



**GOOD PRACTICE SERVICES:
PROMOTING HUMAN RIGHTS &
RECOVERY IN MENTAL HEALTH**
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ABSTRACT FORM

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Title of the contribution/Titolo del contributo	Personal Health Budget: means for integration but in the hands of whom? Mental Health Department and Social Coops, Trieste – Region Friuli Venezia Giulia		
Objectives/Obiettivi	<p><i>The objective is to underline the need that the different levels, cultural, legislative, organizational, methodological and financial, involved in the creation of processes of effective inclusion of persons with disabilities, should be considered tools of action for a strategical transformation of the various practices of inclusion. Infact the various aspects interact heavily between them and need to be considered and oriented jointly to affirm principles and strategies of equity and participation. Only a comprehensive approach led by the needs of the people, allows creating the conditions for exercise and access to the rights of citizenship, counteracting prejudice, exclusion and marginalization. Personal Health Budget and Personalized Rehabilitative Therapeutic Project are tools and can represent the moment where social and health integration takes place and the final overcoming of the medicalization of mental health.</i></p>		

Contents-text/Contenuto-testo:

Max. 400 parole/words

The subjectivity of clients, their life stories, their needs and their aspirations are considered as the main tools for create health path and developing responses. A good intervention for integration of people with psychosocial disabilities must be based on three priority areas: home, work and development, social relations and affectivity. Recognizing the central role of the person with rights, needs and resources and acting overall living context, not limiting the treatment to the individual only.

The Personal Health Budget with the Personalized Rehabilitative Therapeutic Project as a shared tools able to support social inclusion, capability, recovery's process, facilitating cultural changes and requalification of economical investment in mental health.

The personal health budget, has shown remarkable advantages in terms of efficiency, effectiveness and, ultimately, cost-effectiveness. More specifically, it showed to be a viable tool to re-qualify about socio economical determinants the healthcare spending, contributing to build a generative welfare community. The partnership relations developed – within the participatory co-design culture – create, with private non-profit organizations, represent a strategical outsourcing for Public agencies. The process of shared decision-making that brings together many kinds of expertise, allowed to shift from a 'gift model' to a 'citizenship model' with the individual at the center of the service system (Duffy, 2010).

As Trieste's system and experience is demonstrating, within this methodology, it's possible to move conspicuous resources from residential structures to co-housing projects, supported work training and social programs, more closely to the concrete needs of people, contrasting new forms of institutionalization and activate welfare community.

The process of de-institutionalization has promoted new alliances and real interactions between services and persons. The approach of community services is aimed at developing the social life and contacts with the community in order to optimize exchanges and relationships: between professionals and users family members, neighbors, social services, social coops, ONG, associations, volunteers, etc. New tools have been developed to facilitate access to a real participation through specific programs and various activities of the services. Useful interventions include the recognition and activation of the ability of the recipients and the creation of conditions in which these skills can be expressed and grow, in order to stop the mechanism of new form of institutionalization.

In the regional mental health system (1.200.000 inhabitants and 20.000 persons in contact with the 5MHD) at 31.12.2018 are activated 619 personal health budget of different intensity co-managed in partnership with 31 social coops.

It represents a model of public investment in the community not only to support the personalized project and the persons but to contribute to create a network of inclusion and development of new opportunity of housing, work and socialization's program.

Other models, as Voucher or direct payment to the user or their families used more in conditions of intellectual or phisical disabilities, at the moment, don't demonstrate advantages in efficacy.