



# Managing victimization risks attached to societal participation by people with severe mental illness; the Victoria-project

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# Parties involved





# Transition to community



- Shift to ambulant/community care
- Recovery in community
- 'Participation society'



# People with SMI



## Severe Mental Illness

- Severe psychopathology
- Serious disabilities on several life domains
- NL: 1,7% of the total population (281.000)
- 75% receives care (56% MHC / Addiction), mainly community care



## In community?



Disadvantaged position in terms of :

- physical health,
  - income, employment (10-20% paid job)
  - relationships (loneliness, victimization)
- 35% traumatized, 6x more victim of violence and other crimes



# Victimization



- Physical assault, threats of violence
- Crimes like burglary and robbery
- Discrimination, rejection
- (Anticipated) stigmatization



# F-ACT-teams



- Flexible Assertive Community Treatment
- Multi-disciplinary, team approach
- Care coordination
- Symptom stabilization and personal / social recovery, change over attitude
- Dignity of risk!



# Risk groups



- 'High-risk group', risks on several life domains, relapses, perpetrator and victim, no adequate participation/rehabilitation
- 'Avoidant group', stigmatization, no risks, no adequate participation/rehabilitation
- 'In between', participation/rehabilitation with sometimes victimization-experiences





# Objective project



- Development of supportive intervention for FACT-teams,
- Elaborate victimization experiences and other adversities in societal participation with clients,
- Acknowledgment of experiences, recognition of risky situations, build experiential knowledge, prevent victimization and (re)discover personal goals



# Methodology



- Focus groups and experts
- Barriers and solutions
- Victoria-modules on the 'drawing board'
- Pilot phase in FACT-teams D&D/GGzE, feedback
- Working towards final version for RCT



# Module 1



## Steps:

- Description of (recent) victimization experience related to social participation  
(who, what, when, where, intensity)
- Causes (own behaviour, behaviour of others, circumstances)
- What went well, what did not, awareness and understanding
- Follow up, personal goals, strengths and possibilities



## Module 2



### Steps:

- Evaluate period of crisis  
(what , who, where, when, intensity)
- Causes (precursors, own behaviour, behaviour of others, circumstances), victimization?
- Consequences for social recovery
- Follow up, personal goals, strengths and possibilities



# Summary



- Awareness of victimization experiences and risks.
- From problem orientation to focus on personal and social recovery, dignity of risk
- Acknowledgment and building experiential knowledge, empowerment
- Lead-up to treatment/rehabilitation, explore and follow up
- RCT



# Adversity as turning point



危機

Danger

Chance

*Thank you for your attention*