

JOINT EVENT

World Congress on **Psychiatry & Psychological Syndromes**

&
29th International Conference on

Adolescent Medicine and Child Psychology

December 06-07, 2018 | Rome, Italy



Nikolaus Blatter

University of Innsbruck, Austria

The effect of the C.O.M.E program for people with mental and/or drug disorders to live a more independent life

Since the 1980s the treatment-first paradigm has dominated the support of clients with mental and drug disorders in Austria. The access-threshold for social service was high for the patient, especially for client with pronounced symptoms whose support was difficult. This led to a considerable number of people who are affected by homelessness. As a result they get treated in the homeless treatment sector. In 2014 the policy of Vorarlberg (Austria) implemented the “psychiatry concept 2015-2025” which includes ten projects to improve the support of community psychiatry. “Psychiatric home care service” was one of these projects and started in 2015. The aim of this present long-term study was to evaluate the C O M E program which started in 2016 and included 52 probands. Our hypothesis was that the C O M E program enables clients to live a more independent life including permanent housing, decrease stays in hospital, improve a long-term mental stability and encourage them in the development of alternative assistance for mutual support. Moreover this support program should enable the caregiver in their daily work. The C O M E program is based on the theoretical foundation of housing first and treatment first. The abbreviation stands for: cooperation, observation, mutual-support and evaluation. A crucial part of the data collection is done by the assessment sheet which is scored at least one time a week. The data collection also includes report-data and medical history. Over a time-period of 42 weeks we found that continuous abstinence from drugs and alcohol is an important criterion for a better cooperation between client and caregiver. Abstinence is not a necessary requirement to get a care-giver-support in the C O M E program. Finally, it is necessary to keep the contact, even if the client denies the contact.

	Rotated Factor Matrix ^a		
	1	2	3
fulfillness	.691		
bath	.716		
grocery	.715		
cooking	.764		
washing (body)	.606		
washing (clothes)	.701		
daily structure		.710	
social-activities		.744	
psychopathological care		.497	
contacts		.732	
medication			.638
sleep-habits			.573
substance-consumption			.652

Extraction Method: Principal Axis Factoring.
Rotation Method: Varimax with Kaiser-Meyer-Olkin
a. Rotation converged in 7 iterations.

Table1: Table shows that the factor-analysis reduced the 13 items of the assessment-sheet to three dimensions. Factor one is described as household and personal hygiene, factor two represents the psychosocial stability and social participation and factor three represents the compliance and sleep-habits.

Recent Publications

1. Johnson S and Teixeira L (2010) Staircases, elevators and cycles of change-“housing first” and other housing models for homeless people with complex support needs. London: Crisis. ISBN: 978-1-899257-63-8.
2. Nelson G, Kloos B and Ornelas J (2014) Community Psychology and Community Mental Health. Oxford University Press.
3. Pearson C, Montgomery A E and Locke Gretchen (2009) Housing stability among homeless individuals with serious mental illness participating in housing first programs. *Journal of Community Psychology* 37(3):404-417.
4. Sahlin I (2002) The staircase of transition: survival through failure. *Innovation, European Journal of Social Research* 18(2):115-135.
5. Tsemberis S (2010) Housing first: the pathways model to end homelessness for people with mental illness and addiction manual. In *European Journal of Homelessness* 5(2):235-240.

Biography

Nikolaus Blatter Past Professional experience (2002-2015): Psychiatric-hospital Baumgarnter Höhe in Vienna; homeless-shelter in Vorarlberg; Supervisor of a small-care-unit for homeless clients with mental illness and drug diagnoses; Professional experience: Since 2015 he/she is working as Psychologist in the Government of Vorarlberg, Department for Community Psychiatry and Drug help. Working topics: individual case planning, detection from unmet-needs especially the support from severe mental ill clients in various treatment-sectors (homeless, community psychiatry, drug...); participation in the creation of the Vorarlberger psychiatric-report. His/her research topics: as a PhD Student since 2016 to evaluate the home-treatment support in the federal state Vorarlberg; Detection of over-, under- and lack of supply in community psychiatry, drug help and adjacent areas (homeless, nursing).

Nikolaus.Blatter@vorarlberg.at

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