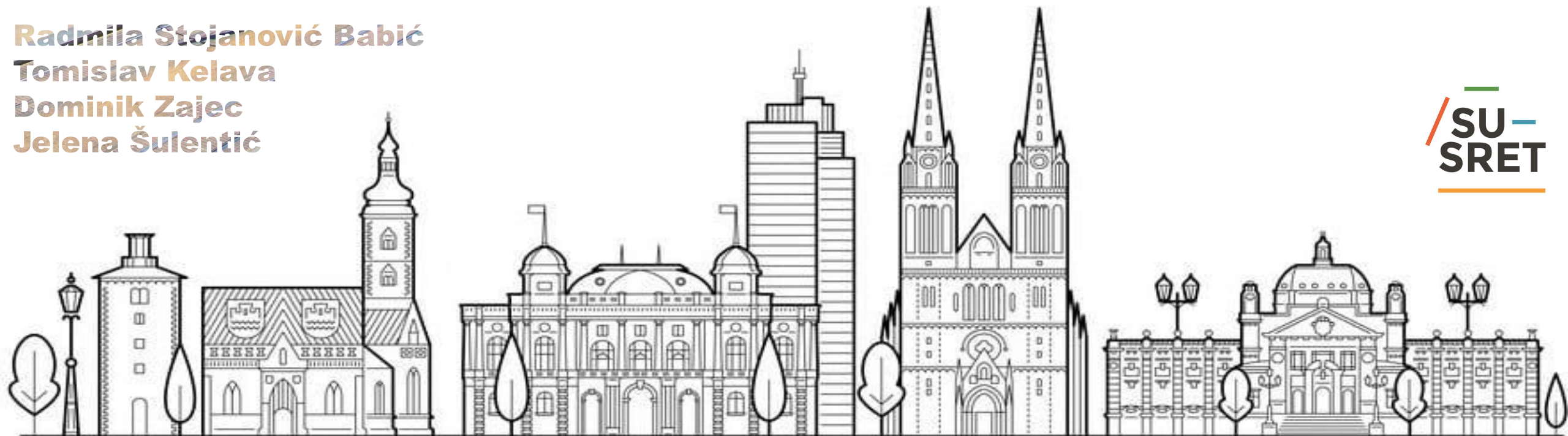


CROATIAN EXPERIENCE

Radmila Stojanović Babić
Tomislav Kelava
Dominik Zajec
Jelena Šulentić

**SU-
SRET**





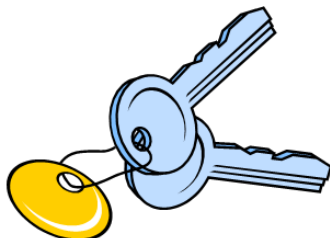
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SUSRET



2006.

Community based housing and
individualized support in Zagreb

Contract with the relevant Ministry

Sustainability

What next? Dead-end street?

*'A ship in a harbour is safe but that
is not what ships are built for'*





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CARe model stands for Comprehensive Approach to Rehabilitation and recovery.

Comprehensive approach

CARe entails a broad approach to rehabilitation and recovery, central to which is the client regarded **holistically** as a human being, without neglecting to consider his living environment and social network.

Within CARe we work with the person in three areas:

- Fulfilling wishes and goals relating to quality of life
- Dealing with vulnerability and reinforcing strengths
- Gaining access to desired environments and maximizing the quality of life of living environments and social networks

The CARe model is meant to support persons in vulnerable situations, due to psychiatric conditions, addiction, homelessness, poverty and marginalisation in their recovery process.

The CARe model is aimed at increasing Quality of Life, self-reliance and community participation.



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CROATIAN TEAM

Getting experience (Dominik)

Personal experience, mixed team (male, female)
sensitivity (Jelena, Tomislav)

Not hospitalized in Sv.Ivan (non triggering
environment)

No previous education as peer trainers

Cooperative, reliable, non judgemental, supportive

Working together in preparations of material
(personal stories and experiences)

Extensive practicing and training before training in
the hospital

Supportive environment in the Day hospitals/Sv.Ivan

Feedback from participants and adjustment of
material and performance





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PEER TRAINERS

Jelena:

- Lots of experience and stories to share connected to each topic
- Most challenging part was nervousness and exposure to people
- With time, it went better and more relaxed
- 'In moment when I felt connected, the feeling was good and felt relieved'
- Good support from trainers and hospital staff
- A direct contact with one participant after closure of formal training

Tomislav:

- Lots of experience and life stories to share;
- Openness for sharing unpleasant experiences to learn from (personal learning and relatable for participants)
- Open toward personal mental difficulties and no self-stigma
- Good support from previous colleagues and friends





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PROCESS



- Research about important topics in peer groups (Ludruga)
- Information that people don't know how to present themselves in the group
- Misunderstanding when communicating
- What is the secret of good communication (verbal, non verbal, listening)
- How to speak about myself and difficulties, how to disclose about illness
- Not only communication issue but trust, safety, recovery process



COMMUNICATION

- Good example from CZ team
- Support in the process of preparation of the material

TOPICS:

- NON – VERBAL c.
- SECRETS OF GOOD COMMUNICATION (LISTENING, HOW TO EXPRESS FEELINGS)
- HOW TO TALK ABOUT YOURSELF
- DISCLOSURE OF MENTAL DIFFICULTIES / COSTS AND BENEFITS

Table 2: Example

Some Costs and Benefits of Coming Out with Mental Illness/Difficulties	
Benefits	Costs
You don't have to worry about hiding your mental illness/difficulties.	Others may disapprove of your mental illness or your disclosure.
You can be more open about your day-to-day affairs.	Others may gossip about you.
Others may express approval.	Others may exclude you from social gatherings.
Others may have similar experiences.	Others may exclude you from work, housing, and other opportunities.
You may find someone who can help you in the future.	You may worry more about what people are thinking about you.
You are promoting your sense of personal power.	You may worry that others will pity you.
You are living testimony against stigma.	Future relapses may be more stressful because everyone will be watching.
	Family members and others may be angry that you disclosed.



What is your decision? The purpose of Worksheet 3 is to yield a decision about whether or not to disclose your mental illness. Two decisions are straightforward:

-Yes, I want to let some people know about my experiences with mental illness.

-No, I don't want people to know about my mental illness.

Although the options are clear, there is no easy way to add up the costs and benefits and come up with a decision. Good decisions are more than the sum of the right and left columns in the worksheet. Clearly, some advantages or disadvantages will be more important and, therefore, should weigh far more heavily in the decision—these are the items you starred in the list.

"Even though I came up with three benefits and nine costs, I can't get past the hope that I'll find other people who have similar problems. So, I've decided to come out at work!"

Table 1: Five Ways to Disclose or Not Disclose

1. SOCIAL AVOIDANCE: Not telling anyone about your mental illness and avoiding situations where people may find out about it. This could mean working or living in a sheltered or supported work environment, where you only associate with other people with mental illnesses.	
Benefit: You don't encounter people who will unfairly harm you.	Cost: You lose the opportunity to meet new people who may possibly be supportive.
2. SECRECY: Participating in work and community situations but keeping your mental illness a secret.	
Benefit: Like social avoidance, you withhold information about your mental illness from others. But, you don't avoid important settings like work or the community in the process.	Cost: Some people feel guilty about keeping secrets. You may also receive less support from others because they are unaware of your mental illness.
3. SELECTIVE DISCLOSURE: Disclosing your mental illness to selected individuals, like co-workers or neighbours, but not to everyone.	
Benefit: You find a small group of people who will understand your experiences and provide support.	Cost: You may disclose to some people who then hurt you with the information. You may have difficulty keeping track of who knows and who doesn't.
4. INDISCRIMINANT DISCLOSURE: Making the decision to no longer conceal your mental illness; this does not mean, however, that you are telling everyone your story.	
Benefit: You don't worry who knows about your problems. And you are likely to find people who will be supportive.	Cost: You may tell people who then hurt you with the information.
5. BROADCAST YOUR EXPERIENCE: Actively seeking out and educating people about your experience with mental illness.	
Benefit: You don't have to worry who knows about your history of mental illness. You are promoting a personal sense of empowerment in yourself. You are striking a blow against stigma.	Cost: You are going to encounter people who may try to hurt you with this information. You are also going to meet people who disapprove of your political statement.



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PSYCHIATRIC CLINIC SV.IVAN ZAGREB - PREP

- Open to new experiences and cooperation with volunteers outside the healthcare system
- Advanced viewpoint
- Supportive stuff
- Good preparation and structure from the hospital side
- In July was announced education in October
- 2 initial meetings with the team in the Clinic
- Term of education agreed much in advance (long before start)
- Info pamphlet for staff and for participants
- A week before start – presented ourselves in the groups
- Start – well prepared (stuff/participants)

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Projekt Edukacija i osnaživanje za prijelaz u zajednicu
Centar za mentalno zdravlje i razvoj skrbi iz Praga (Češka), Recovery college iz Tallina (Estonija) i Udruga za psihosocijalnu pomoć Susret iz Zagreba.

Cilj projekta je **osnažiti** osobe s teškoćama mentalnog zdravlja za život u zajednici kroz edukaciju iz 3 važne teme:

Oporavak
Oporavak je različit za svaku osobu. Ipak, ključno u svim definicijama oporavka je nada, samoodređenje, samostalna briga o sebi, osnaživanje i zastupanje.

Osobni oporavak je **sposobnost kreiranja i življenja smislenog života** u kojem osoba doprinosi (svojoj) zajednici po izboru sa ili bez prisustva simptoma psihičke bolesti.

Oporavak se može usporediti s putovanjem koje je jedinstveno i osobno iskustvo za svaku osobu.

Komunikacija
je proces razmjene informacija, poruka, osjećaja i misli.
Komunicirati znači sporazumijevati se.
Komunikacijom primamo i šaljemo poruke da bi nas se razumjelo i da bismo mi razumjeli druge.
Komuniciramo verbalno (riječima) ili neverbalno (bez riječi).
Kako komuniciramo s drugima? Razumijemo li se? Zašto dolazi do nerazumijevanja?
Koja je tajna dobre komunikacije?

Sigurnost
Gdje je moje sigurno mjesto? Što mi znači? Osnovne potrebe.
Sigurnost kod kuće
Okidači (poticaji) koji utječu na promjenu ponašanja i osjećaja)
Na koji način kreirati sigurno mjesto?

Predavanja i radionice traju 60 minuta i održavat će se

svaki **PONEDJELJAK**
Početak: 17. 10. 2022.
Završetak: 09. 01. 2023.

Dnevna bolnica za psihotične poremećaje
15.30-16.30

Tim udruge Susret čine:
Radmila Stojanović Bažić, predavačica i podnaginja
Dominik Zapeć, socijalni radnik
Jelena Šulentić, osoba s iskustvom (peer)
Tomislav Kelava, osoba s iskustvom (peer)

Sveti Ivan Zagreb

Education and empowerment for transition to community 2021-2-CZ01-KA21-SADU-000050475




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PSYCHIATRIC CLINIC SV.IVAN ZAGREB - PERFORM




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Povratak u zajednicu
Kako podržati svoj oporavak


Osobni Priručnik za OPORAVAK

IME:


Priručnik je razvijen u okviru projekta Edukacija i osnaživanje za prijelaz u zajednicu (Education and Empowerment for Transition to Community) financiranog putem Erasmus+ programa. Projekt provodi Centre of Mental Health Care Development iz Češke u suradnji s projektnim partnerima Wellbeing and Recovery College iz Estonije i Udrugom za psihosocijalnu pomoć Suseri iz Hrvatske.



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EXAMPLE

Chinese symbol for listening
TING

Ear

Eye

Undivided
attention

Respect

Heart





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**SU-
SRET**

