes to, and adds value to, the following Highland, national and European practices and policies:

- See me (Scotland's national anti-stigma campaign around mental illness).
- National Service Framework for Children, Young People and Maternity Services: The Mental Health and Psychological Wellbeing of Children and Young People (2004).
- National policy consistently advocates the importance of developing and sustaining a preventative agenda; Choose Life: A National Strategy and Action Plan to Prevent Suicide in Scotland; National Programme for Improving Mental Health and Wellbeing.
- Mental Health Action Plan for Europe.

Transferability

This work could be transferable providing it is lead by an independent user organisation with skilled and a committed worker (who, ideally, have direct experience of mental illness themselves as this builds up strong trust and a unique relationship with staff and users).

Financially there is an on-going issue with gaining sustainable and longer term funding as none of this work is funded by government/statutory agencies and is dependent on annual fundraising.
The work also requires strong project management skills and an ability to work under pressure, and most importantly to support and enable the involvement of people in the midst of mental illness.

HUG has produced a number of reports detailing the young people's work, which is part of our commitment to sharing good practice and helping others learn from our experiences and the key lessons we have learnt over the last 7 years.

Mainstreaming Potential

There is a strong regional, national and international policy commitment to eradicating stigma and promoting the social inclusion of people with mental health problems. National and European directives advocate the importance of sustainable and proactive preventative and educational work within this field.
The work of the Communications Project is incorporated into Highland and Scottish policy documents.

Costs of the Project

£40-55,000 per year

People involved in the Project

One part-time HUG project development worker (= 26 hours per week) and core group of 8-10 HUG members.
Partnership working essential to this project, e.g. with staff from voluntary and statutory services, including child and adolescent services, education services, schools and community group.

Strengths and Weaknesses of the Project

Strengths:

- User-led
- HUG members receive on-going support and training
- Breadth of experience of our members
- Willingness and commitment of our members to give personal (often painful/emotional) testimony
- Strong trusting relationship between worker and members
- HUG has strong reputation locally and nationally
- Supported by workers with experience themselves of mental health problems
- HUG's approach is not confrontational but is about learning and sharing from each other i.e. users and professionals
- Strong partnerships with statutory and voluntary agencies

Weaknesses:

- Capacity of HUG members i.e. relatively small pool of very active members
- Capacity of staff to support greater user involvement
- Unpredictable nature of mental illness
- Lack of time for planned project development
- Wide geographical area
- Cost of involving users of services - again due to geography/distances to travel
- Secure, long-term funding

Contact Person for the Project

Emma Thomas, Project Development Worker
http://www.hccf.org.uk/projects/HUG/HUGcom.html

MOOD Project

Description
Mental health options for older people with depression.

Aims
The project aims to identify older people who are diagnosed as having a depressive illness and to devise a range of resources to support carers and users.

Areas
Health, Leisure, Social services

Effectiveness
The project has proven to lead to:

- Improved quality of life for participants and reduced isolation.
- Evidence of reduced medication and fewer admissions to hospital.
- Over three hundred referrals in seven years.
- High weekly attendances due to accessibility and no cost to client.
- Evaluation completed by the Scottish Mental Health Development Centre highlighting cost benefits.

Sustainability
MOOD has been funded over the past seven years by the Scottish Executive Mental Health Specific Grant. In October a successful application to the Executive would guarantee three year funding from 2008-2011
Referrals come mainly from community psychiatric nurses and social workers and the increasing number of older people living longer ensures that there is a steady flow of referrals.

Innovation
This project is the only one of its kind in this part of Scotland. The group is also involved in intergenerational work and work specific to older men at risk of suicide/self harm. This is done using small activity/interest groups which bring older vulnerable and isolated people together once weekly.
Presentations are given to schools to reduce stigmatisation of older people with mental health problems. Intergenerational working with school pupils and older people ensures that barriers are broken down and old age myths are dispelled.

Added Value
MOOD uses volunteers in providing drivers and escorts to groups. Fewer admissions to institutional care and reduced medication ensure added value.

Transferability

This group could be replicated in any community. It is locally based and the area of need has a small population of around 65,000. The group is aware of local culture and needs. The project is flexible and adapts easily to changes in clients' needs.

Mainstreaming Potential

The work carried out by MOOD fits the Scottish Executive's strategy to reduce stigmatisation of mental health issues and the Choose Life aims of reducing suicide.
It meets the Local Authority Best Value standards and recognised by the Council as a valuable resource in prevention in the mental health field.

Costs of the Project

60,000 per annum

People involved in the Project (number of people and profession)

One social work qualified project leader, one part time administrator, seven seasonal workers and two volunteers.

Strengths and Weaknesses of the Project

Cost effective person centred accessible project with seven years of experience in providing this service. Excellent networking with statutory and voluntary agencies. Difficulties with transport arrangements and limited long term funding.

Contact Person for the Project

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Paths to Health

Description

Paths to Health is a national voluntary sector organisation which aims to encourage walking by supporting over 90 local health walk schemes across Scotland. Health walks are short, safe, local, low level, volunteer led walks. Paths to Health provides an enabling environment to deliver these walks by providing training, support and grants. The scale of the project depends on a community based volunteer model.
The project works at a range of levels from communities to workplaces to advocating walking at a political level.

Aims

Paths to Health's main aim is to contribute to reducing health inequalities in Scotland by supporting local health walk projects.
Paths to Health is part of "The Paths for all Partnership". The Partnership's long term vision is: A Scotland of active communities where each community has a network of paths on which people want, and are able, to use for recreation and everyday journeys. This will deliver health, community, sustainable transport and economic benefits for Scotland.

Areas

Health, Training

Effectiveness

The project specifically targets clients with mental health issues and it offers an inclusive service to clients with mental health issues. The project has developed referral pathways from Occupational Therapists and Community Psychiatric Nurses. The project promotes positive mental health. This is achieved by encouraging social networks within groups and creating a supportive environment, as well as the "feel-good factor" associated with physical activity.
In terms of cost benefit analysis, the cost to the service user is nil, the benefits are extensive. As a project, the running costs are minimal due to the community volunteer model used.

Sustainability

The aim is to help individuals, often through a transition in life (retirement, bereavement, new parents etc.) A mixture of physical activity and social interaction in led walking groups proves to be an effective mechanism in supporting individuals. Often people move away from the group to be more independent or they stay with the group to sustain new relationships. We see that people often tap into other services available locally as a result of them building knowledge and confidence.
The people centred approach means that local projects adapt to changing needs. As new opportunities arise, e.g. developing links with a post natal depression group, the project leaders adjust their plans to include new programmes to suit needs. The strength of this project is the volunteers. As walkers become more confident, many are recruited as volunteers and go on to get paid employment. In order to support the local projects, there are two regional offices (Alloa and Inverness) with eight paid staff. These staff manage a grants budget, evaluation support, training and project development.
Given the cost of ill-health in Scotland and the fact that physical inactivity is the "silent ticking time bomb" the Paths to Health project represents good value for money. In Glasgow alone, over 4000 walkers attend led health walks in city parks.

Innovation

People with mental health issues who use this service believe that it is innovative in its simplicity. Getting people active in their own communities in a supportive environment is effective. For groups solely targeted at people with mental health issues, it has proven that "walking and talking" is more effective and productive than

traditional group scenarios. The opportunities for people to take ownership of their local projects, by volunteering or steering the project are also innovation and rewarding for all.
For projects which are not targeted at mental health clients, the integration has proved to be rewarding for mental health clients. They can attend a group without having to explain their reasons for being there and they can build new relationships in a supportive environment.

Added Value

The project work makes a significant impact on the service users and the partnerships involved in making projects happen locally. Many non-health organisations have joined partnerships across Scotland and have successfully adapted the way they work to contribute to the health agenda e.g. Local Transport Officers from local authorities work through partnerships to improve the walking environment, small charitable organisations have improved relationships with community planning systems through their experiences on health walk partnerships.
The project aligns with a number of policy sectors in Scotland:

- Social justice (Closing the Opportunity Gap)
- The Access agenda (Land Reform Act)
- Let's Make Scotland More Active A Strategy for Physical Activity (Scottish Executive 2003)
- The National Strategy for Mental Health and Wellbeing
- The Scottish Executive Volunteering Strategy
- The National Standards for Community Engagement (2005).

Transferability

The original idea for "health walks" in the UK came from the sister project "Walking the Way to Health" in England. Valuable lessons were gained from their experiences and adapted the model for Scotland. Unique characteristics have been developed in the present project and expanded beyond initial expectations in terms of the size of the project and its impacts. Each locally funded project in turn has a unique set of attributes, partners, funding mechanisms, but the thread that brings them all together is the health walk message and the core role of volunteers.
All volunteers are trained by accredited trainers, using the same materials across Scotland.

Mainstreaming Potential

Walking as a form of physical activity is increasing its profile in Scotland. It is a strong element of national transport strategies, national physical activity strategies and local physical activity strategies. A new "Walking Action Framework" hopes to build on this recent growth and encourage effective collaborations across a number of sectors.

Costs of the Project

Paths to Health costs: A local 3 year project costs on average 70000 (included a full-time post and volunteer expenses)
The national support office costs include:

- Project Manager,

- 6 FTE Development Officer posts,
- 2 FTE Administrator posts,
- Grants budget (varies from year to year but approximately 150000 per year),
- Project related costs, e.g. pedometer projects,
- Training budgets.

People involved in the Project (number of people and profession)

Local level projects:

- Over 1700 trained volunteers
- around 30 Coordinator posts (range of professions) and their respective line managers
- 30 partnerships (with at least four organisational representatives per partnership from Access, transport, health etc)

National support office:

- Project Manager
- 6 FTE Development Officer posts
- 2 FTE Administrator Posts

Paths to Health Advisory Panel:

- Eight voluntary representatives from statutory and voluntary bodies.

Strengths and Weaknesses of the Project

Strengths:

- Cost effective
- Large scale/ locally relevant and sustainable
- Volunteer model
- Building effective partnerships
- Improving evaluation
- Building communities

Weaknesses:

- In some cases, funding (post grant) is a barrier.

Contact Person for the Project

Kenny Steele (Project Manager)
http://www.pathsforall.org.uk/pathstohealth/

Penumbra Youth Project Fife

Description

Penumbra youth project supports young people aged 12-21 experiencing mental health difficulties through early/crisis intervention, advice, support and skills development.
The project offers a holistic approach to supporting the mental health and well being of young people, and offers recovery focused one to one support, drop-ins, issues

based groups, creative activity groups, life-skills, outdoor activities and Action Therapy.
The project supports young people throughout Fife, through a programme of outreach support, to residential houses, homeless accommodation units, psychiatric hospitals and wards, voluntary mental health agencies, schools.

Aims

The project aims to:

- provide early/crisis intervention and alternative support to young people aged 12-21 in the community through the establishment of services that are community based and voluntary sector led, but which link with mainstream services.
- provide mental health and well being services that support young people in transition, who may be experiencing complex difficulties.
- provide advice and support on a range of issues including mental illness, stress, isolation, suicidal and self-harming feelings and actions, family breakdown, homelessness, anxiety, abuse.
- improve resilience and coping skills amongst vulnerable young people to enable them to maintain mental well being, prevent further mental illness and achieve successful independent living.
- continue to work closely with other services to improve referral routes between service providers, in addition to offering open access to young people who wish to self refer.
- reduce referral to specialist services be encouraging young people to develop the skills and confidence to deal with the difficulties they experience in their lives, thereby reducing stigma and easing the pressure on other services.
- continue to work with young people to identify problems they are experiencing first hand, their views on services and what they feel would better meet their needs.
- support young people's mental health and well being indirectly through continued awareness raising and promotion of mental health, and through offering informal support/advice to carers and professionals.

Areas

Health, Social services

Effectiveness

The project takes a holistic approach to support the needs of young people with mental health problems, providing a range of activities, in response to needs identified by the young people.
The project works to identify coping strategies and other supports, including friends and family, and develop the young person own resourcefulness, by working in a way that is recovery focused.
An aim of the project is to improve referral routes and access for young people, which we do by regular promotion of the work of the project in radio, newspapers, website, quarterly newsletter, annual review, bi-annual open days. Yong people can refer themselves by personal contact, telephone, email, letter, or be referred with their consent by another individual.

The project also provides outreach support to young people who have difficulty accessing the service, for mental health, financial or transport reasons.

Sustainability

The project is funded through the Scottish Executive Changing Children's Services fund, and contributes to the Children's Services Plan 2005-2008 overall strategy, aims and targets.
The work of the project is also influenced by The Mental Health of Children and Young People: a Framework for Promotion, Prevention and Care, and the National Strategy for Mental Health.
From an economic viewpoint, implementation is warranted through our aim of supporting young people in identifying and developing resourcefulness, resilience and coping strategies, thereby reducing their need to access specialist services.

Innovation

The project seeks to deliver a service that is recovery focused. Recovery in mental health is happening across the world. In Scotland, the Scottish Executive is promoting services that are recovery focused. The Scottish Recovery Network has been set up, and Penumbra is very closely involved in their work.
Recovery does not necessarily mean living without medication or support, or being symptom free, but brings about a decrease in focus on mental illness. It is about working out ways of coping, self-help, taking responsibility and having hope.
The project also gives every young person the opportunity to develop their own WRAP (Wellness Recovery Action Plan). WRAP is a tool developed by Mary Ellen Copeland in Arizona, and is a self-composed plan for the daily, weekly and monthly maintenance of mental health and well being, a plan for identifying and coping with triggers, and plans for managing illness and crisis.
The youth project works with young people who are vulnerable and hard to reach because of their mental health problems, housing situation, and/or chaotic lifestyle. In the year 2005/2006, the Project had 1,793 contacts with young people.

Added Value

All services and activities provided by the project are provided free of charge to young people. In addition to those mentioned above, young people can access a daily drop-in where they can have a free, healthy meal and a drink. Young people accessing the project also have their transport costs refunded. Because the project covers a very large area, young people have to travel by public transport, and potentially would not be able to afford to access support if their transport costs were not refunded.
The project makes a significant contribution to raising awareness of mental health problems and how to promote mental health. Reducing stigma in this area has an impact on young people who have previously felt excluded or marginalised because of their mental health difficulties.

Transferability

The practice and related materials are transferable to other countries and communities, and are flexible and adaptable to local conditions.

Project workers adhere to a model of support and intervention, and work under a framework that is robust enough to direct and develop work consistent with Penumbra's vision and mission, but flexible enough to support the individual needs of the young people and the particular experience and skills and experience of the worker.

The practice contains guidelines for replication.

Mainstreaming Potential

The practice is relevant to local and national policy as outlined above. Through our funding stream we are linked to local/national strategy on developing services for children and young people, as well as being represented at a local and national level on mental health, anti-stigma, participation, recovery strategy groups.

Costs of the Project

198,000 per year

People involved in the Project (number of people and profession)

Project Co-ordinator
Project Administrator
Development Worker
Project Worker
Project Worker
Support Worker

Strengths and Weaknesses of the Project

Strengths:

- The project is well supported and well represented all over Fife. Excellent contacts have been made with colleagues in Child and Adolescent Mental Health Services, Social Work, Education, and the Voluntary Sector.
- The project has established a reputation of innovation and good practice.- The project has central management support from Penumbra, and supported through the network of Penumbra Projects and through the area network of East/Central Scotland.
- The project is well supported through the Fife voluntary sector network CVS Fife, which is active in working to raise the profile of voluntary sector Projects, ad ensure representation at all levels of planning in Fife.
- The team is made up of people with a very broad range of skills and experience in mental health and youth work.
- The project is very well supported by the young people who use our services, who often recommend the project to their friends, and, as self referrers, account for almost half of all referrals.

Weaknesses:

Probably the only, but a major weakness of the Project is that it is funded on a yearly basis, with no guarantee that funding will continue past each financial year.

The impacts on the service at all levels, from a feeling of security for staff, to difficulties in planning strategically. Workers operate and plan on the basis that the project will continue to be funded, without the security of the knowledge that it will.

Contact Person for the Project

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The Moray Healthy Living Centre

Description

The Moray Healthy Living Centre (HLC) project based in Elgin has been established since 2002 after securing a £1m grant fund from the New Opportunity Fund (renamed the Big Lottery) for a period of five years. Since then, it has introduced initiatives aimed at reducing inequalities and improving the health and wellbeing of the Moray population.

The project's flagship is the Tailor Made Leisure Package (TMLP) programme which provides an individual package of relaxation and exercise for the target client group which includes those with mental health conditions, carers/young carers, medical problems, social isolation, physical, learning and sensory disabilities and older people. Clients are referred to the programme through statutory and voluntary agencies including health visitors, occupational therapists and support groups.

The project also offers a Choose Life Support Programme providing an intensive support programme for those who are suicidal or self harming. Formal research and evaluation has shown that individuals who have taken part in both programmes have experienced significant improvements in their health and wellbeing. The main reasons include staff support and the ability to take part in a non-stigmatised environment, resulting in increased self esteem.

Aims

The Project's Mission Statement is:

"To motivate, support and empower people to make positive lifestyle choices and develop life skills which will improve their health and maximise their potential to enjoy life".

Areas

Health, Leisure

Effectiveness

The project provides access to leisure activities and complementary therapies in a community social setting which is a none threatening, none stigmatised environment. The project addresses those barriers which precludes individuals from accessing leisure facilities for example transport, childcare, financial difficulties.

The project has recognised the significant difficulties individuals with mental health problems face daily and have developed a buddy scheme. The buddy scheme provides discreet, confidential support for as long as is necessary to allow individuals to improve self esteem, confidence and enhance their overall health and wellbeing. The project's external evaluators the Robert Gordon University of Aberdeen and the project has worked closely to develop specific research tools to capture both quantitative and qualitative data.
Evaluations to date have demonstrated significant improvements in individuals overall health and wellbeing including increased self esteem and confidence and ability to socialise. The evaluations have also demonstrated that individuals who have had complementary therapies have reported significant improvement in symptoms both physical and mental. The evaluation tools of the various elements of the project are constantly re-evaluated and developed further if required.

Sustainability

The project's activities, methodologies and impacts have made a significant contribution with regard to the needs of people with mental problems in accessing health, leisure and social activities. This can be demonstrated by the key programmes within the project namely: The Tailor Made Leisure Package Programme (TMLP), Health Referral Programme (HRP) and the Choose Life Support Programme (CLSP).
Tailor Made Leisure Package Programme - this programme provides an individual package of relaxation and exercise for the target client group including those with mental health conditions.

The programme addresses individual needs and barriers to participation. Clients have the opportunity to take part in complementary therapy, gym sessions, health referral programme, swimming, relaxation suite, ice skating, art classes, childcare facilities, walking groups, studio classes and self help workshops. Clients are financially supported to take part in introductory sessions of activities and therapies. Thereafter clients are assessed on an individual basis and financial support can be sourced through other partner organisations such as the local authority or voluntary organisations.

Health Referral Programme - Clients are referred by their general practitioners from throughout Moray - all 16 GP practices are registered with the programme. Clients undergo a fitness assessment to determine their level of fitness and from this information a fitness programme is developed for the individual. Each client has the opportunity to attend two sessions per week for ten weeks and is supervised throughout the duration of the programme. All staff costs are met the HLC and clients pay a nominal fee of £2.35 per session to attend.

Choose Life Support Programme - This programme is part funded by the HLC and the Local Authority. The programme provides intensive support to individuals who are suicidal, self harm or carers who are affected by the aftermath of these conditions. The programme allows individuals to access an intensive complementary therapy package which is designed to run for nine months however due to the chaotic lifestyles of these individuals this is not often the case. If individuals do not wish to take part in complementary therapy there is the flexibility to offer them other activities such as gym sessions, relaxation suite etc. The Choose Life programme includes one to one buddy support where necessary.

Fall's Prevention Support Group - This programme supports frail elderly clients who are at risk of falling or have fallen. This helps to raise self - esteem and also addresses social isolation therefore preventing deterioration in mental health. Clients who take part in the TMLP and CLSP are referred in to these programmes through a variety of statutory and voluntary organisations throughout Moray which includes Occupational Therapists, Social Work Departments, Moray Carers, Moray New Futures, and Mental Health Drop In Centres. Clients can be directed to any of the support programmes and are followed up for a minimum of 1 year by project staff.

The provision of support for mental health clients is currently being evaluated by the Robert Gordon University. The aim of this evaluation is to determine why mental health gatekeepers refer their clients into the HLC support programmes with a view to looking at how the project can be sustained at the end of the funding period in March 2007.

Innovation

The innovative aspects of the project are as follows:

- Client centred approach
- Non clinical setting
- Non stigmatised environment
- Extensive support
- Buddy Scheme
- Financial support
- Childcare facilities on site
- Wide variety of on site leisure activities
- Wide variety of on site complementary Therapy as well as outreach venues
- Working with Employment services such as the Job Centre and Employment Support Services. Developing innovative approaches to supporting people back into employment after being in receipt of Incapacity Benefit for medical conditions including mental health problems.

The HLC is effective in terms of quantitative and qualitative results. Evaluations to date have demonstrated that the innovative approach to people with mental health problems has shown that individuals have experienced increased social inclusion, increased self- esteem and confidence, increased social interaction and improvements in overall health and well-being.

Added Value

The evaluation to date has demonstrated a significant contribution with regards to the needs of people with mental health problems in accessing health and leisure services. In addition to the services already outlined above the HLC is currently involved in negotiations with Employment Support Services that have identified individuals who have already benefited from taking part in the programme. These individuals are keen to volunteer to support other individuals. These individuals will be supported by staff from the Employment Support Service. The aim of this approach is to improve the individuals self -esteem and enable them to return to paid employment in the future.

The partnership with the voluntary and statutory sector allows the project to work

directly at a local level on local policies linked to national directives in the area of social exclusion.

Moray is a rural area and has major issues regarding transport. The HLC to date has addressed this problem by working in partnership with local Taxi Companies, local authorities and voluntary car share schemes. Through negotiation the cost of transport to the individual has been reduced significantly as these companies are willing to accept HLC leisure passes as part payment. Only clients who are diagnosed with a severe mental health condition can access free transport however many of our clients do not fit into this category. Therefore the transport schemes set up through the HLC has allowed these individuals to access the programme.

Transferability

The project and its related materials are potentially transferable to other countries and communities whilst remaining flexible enough to allow individual or community ownership.
The project model is low in complexity and can use local resources and is reasonable with regard to human resources and financial cost. The project is currently working with individuals to prevent the deterioration of their mental health condition through empowerment leading to self management and self awareness. In the longer term it is hoped that evaluation and research will demonstrate a financial benefit to mainstream mental health services.

Currently there are no established guidelines for replication however this may be developed as part of the ongoing sustainability.

Mainstreaming Potential

The project is extremely relevant to national and local policy and fits into the local joint Moray Health Improvement Plan. The project is an additional service that combines the social, medical and leisure models and currently provides extensive additional resources and facilities.

People involved in the Project

HLC core staff members:

- Project Development Leader
- Leisure Link Co-ordinator
- Community Development Co-ordinator
- Training & Development Co-ordinator

Health & Wellness Team:

- 6 staff who although under the management of the project are not funded through the Big Lottery Health Referral Staff:
- 4 staff (2 full time equivalents are funded by the Big Lottery) Childcare Staff:
- 15 staff (not directly funded by the Big Lottery although come under the management of the project).

Complementary Therapy Staff:

- 5 therapists (part-time) funded by the Big Lottery

Strengths and Weaknesses of the Project

Strengths:

- Experienced and highly qualified staff
- Diverse range of activities available both on site and in outreach venues
- Strong partnership network with both statutory and voluntary organisations
- High level of monitoring and evaluation
- Formal research projects undertaken
- Unique programme models

Weaknesses:

- Funding ceases in March 2007
- Programmes require ongoing staff resources
- Change in local authority priority areas
- Ongoing funding for specific areas requires 'new' innovations which can be difficult when existing programmes are only beginning demonstrate improvements in individuals' health and wellbeing.

Contact Person for the Project

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SLOVAKIA

Center Memory

Description
The Center is a project of the Memory foundation in Slovakia. The Center is offering its activities for people suffering from Alzheimer and other forms of dementia and for the professionals that provide social care to these people.

Aims
The activities of Center Memory cover special needs. They help to solve some problems of seniors, people suffering form Alzheimer and other forms of dementia and those who provide social care to these people.

Areas
Education, Health, Leisure, Social services, Training

Effectiveness
Foundation Memory offers complex solutions for problems concerning Alzheimer disease by means of research, health care and social work and support of whole families taking care of disabled people with this type of mental health problems.

Clients need a lot of help from their relatives. In most cases they have to understand that a person with a memory deficit needs also to socialise; financial support from the relatives and transport is also needed frequently.

Services are financed from a Memory fund that collects money especially for these services.

Sustainability
Centre Memory activities are focused on education and training, social and health services and leisure time activities.
The project requires:

- Material facilities, equipment etc.,
- Human resources: knowledge of specialists, humanity,
- A belief is needed in non-pharmaceutical treatment methods such as memory training and cognitive rehabilitation,
- An emphasis on continual strategic planning.

The Foundation Memory is an NGO, thus some independence is guaranteed, but also the clients' financial contribution is needed as well as financial help through sponsoring, grants etc.

Innovation

A specific approach towards people with different types of dementia and their activation is an innovation in the field of medical services.
At least more than 100 people a year have better access to health and social services, education and leisure activities thanks to the project Centre Memory. The process of social inclusion of elderly people with dementia is very difficult and requires a lot of help from professionals and volunteers.
The benefits of the innovative approach to people with mental health problems are:

- an individual approach,
- methods and approaches toward the illness that are keeping up the most actual and newest scientific knowledge,
- an improvement in the mental, cognitive, motoric conditions as well as higher self-reliance and independency of the clients.

Added Value

The contribution of the project with regard to the needs of people with mental health problems include:

- life span education, which is essential to maintain positive mental health,
- non-pharmaceutical therapy.

The mission of the centre is to prevent memory deficits and the social exclusion of people with dementia from in order to provide them with the chance to live with dignity.
There is just one such project in Bratislava region.

Transferability

The methodologies of the project are very simple and flexible.
It is manageable by 3 people in management and some subcontractors - social workers are needed.
Materials for education and memory training are used, as well as educational programmes for social workers and specialists such as "Memory Training and Therapeutic Activation Programme for Seniors".
For cognitive rehabilitation a "Memory Training and Therapeutic Activation Programme for People with Memory Deficits" is being used.
Materials helping to establish special daily programmes for people with dementia are also used.

Mainstreaming Potential

The project's relevance to national and local policy is given on the basis of the following points:

- Demography: the number of elderly people is increasing word, just as in Slovakia;
- Health and medicine: there is a rising number of people with various cognitive disorders and dementia and they need proper care;
- Social problems: rising quality demands and increasing expenses for nursing of people with various cognitive disorders.

The care of this target group is underestimated in Slovakia, at least care of elder people with mental health problems.
The project Centre Memory addresses the problems of Alzheimer and other dementia disorders in Slovakia:

- psychiatric and psychological health services and special therapeutical means for diagnostic and curative purposes;
- memory and vitality training for people higher in age and seniors as memory deficit prevention;
- social services by means of daily program for clients with various cognitive deficits; the focus is on activation, stimulation and keeping a good condition;
- social counselling for clients with various cognitive deficits and also for their relatives and nurses;
- educational activities of the project are focused on an increase of knowledge of professionals and all those that work with people suffering from various cognitive disorders and dementia.

People involved in the Project

3 members of management, 10 social workers, 1 psychiatrist and 1 psychologist

Strengths and Weaknesses of the Project

Strengths:

- specific approach towards people with different types of dementia; their activation is an innovation in the field of medical services;
- the care of this target group is underestimated in Slovakia, at least care of elderly people with mental health problems;
- simple methodology.

Weaknesses:

- the project depends on volunteers work to a great extend.

Contact Person for the Project

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Gallery Forget Me Not (Gallery Nezabudka)

Description

Gallery Forget Me Not was established in autumn 2004 as a special place exclusively devoted to artists with mental health problems.
The Gallery is located at the League for Mental health (LDZ). The management of LDZ organises exhibitions for the public and media and makes also promotion activities for the Gallery. Within almost 3 years of existence there were 10 exhibitions opened in this Gallery and many workshops organised.

Aims

The main goal of the Gallery is to fight the stigmatisation of people with mental illnesses or in the ideal case to overcome stigma through the art work of people with mental health. The second important goal to achieve is social integration: The promotion of talented artists, their exhibitions, use of media in all activities facilitates an easier integration into society. It is important for all people to establish a good position within their own culture, but it is especially important for those who are marginalized by society on the basis of their illness or disability and who do not know how to get through in the art world.

Areas

Education, Leisure

Effectiveness

The idea was to create equal chances for all artistically talented people with mental illness in Slovakia, and especially for visual artists. Not long ago pictures and creations of people with mental illness were seen as vehicles for associations, as a medium of diagnosis and analysis, but only in exceptional cases were they recognized as individual artistic achievements in their own right. Even nowadays people do not see these images primarily as works of art. They consider it as the projected knowledge of illness or their prejudices, but hardly anyone sees the artwork unconditionally.

There are special ways how to use the art methods in psychotherapy - an art therapy is the official one. Besides creating space for stigmatized visual artists, our second big aim is to support art therapy in Slovakia. The quality of the education in this type of therapy and its practical use is not good enough. There are no accredited schools; students undergo just some basic unverifiable training and thus anybody can do it.

We want to contribute to efforts aimed at accreditation, and this project can do a lot to help establish a higher quality of the art therapy work in Slovakia.

The opening of the Gallery was in 2004 and since then we arranged 10 exhibitions in Bratislava (140 Slovak artists participated) and 5 in different regions of Slovakia under the name "Gallery Nezabudka on the Road" (250 artists exhibited). There were 5 art therapy workshops and 2 artistic/art therapy symposia during the summer 2005 and 2006. The greatest success is that the exhibitions are widely accessible - for people with mental health problems there are special exhibitions in 6 big cities in Slovakia. Besides regular exhibitions the Gallery serves also as a permanent collection of art work of people with mental health problems, and in the future we plan to meet authors from other countries and to start mutual exchange projects.

Sustainability

The needs of people with mental health problems are very divers. Considering at least one -satisfaction in any activity that leads to a feeling of self-realisation that helps on a way to better mental health - these days there are more and more people interested in participating in an exhibition or any art therapy workshops.

We are happy that we have found a curator who is enthusiastic and eager to support a specific field of art which is called Art Brut among professionals.

The Gallery has one manager. LDZ has one PR manager that also supports the work.

The Gallery was launched in joint collaboration of three independent initiatives: LDZ, the Slovak National Gallery and Pfizer. The Slovak National Gallery was a great

support, especially Dr. Katarína Čierna, the curator of our Gallery. In LDZ we have a project manager responsible for the Gallery and we bear only the administrative expenses for Gallery. The third partner of the project, Pfizer, is a general sponsor. In the future we are trying to find multi-resources funding.

Innovation

Innovative aspects of Gallery practices and methodology are:

- the idea to create equal chances for all artistically talented people with mental illness in Slovakia, and especially for visual artists.
- to recognized individual artists and their art work as achievements in their own right and not in connection with their illness or their prejudices
- to promote accreditation and a higher quality of the art therapy work in Slovakia.

Added Value

One of the most important goals of the project is to support improvement of art therapy in Slovakia. Art therapy integrates the fields of human development, visual art (drawing, painting, sculpture, and other art forms) and the creative process with models of counselling and psychotherapy.

Art therapy is used to assess and treat the following: anxiety, depression and other mental and emotional problems and disorders; mental illness; substance abuse and other addictions; family and relationship issues; abuse and domestic violence; social and emotional difficulties related to disability and illness; trauma and loss; physical, cognitive, and neurological problems; and psychosocial difficulties related to medical illness.

Art therapy programs are found in a number of settings including hospitals, clinics, public and community agencies, wellness centres, educational institutions, businesses, and private practices. Art therapists should be professionals who hold a degree in art therapy or a related field.

Educational requirements in other European countries usually include: theories of art therapy, counselling and psychotherapy; ethics and standards of practice; assessment and evaluation; individual, group, and family techniques; human and creative development; multicultural issues; research methods; and practicum experiences in clinical, community, and/or other settings.

Art therapists in Slovakia are skilled but do not undergo accredited studies or education with any conceptual framework - they have to study abroad or go through various workshops here and there.

Transferability

The Gallery is already inspired by the House of Artists in Vienna, but all of Gallery's projects are very original. It is important is to find a curator who is dealing with "Art Brut" or someone who has a certain experience in the Art scene. The entire project is manageable with local resources: the financial management and human sources. All projects are coordinated by one person - a project manager of the LDZ; one assistant is needed and the help of PR manager. Finally we use subcontracted specialists - art therapists and artists for symposium or workshops; the curator is volunteering.

Funding comes mainly from the Ministry of Culture.

We do not have any guidelines elaborated yet but all the project's elements have very simple ideas and are easy to be replicated.

Mainstreaming Potential

Over the next years we have plans to enriching the Slovakian art scene through exhibitions that display important works by the artists and we will organize exchange shows with other artists. These will comprise several studies, a library, a shop, and we plan to organise a public auction. Thus we will create here a special centre for art following the Vienna Maria Gugging House of Artists example. Here in Slovakia the policy (Ministry of Culture) is supporting some cultural projects that are declaring visibility and representation of our country.

Costs of the Project

It costs 1000 Euros per year.

People involved in the Project

- 1 Project manager responsible for Gallery
- 1 PR manager of LDZ
- 1 Photographer - volunteering
- 1 Professional artist - volunteering
- 5 Art therapists - subcontracted

Strengths and Weaknesses of the Project

Strengths: The Gallery was launched in joint collaboration of three independent initiatives: LDZ, the Slovak National Gallery and Pfizer. We bear only the administrative expenses for the Gallery.
Weaknesses: The general sponsor is a pharmaceutical company.

Contact Person for the Project

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SLOVENIA

DAM Society (Society for Individuals Suffering from Depression and Anxiety Disorders)

Description

DAM Society has established its own website, a web portal with all the relevant information about depression and anxiety disorders in Slovene language. It also publishes relevant articles on the subject that have been released in the Slovenian press or elsewhere, whereby the staff that works on the website translates the foreign articles from English into Slovene.

Apart from the articles, the website also publishes announcements on several happenings, public debates and workshops in the field of depression and anxiety disorders. For those who wish to share their personal life stories about living with their disorders, the staff will publish their story under the popular category of Personal Stories, much loved and appreciated by the users.

The website also comprises a public board, where individuals suffering from anxiety disorders or depression and their support persons can exchange valuable information, ask questions and support each other. The public board is moderated by the staff, all active members of the DAM Society, who monitor the themes and subjects on the board. No professional help is offered on this board, it is meant solely for lay exchange of opinions, which is clearly specified in the board rules (with the only exception being the board about medicaments, where an expert pharmacist offers her opinion on drugs used for treatment, at any time).

One of the most important features of the site is also the list of Slovenian mental health care practitioners, which is the first of its kind and only available to the public on this site (www.nebojse.si).

Aims

The project aims to:

- notify, informing and apprising the general public, but most importantly, individuals suffering with anxiety disorders or depression on facts concerning the disorders in question.
- publish relevant articles on the subject.
- offer a common space for all individuals suffering from an anxiety disorder or depression for exchange of information and mutual support.
- bring together members who wish to meet other individuals suffering from anxiety disorders or depression.
- notify all users about the meetings of DAM society.
- notify the users and the general public about workshops and other events concerning the disorders in question that take place in Slovenia.
- offer the very first coherent list of mental health expert practitioners in Slovenia. The list is constantly being updated.

The main aim is to offer a possibility to receive support from other fellow sufferers over the internet, since many sufferers do not receive any support by their surroundings whatsoever.

Areas

Health, Social services

Effectiveness

So far the internet support board and portal proved to be a huge success amongst the sufferers who join the boards to receive and give support and exchange information. The response shows how desperately such a site was indeed missed and needed in Slovenia. In not even one year the site was visited by over 500 users, many of those sent their questions or gratitude e-mails directly to the staff on the regular e-mail address of DAM Society. The received positive feedback encouraged other organizations working in the field of mental health in Slovenia to cooperate with DAM society, promoting the website address in their campaigns and on their promotion material (e.g. IVZ - the Slovenian Institute for Health Safeguard included the site in their successful campaign "Premagal sem depresijo" - I Can Beat Depression). The site was publicized in public appearances on TV and radio shows and interviews and articles were published by the active members of DAM Society.

Sustainability

DAM Society has reached an agreement with our server host to keep the website alive throughout the year for a certain amount of money paid from DAM Society fee fund and eventual sponsorship. The maintenance of the site is laid upon active members of DAM Society, including the webmaster Stanko Ivančič, who received a symbolic sum of money for helping the Society build, maintain and update the site. So far, DAM Society only received financial support from its members and one particular sponsor (LEK - Slovenian Pharmacist Company) who paid the Society for an advertising banner on the site. Unfortunately, DAM Society is not otherwise sponsored by any other source, so the active members are constantly searching for opportunities of sponsorship from which they could finance better promotion of the site and the maintenance. Most of the project is based solely on voluntary work and good will from the people involved.

Innovation

The site is unique in Slovenia.

Added Value

Users' involvement and self-organization.

Transferability

The project is transferable.

Mainstreaming Potential

The site has a great mainstreaming potential.

Costs of the Project

For now, all costs are covered by the volunteers. There is no accounting.

People involved in the Project (number of people and profession)

Around 10 people are involved in keeping the site running. All of them are active members of DAM Society, therefore people coming from various professions. There are 56 registered members.

Strengths and Weaknesses of the Project

So far, DAM Society is maintaining the only Slovenian site specific for anxiety disorders and depression, even though those are by far the most common of all mental health disorders in Slovenia. No other site offers such specific information and public boards in Slovene language. It is also the only site that offers a list of mental health care practitioners in Slovenia.

The site is being effectively moderated by the active members of DAM society, so it offers a safe haven for sufferers who are by definition very cautious and afraid in receiving feedback from other people. Distracting members, offenders and those who break the board rules are warned by the staff and banned in case of continual violations. The site is very well received by its users and it operates in a kind, supportive spirit. That is perhaps also the reason why individuals with other mental health disorders come there to seek support, although the site is not specialized in any other disorders than anxiety disorders and depression. Such specific sites are obviously much requested and needed in Slovenia.

Weaknesses stem from continual lack of funding, since DAM Society collects only symbolic membership fees that do not cover all the maintenance expenses, therefore a lot of the work depends on voluntary contribution and good will. The active members of the society are constantly in search of potential sponsors, which are quite hard to find for such a young and rather unknown and specific Society. Another weakness is the lack of active members who are able to help with site maintenance, therefore those who have adequate computer knowledge. There are also not enough active members with adequate knowledge of foreign languages that would be able to translate valuable information and articles from foreign languages into Slovene. DAM Society can not, at this point, afford any professional translators or computer experts; it is dependant on voluntary work.

Contact Person for the Project

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Dobrovita Plus

Description
Dobrovita plus is a social firm employing people with mental health problems and other hard-to-employ people (60-70% of all employees).

Aims
The project has the following aims:
- work rehabilitation and employment of hard-to-employ people,
- promoting equal opportunities,
- mediating work on the open labour market.

Areas
Employment

Effectiveness
The Dobrovita Plus' activities, methodologies and approaches have proven to be useful because many of people with mental health problems are employed for quite a long time. The practice is easier to access for people with mental health problems since the ŠENTPRIMA institute was established.
The project's costs mostly correspond to the benefits resulting from it.

Sustainability
The project's impacts are most of the time in line with the needs of people with mental health problems; many people manage to get certain education during their work and they arranged their social status. Dobrovita Plus has been a member of CEFEC (Confederation of European social Firms, Employment initiatives and social Co-operatives) for several years. The general manager is also cooperating with other social firms' general managers and the Dobrovita's professional workers regularly improve their knowledge.
The implementation of the project is partly warranted from the economic viewpoint.

Innovation
The whole programme of Dobrovita is innovative in Slovenia.
Dobrovita's usual practice has got effective results in many cases. Many employees managed to improve the quality of their lives.

Added Value
The whole programme of Dobrovita is innovative in Slovenia.
Dobrovita's usual practice has got effective results in many cases. Many employees managed to improve the quality of their lives.

Transferability

The whole programme of Dobrovita is innovative in Slovenia.
Dobrovita's usual practice has got effective results in many cases. Many employees managed to improve the quality of their lives.

Mainstreaming Potential

The project has an added value compared to policies deficits.
The strategy started to form at the same time the new legislation was set up.

Costs of the Project

Costs of project: cca. 102 mio SIT / 425.638,00 EUR per year

People involved in the Project (number of people and profession)

Approximately 25-30 people are involved in the project:

- 1 director - social worker
- 1 business secretary, social pedagogue
- 1 administrator
- 1 project worker
- 2 work-organisers
- 2 gardeners-mentors
- 2 group leaders-mentors
- 5 people on work rehabilitation
- 15 workers in Green programme

Strengths and Weaknesses of the Project

Strengths: The project offers an opportunity to work for people with mental health problems.
Weaknesses: Frequent changes of personnel due to mental health problems.

Contact Person for the Project

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Noups Project

Description

The project consists of research of alternative psychiatric medicine by literature and internet. It prepares users documentation of future law about mental health in Slovenia. There are educational lectures about harmful side effects of psychiatric drugs. The project connects with other handicapped social groups. Opinions about the project are presented in a blog: http://tebizvoni.tuditi.delo.si/

Aims
To project aims to make people aware and to instigate them about the actual state of mental problems.

Areas
Education, Health

Effectiveness
The practice of making users aware of their mental and social position could be a very useful method. The greatest obstacle is the official psychiatric system which is not ready to give up huge material benefits arising from the existing, prevailing medical model of treatment used with mental disorders. The costs of such a practice would be certainly lower than those of the existing ones.

Sustainability
The existing system only increases the number of users; therefore, the new practise will easily sustain all counter-arguments.

Innovation
The project is not something completely new; it is based on a personal engagement of medical and other personnel instead of psychiatric drugs.

Added Value
The project is not something completely new; it is based on a personal engagement of medical and other personnel instead of psychiatric drugs.

Transferability
The project can be useful not only for medical care but also in the field of social care, also in other EU counties.

Mainstreaming Potential
It would be certainly useful if the leading politicians could recognise the applicability of this project.

Costs of the Project
Approximately 1.000.000 SIT, 4173 EUR per year.

People involved in the Project (number of people and profession)

Four people, three of them are users of mental health services. Two of them with college education and two with high school education. We are all very enthusiastic when dealing with the issue of mental health.

Strengths and Weaknesses of the Project

A weakness of the project is the ignorance on the side of the users who are not informed and motivated enough to accept this model, which arises from the opposition of the traditional model of psychiatric treatment.

Contact Person for the Project

Bogo Krajnc
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Prepadnik Project

Description

The project covers mental and behavioural disorders as well as the issue of treatment.

Aims

The project aims to:

- cover all psychiatric fields,
- redirecting people on appropriate info sites,
- find adequate answers for different questions put by visitors,
- combine science and art.

Areas

Health

Effectiveness

The approach of the project is fairly passive; the page does not have a forum. It offers complete articles from magazines and almanacs.
The web page is free to access.

Sustainability

The web page covers all psychiatric fields and answers simple as well as sophisticated questions. The project is not financially supported and would not be any different if it were.

Innovation
Combining art and mental health.

Transferability
The project is easily transferable.

Mainstreaming Potential
The project seems to be too small to have mainstreaming potential.

Costs of the Project
The project consists mainly of voluntary work. Domain 3500 SIT (per year) + hired server 3000 SIT/month.

People involved in the Project (number of people and profession)
Initiator Janez Prepadnik
prim. Darja Boben Bardutzky (psychiatrist)
Adela Vlašič Tovornik (psychologist)

Additional support from:
Centre for student innovation and creativity (ŠPIK)
ŠENT dr. Vesna Švab (psychiatrist)

Strengths and Weaknesses of the Project
Strengths: Published information
Weakness: Lack of time; poorly covered psychiatric field.

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4. About Mental Health Europe

Mental Health Europe (MHE) is a European level non-governmental organisation (NGO) and network committed to the promotion of positive mental health and well-being, the prevention of mental disorders, the improvement of care, advocacy for social inclusion and the protection of the human rights of people with mental health problems and their families and carers.

MHE is a European level NGO and network, recognised under Belgian law as an international not-for-profit organisation, which represents associations, organisations and individuals active in the field of mental health and well-being in Europe. In 2007, MHE has 52 full members, 12 associate members and 55 individual members. All the Member States of the European Union are represented in the membership.

Membership of MHE is open to NGOs, individuals, professionals, volunteers and others, including people with mental health problems, who are active in the mental health field at local, national, regional or European level and who share and who support MHE's vision. MHE represents the common interest of these organisations and lobbies and advocate for it at the European level.

For further information about MHE, please contact the MHE Secretariat:

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