



Service charter

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INTRODUCTION

We wanted to provide in this service charter the way of being and working of the LAHUEN PSYCHOTHERAPY AND WORK COMMUNITY.

Born on December 1, 1983, the community has built its own identity over time, of which these pages offer a summary. It was necessary after a long time to summarize a way of doing therapy that was a clear reference for those who gravitate in and around the community: patients, operators, families, psychologists and psychiatrists, health units, judiciaries, law enforcement agencies and public opinion.

It was a right-duty as well as a necessity to present who we are and what we do, clearing away false ideas, prejudices or bad information.

The Lahuèn Community is among the first in Italy to treat mental pathologies and deviances such as drugs, alcoholism, drug addictions, according to a community model and not a psychiatric clinic. In our vision, the psychiatric intervention accompanies the much broader one on a psychological, psychotherapeutic and relational level, with a global involvement of the operators with the patients at various moments of the day.

The Lahuèn Community is a laboratory of life, a development of energy, constant research into what binds the person to their pathologies. It is a more human and more global way of intervening on the psyche than in the past.

Paolo Manco



HISTORY

The Lahuén Community was born in the area of Corchiano (Viterbo) on December 1, 1983 on the initiative of the spouses Paolo Vincenzo Manco and Mirella Guerrovich. On 2 June 1984 it moved to Orvieto (Terni) in the locality of S. Faustino, near the nineteenth-century Villa Laura and from there it definitively established its headquarters in a brand new structure in Colonna di Prodo, still in the municipality of Orvieto, the 13 July 2011. The current headquarters, conceived as a small village converging on a central square, overlooks the Tiber Val-

ley and Lake Corbara, along the slopes of Mount Peglia. It is a relaxing environment, full of greenery, where you perceive a sense of welcome because the community must give the idea of home and village, of intimacy and relationship. A place where you can feel good, open to interiority, reflection and human relationships. To date, this place of life and care continues its project with the passing of the baton to Fabiana Manco, the only daughter of the founders. In recent years the community has welcomed and treated 843 patients.

THE IDENTITY

The Community is defined in the articles of association as "Community of Psychotherapy and Work for the recovery of the person".

The goal and reason for existence of the community are to help people rediscover themselves, their energies, their enthusiasm and the joy of living.

The community is not conceived as a psychiatric clinic but as a group of people who stay together to change the quality of their lives and learn to live together and share the richness of their being.

Everyone contributes, each in their own way and according to their own potential, to the good performance of the entire group and each of its members.

The idea of involvement is closely linked to the idea of community. All the people who compose it (patients, operators, professionals, collaborators, etc.) are required to favor communication, emotional relationships, self-involvement with all the energies, riches and abilities of their person throughout the entire life cycle. day. The Community does not only deal with pathologies, it is not a clinic, nor a hospital, nor a family home but a center where there are people who work, who create, who live in contact and question each other.

EPISTEMOLOGICAL THOUGHT

INTRODUCTION

The years that have passed since the foundation of the Lahuén Community (December 1983) and of the IPA UMBRIA (October 1984) have been of profound trouble for the development of a way of being therapists which has gradually become more precise and which today appears to us very clear in the strength of its contents. We needed to define our identity as a community before developing teaching programs that were a proposal of something personally experienced before being learned

from other schools or experiences. This is the reason why IPA UMBRIA had so many difficulties in giving itself life, structure and programmes. The work of all those who have been within or close to the community, the many hours of analysis, the close proximity with the patients have allowed us to accumulate experience which is the foundation of a method that only today can we say belongs to us "global psychotherapy".

GLOBAL PSYCHOTHERAPY

We have learned from experience as well as from our intuition, that there is a profound schizophrenia within the person that leads him to see himself not as a unity, totality, globality, but as a part. In reality we are whole, we are a totality, complexity. The person goes beyond individual aspects and individual dimensions.

In a person it happens that one aspect tends to prevail, that one part acts more consciously, but we must never

lose sight of the fact that the person is complexity where it expresses one of its parts most, it is united where it seems that one part acts separately from the others. If one writes, the affected organ is the hand, in reality, the whole body is involved in this operation. So when we think, not only the brain is affected but the whole person.

GLOBAL PSYCHOTHERAPY IN THE THERAPEUTIC COMMUNITY: THE LAHUÉN METHOD

This idea that being a person is a complexity, a whole, is a fundamental key to understanding being therapeutic as it is understood in the Lahuén Community and as it is taught at IPA UMBRIA.

For us, psychological illness is an aspect of the person, toxicity is an aspect of the person.

The disease is part of a totality: the person; the person is part of another whole: the family; and gradually from totalities to increasingly complex totalities.

The more we interact with the person in his complexity, the more we touch the reality of being a person.

Our relationship is not just therapist-patient but fundamentally it is person-person with all the implications that

this entails.

In a vision of this type the so-called patient is therapeutic for the so-called therapist.

The patient has become such because he no longer knows how to see himself as unity, totality, complexity, but only as a part. He feels like a sick person, a drug addict, an alcoholic, a madman. That is, he fixes himself on a single dimension of himself.

The community's response is to feel global, together, unity, complexity, life in its many aspects: personal, social, work-related, artistic, etc. The community's response to the disease is to bring the person to the maximum expression of all their potential.

GLOBAL PSYCHOTHERAPY: ITS IMPLEMENTATIONS

1. In the Person-Patient

Starting from the premise that the patient's being is not just his illness, he is called to recognize and relive his conflicts through the contribution provided by individual and group analysis. However, throughout the day he is encouraged not to focus on his illness, but to develop his potential; that is, he is called to treat his sick part with the healthy part of him, becoming his own first therapist. The awareness of being a globality, a set of aspects, removes from the person that deterministic, pessimistic and desperate constraint into which the disease induces him. The patient's hope is based on the gradual awareness of having healthy parts on which to build a better existence. The reality of the person-patient goes far beyond the onset and development of his illness. The patient's story is made up of successes and failures, good and bad, healthy parts and diseased parts.

Global psychotherapy. A new way of being therapists. Global psychotherapy is an invitation and an action of rapprochement with one's entire history, for better or for worse; to all one's constructive and destructive energies, to one's entire existence.

Global psychotherapy is an invitation and an action to explore and make contact with one's body and all its potential, with one's psyche and all its energies, with one's spirit and all its infinite resources.

It is ultimately taking care of one's person as a whole, recrossing it both horizontally (its various dimensions) and vertically (depth of the individual dimensions).

2. In the Person-Therapist

If it is true that the person-patient does not identify with his illness, it is also true that the person-therapist does not identify with being healthy; he too is accompanied by his illness and his limitations. It is certain, however, that one cannot be considered a therapist, that is, capable of stimulating a positive change in others, without being capable of leading oneself to be, to live, to exist.

This is the therapist's task: to develop one's potential and energy to the maximum and to know oneself and one's pathology more and more. The image of the traditional therapist, i.e. the one who, having worked through his own conflicts, is able to help resolve those of the patients, has a restrictive meaning in the vision of global psychotherapy.

Being a therapist is not just about knowing your own sick side, it's about focusing your attention and translating into life everything that is healthy and creative in your person.

With respect to the patient, the therapist's task is not exclusively fixed on the pathology but tends to solicit and stimulate all the healthy and creative parts of the patient-person.

The therapist trained in a global psychotherapy perspective is called to be and to be real, that is, to express all the energies of being.



3. In the community

A community set up according to the principles of global psychotherapy has as its final objective the harmonious development and therefore the well-being of all the people who compose it.

The community is a coexistence intended to develop all the resources of the members, both as individuals and as a group.

The community is a group of people who continually question themselves through individual and group psychological investigation, but at the same time it is a group of people aimed at the maximum development of themselves, their energies and creativity in a spirit of close collaboration with the individual and with the group.

The therapeutic value of the community is therefore not only measured by the ability to reflect on the pathology of individuals and groups but also by the ability to release resources, life and planning.

The therapeutic nature of the community consists in teaching life, in harmoniously developing the whole person. A community of this type is characterized by the multiplicity of its interventions.

The therapeutic nature of the community lies in the globality of its approach.

THE GLOBALITY PRINCIPLE

The principle of globality can be usefully explained, even if partially, by resorting to the famous apologue by Menenius Agrippa.

When the Romans, divided by internal struggles between patricians and plebeians, risked the collapse of the city, Menenius Agrippa reached the plebeians who had retreated to the Aventine and made this speech to them: One day the various members of the human body, tired of the stomach which, according to them, was perfectly selfish because it fed on what they provided it, decided to rebel. The hands crossed, the legs stopped, the mouth remained closed, the teeth no longer chewed. A few days later the human body, deprived of the substances that came from the stomach, began to weaken and he realized that without the stomach, the body's limbs could not function and the whole body risked dying. So they stopped waging war on the stomach.

Here it is: the principle of globality means stopping making war on each other but committing energy to unify and unify, that is, developing all parts of oneself and others in a balanced way.

a) The principle of globality applied to the person means:

- All dimensions of the person are important because they contribute to forming a unit: the person.
- The more the individual dimensions are known and highlighted, the greater the knowledge and power of the person.
- The well-being or malaise of one dimension contributes to the well-being or malaise of the whole person.
- The final objective of every therapeutic intervention is not the well-being of one dimension but of the whole person.

Anything that releases energy, increases the level of consciousness, puts one in touch with one's own and others' potential, stimulates creativity, is considered therapeutic. In a community of this type it is important to make a bed, keep the house in order, look after animals, garden, be an electrician, a mechanic, a carpenter, learn crafts, engage in theatrical, pictorial and musical activities, take an interest to cultural and political life, practicing sporting activities, learning to communicate with oneself and with others, to express one's feelings, to know oneself more deeply.

In summary, everything that is life, an expression of a creative self, is therapeutic.

The community becomes a LABORATORY OF LIFE, that is, a place where you work for your own and others' growth, in order to develop yourself and all the members of the community to the highest level.

Global psychotherapy in community means working on two levels: one conscious, the other unconscious; both must be explored and experienced to the maximum degree.

Global psychotherapy means interacting with others with the totality of one's energies, with one's whole person.

- Acting for the well-being of the person as a whole means acting for the individual parts.
- The overall well-being of the person prevails over that of a single part.
- The well-being of a part is false if obtained to the detriment of or against the whole.

b) The principle of globality applied to the community means:

- The community is the set of people who compose it.
- The well-being of the community passes through the well-being of the people from whom it is formed. The better off the people, the better off the community is; the more the individual person is protected, the better off the community is.
- The well-being of the community comes before the well-being of individuals; if the individual person substantially attacks the life of the community, she must be put in a position not to cause harm.
- The true well-being of the individual cannot be against the well-being of the community. If something is good for the individual, it is good for the community. If it's good for the community, it's good for the individual.
- The community grows to the extent that individual people grow. Maximum development of people leads to maximum development of community.
- The community is stronger than the individual. Where the individual fails, the community can succeed.

Towards a new anthropological vision

The principle of globality = seeing the person in a unified way, can be usefully applied not only as a therapeutic method but also as a more complex and harmonious way of seeing man.

Contemporary civilization which has abolished the bar-

riers of time and space and which through the mass media has made the completely ignored practically visible, makes peoples, cultures, traditions, scientific results and economic systems familiar and close.

The earth belongs to man today much more than in the past; we are truly children of planet earth.

In such a complex and interdependent civilization we can no longer afford to go our own way. The period of the communes is long over; but the period of the nations is also ending. We are moving towards supranational states: a united Europe at the gates.

We can no longer afford to live or see things individual-

MISSION

The principle and purpose of the Community are the people who constitute the ultimate and most important objective. All those who in various capacities are an integral part of the community have as their fundamental objective that of bringing themselves to truly be Persons, that is:

- subject free from internal and external conditioning;
- capable of moving creatively towards oneself and

olistically. We are moving towards a more planetary perspective of seeing life, relationships and problems.

Today a global anthropology is imposed, that is, a way of seeing man and the person as the result of solicitations coming from all over the planet and as a starting point for solicitations towards the whole planet. It is a long discussion that needs to be expanded and deepened but it does not concern the main objective of this work aimed at incorporating the key elements of a new way of doing therapy: global therapy.

Therapy of the conscious and the unconscious, of the real and the fantastic, of the whole and unified person.

others, that is, capable of loving oneself and others.

Respect for the person and growth of the person must be established by every member of the community, especially by all those who hold roles of responsibility and whoever does not accept this principle betrays the fundamental rule of the Lahuèn Community.

TYPE OF USER

The Psychotherapy and Work community is a psychotherapy community open to any type of psychological, mental distress and dual diagnosis. It therefore welcomes people with so-called "main" psychiatric pathologies in the non-acute phase, and with individual and environmental traits that give the possibility of concrete work aimed at healing, if possible, or, alternatively, at achieving a good clinical and behavioral compensation such as to allow the person's self-management from the most everyday levels to the most articulated and complex ones.

People with more or less serious mental health problems can therefore turn to our Community as long as they do not have a long psychiatric hospitalization or, in

the opinion of the treating doctors, SIMs. and our medical collaborators, neurological injuries.

Our Center carries out in-depth research on the person's psychological and existential problems and this type of work cannot be carried out without the collaboration of the interested party, under penalty of certain failure of the therapeutic project; Precisely for this reason no one can be forced to enter and stay with us without his explicit consent. Requests relating to users aged between 18 and 37 will not be taken into consideration; with restrictive measures (reliance on social services, obligation to sign, etc.); with severe mental retardation; HIV seropositive; being treated with methadone, buprenorphine, etc.

ACCESS METHOD

The user accesses our service through a telephone request followed by an interview within 10 days, following the sending of a medical history report of the patient by the private individual or the sending institution (CSM, DSM, Sert, Municipality, etc.). During the interview, the patient and their family members are informed about the services provided by the Community, the information contained in the above report is integrated, the reasons that brought the patient to the community are assessed and a summary assessment of the patient's suitability is made. to be included in a group, and of its structure to accommodate the patient's peculiarities. If the judgment is positive, the community sends a declaration of availability to enter to the sending institution and awaits

the authorization to include the patient. In the meantime, a patient information sheet is compiled which is supervised by the team during the weekly meetings and will allow an initial understanding of the patient and an initial development of the therapeutic interventions to be implemented during the community placement phase.

If there are linguistic or socio-cultural barriers that could limit the effectiveness of the interview, the Community can make use of interpreters or cultural mediators, made available by the ASL or by the Community itself, in order to guarantee the best welcome and a complete and peaceful exchange of information.



ADMINISTRATIVE ASPECTS

Our daily fee is €150.00 (one hundred and fifty euros), in accordance with the D.G.R. 7404/1997 of the Umbria Region and subsequent resolution of the regional council n.406 of 2 March 2005. The fee is VAT exempt, based on Article 10 of Presidential Decree 633/72 and subsequent amendments.

The fee includes food, accommodation, community and personal laundry, psychotropic drugs, medical history interview, group therapy, individual therapy, interviews with family members, psychodiagnostic assessment. Family therapies and all personal expenses, such as clothing, shoes, hairdresser, barber, beautician, cigarettes, health tickets, instrumental medical evaluations, etc. are not included in the fee. The daily fee will still be due even if the patient is temporarily visiting his parents. Starting from the fourth night outside the community, as per the agreement, 30% of the daily fee will be reduced.

QUALITY AND ACCREDITATION

Our Community holds the UNI EN ISO 9001 quality management system certificate.

Furthermore, our structure is in possession of the following documentation:

1. Authorization from the Regional Council of Umbria with Executive Decision no. 4339 of 06 July 2011 to carry out the activity of 2 type B therapeutic rehabilitation community modules.
2. Renewal of institutional accreditation of the Regional Council of Umbria with Managerial Determination n.7143 of 01/08/2016.
3. Agreement with the USL Umbria company 2.

PEOPLE

DIRECTOR

The director, a psychologist-psychotherapist, is ultimately responsible for all the psychotherapeutic and educational activity of the community.

It is up to you as a person to be a synthesis of all community energies, and to be an analysis of all the psychodynamic and real movements of group life.

A strong moment for an analysis and synthesis of community life is group psychotherapy, carried out twice a week, and team meetings.

But the Director's action in community life must take place on a daily basis, in order to have a constant pulse on the various community problems and needs.

To achieve this you will avail yourself of the collaboration of all those who in various capacities have a space for direct observation of community life.

The director's ultimate goal is to bring everyone to be a PERSON:

- capable of establishing rules that respect one's own and others' freedom;
- capable of knowing and respecting one's own limits and those of others;
- capable of recognizing and developing one's own resources and those of others.

For patients coming from the local health authority, a resolution is requested with a commitment to spend the aforementioned fee. In the event that the ASL does not pay all or part of the daily fee, the family will undertake to pay the entire amount or the difference as a supplement, in advance by the 5th of each month.

Furthermore, family members are asked to provide a civil liability policy upon entry with a minimum limit of one million euros to cover any damage caused.

During the first interview, the patient and family members are informed of the community rules contained in the regulation which must be duly signed. A declaration is also signed by the patient and family members which allows the facility to use the data of the interested parties for privacy purposes.

To achieve these objectives, the Lahuèn Community establishes criteria and methods for:

- define the specific functions,
- identify everyone's responsibilities,
- create shared methods and procedures for providing the service,
- monitor the patients' status through the Personalized Treatment Plan,
- periodically review its service delivery processes in such a way as to determine an organized system of continuous improvement
- accompany the patient during his reintegration phase.

HEALTH DIRECTOR

He is a psychiatrist present in the facility one day a week. She coordinates in continuous dialogue with the responsible director the medical staff made up of another consultant psychiatrist, an internal general practitioner, the general practitioners of the area having our guests at the health home on site; the nurse, the OSS

He assumes the following responsibilities:

- deals with the psychiatric clinical evaluation at the time of insertion, the prescription of psychotropic drugs if necessary, the possible administration of psychodiagnostic tests, the clinical interviews to evaluate the patients' mental health status, the reports requested by ASL, institutions, families etc.
- issues specific procedures relating to pharmacological and hygienic-sanitary aspects.
- defines the community's health policy;
- is responsible for organizing staff within specific healthcare organizational aspects
- checks the Risk Assessment Document and verifies its organizational adequacy in consultation with the Responsible Director.
- presides over the management of all kitchen activities (menus, HACCP, temperatures, controls, etc...)

OUR PROFESSIONALISM

The professionals who provide service in the community are psychologists, doctors, nurses, OSS, psychiatric rehabilitation technicians, social workers. They work in close contact with the management, creating a therapeutic plan that, while respecting professional autonomy, can be reconciled with a community therapeutic vision. This means:

- a) right-duty, to inform on the interventions carried out and bring their work to the attention of the manager;
- b) safeguarding by all of the identity of the Lahuèn Community which implements a community, psychotherapeutic and ergotherapeutic intervention.

Professionals integrate as a living part of the community fabric so that they are not experienced only as specialists, but as people who share an experience and are not limited to watching and studying it from afar.

They are responsible for the patients entrusted to them within their specific competences. They will not allow unauthorized drugs to be given in any way by either the doctor or the psychiatrist.

If there are patients who need to be followed in a specific way, they will report it in order to take appropriate measures to protect the patient.

Since ours is a community of psychotherapy and work and not a clinic, if patients do not prove suitable for group life, or do not offer margins for improvement in their mental conditions, or are in the condition of needing a strictly psychiatric, are required to report it to the Management, who will take appropriate measures.

Let's look specifically at their tasks:

- The general practitioner deals with strictly organic problems, treating on-site only pathologies that do not require specialist intervention or hospitalization. In these cases he will report this need so that the most appropriate solution can be agreed with the families or local health authorities to which they belong. He works in collaboration with the Medical Director, informing him of all the initiatives he undertakes, especially if they concern the psychiatric field.

The doctor is present in the facility every Friday morning and is contacted whenever deemed necessary. Further-

more, upon entry, the medical address is acquired for each patient who is assigned a referring GP for the entire duration of the process.

- The nurse works in collaboration and complementarity with psychiatrists and the general practitioner. In particular:

- Performs all tasks relating to his professionalism when on duty.
- Checks the expiration of medicines and takes care of the periodic disposal of special waste and expired medicines.
- Ensures the functioning of the equipment and instruments located in the medical office.

• Is informed by psychologists about possible manipulations of patients with respect to drugs.

- The psychologist follows the patient's psychological growth by engaging with him throughout the day, pointing out the people most in crisis or those in need of psychotherapeutic treatment without ever descending into analytical interpretations.

His role is a psychological support function unless expressly authorized by the Director for in-depth psychotherapeutic interventions or clinical interviews.

The compilation of the PTP (personalized therapeutic plan) is entrusted to the psychologist.

- The social worker is a professional who takes care of the community's relationships with institutions and families. In particular:

- is concerned with the flow of information from the community to institutions and vice versa;
- ensures that reports on the progress of patients are sent to the local health authorities, to the competent bodies or to families who request them;
- maintains relationships with families and is available to pass on any material needs of patients to them;
- takes care of insertions;
- takes care of all the practical needs of patients (renewal of driving licences, disability pensions, work expectations, contacts with judicial authorities).

- the social health worker

-the psychiatric rehabilitation technician

SUPERVISION AND ONGOING TRAINING

The psychologists on duty carry out weekly meetings aimed at interviewing and/or supervising significant situations, always in the presence of the person in charge or whoever takes her place. The entire therapeutic team carries out supervision with an external psychotherapist and other moments of supervision always with external

consultants.

Furthermore, two training meetings are scheduled per year, organized within the structure with ECM credits. Each professional undertakes to complete the training courses required by law on your behalf.



THE METHOD

Ours is a global rehabilitation intervention in which operators act therapeutically by bringing into play all the energies and riches of their person and patients act therapeutically if, in addition to treating their pathologies, they develop all their potential.

The objective is the recovery of the Person through the mobilization of all creative energies and the search for everything that hinders development and causes mental suffering.

This therapeutic action is carried out with the collaboration of various professional figures from the psychiatrist, to the doctor, to psychotherapists, to psychologists from different schools and to other professional figures in the educational and rehabilitation field.

We call the set of interventions on the psyche involving both patients and specialists, albeit with different levels of expertise, "global psychotherapy", precisely to highlight how important the involvement of each person in the growth process is.

General medicine medicines are prescribed by the doctor; psychotropic drugs are the responsibility of the psychiatrist who also holds the role of Medical Director. The use of drugs and psychotropic drugs is reduced to what is essential to create the conditions for good functioning of the mind. the psyche is the terrain on which community intervention is concentrated.

This explains the massive presence of psychologists and educators to guarantee relationships, dialogue, knowledge of oneself and others.

SERVICES PROVIDED

ACCEPTANCE AND PSYCHODIAGNOSTICS

Before entering the facility, the following documentation will be acquired, viewed and validated by the treatment team in the persons of the responsible director, medical director, psychiatric and general medicine consultants, nurse and social worker:

- Entry report of the sending contact person;
 - Clinical tests: stress ECG, blood count, lipid profile, liver function, renal function, thyroid function, HIV, hepatitis, complete urinalysis, Beta HCG, vaccination record.
- Upon entry, the patient will be subjected to a psychiatric examination (collection of medical history, drug therapy, vision tests, etc.) and medical examination and a medical record will be drawn up which will be updated every

time the patient undergoes a check-up (with regards to the appearance psychiatric he will be monitored bimonthly and as needed). From the moment the patient enters, there follows an initial reception period where he gradually accesses the rhythms and community rules supported by an elderly patient on the path and by an operator (who is entrusted with the drafting of his PTP) who follow his inclusion in the Community, making him known and sharing with him all the moments of the day. During the first two months, the first diagnostic assessments will be carried out, which will be repeated throughout the process in order to monitor the outcome of the treatment as specified in the following table.

STEP	GOALS	INSTRUMENTS
Entrance (within the first week)	Integrated diagnostic evaluation, preparation of therapeutic plan	Psychiatric interview and compilation of medical records, VGF, opening of PTP
Assessment (within 6 weeks of entry if clinical conditions allow)	Preparatory to evaluation of outcome	WAIS IV, SCL90-R, MMPI -2
Six-monthly monitoring	Clinical, psychological and rehabilitation follow up of the therapeutic program	PTP
After 18 months from entry	Symptom monitoring	SCL90-R
Resignation last week	Outcome of the journey	WAIS IV, MMPI-2, SCL90-R

PSYCHOLOGICAL AND PSYCHOTHERAPEUTIC AREA

Individual psychotherapy is psychotherapy intended for a single person that takes place twice a month or as needed. The matrix is existential psychoanalytic, EMDR, psychotraumatology.

Upon indication of the responsible director, psychologists with different therapeutic approaches and proven experience can be used.

Group psychotherapy is a verbal analysis of the group's unconscious, to which free association is applied, as in individual and with a final restitution by a psychotherapist. It can be conducted by a psychologist-psychotherapist indicated by the director. All guests and psychological operators present in the group participate.

It takes place once a week and as needed. Another group therapy is also carried out weekly (15 -17 participants for each group). This therapeutic space was introduced during the covid 19 emergency to limit the spread of the virus. From clinical observation it emerged to be a therapeutic space that favored the active participation of guests whose voice in the large group was little expressed. Participants are randomly selected or chosen based on particular needs. The groups are reconstituted every 3/4 months to encourage mutual understanding of all patients. The management is entrusted to 2/3 psychologists who rotate between the different groups.

Individual support interviews are the order of the day at the patient's request or at the initiative of the professionals.

For years the Lahuèn Community has been enriching its therapeutic work by also using Family Therapy, which involves the patient's entire home unit, determining

through the systemic-relational approach the reorganization of the family system on communicative, relational and emotional styles different from the dysfunctional ones of presentation. This resource is preparatory to reintegration into the context of origin.

The 1st family interview is carried out at the end of the second month of stay by the individual therapist supported by a colleague and aims to draw up a traumatic map of the patient and the entire family, to identify the salient elements of the psychological distress.

Monthly family interviews are carried out quarterly or at the request of the patient, the team and the family. They are used as an information channel or as a tool for in-depth analysis of specific dynamics and are conducted by the individual therapist supported by a colleague.

Every Wednesday morning, family members can receive telephone information about the progress of the therapeutic process. It goes without saying that if significant situations arise, it will be the facility's responsibility to promptly communicate with family members or contact figures.

The collaboration with the sending services is constant and continuous both for checks relating to the therapeutic program with the sending of reports every six months and/or upon request, and above all in the phase of reintegration of the patient into his social context. Various meetings are planned during the therapeutic process aimed at achieving a common goal, the improvement of the patient.

PSYCHIATRIC CARE AND ADMINISTRATION OF PHARMACOLOGICAL THERAPY

Given that the purpose of the therapeutic program is fundamentally based on the integration of psychotherapeutic, educational, socio-rehabilitative and pharmacological interventions, the assumption of any psychopharmacological therapy, in addition to being subordinate to the prior indication given by the psychiatrist, is carried out by the guest in self-administration regime always carried out in the presence of the operator on duty and/or the nurse who ensures that the drug is taken according to the correct dosage and posology prescribed by the consultant psychiatrist.

Psychiatric care in the community is divided into the following moments:

- Pre-entry assessment;
- The clinical evaluation interview upon entry which al-

lows us to make an assessment of the person's status, evaluate the motivation for treatment, acquire clinical documentation of previous psychopathological diagnosis and know the evolutionary stage of the current syndrome;

- Periodic control of the pharmacological therapy that is prescribed and monitored, aiming for ever greater awareness, collaboration and compliance following the criterion of "minimum effective dosages";
- Discussion and sharing with the foster care or reference operators on the need for modulation of psychiatric and psychopharmacological interventions;
- Collaboration with the health workers of the sending Mental Health Services as the main contact persons for their patients even if they are included in our therapeutic-rehabilitation program.



DIVERSIFIED THERAPEUTIC APPROACHES

The Lahuèn community in the person of the therapist draws on all the resources, experiences and interests that the health professionals who compose it offer. In this regard, diversified therapeutic and rehabilitation approaches are activated year after year. Some of the most historically present activities will be listed below, although we are aware that this list cannot capture the richness of a container of resources and creativity such as a therapeutic community can be.

- Art therapy

È un'attività psicoriabilitativa che si basa sulla concentrazione delle sensazioni somatiche indotte sia da una musica rilassante che da alcuni esercizi corporei. Il fine è quello di creare un momento distensivo, rispetto alla molteplicità delle problematiche del paziente e quello di privilegiare un nuovo sistema di comunicazione attraverso il canale non verbale e l'uso del disegno.

- Skill Training and Social Skill Training

There are two Skill Training protocols applied to date in our structure:

1) Skill training according to the DBT (Dialectical Behavioral Therapy) model is a complex cognitive-behavioural treatment originally developed for subjects at serious risk of suicide, also applied to subjects suffering from borderline personality disorder, effective in reducing

impulsive behaviour, psychiatric hospitalizations, abandonment of care, substance abuse, emotional dysregulation and interpersonal difficulties.

2) Social Skill Training, recommended by the World Health Organization, is based on a biopsychosocial approach to mental illness, centered on the 'promotion' of health understood as the development of human potential. One of the fundamental principles underlying Social Skills Training is that of learning. In fact, research indicates that all social behaviors can be learned – and therefore modified – thanks to experience and training.

- Targeted Groups

For specific problems relating to nutrition, adopted children, women's issues, impulse control, new arrivals, in-depth seminars are organised.

Part of the therapeutic project are moments of meeting with families through shows, culinary competitions between parents and children, games or recreational activities which we hope can be restored at the end of the Covid 19 emergency because they are very significant from an emotional point of view and as a vehicle for a therapeutic alliance.

WORK AND ACTIVITIES

Psycho-physical well-being is achieved above all through a personal commitment to growth in all the sectors that community life offers. The body and senses are primarily involved in the activities proposed in community, in profound union with the mind.

Work is planned in these areas.

AGRICULTURAL SECTOR

With interventions by guests, assisted by an operator, in the various areas of the structure:

- Garden

Experience has taught us that garden work is particularly suitable for children with serious psychological problems as it does not require particular specialization and allows them to observe the fruits of work in a relatively short time.

- Vegetable garden

it's one of the most creative places in the community. It puts you in contact with nature and its rhythms, moods and variations. It teaches silence and reflection. It teaches the meaning of work as the ability to transform and bear fruit.

- Olive grove

The community has an olive grove with around 160 plants. The kids help to keep the land clean, hoe it when necessary and collaborate in the olive harvest.

DOMESTIC SECTOR

- House cleaning

Each guest is responsible for cleaning his room and, in turn, also the common areas on the floor. The operator on duty coordinates the intervention on the individual parts by composing the teams and indicating which operators must view and participate in the children's work.

- Laundry

It is the guests' responsibility to wash, hang out, iron or sort the community linen. Supervision is entrusted to an operator on duty who supervises the safety, therapeutic and educational aspects.

- Kitchen

it is a sector that requires a rigorous commitment to cleanliness and respect for timetables in all its phases. The employees must be people of proven maturity and experience. Kitchen users are educated by those responsible for the self-control plan on the procedures required by HACCP.

- Maintenance

it is one of the areas in which children's creativity can best develop and they can learn practical activities regarding plumbing, bricklaying, painting, carpentry, electricity, etc.

- Assembly of works

A work meeting is scheduled every two months for the organization and management of the various work sectors and to reflect on aspects of real life in the community.

ARTISAN AND ARTISTIC SECTOR

Crafts and art are sectors in which senses, reason and feelings blend admirably. Manual skill and creativity come together to produce something that is an expression of the whole person. It must therefore be approached with passion because it expresses the totality of the person.

CRAFTSMANSHIP

Community craftsmanship is intended for learning and as creative expression in various forms such as:

- Restoration and carpentry workshops

Through participation in the work, significant communication is created between the group participants, cemented by the objective of creating something that is visible and usable.

All this considerably improves the relationship with reality and with one's ability to have an impact on it, increasing self-esteem and satisfaction with one's ability.

- Cooking workshops and elements for healthy eating

The laboratory acts as a psychoeducational group and tries to provide children with all the information relating to correct eating habits to achieve the healthiest possible lifestyle both inside and outside the facility.

Artistic

Art is a discovery of one's inner world and an valorization of emotional, bodily, mental and intuitive resources. It defines its uniqueness and deep connection with nature and culture. Over the years, the Community has approached different types of artistic approaches.

- The music laboratory

Music therapy makes use of methods capable of offering the individual opportunities to develop skills, regain personal balance and strengthen their relational skills. All patients are offered the opportunity to participate in the course as no particular aptitude is required and it is not essential to have musical knowledge. The course involves the implementation of some exercises that allow you to work on rhythm, melody and harmony both through the use of some musical instruments and through the voice and body in general.

- Theater

Since its inception, the Lahuèn Community has valorised theater in an experiential form, producing "La Vertigine del Profondo" a highly emotional piece performed in important Italian theaters such as the Lirico in Milan, the Teatro Olimpico in Rome, the Metropolitan in Naples and the musical "Uscita di Sicurezza", performed at the Mancinelli theater in Orvieto and at the Unità d'Italia auditorium in Isernia; a work entirely created by the theater laboratory group.

Theatrical activity allows you to achieve three important therapeutic results:

- intense group collaboration;
- constant reminder of the reality principle;
- the theatrical medium is a vehicle of communication with society, or said in psycho-analytical terms, with the mother.

SPORTS SECTOR

The enhancement of the body has one of its greatest expressions in sport. The Lahuèn Community, aware of the profound split that exists between body and mind in mental illness, wants to overcome this laceration, using the resources that the body can develop with the articulated use of different sports disciplines.

a five-a-side football field and a beach volleyball field have been equipped where boys and girls give free rein to their imagination, discharge their aggression in sporting ways, experiment with competition and collaboration, acquire the importance of rules in a playful context. The community is open to external competitions and has achieved excellent results in football. These moments promote social reintegration, socialization and well-being. Volleyball, gymnastics and excursions are very popular. Weekly walks and access to the internal gym are also provided with the support of field operators.

RECREATIONAL SECTOR

Fun and leisure are an excellent opportunity to live the pleasure principle in a healthy way. It provides the energy to recreate and face daily life with more enthusiasm.

Aware of the importance of the recreational aspect, the Lahuèn Community has created a whole series of spaces that allow moments of relaxation since the beginning.

- relaxing moments are planned after lunch and dinner
- evenings are organized under the supervision of an operator in which board games, cultural competitions, small performances, joke telling and imitations are held.
- birthdays are an occasion in which the community can demonstrate its sympathy and affection towards the person being celebrated.
- particularly important is Christmas, New Year and Carnival
- it is tradition to celebrate the Director in a very special way.
- summer or winter holidays are periods with more flexible hours, less work commitment and an opportunity for fun.
- The 1st December anniversary of the foundation of the community is the occasion for a great celebration in which everyone participates with shows, musical and pictorial expressions, etc.

CULTURE SECTOR

Culture is the work of others, everything that our fathers built and handed over to us. It is therefore to be respected, to be cultivated, because each of us is the result of culture, as well as an expression of culture.

- The library

The pride of the library is Battaglia's large Italian language dictionary as well as numerous books on art and other subjects.

- Music room and film library

It is a space where you can gather and listen to music and watch important films.

- Courses of study

Compatibly with therapeutic needs, guests can complete studies interrupted due to illness, even at university level if there is no obligation to attend. The community also offers study courses in various disciplines to offer children a concise but effective preparation in various sectors of knowledge.



TIMETABLE

The time is not simply the succession of time but everything that man is and does during the day. The Lahuèn Community has its own timetable organized to make the best use of its energies.

It cannot be taken in a rigid manner, since it is susceptible to various changes but it is indicative of a habitual orientation of the community. Winter timetable (mid-September-June):

SUN		RAIN	
Rising	8:00	Rising	8:00
Breakfast	8:30 Therapies	Breakfast	8:30 Therapies
Room cleaning	9:00	Room cleaning	9:00
Jobs	9:30	Cleaning	9:30
Coffee break	11:00	Coffee break	11:00
Jobs	11:15	Various activities	11:15
Lunch	13:00 Therapies	Lunch	13:00 Therapies
Rest	14:00	Rest	14:00
Work-Sports	15:00	Various activities	15:00
Snack	16:30	Snack	16:30
Laboratories		Laboratories	
Group psychotherapy	17:00	Group psychotherapy	17:00
Dinner	19:30	Dinner	19:30
Recreation	20:30 Therapies	Recreation	20:30 Therapies
Rest	21:00-22:30	Riposo Rest	21:00-22:30
Curfew	23:00	Curfew	23:00

N.B. By various activities we mean: Study - Educational - Recreational - Musical - Film club - Board games - Gym - Courses - Workshops and all the normal activities that can be done indoors.

Summer hours (July to mid-September) are more flexible with two hours of rest in the afternoon and longer hours after dinner. Sports activities are carried out after the afternoon rest.

AUTONOMY PROJECT

The Lahuèn community welcomes patients from all over Italy and we have often encountered the difficulty of transitioning from a highly demanding and protective care context to returning to the family with projects that often interface with the lack of structures and programs suitable especially for dual diagnoses. In order to facilitate the return to the territory of origin, over the years we have gradually introduced tools and methods that would favor expertise in relation to various autonomies at an advanced stage of the therapeutic program (use of vehicles and mobile phones, minimal management of money, therapeutic internships). To facilitate this recovery process, the Nogap Social Promotion Association was established in January 2020. The main objective of NoGap is the reintegration of people with dual diagnoses (mental health and addictions) with particular attention to gender aspects deriving from triple vulnerability.

Specifically, NoGap:

- accompanies the socio-economic reintegration process of young people at the end of their course in the Community;
- raises awareness on the issues of gender violence, mental health, addiction in all its forms and multiple vulnerability;
- promotes social integration activities, research and inclusive business spaces.

Our approach combines actions related to personal protection, training, non-formal approaches, inclusive and social entrepreneurship, art and creativity, awareness-raising and theories of personal improvement through discovery, acceptance and self-growth.

Designed as a free space for anyone who wants to take on the responsibilities of a role by proposing activities, projects, actions, in line with the idea of creating opportunities for autonomy for children with dual diagnoses.

AUTONOMY GROUP

On a bimonthly basis, 2 groups of 4 guests experiment with some autonomy such as going out without assistance, using and managing mobile phones and money with a set budget, shopping and cooking independently, going to visit nearby places, taking part in events or recreational activities by agreement with the therapeutic team.

CHILDREN'S ASSEMBLY

Inspired by the principle of democratic community, on a monthly basis, in conjunction with the supervision of the team, our guests find themselves managing a meeting in complete autonomy to make their own reflections, propose initiatives to the staff and discuss without therapeutic mediation.

THERAPEUTIC INTERNSHIP

In collaboration with the Work Support Service of the municipality of Orvieto, with the participation of the APS NoGap through the awareness campaign "An internship for...", the activation of therapeutic internships is planned for the boys and girls of the Lahuèn Community self-financed.

RESIGNATION AND REINSTALLATION

The goal of the community is to reintegrate the patient into the context of origin at the end of the process. The resignation is decided by the team. The duration of the process depends on the severity of the pathology and the patient's resources. Precise times cannot be established. When the child has reached an autonomy that is considered sufficient for him/her, steps will be taken through collaboration with the sending institution and with the family to find either a more or less protected working situation or sometimes a housing situation (family home,

medium protection facility, day center etc.) and during the last months of stay, insertion tests will be carried out with subsequent verification so that the patient is accompanied during the final phase.

Furthermore, a meeting day was established with discharged patients and their families to provide, during the difficult phase between separation from the community and the reintegration phase, a space for discussion through the provision of a free support group per family, and user co-led by a therapist and social worker.

HOW TO REACH US

CAR - TRAIN - PLANE

By Car: - A1 Rome-Florence, exit at Orvieto and continue on SS205 towards Orvieto. Once you reach the second roundabout, continue following the signs for the hospital. After three roundabouts, at the 4th take the third exit towards Prodo-Titignano SS79BIS/SR79BIS and continue for approximately 8 km until you reach Località di Colonna di Prodo; turn right towards Corbara

and after 500m on the right you will find the entrance to the Community.

- E45 Cesena-Orte, exit for Todi - Orvieto, you arrive at Orvieto stopover then proceed to Colonna di Prodo
By Train: Rome-Florence line get off at Orvieto station served by taxi.

By Plane: Fiumicino-Rome Airport (130 km); Ciampino-Rome (120 km); S. Egidio-Perugia (90km)

CONTACTS

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