

Prof. Angelo Barbato

WAPR postpresident, Milano Italy

"From residential care to supported housing for people with mental disorders".

Residential care and supported housing are two models of accommodation for people with mental disorders in post-institutional mental health systems. In residential care, the emphasis is on treatment and rehabilitation provided by professionals in staffed facilities belonging to community psychiatric services, whereas in supported housing the emphasis is on outreach need-led support to people living in their own home integrated in the community.

The supported housing approach grew from a dissatisfaction with the original model of residential facilities, developed in the early wave of downsizing or closure of mental hospitals, based on the concept of a "linear continuum", in which persons were supposed to gradually progress from hospitals, through less supervised accommodations, halfway houses, group homes, to reach finally independent housing. This model failed in most cases to move people toward independent lives and trapped many people in segregated residential settings. This was also due to the confusion between accommodation and care. Instead, a core aspect of the supported housing model is the separation between accommodation and treatment services.

Problems of supported housing may include housing affordability, location in unattractive neighborhoods, complex organization of outreach services, failure to provide flexible support, boundary problems between health and social services, isolation and safety of residents.

The latest developments will depend on integration between the social sector (housing) and the health sector (mental health care).

An array of residential services are required in a balanced mental health system. At a given point, shelters that represent veritable social lifeboats, tertiary care facilities, supervised residential settings, or apartments may represent the best balance between the need for socialization, treatment, crisis support, rehabilitation, and autonomy. The adoption of a supported housing approach does not mean that time-limited residential alternatives to hospital admission should not be available. However, the availability of a variety of solutions should not open the door to an uncontrolled increase of small institutions