MAKE – ABLE

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Abstract

Once upon a time there was the asylum. That place, where was the madness was confined, since 2000, in Italy no longer exists: it was canceled a shame of the society. Law 180, which abolishes the asylums, is not only a law of better health care, but is based on the values of democracy, freedom, justice, peace and solidarity. Healing must take into account the individual, his history and his context and in support of the individual crisis, must be activated the community resources. Said Franco Basaglia: "Technicians cannot be the only one involved in the rehabilitation and the care of the sick, but the subjects of this rehabilitation must be the sick and healthy, that only becoming the protagonists of the transformation of society in which they live, can become involved in a science whose techniques are used to defend them and not against them."
The Grundtvig project "Make Able" began as a fairy tale, to be feed and tell: it takes form by a contact seminar, held in Malaga in 2009, where, around a table, where people, strangers until that moment, become fervid about the possibility of promoting a kind of social redemption on a European scale for some people, the mentally disabled, for the most, considered at the margins of society. In the working group there is a growing determination to introduce a different reality, a reality made up of people who are in great need of... a relationship, have a strong need to establish human contact, have their voices of unfortunate people heard, their stories, made of too much suffering and injustice. For our part, we want to tell the Italian experience, for a "Europe without asylums, free, open, democratic, peaceful, "a dream in the presence of reason". This is not just something fantastic, but also the reality of a territory, a space between Czech Republic, Slovakia, Great Britain, Belgium, Spain and Italy, both real and virtual, which extends up to become an enthusiastic space, a boundless space for a "good" mental health. Until 1978, the year of enactment of Act 180, better known as Basaglia law was in force Law No. 36 of 1904 by which the Parliament of the Kingdom of Italy stated that "persons affected for any reason by insanity, deemed dangerous to self or others, or of public scandal "had to be hospitalized in mental hospitals, where would be" kept and cared for". The primary purpose of the law was the protection of public order. The care of the insane was in second place. The Director of the asylum was given full authority over the health service inside the structure and supervision over the economical part. The cost of treatment of the alienated, in poor economical situations, belonged to the provinces. The supervision of private and public asylums or institution for psychiatric patients was assigned to the Ministry of the Interior and the Prefects. The patients were to be divided by sex and pathological categories. Each institution was forced to have rooms for patients in observation, work areas in the hospital, rooms for the isolation of the dangerous, for defendants acquitted and those who had already served the sentence, for the infectious and so on. The asylum was not so much an institution responsible for the treatment of persons suffering from the psychological sphere, but rather, a preventive mean designed to prevent the healthy human to be infected by the evil of madness that could corrupt them. Enter a mental hospital structure was very simple: it was sufficient that four people signed a letter in which it was said that the individual ‘X’ was dangerous and had he was suffering of an illness of any kind (without, however, that this was necessarily true), to trigger the procedures for admission. The experience not only hurt inside: all measures of hospitalization were transcribed in the criminal record, where remained forever. This way, when the alienated, obtained the chance to leave...
the mental hospital, returned to the supposed “healthy” world with a stigma and find a job became almost impossible.
At this point, I want to remind the treatments the patients were undergoing in the forties and fifties: Insulin therapy for people with schizophrenia, so that they would go into hypoglycemic coma; seizures that were created in these situations, were supposed to eliminate the schizophrenia. When the inmates were “awakened” by the administration of sugars and after the exit from the coma, they were very receptive to interpersonal relations: the situation was exploited to implement various forms of psychotherapy. In 1939 was an Italian, Ugo Cerletti, who propose that the injection of insulin could be replaced with a shock caused by the passage of a stream of relatively low-voltage electrical current. This is how the electroshock was born, to be implemented by applying two electrodes on the patient's forehead, near the temples. It was a very brutal method of treatment, whose side effects could be devastating: loss of memory not always reversible, fractures and dislocations of the bones (especially of the jaws but also of the vertebrae), falling teeth, muscle damage, cardiac dilation followed by syncope. Therapy ranged on average about ten sessions, to be made two or three times a week, but a particularly serious patient could be subjected to a double number of shocks. In the ’70s were introduced the drugs, but the practice of electroshock as of today, is still in use in many parts of the world. As is unfortunately still in use, the lobotomy, a surgical procedure with which is caused an injury to the brain, that would alter forever the character of a person.
The closure of mental hospitals did not mean that in Italy there were no longer mentally ill, psychiatric pathologies survived the Law 180 and it immediately showed the inadequacy of care centers as places of care. Psychiatric hospitals were to be replaced by a series of open outpatient care that would guarantee an effective treatment to patients, acceptable in terms of therapeutic and personal dignity. This, unfortunately, occurred to a limited extent and mostly in regions traditionally of “good governance” (Emilia Romagna and Umbria) and in those that were most directly affected by the work of Franco Basaglia (Friuli, Veneto and all of North-East Italy). The assistance has reached peaks of excellence in the regions just mentioned, but in southern Italy and islands remained the lack of centers and facilities for mental health. It’s clear that the situation is and remains patchy, but it should be noted that are the people and not centers that create excellence.
Sensible to these concerns, and because we insist in both the region where Franco Basaglia took his steps, and for the existing problems in the territory in which we operate, we felt it important to work on mental health.
The project “Make able” has been approved and funded in July 2010 and so has started a fascinating adventure that will take us in different partner countries to know different realities, but at the same time similar. We will be accompanied, on this journey by the so called mad people, who, like we saw in the first project meeting in Valencia, have a sensitivity that leaves sometimes shocked, positively shocked, they took us to visit the city, we heard their stories, we invaded their space, we shared every moment of the day with a serenity that has surprised us all.
The purpose of the project are the acquisition of social skills and cultural rights by adults with mental disabilities, skills that can help them become self-confident enough so that they can become active members of society in which they live and work. The partnership aims to explore, develop and share a model of active citizen even if disabled. For this reason, during the project meetings there are a number of activities in which these people are actively involved according to their potential. They will then select, with the sharing of all partners, innovative methods of good practice using the different geographical and cultural contexts. The motto that characterizes the project is learning to learn in different and informal environments. The added value of this partnership is that each partner contributes with its own identity, which is different from all others. This project has the ambition to become the springboard for future projects aimed to a full integration of persons with mental disabilities, people with their limitations but also with their personal richness can be part of a society that defines itself civilized.
Our organization wanted to give a tangible contribution to the activities involved in building an album of memories as a personal museum through the techniques and methods of the autobiography, in order to build confidence in people with mental illness.
The autobiography offers:
- a particular method to determine time with themselves and take care of themselves;
- a way to cultivate the ability to learn from their experience and their way of being;
- in telling his life the subject builds, organizes and educates himself because:
  - the autobiography makes possible to explain and give meaning to their experiences;
  - remember our history helps us rediscover our "cognitive" capacity to know, learn and do;
  - engage in an autobiography means "redefine" themselves in terms of personal development;
  - write and tell the story or fragments of themselves are useful ways to deal with the wounds of life and so to cause useful changes.

The workshops have enabled three main phases:
1. phase of reflection: the authors choose the main idea of a theme, remember a specific episode to use as a starting point and on focus the positive or negative experiences related to their life;
2. phase of expression: the anecdote or reflection takes form and the author steps in from the "living self" to the "writing self";
3. exchange phase: all the texts and points of view are shared with other participants.

The reflection phase, to be made in solitude, regards:
- Retrospection (thinking, remembering, mediate, reflect)
- Interpretation (translation of experience in language closer to the present);
- Creation (every memory is creative and gives meaning to action).

The exchange phase is in fact an important time of sharing and building in the encounter and confrontation with others:
- The group stresses the main aspect of personal narrative;
- The group, as a neutral witness, validate the story for what it is and what it represents.

The assessment will see the reworking of the material produced and a critical analysis of the result reached by the parties involved which will be enabled to become aware of their past and their life experiences.

The collected material corrected and edited has been printed and officially presented to the local community and European partners as an example of good practice for the meeting of the project in Italy.