



PROTECTED HOUSES FOR SOCIAL AND ECONOMIC INTEGRATION

NATIONAL CATALOGUE OF INNOVATIONS
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IDEASS - Innovation for Development and South South Cooperation

INTRODUCTION

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Positive Mental Health Care cannot be obtained through the treatment of mental disorders. To ensure positive mental health, to decrease the economic and social weight of mental disorders, to alleviate poverty and strengthen social inclusion of these persons, it is necessary to develop and implement comprehensive plans. Such plans help in the physical integration, rehabilitation and social development of people in need, with regard to establishment of specific structures. The persons with disabilities are those whose physical functions, mental or psychological capacity tend to lose the typical condition for the appropriate age for more than six months. Care for people with psychological problems or intellectual disability for children, or in general was badly organized in Albania until now as the health system in general. The psychiatric rehabilitation was an unknown paradigm, patients who went out from psychiatric wards, were not followed externally by any community. There was no understanding for psychiatric and mental suffering. People with such problems were stigmatized and expelled from society. Such phenomena are observed even today, despite the work that has been done by all institutional levels.



Vlora's "Ali Mehmed" Psychiatric Hospital is a state institution with beds the goal of which is the rehabilitation and integration of patients in social life. *The Psychiatric Hospital of Vlora city (SP)* is the first Albanian Psychiatric Hospital opened in 1921 by the physician Sezai Como. Regarding the hospital history, initially there was a psychiatric medical assistance not scientifically based. Previous years statistics show that Psychiatric Hospital had about 30 patients (mostly men) and it operated essentially as a place of isolation for patients who presented social dangers due to the absence of specific pharmacological treatments. This situation was worse also because there were no historic documents regarding patients treated with no specialized ways, as example in their moments of crisis they were also tied with chains.

With the support and cooperation of the Ministry of Health and in collaboration with specialists from Italy, Psychiatric Hospital, Qendra Komunitare e Shendetit Mendor-QKSHM (Community Mental Health Center) ended up the realization and building of family homes for the city of Vlora in September 2008, guaranteeing assistance for the needs of patients hospitalized in the Psychiatric Hospital of Vlora.

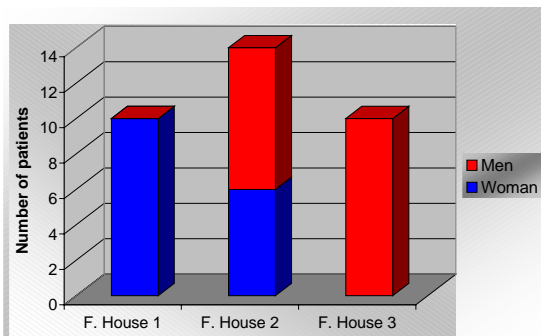


Fig. 1

Consequently Vlore Psychiatric Hospital has decided to implement 3 different family homes starting from the building of House No.1 in which 10 women are accommodated. Continuing the work, with the support and cooperation of Ministry of Health, Psychiatric Hospital, QKSHM proceeded with projects for construction of two other family houses which will include Family Home No. 2 regarding 14 patients, 8 males and 6 females, and Nr. 3 Family Home in which 10 men will live (Fig.1).

The project-family house is a project carried out step by step by Vlora Psychiatric Hospital, in collaboration with the Ministry of Health and the Community Mental Health Centre funded by Puglia Region in September 2008. Three family houses are built in Vlora city From 2008 until this year in which 34 patients were rehabilitated. With the support of the Puglia Region another glasshouse was realized in the Vlora city, to improve the economic interest to the benefit of patients

Nowadays the Psychiatric Hospital is not viewed as an isolated entity as before, but as a training hospital for diseases and patient deinstitutionalization. In addition to the construction of specific subunits for treatment of patients with mental illness, various institutions have shown interest in investing for the patients.

Evolution over the years shows that the treatment of patients who suffer from mental health has changed in a positive way. If at the beginning of 1921 the first Hospital Psychiatric Vlora and Albania was opened, the treatment of mentally sick people left much to be desired because it lacked scientific treatment. The Psychiatric Hospital in 1921 was seen more as a social isolation for people who appeared dangerous, and there were no drugs and patients had no card or identification. The first hospital conditions were non-existent despite the presence of 30 patients with mental health problems isolated in Vlora Psychiatric Hospital.

Ministry of Health as State Institution had contributed to the establishment of Family Homes in the city of Vlora, the QKSHM (Community Mental Health Center) collaborated in the realization of the house, Puglia Region financed the construction of family houses and Sardegna Region invested in the construction of the greenhouse for the mentally sick people.

The Implementation of the project-family house in the city of Vlora was supported by Vlora Psychiatric Hospital and UNOPS/ PASARP and UNDP ART GOLD. Puglia Region continues to work closely with Vlora Psychiatric Hospital to achieve the purpose of the project in relation to patient's rehabilitation and integration in the social, economic and cultural sectors.

WHAT PROBLEM DOES IT SOLVE?

The main problems that this innovation solves are represented by the low social-economic conditions of the mental patients in Albania before our intervention. Based on this project, we aim to improve the (a) personal autonomy, (b) cognitive plan, (c) social skills, (d) emotional skills, (e) orientation in space, (f) and the way to organize the families of patients.

These basic indicators are capable to give an assessment of persons who present difficulties in intellectual functioning and criminal behaviour. Worth mentioning are the first areas in which they have more skills and areas where they present more difficulties. The project is built in a way that includes all patients. Likewise, basic projects are built to organize activities within the home and outside.

The supervision of different problems that patients display mainly in the first year of the house-family home help to improve the collaboration with the responsible staff for each patient-family house. The improvement of problems over the years allowed to solve the problem of productive integration of patients.

The Family-House in Vlora is a novelty never seen before, realized step by step by professional personnel of Psychiatric Hospital and Community Mental Health Centre under the continuous direction of professionals of Puglia Region. The main purpose is the improvement of the functions in the development of personal autonomy, cognitive plan, social skills, emotional skills, orientation of patients in space and time, and the way to organize their family.

The project "I'm like you, I'm with you" is generally composed of three phases: family house building; greenhouse implementation; training activity for cultivation of vegetables for human use.

Family house building

The Residents who are members of these protected families are prepared for living in these families under rehabilitation and integration programs. Family homes are a positive indicator as regards the increase of the quality of mental health services. We stress that family homes are parallel with the Community Center organization and in cooperation with many activities realized in relation to family home residents.



Building Family Homes was a great innovation because of the new environment created in these family houses not previously programmed. But the construction of family houses had its difficulties represented by interpersonal relation problems, as jealousy, the difficult way in which the house status was perceived by women, relationships between staff and community, dealing with difficulties of women responsibility during the transition from structures with beds or analogous to family houses and difficulties with the staff that for the first time would follow the work after hospital activities taking the responsibility that belonged to women.

Family Homes were built in the environments of the former dystrophic hospital and were reconstructed starting from the part destined for patients to be moved here. Since it was a new experience, specialists from Italy as Rocco Canos and Mariela Genchi worked for the continuous training of hospital staff and community center in order to ensure the project continuity.

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The greenhouse

It is also worth mentioning that the innovation was carried out in connection with the creation of the greenhouse where a group of experts worked to repair a ground surface of 210 square meters to achieve the construction of the greenhouse in collaboration with the Psychiatric Hospital and financed by Sardegna Region. Operators together with the patients attended a theoretical and practical course to learn about planting flowers. After this all together were available to implement the greenhouse structure. The work was organized



according to a weekly timetable from Monday to Friday, alternating one day for community residents, three days for the home and family residents, and one day for Psychiatric Hospital patients.

Photo realized in the greenhouse was made in particular for the family house people, community residents and hospital patients.



In the greenhouse built for residents of family house, they deal mostly with tree planting, planting different flowers, food products, such as tomatoes, peppers, cucumbers, etc..In addition, they were built at the entrance of Vlora city, Family-Home residents had facilities within the house having a mini series for which they take care every day. This approach makes people feel closer to life like any normal person and feel themselves quite valid, because they are able to cohabit in the community as any person who is located outside the Family-House. Volkswagen type car was decided to be available for patients transport to the greenhouses. The patients will have a salary for the service in the greenhouse, as stimulus based on hours of work done, enabling the increase of the number of patients activities in the greenhouse environment.

the increase of the number of patients

Social and economic integration

The project objective is rehabilitation and integration of economic, social and cultural rights of patients in Vlora city and in places where they live. The project has a program in connection with rehabilitation and integration of mentally sick people which aims to increase the services in relation to mental health.



The purpose of the project was carried out by responsible specialists in order to:

- deinstitutionalize the women and men resident in Vlora Psychiatric Hospital;
- creating a structure where staff would be only 24 hours in its first year supported by QKSHM through the involvement of other hospital patients;
- enhancing the capacity of the staff to continue to deinstitutionalize the patients;
- raising the awareness of community about mental health services.

The project was made for rehabilitation of patients in all areas of operation within a house. It should also be emphasized that the work done in connection with practical autonomy of patients (like feeding, dressing and hygiene). Work was made in parallel with the communication and social behaviors of patients in which they were included (attitude to others, attitude towards the activities). To note is that the work was done in connection with orientation of patients in time and space. Taking into consideration that the creation of two family houses, number 2 and 3 would be a continuation of a previous experience, the project team focused on strengths and weaknesses of the previous project, improving things that were not developed the first time especially about family house number 1, in which 10 female patients were hosted for rehabilitation.

The participation of institutions and social actors

The realization of a rehabilitation and integration project in a country depends on the combination between Ministry of Health, which enables the cooperation for realization of a so diverse project, and the institutions related to project financing.

To realize the project, the competent authorities shall take into account the interdisciplinary actions, combined with each other in such a way that the implementation of the project can be productive. Institutions that could be part of such a project might be: Health Institutions, Research Institutions, Universities, Social Institutions and project experts in rehabilitation and integration of patients are necessary for the implementation of the Project. All these institutions must have a combined cooperation in order for the project to achieve the intended results. Ministry of Health needs to realize a national project concerning rehabilitation and integration in the community of mentally sick people and in the broader economic and cultural life of society.



HOUSE FAMILY, IN PRACTICE

The House-Family represents a program connection with rehabilitation and integration of mentally sick people, which aims to increase services in relation to mental health.

The House-Family project method consists in an innovative combination of three different actions:

- selection of a multidisciplinary team from Vlora Psychiatric Hospital to realize training regarding the method of selection of patients who will live in the environments of the House-Family.

- rehabilitation of patients in the environments of the House-Family realizing an economic investment, social and cultural development.
- integration of rehabilitated patients-family house in the community and social life.

Family houses for the city of Vlora ensure a new undertaking regarding the assistance to come based on needs of patients hospitalised in the Psychiatric Hospital of Vlora.

The working group

The project set up a working group initially made of: doctors, psychologists, social workers, nurses, caregivers. This group made a reappraisal of all patients Psychiatric Hospital and identified those patients who would be part of the project. It is worth to mention that a complete working group was identified divided into three sub-groups where each specific subgroups was divided according to areas of activities which included:

- *The first group* which was responsible for activities within the hospital improving personal hygiene, work in the kitchen, laundry, garden, etc.. This group will work in parallel with other patients involved in activities inside and outside the hospital. This project was realized with all hospital patients.
- *The second group* was responsible for activities outside the hospital as sports, walking, fairs, etc.
- *The third group* was responsible for informing the families about the project as well as the contacts of these patients. Repeated association meetings were organized under the care of this group held by the same family members and they were enlivened with community contacts, meetings with universities, media contacts, etc.



But in addition to modalities followed in relation to organization of family home, important was also the result that the patients will have, to become real members of family homes and not more of Psychiatric Hospital. In connection with this phenomenon, a working group was set up consisting of experts in all fields capable to select patients from each ward. Specialists made skills assessment in every area, which is considered as an indicator of people with mental health problems and on the basis of this assessment, the final selection of the inhabitants of the houses 1, 2 and 3 was carried out.

After entering in the family home, residents are provided with identity cards and health booklet.

The family houses

Families house number 1, 2, and 3 function on the basis of programs and activities developed by psychosocial staff. During these activities programmed and organized with the residents of the family houses, the attention was focused on development of personal autonomy, cognitive plan, social skills, emotional skills, the orientation in space, and the way to organize the families of the patients, as is the family where they live this indicator-based assessment of persons who present difficulties in intellectual functioning and criminal behaviour. Worth mentioning are the first areas in which they have more skills and areas where they present more difficulties.

Programs are built in a way that include all persons. Likewise, basic programs are built that organize activities within the home and outside.

Family house 1 (SH.F.NR.1) is one of the homes built in relation with the rehabilitation of Psychiatric Hospital patients. Family house 1 starts to function in September 2008 in which 10 women were accommodated, which was prepared for life in these families under rehabilitation and integration programs. Initially, residents were transferred from the Psychiatric Hospital at home family accompanied by their personal cards attached during their accompanying.

Family house 1 as declared above consists of 10 people, 5 bedrooms, 3 bathrooms, 1 living room, 1 kitchen and hallway. In each room there are two single beds and with two people living in. Residents of family houses have been rehabilitated in tasks anyone has in relation to the maintenance of the house. Based on a realized program considering cooking and cleaning activities, people proceed in accordance with the weekly program making sure that 10 peoples



are active to maintain the hygiene of the house in which they live. Residents of the house protected on the basis of highly effective therapies that they have followed, have gained skills in relation to their living space and lifestyles quite different from those lived in Psychiatric Hospital.

Family house 2 (H.F.NR.2) started its activity in November 2010 and consists of 14 people, 8 of whom are men and 6 are women. As Family house Nr. 1 for family house 2 the selection of inhabitants carried out the same way.

Family house 3 (H.F.NR.3) started to operate in February 2011 in which only 10 male inhabitants were accommodated. The same procedure of selection of residents was followed as in other mentioned homes. Inhabitants here are also initially transferred from a psychiatric hospital to a family home accompanied with personal cards and proper case history. After entering the home the inhabitants are well equipped with family identity and health cards.

The greenhouse

This project glasshouse became an important information sharing point for all patient groups. These groups should be small and the time frame of the work should not last long because of level of concentration of each of them. The operators desired that the patients be part of the project in order to be engaged.

This project firstly trained 17 people, 10 men and 7 women. After the first meeting. the next meeting intended at setting specific hours per day for the respective groups (Hospital, Community Mental Health Centre and Home-Families). Home-Families will train on Wednesday and Friday.

Works were organized into two groups, the first one included house No. 1 and No. 3, while the second group house No. 2, for the reason that participants in these groups are men patients and women patients.



During the first training there was a great interest and participation by the users of family house. Some of them showed the personal experience about the work that they carried in their past and that related to agriculture. After the theoretical training, the second phase started related to small works in the surrounding environments. This phase related to work directly on the land. The first part of the yard was cleared and all plants were removed and relevant work tools were introduced. People with active jobs were monitored and categorized from both groups.



RESULTS

Construction of family house in the city of Vlora, in connection with the rehabilitation and integration of patients in social and cultural terms has proved very effective. This is noticed in the way of organization of life within the home and family life outside its environments. The project has proved very successful in terms of orientation of patients in time and space, in terms of their personal care and hygienic aspects, family life organizing, etc. cognitive process. Generally, this project demonstrated to be of benefit in social terms as their integration in society has increased significantly and prejudices are smaller.

It showed that 80-90% of House-Families play a primary role in the integration of patients in social and cultural life. This project has shown that the best effectiveness in integrating patients can be used anywhere where there are Psychiatric Hospitals.

Actually there are three family house in the city of Vlora where 34 patients are rehabilitated selected by a multidisciplinary team from 2008 until today. Rehabilitation and integration of patients in the environments of the House-Family have shown over the years that there were benefits in economic direction, since the implementation of greenhouse project trained 17 patients who subsequently were employed against payment in these environments.

Figure 2 shows the total entries and exits of patients. As reported, studies have shown that by years 2007 to 2008 the number of acute patients in the hospital followed a significant reduction despite a strong increase of them was documented from 2008 until 2011 (Figure 2).

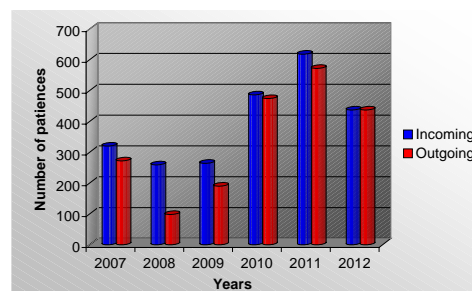


Fig. 2 : data from 2007-2012 regarding entrance and exit of patients

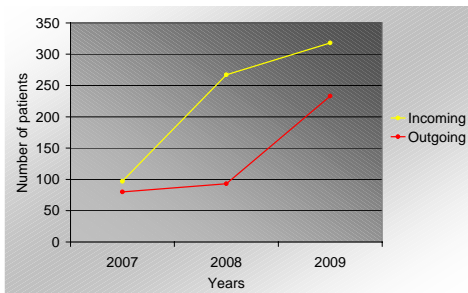


Fig. 3 entries-exits of chronic ill

those outgoing, their trend in the period 2007-2009 appears increased compared to those incoming in the same period, and this represent a very important result. Figure 4 shows that the highest number of inputs and outputs regarding the hospital coincides with the year 2011 and the lowest number of inputs and outputs corresponds to 2008. The graph shows in Figure 3 put in evidence that during the year 2009 more chronic patients entered in the hospital than other years, 2007 and 2008.

Figure 4 shows the entrances and exits of patients over the years 2010-2012 as in 2010 patients were divided into two parts, chronic and sub acute ward. Another positive results were achieved over these years where the entries of patients appear lower if compared with the same exits and specifically to the chronically ill.

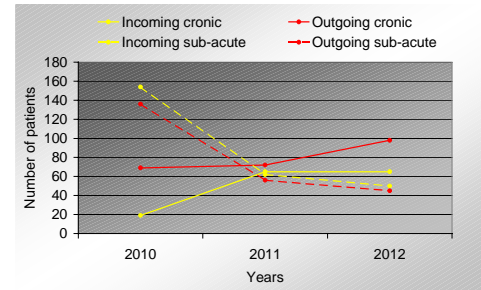


Fig.4. entrance and exit of chronic and sub-acute sick patients.

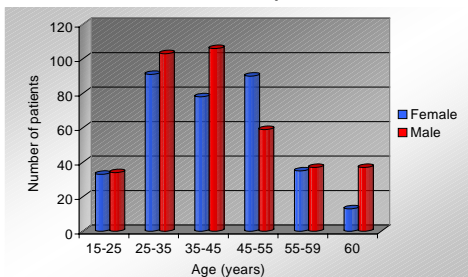


Fig.5 patients classification by age for the patients.

Figure 5 shows the ranking of patients according to age. This graph shows that the highest number of mentally ill persons belonging to the male sex for all ages except in the range between 45 and 55 years. But considering family houses in the city of Vlora, it seems clear that the number of men to be rehabilitate in these homes is higher than females and precisely corresponding at 18 men and 16 women.

INTERNATIONAL INTEREST

During the last decades in Europe and worldwide, projects related to the integration of the mentally ill have played a very important role. Always the primary goal of these projects was the rehabilitation and integration of the mentally ill in the social, economic and cultural life of the country. Studies conducted have also targeted the rehabilitation of patients from the environments of psychiatric hospitals to family houses environments and giving the premises to build family houses near their respective family members. These projects aim at the rehabilitation and integration of patients with mental health problems and are expanding in different countries and cultures in the Mediterranean area such as Italy and Spain and in extra Europe areas as China, San Francisco (USA), New York (USA), etc. Currently all the foreign countries exhibit a great interest in connection with the implementation of our project. In Albania the family houses were built for support of patients with mental health problems and employed 8 years of work, time necessary for the purpose of their rehabilitation, integration and rehabilitation of the patient to make a life in the community.

Projects such as ones presented in 2008 in Vlora in the development of one-family house, are presented with success in other cities of Albania as Elbasan, etc. The construction of the project-family house in connection with the rehabilitation and integration of the mentally ill, has resulted in very favourable and very productive in relation to its purpose. The positive results achieved through this project, specifically in the city of Vlora, should stimulate each institutions both within and outside the country to contribute the increases in other-family house the rehabilitation and the integration for individuals who suffer from mental health.

TO KNOW MORE

Here follow a more exhaustive and in-depth documentation linked to the project.

- Mental Health Institute (2007). "What is Mental Health?"
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CONTACTS

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