

# Home Again: A Journey from Rescue to Rehabilitation of Patients with Mental Illness

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Case Reports

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## Background

The Hospital for Mental Health, Ahmedabad, is the first NABH-accredited mental hospital in India with a long history of delivering comprehensive quality mental health care since 1863.

Mental health is a critical public health concern globally, contributing significantly to the overall disease burden. In India, an estimated 150 million individuals live with mental health conditions. Unfortunately, access to care remains a significant challenge, with 60% of individuals with schizophrenia unable to receive the necessary treatment. The National Mental Health Survey (2016) highlighted a concerning treatment gap of 83%.

People with mental illnesses often face stigma and discrimination, leading to long-term institutionalization in tertiary psychiatric facilities. A distressing 36.25% of residential service users in state psychiatric facilities have resided there for over a year, with an average stay of six years. This prolonged institutionalization leads to social isolation and hinders meaningful participation in work, family, and community life. The “Home Again” initiative directly addresses this critical issue by facilitating the transition of long-term psychiatric patients into community-based housing.

## Distinctiveness of the practice

The “Home Again” project provides a unique model for community-based rehabilitation for individuals recovering from mental illness. This initiative offers shared housing with

comprehensive support services, enabling residents to live in rented, shared homes within their community. Residents receive personalized assistance, including healthcare, social support, and vocational training.

Aligned with the United Nations Convention on the Rights of Persons with Disabilities, the Rights of Persons with Disabilities Act (2016), and the Mental Healthcare Act (2017), “Home Again” upholds the fundamental right of individuals with psychosocial disabilities to live independently within their communities.

Unlike traditional institutional care, “Home Again” fosters a supportive environment that closely resembles a familial setting. This approach emphasizes long-term well-being and reintegration into society, reducing reliance on hospital-based care and minimizing hospitalization rates. Key features of the “Home Again” initiatives include:

- **Personal Assistance:** Support with daily living activities, including cooking, cleaning, and social engagement.
- **Mental Health Support:** Regular counselling sessions by social workers and psychologists to address personal and emotional challenges.
- **Medical Support:** Access to healthcare services at nearby Primary Health Centers (PHCs) and Community Health Centers (CHCs), along with regular psychiatric check-ups.
- **Medication Monitoring:** Structured tracking to ensure consistent medication adherence.
- **Vocational and Occupational Training:** Skill development training to encourage economic independence.

- **Community Engagement:** Participation in local events to promote social inclusion and reduce stigma.
- **Advocacy and Awareness Campaigns:** Community outreach initiatives to challenge prejudices and foster social acceptance.

## Measuring effects

Over three years, the Home Again project successfully deinstitutionalized 29 patients. Of these, four were reunited with their families, two passed away, and seven were re-hospitalized. The remaining patients continue to live in community-based homes. Nine additional patients are currently being screened for future transition. The project has demonstrated significant improvements in the rehabilitation process:

- **Reduced hospital re-admissions post-rehabilitation.** Patients experienced fewer relapses, leading to decreased dependency

on institutional care.

- **Increased hospital bed availability for new patients.**
- **Prolonged hospital care costs have been reduced.**
- **Increased community acceptance** highlights the reduction in stigma associated with mental illness. Local communities have shown greater openness and willingness to integrate mentally ill individuals.
- **Enhanced patient independence,** many persons with mental illness gained confidence and have started working independently and leading self-sufficient lives.
- **Positive behavioural changes and coping mechanisms** were better than institutionalized patients.



Fig. 1 Patients back to social life

## Challenges

The “Home Again” project encountered several challenges during its implementation.

- **Resistance from family members:** Family members were reluctant to take a person with mental illness. Their concerns were social acceptance, financial constraints, and the demands of caring for other

family members. We counselled family members and assured psychiatry services at Community Health Centres and oriented about project’s outreach activities.

- **Community Resistance:** Initial resistance from the local community was a significant hurdle. Concerns were raised about potential safety risks and social disruption. To address

this, extensive community outreach activities were conducted to address concerns, educate residents about mental illness, and foster understanding and acceptance.

- **Establishing Patient Identities:** Many patients did not have any government self-identification documents. The project team facilitated legal and administrative documentation where required.
- **Securing Long-Term Funding:** Sustaining the programme required consistent and reliable funding sources, which presented a significant challenge. We built strong partnerships with NGOs and Corporate Social Responsibility Cell of companies for resource sharing, expanded service delivery, and enhanced community engagement.

## Lessons Learned

- **Rehabilitation is Essential for Mental Health Recovery:**
  - Simply discharging patients from hospitals without a structured plan for reintegration into the community is insufficient for long-term recovery.
  - True recovery requires a comprehensive approach that addresses not only the clinical aspects of mental illness but also the social, emotional, and vocational needs of individuals. Rehabilitation programme should focus on developing essential life skills, vocational skills fostering independence, and empowering individuals to manage their own health and well-being.
- **Community Integration Fosters Faster Recovery:**
  - Living within the community provides a more natural and supportive environment for recovery compared to the isolated setting of an institution.
  - Community living allows individuals to re-establish social connections, rebuild relationships, and participate in community activities, which are crucial for mental and emotional well-being. It helps to reduce the stigma associated

with mental illness by demonstrating that individuals with mental health conditions can live fulfilling lives within society.

- Raising awareness within the community can help to challenge societal stigma and misconceptions about mental illness and to create a more inclusive and supportive environment for individuals with mental health conditions.
- Engaging with community members and addressing their concerns can help to build trust and support for community-based rehabilitation programme.
- **Ongoing Support is Necessary:**
  - Continuous support is crucial to ensure long-term success. This may include ongoing access to mental health services, support with daily living activities, vocational training, and social support networks.
  - Providing ongoing support helps to identify and address potential relapse triggers early on, minimizing the risk of hospitalization and ensuring continued recovery.
- **Multi-disciplinary Approaches Yield Better Outcomes:**
  - A multidisciplinary approach that addresses the multifaceted needs of individuals, including mental health, social, vocational, and physical health needs, is essential for successful reintegration.
  - Collaboration between mental health professionals, social workers, vocational counselors, and community support services is crucial to ensure that individuals receive comprehensive and coordinated care.

By carefully considering these lessons learned, we can continue to improve community-based rehabilitation programs and ensure that individuals with mental illness have the opportunity to live fulfilling and meaningful lives within their communities.

## Sustainability of Practice

The Home Again project is evolving, with

ongoing documentation and refinement for long-term sustainability. The initiative ensures support through:

- Multi-stakeholder collaboration with public and private entities.
- Continuous assessment and improvement of service models.
- Secure funding channels to sustain housing and personal assistance services.
- Expansion to additional districts and states.

## Conclusion

This project is replicable and adaptable

for mental hospitals dealing with long-stay patients who lack external support. Potential adaptations include:

- Customization of vocational training based on regional employment opportunities.
- Strengthening partnerships with local healthcare providers.
- Expanding outreach efforts for better community integration.
- Introducing technology-driven monitoring for better patient tracking.

# Home Again: A Journey from Rescue to Rehabilitation of Patients with Mental Illness

1

## Target Population

Long-term psychiatric patients in tertiary mental health facilities, their families, and local communities.

2

## Phenomenon of Interest

Community-based rehabilitation for deinstitutionalized psychiatric patients through the "Home Again" initiative, promoting independent living and social reintegration.

3

## Context

Implemented at the Hospital for Mental Health, Ahmedabad, the initiative provides shared housing, medical support, and vocational training to transition long-stay psychiatric patients from institutional care to community living.

## Conclusion



The "Home Again" initiative provided a scalable model for deinstitutionalization, improving patient independence, reducing healthcare burdens, and fostering community acceptance of mental health rehabilitation.

## Key Findings

1

### Reduction in Hospital Burden and Costs

The program freed up hospital beds for new patients, reduced prolonged institutional care costs, and enhanced resource utilization within the mental healthcare system.

2

### Successful Deinstitutionalization and Community Reintegration

The "Home Again" initiative successfully transitioned 29 long-stay psychiatric patients into community-based housing, with increased independence and reduced re-hospitalization rates.

3

### Improved Social Acceptance and Patient Well-being

Community engagement efforts increased acceptance of individuals with mental illness, while patients demonstrated better coping mechanisms, vocational skills, and social reintegration.