# Therapeutic Community Centre for women with mental health issues

"Success is a journey, not a destination. The doing is often more important than the outcome."

Arthur Ashe



Barcelona, 3<sup>rd</sup> November 2016

# Development of the therapeutic community centre

Project: Establishing a therapeutic community centre for women in Gherla Prison

Programme RO 23 "Correctional Services, including Non-custodial Sanctions"

The project was supported by a grant from Norway through the Norwegian Financial Mechanism 2009-2014

Program Operator: Ministry of Justice

Project Promoter: National Administration of Penitentiaries

Partners: Bredtveit Prison and Gherla Prison

# **Outline of the approach**

#### Why a therapeutic community?

- ✓ ensures self-developing;
- ✓ it is based on respecting the principles of social, medical and psychological assistance;
- ✓ is a temporary removal from the general stressful prison environment
- ✓ is based on cognitive behavioural principles;
- provides changing and maintaining a rational way of thinking;
- influences in a better way the interaction with themselves and with others.

#### The current approach

- integrates an adaptation of the standard concept of therapeutically community;
- ✓ keeps the specific strategies and work principles;
- ✓ answers efficiently the identified needs for women deprived of liberty;
- maximizes the involvement and participation of each in its own rehabilitation process;
- ✓ maintains the desired behaviour;
- makes the residents of the therapeutically community responsible;
  - (increases significantly their social reintegration premise.

#### The clinic protocol for depression

- reflects the most advanced research in the field of psychological treatments for depressive disorders;
- $\checkmark$  it focuses on the depressive syndrome;
- ✓ is an adaptation of individual protocols for depression, tested on the Romanian population;
- ✓ provides access to the most efficient psychological treatments existing today at international level;
- leads to the improvement of the clinical condition and the increase of life quality and social functioning of women.

#### The clinic protocol for anxiety

- ✓ approaches the adaptation issues of female prisoners with behaviours and emotions specific to anxiety;
- ✓ implements in a structured and comprehensive manner the relaxation techniques, the procedures for behaviour modification, cognitive restructuring and problem solving;
- aims at the disappearance of the physiological symptoms;
  - develops the necessary skills to reduce the anxiety.

The clinic protocol for personality disorders
develops specific activities with the prisoners diagnosed with personality disorders;

- $\checkmark$  aims at building a therapeutic relationship;
- ✓ approaches the development of self-control;
- ✓ sustains the development of self-identity;
- ensures the achievement of self-control capacity in terms of behaviour;
- activities and exercises suggested within the protocol are meant to develop empathy and inter-relational intimacy.

The program for personal optimization
✓ is developed on three levels: emotional, cognitive and behavioural;

Aims at achieving the following objectives:

- creating the skills of independent and critical thinking;
- ✓ increasing the capacity of emotional selfexternalisation;
- developing skills for communication, assertive behaviour and personal resources.

# **Target group – participants selection**

The target group is represented by women in detention, including Roma ethnics, diagnosed with depression, anxiety and personality disorders.

- To be diagnosed by a psychiatrist with depression, anxiety and / or a personality disorder such as antisocial or borderline;
- ✓ Not to be under investigation or pending in other criminal cases which require the transfer;
- To have a recommendation of inclusion in the therapeutic centre in her Individualized Plan of assessment and educational and therapeutic intervention;
- ✓ Not to present a major cognitive deficit;
- ✓ To be at least 21 years old;
- ✓ To speak fluently Romanian language;
- Not to be under medical treatment that can interfere with the intervention.

# The clinic protocol for depression was piloted in 3 penitentiaries

Arad 5 women Târgșor 21 women 10 Roma ethnics Craiova 11 women 3 Roma ethnics

The clinic protocol for anxiety was piloted in 2 penitentiaries

Cluj-Napoca 7 women 2 Roma ethnics Craiova 10 women 4 Roma ethnics

The clinic protocol for personality disorders was piloted in 3 penitentiaries

Cluj-Napoca 13 women 4 Roma ethnics

Târgșor 5 women 3 Roma ethnics

Arad 7 women

The program for personal optimization was piloted in 2 penitentiaries

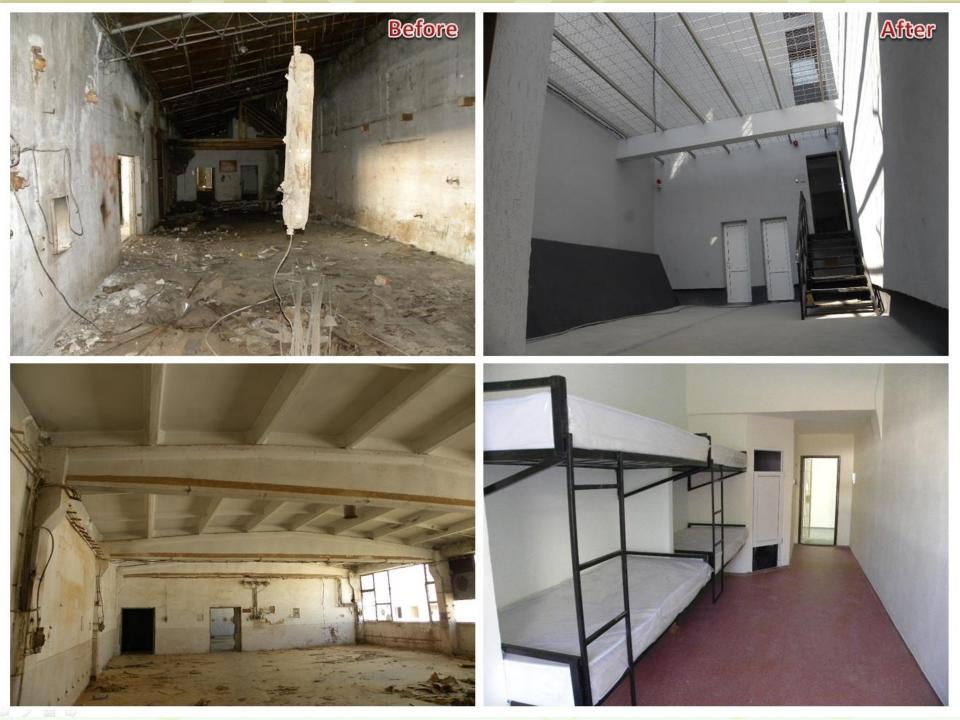
Cluj-Napoca 25 women 5 Roma ethnics Târgșor 6 women 1 Roma ethnics Proposed outcome 90 women

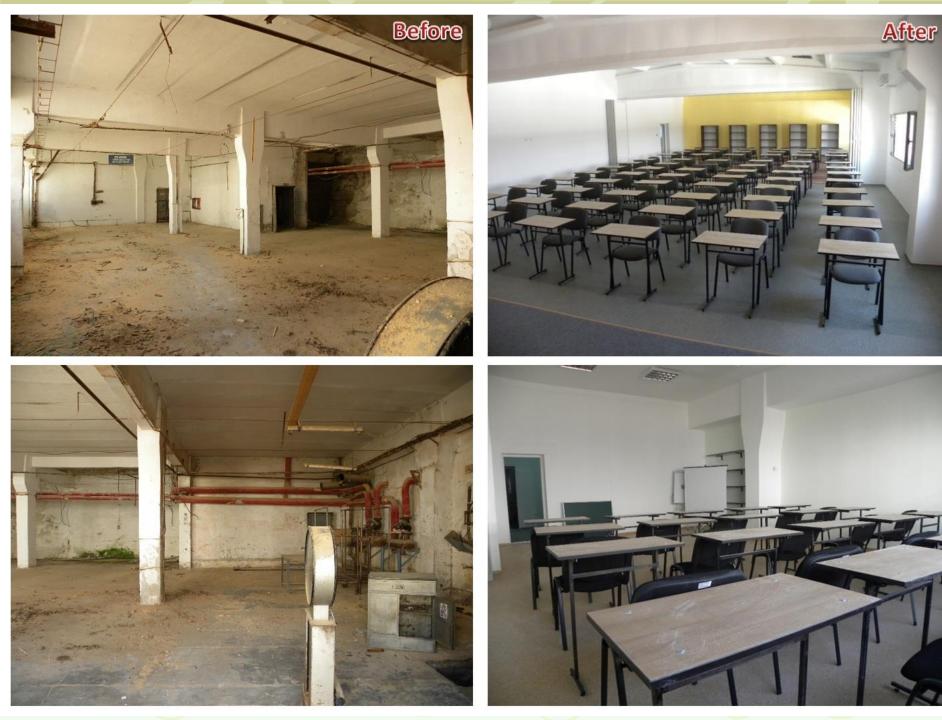
#### Achieved outcome 110 women

Proposed outcome (10%) 9 Roma ethnics Achieved outcome 32 Roma ethnics

















### **Challenges for the future**

- Assuring the necessary human and financial resources after the end of the project;
- Supporting the personnel in continuing their work within the therapeutic community centre;
- Keeping the adequate climate within the therapeutic community, taking into consideration the specific of the residents;
- Being able to provide this type of intervention for all the women who are identified with this need.



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