



A MULTIDISCIPLINARY APPROACH TO MENTAL HEALTH AND PROBATION: THE EXPERIENCE OF PROJECT PRETRARCA

ANDREIA FERREIRA, SOCIAL WORKER, CENTRO HOSPITALAR PSIQUIÁTRICO DE LISBOA

BEATRIZ LOURENÇO, PSYCHIATRIST, COORDINATOR OF PRETRARCA, CENTRO HOSPITALAR PSIQUIÁTRICO DE LISBOA

DANIEL TERÊNCIO, RESIDENT OF PSYCHIATRY, CENTRO HOSPITALAR PSIQUIÁTRICO DE LISBOA

PILAR GARCIA, GRADUATED NURSE, CENTRO HOSPITALAR PSIQUIÁTRICO DE LISBOA

PRECIOSA VERÍSSIMO, PROBATION OFFICER, DIREÇÃO-GERAL DE REINserÇÃO E SERVIÇOS PRISIONAIS

A MULTIDISCIPLINARY APPROACH TO MENTAL HEALTH AND PROBATION: THE EXPERIENCE OF PROJECT PRETRARCA

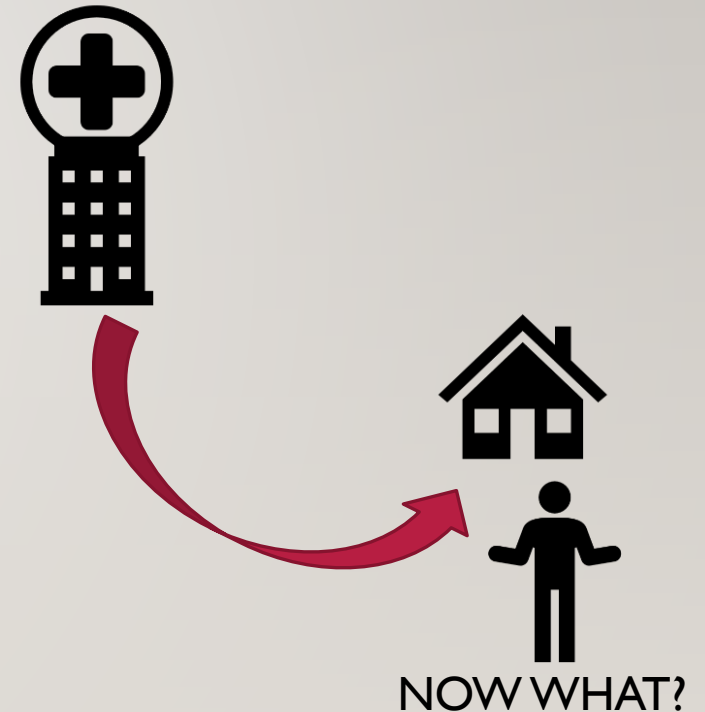
- THE PROJECT PRETRARCA
 - What is it?
 - Who do we help?
 - What are our goals?
 - How to do it?
 - How has it been working?
- THE ROLE OF THE SOCIAL WORKER
- ARTICULATION WITH COMMUNITY STRUCTURES
- THE DGRSP
 - What is it?
 - DGRSP and Mental Health
 - Why is PRETRARCA importante for us?
- A CASE OF SUCCESS

THE PROJECT PRETRARCA

- “Prevention and Treatment at Home” Program, created in 2009

It's a program of **proximity health care**, facilitating the **reintegration** and **recuperation** of patients with severe mental illness.

ASSERTIVE COMMUNITY TREATMENT

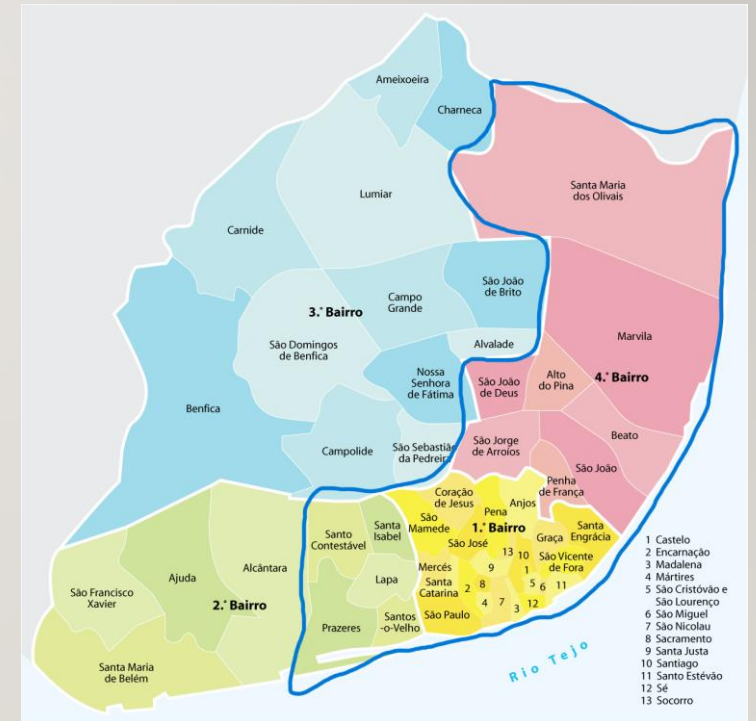


THE PROJECT PRETRARCA

And who do we help?

The project is aimed at patients with **severe mental illness**, with **high risk of relapse**

- Mental illness severity
- Functional disability
- Absence of social/family support
- Low compliance with treatment

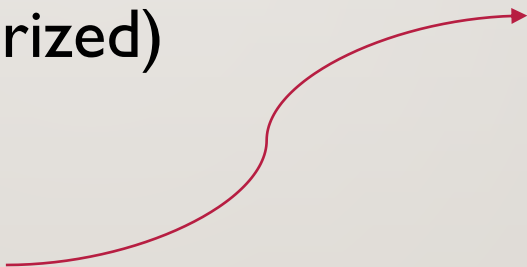


Lisbon parrishes and districts

THE PROJECT PRETRARCA

What are our goals?

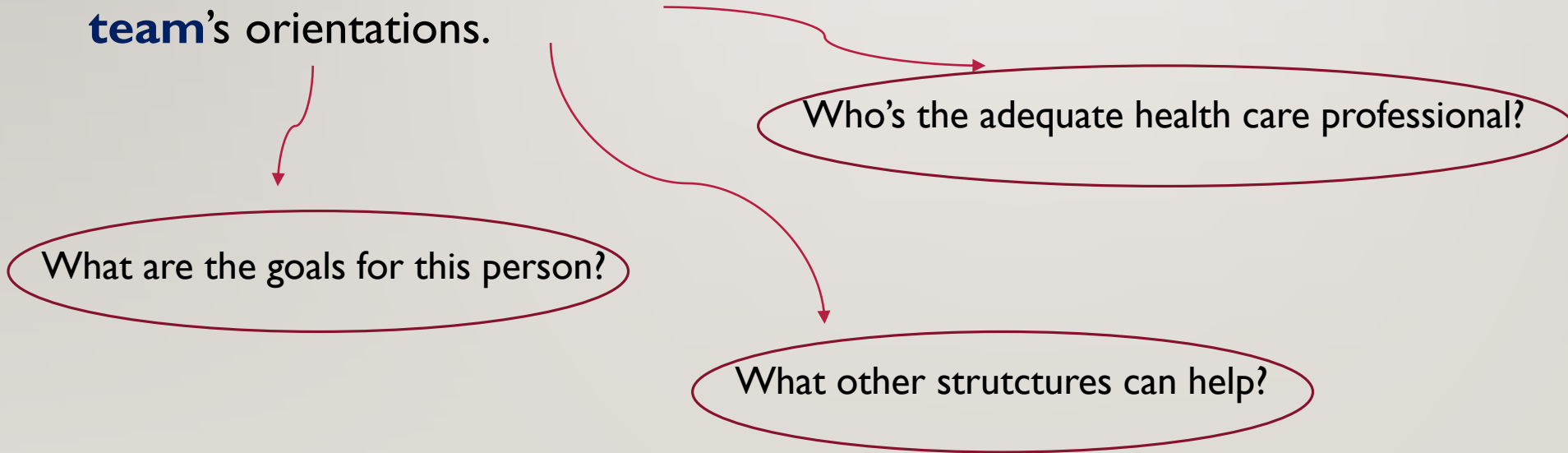
- Facilitate and assure **treatment** compliance
 - Intramuscular injection (calendarized)
 - Box of medications
- Psychological and **social support**
- **Early detection** of therapeutic fail or clinical destabilization

- 
- Emotion management
 - Skill training
 - Contact with local structures
 - Reintegration in work life

THE PROJECT PRETRARCA

How to do it?

The **individualized project** follows the physicians and **multidisciplinary team's** orientations.



THE PROJECT PRETRARCA

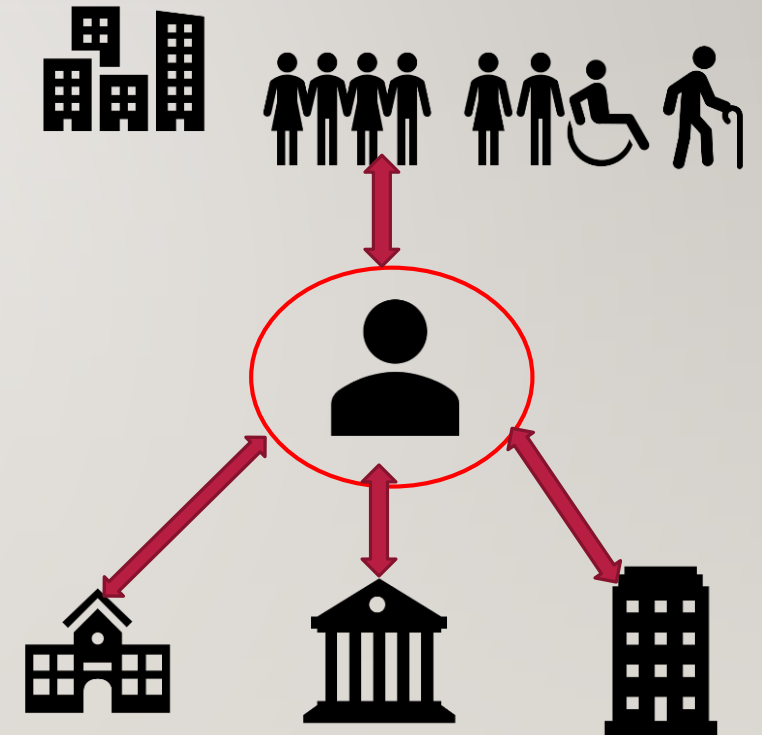
How has it been working?

- 90 patients
- 2.616 visits to patients homes
- 56.43% of the total visits from CHPL teams



THE ROLE OF THE SOCIAL WORKER

In health promotion, the social worker appears as a **social mediator** between the patient and several institutions that must participate and **cooperate in a network, multidisciplinary perspective**, to answer adequately to the people's problems and necessities.

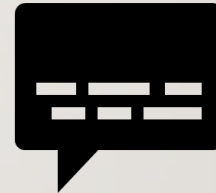


ARTICULATION WITH COMMUNITY STRUCTURES

Articulation is key!

- Santa Casa da Misericórdia de Lisboa
- IPSSs (Social Solidarity Particular Institutions)
- Temporary Refuge Centers
- **DGRSP** (Reinsertion and Prison Services)
- City and Parish Councils
- Primary Care

...



THE DGRSP

- The DGRSP is a central service from direct Government administration, whose mission is the development of public policies for **criminal prevention** and the **execution of sentences** and **probation/reintegration measures**.
- For the last several years, these services have been centering their activities and interventions on the execution of measures in the community.

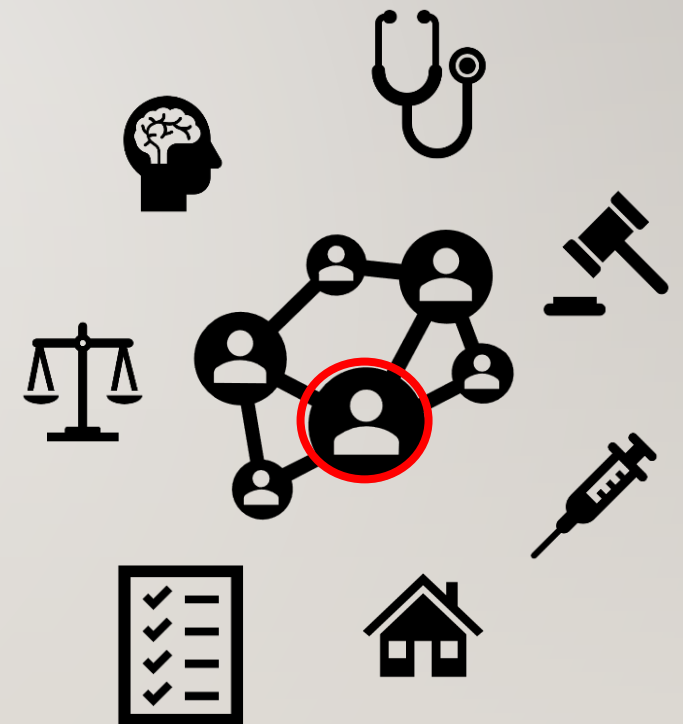


THE DGRSP

Non depriving of liberty sanctions are oriented by two common vectors:

- Imposition of certain conditions to the defendants or convicts
- Intervention of the social reinsertion services

To answer to the needs of people with mental illness and help them accomplish their judicial measures, we need this interinstitutional articulation supported on a continuous work of partnership and resource mobilization using the synergistic strenghts of each institution.



THE DGRSP

Why is PRETRARCA importante for us?

- It creates conditions and supports the Social Reintegration Plan
- Increases access to treatment and clinical follow up
- It's an innovating response
- Greater treatment efficiency promotes greater efficiency in the judicial measure applied
- Promotes sensibilization and mobilization next to families and community
- Promotes articulation with other local institutions

A CASE OF SUCCESS

Patient WM: Male, currently 33 years-old

2008:

Agression with knife

Two thefts

2009:

4 hospitalizations in CHPL

1st after suicide attempt by hanging
Psychotic symptoms

A CASE OF SUCCESS

Patient WM: Male, currently 33 years-old

EARLY YEARS:

Childhood marked by parental abandonment and violence.

In an boarding school from 6 to 13

Bad behaviour and school absentism

Use of drugs

PSYCHOSIS:

- Delusions
- Hallucinations
- Suicide attempt

A CASE OF SUCCESS

Patient WM: Male, currently 33 years-old

2009:

Starts treatment with intramuscular antipsychotics
Regular appointments with the assistant Psychiatrist
Difficult compliance
Starts PRETRARCA



2010:

Mother dies
Sisters are institutionalized
Stops treatment

NEW HOSPITALIZATION

A CASE OF SUCCESS

Patient WM: Male, currently 33 years-old

2013:

Declared dangerous non-imputable

Applied plan of social reintegration

- Presence to all appointments
- Do the diagnostic/evaluation tests and comply with the medication plan, as determined by the Psychiatric Services
- Strict compliance with the reintegration plan
- Presence in the social reintegration services when summoned



A MULTIDISCIPLINARY APPROACH TO MENTAL HEALTH AND PROBATION: THE EXPERIENCE OF PROJECT PRETRARCA

THANK YOU!