



## “Individual in-depth personal development IDPD (IPRO in Polish)” in The Home of Therapy and Social Readaptation of The Antidotum Association

Name of the project	<b>Individual in-depth personal development IDPD (IPRO in Polish) in The Home of Therapy and Social Readaptation of The Antidotum Association</b>
Aims and Objectives	Countering social stigmatization and marginalization of groups in critical social and economic situation through integrated and interdisciplinary activities including social readaptation and rehabilitation grounded in Christian ethics and human good and concluded by advocacy.
Description	<p>The House of Therapy and Social Readaptation run by the Antidotum Association is located in a former vacation center for workers of the public sector (before transition). It is composed of three pavilions scattered among trees nearby the river. It is almost in the middle of nowhere: about sixty km of Warsaw far from municipal noise and hurry. This happened to be a perfect setting for the “Individual in-depth personal development (IDPD)” - the therapeutic attitude to supporting people experiencing homelessness in their way out. Since its creation the IDPD is gradually evolving based on newly gathered experience and knowledge. The deficits revealed while working with homeless people inspired Antidotum to look for potential for change in various spheres of the person. Antidotum understood that pure “usamodzielnienie” (leaving the shelter to better housing situation without monitoring and support) is ineffective and unsustainable.</p> <p>The author of the IDPD Agata Pietras, the president of the Antidotum Association believes that homelessness is a state of soul of the person rooted in her/his childhood and primary family which are the source of initial trauma. Majority of homeless people are in the state of permanent crisis and need at least two years of therapeutic process which includes socialization in order to be able to start planning independent life without dependencies and degradation.</p> <p>The therapy in The Home begins with <b>crisis intervention</b> which includes meeting basic needs and initial assessment of the overall life situation. In the next step person is <b>introduced to sociotherapeutic community</b> where he/she starts integration, meets other members and comprehends the norms and rules of The Home. The Home works as “compensation family” in which the person can work on relationships habits and attitude. The community the same as family provides support, corrects, meets the need of attachment and helps to regain an identity.</p> <p>The next step is <b>individual work with therapist</b> based on the idea of temporary adoption in/to? limited parenthood. It helps to rebuild “internal core” of self – esteem and dignity. In the therapist – person relationship which is the basis for recovery the unmet psychological needs are revealed which allows for meeting them and introducing the person to adulthood which he/she is unable to do her/himself due to inability to give up destructive protective mechanisms.</p> <p>Parallel to the above stage is the sociotherapy and drafting the IDPD. The goal is to make personal goals and dreams in regard to “independence” more real. This stage is composed of: medical care, job qualifications and elimination of destructive behaviors and habits. The above stages are implemented in linear progress</p>



The IDPD assumes also **vertical progress** composed of stages of stays-treatment to which certain privileges are prescribed:

- Novice (nowicjusz) – about three months for adaptation, comprehension of Home rules and being responsible for him/herself.
- Inhabitant (domownik) – has the privilege to move outside The Home/area, to have mobile phone and is capable of taking care not only for her/himself but also others, feels co-responsible for The Home.
- Resident (rezydent) – person who finished therapy and has a job but still has no apartment outside. The stage can last up to six months.
- Resident-worker (mieszkaniec pracownik) – person who due to psychological reasons is unable to live independently and has decided to work for the Home.
- Resident-medic (Mieszkaniec medyka) – a person who finished therapy but is unable to leave the Home due to poor physical health or age.

The Home provides 70 bed spaces, three to four in one room in two pavilions. Third pavilion has offices, service rooms, kitchen, dining room and private apartment on the first floor.

Core elements	<p>Core elements of Individual Program for Personal Growth (IPRO):</p> <ul style="list-style-type: none"> <li>• Social work – basic social and health benefits</li> <li>• Sociotherapy – social skills, Improvement Plan for family relations, social skills, work, education, health</li> <li>• Interpersonal training</li> <li>• Psychotherapy – for bigger deficits</li> <li>• Spiritual support for those who are looking for God</li> </ul>
Funding	<p>The Association is financed through private donations and grants from local and national government. In 2014 private donations including in kinds were worth 242568 PLN (54,960E) and grants 259090PLN (58,704E)</p>
Impact/ results	<p>In 2014 - 207 people supported: 82 through crisis intervention 66 including 2 families under IPRO In 2015 - 203 people supported: 71 through crisis intervention 8 people became fully independent and solved their dependency problem</p>
Participants	<p>Activities of the association are dedicated to people:</p> <ul style="list-style-type: none"> <li>• who have no shelter</li> <li>• are dependent on substances</li> <li>• are elderly</li> <li>• are sick</li> <li>• are disabled</li> <li>• are poor</li> <li>• families with children</li> <li>• thriving in difficult living situation</li> <li>• 9. who lived in penitentiary institutions</li> </ul>
Staff	<p>Two psychotherapists, two interpersonal trainers, coach, socio-therapist, social workers, administrative worker, IT support, job club moderator, art therapist. We cooperate with mainstream health services and other institutions.</p>



Innovative aspects	In our therapeutic attitude we assume that people in situation of homelessness experience chronic crisis therefore in initial stages of therapy crisis intervention should be provided and immediately followed by an integrated program which supports all spheres of life: social material psychological health legal spiritual and professional. Our attitude is based on the idea of compensation family and temporary adoption.
Sustainability	Sustainable development depends on the scale of elimination of personal deficits and acquisition of ability to address once own psychological and life needs.
Lessons learned	We improved our knowledge on characteristics of a homeless person, depth of deficits and causes which lead to total helplessness. We experienced new ways of helping through empathy emotionality good rules setting and adequacy of actions. We learned using the pattern of sociological family, transversal relationship, limited parenthood and following the person's needs.
Obstacles	Fundraising from individual people and private businesses is very difficult due to competition and adverse regulations. It is also difficult to get grants from public institutions as they happen to reject offers due to minor formal mistakes in order to limit the number of offers which have to be processed by administration. Major founding is distributed only for half a year and at the same time a lot is misallocated for wrongly defined goals.
Evaluation	The program constantly evolves. Not all questions can be answered and each man reveals new mysteries. Effectiveness relies on differentiation of activities and forms of support. Parental attitude and community building based on family pattern is much more effective. We call it "program" for institutional reasons – for us it is HOME. Any person who feels TRULY accepted appreciated and treated with sympathy, TRULY starts believing to be valuable, full of strength, resources, abilities and creativity.