Trieste Mental Health System must remain a global beacon towards deinstitutionalisation and community mental health services, backed with political will

For many years, the mental health system in Trieste, Italy, has been at the forefront of positive and pioneering examples of deinstitutionalisation and community mental health care around the globe. One of the world’s most renowned models of mental healthcare is currently being questioned by the regional government. Together with its members in Italy, Mental Health Europe would like to stress the importance of introducing human rights into mental health services, in particular by moving away from institutional towards community-based mental health care and support. The move towards the community comes with a shift in approaching mental health difficulties, and a growing number of mental health professionals, service users and carers alike support a psychosocial understanding of mental health. This approach acknowledges that a clinical, biomedical model reduces the complexity of mental health issues persons encounter and can even be harmful to them.

For many, the Trieste reforms were emblematic of such paradigm shift and a source for inspiration in Europe and beyond. Inspired by Franco Basaglia in the 1970s, now considered a visionary and hero for Italian mental health systems, deinstitutionalisation goes beyond the formal shift to the community. Instead, persons in all their complexity and uniqueness are at the heart of deinstitutionalisation processes – they become the protagonists of mental health support in full exercise of their rights, social contracts and power in multiple forms. The vision was later introduced into discussions reforming the Italian mental health laws (including the infamous law 180), leading to a stark decrease of forced institutionalisation and applying a multisectoral approach to mental health. Today Trieste works through an open-door approach, with community mental health centres operating at all times, providing users with a hybrid set of options for day care and overnight stays at a fraction of the cost of hospital services.
“While we observe more mental health services shifting towards multisectoral and community-based support that upholds people’s rights, we should not underestimate how the Trieste reforms influence policy-making until today,” says Liuska Sanna, Acting Director for Mental Health Europe.

“Policymakers, persons with lived experiences and mental health service providers continue to uphold Trieste as an inspiration worldwide,” Liuska Sanna added. Indeed, the Trieste model influenced reform and practice, for example, in North and South America and is recognised by WHO as a world standard for community mental health services.

Moving towards human-rights compliant community mental health care is an obligation under the UN Convention on the Rights of Persons with Disabilities, which all EU member states and the EU itself have ratified. Mental Health Europe and its members have been working towards this vision for many years, promoting the psychosocial model and campaigning to end coercive measures in Europe’s mental healthcare. The growing community promoting human rights in mental health needs to be supported by committed policymakers providing political and financial frameworks for community mental health support, as done in Trieste. Trieste’s pioneering mental healthcare system, therefore, must remain a beacon for progress, community inclusion and support in Europe.