

Five *on* Friday

Musings on Mental Health

Si sta bene in Trieste

By Kathleen M. Pike, PhD
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I am so happy to be in Italy after a nearly two-year hiatus from international travel. Italy is one of the places in the world that I call home. My paternal grandmother was born in Rome. I lived in Bologna as a university student. I return as often as possible.



Vagnati dott.sa Silvia Psicologa Psicoterapeuta - La libertà è terapeutica! (Foto di Yle!) on Facebook

Anyone who has been to Italy knows the warmth, openness, and social connection at the heart of Italian culture. Being here nourishes my soul. It is no wonder that Trieste's extraordinary experiment in community mental health has set an example for the world for decades.

1. The Trieste Model. Trieste once had 1200 psychiatric hospital beds. It now has six general hospital beds and 30 additional beds in the community for short-term stays. It has essentially eliminated large psychiatric institutions from its care model. The World Health Organization recognizes it as a global standard for

community psychiatry. [The Trieste Model](#) is based on the principles of treating individuals with mental illness with dignity and respect. It does so by preserving people's freedoms and recognizing their strengths. Individuals with serious mental illness have opportunities for work and socialization and are part of the city's daily fabric of activity.

2. Belonging. When I am in Italy, I feel like I am welcome. It's so simple, but profound in terms of promoting a sense of wellbeing. The same dynamic is at play in Trieste for people with serious mental illness. The community network of programs and services promotes mental health by eliminating involuntary treatment, seclusion, and closed doors. Instead, it focuses on interpersonal relations, family involvement, social integration, and a network of integrated community services. Everyone has a place in the community.

3. How it started. Inspired by President John F. Kennedy's 1963 Community Mental Health Act in the United States, Dr. Franco Basaglia launched The Trieste Model of community-based care in the 1970s in Italy. The irony is that deinstitutionalization was a brilliant success in Trieste because they built a strong network of community services and programs. In contrast, the U.S. has closed 90% of its psychiatric hospital beds without building the necessary community infrastructure and support over the past sixty years. In the U.S., an estimated 600,000 people with mental illness are instead incarcerated or homeless.

4. Under threat. The current administration of Trieste poses a [threat](#) to Trieste's unique system of community mental health. Political upheaval and organizational changes in the health care system have led to an outcry among mental health professionals worldwide. Mental health professionals in Italy fear that support for community services are being reduced and critical programs are being eliminated.

5. Why should we care? Over the decades, The Trieste Model has [proven](#) safe, practical, highly valued by community members, and cost-effective. If such a program is dismantled, science and humanity are losing ground to ignorance and stigma. That path should set off alarms for us all.

The Trieste Model starts with dignity, respect, and belonging. It seems so simple, but throughout history and around the world, individuals with serious mental illness are more likely to be met with fear, control, and exclusion. I know which environmental context is better for my mental health. Why would it be any different for individuals with serious mental illness?