

**S36.5**

Community mental health and psychiatric hospitals: what strategies for reform. The Kosovar and Albanian examples

L. Urbina\*. *World Health Organization, Tirana office for Albania, Albania*

The war in Kosovo and the post conflict emergency required the World Health Organization (WHO) intervention to support the large population of refugees fleeing into Albania, and their difficult return into Kosovo afterwards.

The psychiatric services available in both areas were unable to provide suitable support to mentally ill or vulnerable people. On the contrary, these services were characterized by the purely biological approach, hospital centralized, strongly stigmatising. The war and the increased needs for mental health support led them into collapse in the case of Kosovo and emphasized their lacks in the case of Albania. An intervention to support, develop and reform them became an emergency.

WHO interventions aimed to enhance local capacity to answer to the needs, by supporting processes of reform of the psychiatric services. But different situations required accordingly different approaches. Understanding what strategies were used, how the international supports came to ensure continuity and quality to the intervention, how the resources were utilized to obtain cost efficient services and why we do think that promoting community mental health means also supporting processes of civil reconciliation and prevention of conflicts are the main aspects of this contribution.

**S36.6**

Mental health in a divided society

F. Agani. *UNMIK Ministry of Health of Kosova, Serbia*

For ten years Kosovar Albanian population was subject of severe apartheid imposed by Serbian regime. At the time when severe violations of human rights of Albanian population happened, Serbian community had experience of power and economical prosperity. Mental health consequences of both processes were catastrophic: A lot of pain, hard emotions, mixed feelings of anger and depression, anxiety and dependency, inferiority and humiliation was accumulated into Albanian population. Unfortunately, nothing was done by Kosovar Serbian society to downsize the intensity of these tectonic developments. After the war, mental health consequences for Albanian population become extremely severe, at the same time Serbian population started to experience what Kosovar Albanians were experiencing many years before. It is difficult to develop comprehensive mental health reform in a divided society. Nevertheless, Kosovar Albanian professionals supported by WHO are showing high level of sensitivity toward minority mental health issues. Reconciliation for Albanian population is well known process and is heritage of national culture and tradition. Sincere motivation of minorities to be integrated into Kosovar society is basic precondition for that.

**S36.7**

International collaboration and support in the mental health programme in Macedonia

H. Wahlberg\*. *WHO-EURO-MH, Skopje, FYR of Macedonia*

The mental health services are poor. They need to be improved from medical, economic and human right's point of view. WHO has in collaboration with 3 twinning cities in EU supported an extensive reform program.

International collaboration has proved to be an efficient way to improve the services

---

## S37. European day hospital evaluation – results from the first year of the EDEN-Study

*Chairs:* T. Kallert (D), S. Priebe (GB)

---

**S37.1**

Quality assurance for randomisation and survey instruments in the EDEN-Study

T.W. Kallert<sup>1</sup>\*, M. Schützwohl<sup>1</sup>, S. Priebe<sup>2</sup>, A. Kiejna<sup>3</sup>, J. Raboch<sup>4</sup>, P. Nawka<sup>5</sup>. <sup>1</sup>*Technical University of Dresden, Department of Psychiatry & Psychotherapy, Germany*

<sup>2</sup>*Department of Social and Community Psychiatry, East Ham Memorial Hospital, London, UK*

<sup>3</sup>*Wroclaw Medical University, Department of Psychiatry, Poland*

<sup>4</sup>*Psychiatric Department of the 1st Medical School of Charles University, Prague;* <sup>5</sup>*Psychiatria Nemocnica, Michalovce, Czech Republic*

In 2000, an EC-funded multi-site study on the efficacy of acute psychiatric day-hospital treatment (EDEN-study) started in five European centres: Dresden (Germany), London (UK), Wroclaw (Poland), Prague (Czech Republic) and Michalovce (Slovak Republic). The study utilises a randomised controlled trial and is the first spanning former western and eastern block countries. The prospective design defines repeated measures of objective and subjective outcome criteria at six different time points including a 12-month post-treatment period.

To guarantee the standard of randomisation the study group (besides initially agreed upon inclusion and exclusion criteria as well as practical details of the randomisation procedure following the rules of the CONSORT statement) uses a focus group methodology at the project meetings, continuous e-mail communication between the centres as well as monthly reports according to the CONSORT statement to the co-ordinator. Besides centre-specific measures for continuous training of interviewers (e.g. for SCAN 2.1) the study group e.g. performs video ratings for BPRS and monthly ratings of written vignettes for GSDS (Groningen Social Disabilities Schedules).

Details of the procedures and results (e.g. GSDS role-specific interrater reliability) will be reported.

**S37.2**

Clinical and sociodemographic features of randomised patients in the EDEN-Centres

J. Raboch<sup>1</sup>\*, A. Howardova<sup>1</sup>, J. Hamplova<sup>1</sup>, N. Bakova<sup>1</sup>, M. Sekot<sup>1</sup>, L. Starkova<sup>1</sup>, T.W. Kallert<sup>2</sup>. <sup>1</sup>*Psychiatric Department of the 1st Medical School of Charles University, Prague, Czech Republic* <sup>2</sup>*Technical University of Dresden, Department of Psychiatry & Psychotherapy, Germany*

We shall summarize the overall number of patients admitted to individual centers in Dresden, London, Wroclaw, Michalovce and Prague during the first year of the EDEN research period starting December 1, 2000, the reasons of their not fulfilling the inclusion criteria (e.g. admission without consent, suicidal risk, risk to others, degree of severity of psychiatric disorder) and the number of those

who refused to participate in the study. Sociodemographic data, such as age, gender, marital and social status, level of education, employment, living situation as well as main psychiatric diagnoses, and clinical history including previous psychiatric treatments of subgroups of patients randomized to completely inpatient setting or to day-care hospitals will be described, compared and analyzed. Possible reasons of differences between individual centers will be discussed.

### S37.3

Psychopathology and social disabilities of day-hospital and inpatients during acute treatment

A. Kiejna<sup>1</sup>\*, K. Szajowski<sup>1</sup>, J. Rymaszewska<sup>1</sup>, J. Jarosz-Nowak<sup>1</sup>, T. Kallert<sup>2</sup>. <sup>1</sup>University Hospital, Department of Psychiatry, Wrocław, Poland  
<sup>2</sup>Technical University of Dresden, Department of Psychiatry & Psychotherapy, Germany

**Objectives:** During the ongoing multicenter randomized, controlled trial EDEN (European Day Hospital Evaluation), which evaluating treatment and costs of psychiatric day hospital comparing to inpatient care, the dynamics of psychopathology and social functioning of patients are assessed.

**Method:** The sample consists of 333 acute adult psychiatric patients hospitalized randomly in day hospital or inpatient care in five European centers: Dresden, London, Michalovce, Prague and Wrocław. They were assessed after initial periods of three days, one week and four weeks as well as at discharge using the Brief Psychiatric Rating Scale (BPRS) and the Groningen Social Disabilities Schedule (GSDS). Total BPRS scores and GSDS sum scores of each 8 social roles were used in the data analysis.

**Results:** Considering the ongoing study, preliminary results will be presented on the conference.

**Conclusions:** We expected to confirm the hypothesis that there were no difference in reduction of overall psychopathology between day hospital and inpatient group, but day hospital is associated with better social functioning.

### S37.4

Burden on relatives comparing treatment in inpatient and day-hospital settings

M. Schützwohl\*, T.W. Kallert, C. Matthes. *Technical University of Dresden, Department of Psychiatry & Psychotherapy, Germany*

Research has shown that family members of mentally ill may be exposed to substantial burden, the impact of which is often felt across many aspects of life, such as leisure, relations with friends, and mental and physical health. With regard to this, within a multi-centre randomised controlled study comparing day-hospital treatment and inpatient treatment for acute mentally ill, the objective and subjective burden on the patients' relatives as well as their general health was assessed using the Involvement Evaluation Questionnaire (IEQ; van Wijngaarden et al., *British Journal of Psychiatry*, 177, suppl. 39, s21-s27) and the General Health Questionnaire (GHQ-28). The period to be rated covered the last four weeks prior to admission and the first four weeks of treatment.

The authors will present multivariate analyses, controlling the outcome measures for specific covariates such as patients' clinical variables (e.g. psychopathology, social functioning) and patients' and relatives' socio-demographic characteristics. Analyses will refer to the patients and relatives recruited during the first 12 months of the ongoing study, thus presumably including about

N=500 patients and relatives. Implications of the findings will be discussed.

### S37.5

Subjective evaluation criteria in the EDEN-Study

S. Priebe<sup>1</sup>\*, R. McCabe<sup>1</sup>, A. Okine<sup>1</sup>, D. Wright<sup>1</sup>, T. Kallert<sup>2</sup>. <sup>1</sup>Barts and The London School of Medicine, University of London, UK  
<sup>2</sup>Universitaetklinikum der Technischen Universitaet Dresden, Germany

Previous randomised controlled trials comparing acute day hospital treatment with conventional inpatient care consistently demonstrated a higher treatment satisfaction in day hospital patients. There is relatively little evidence as to whether day hospital treatment also leads to more favourable results on other subjective evaluation criteria such as indicators of quality of life and needs. The EDEN Study – a European multi centre randomised controlled trial comparing day hospital treatment and full hospitalisation – systematically investigated subjective evaluation criteria in both treatment arms.

The findings are roughly in line with previous research, but not fully consistent across all five centres. Subjective evaluation criteria tend to be more positive in day hospital treatment. Changes of those criteria over time in the day hospital to some extent differ from patterns found in conventional hospital care. The tested criteria show intercorrelations of varying degrees which challenges their conceptual framework as independent variables and their separate use in evaluative research.

---

## S38. Ethical aspects of psychiatric genetic research

*Chairs:* M. Rietschel (D), J. Hauser (PL)

---

### S38.1

Attitudes towards psychiatric genetics in the Weimar Republic

H. Fangerau<sup>1</sup>\*, F. Illes<sup>1</sup>, I. Müller<sup>2</sup>, W. Maier<sup>1</sup>, M. Rietschel<sup>1</sup>. <sup>1</sup>University of Bonn, Department of Psychiatry; <sup>2</sup>University of Bochum, Germany

In the history of psychiatry eugenic thoughts and psychiatric genetics formed a fatal alliance. Especially in Germany this alliance resulted in atrocities which discredited psychiatric genetics for the following years.

It has often been argued what kind of ethics doctors applied during the years prior to the Third Reich towards psychiatric genetics or whether they applied any ethics at all.

A possible source for such research is formed by book reviews on genetic textbooks in scientific or general journals.

In this presentation the attitudes of German opinion leaders towards psychiatric genetics are investigated for the period of the Weimar Republic with the use of 324 systematically screened book reviews on the contemporary standard textbook on "Human Heredity and Racial Hygiene" by Erwin Baur, Eugen Fischer and Fritz Lenz.

The attitudes expressed in the reviews cannot be considered as bearing no ethics at all, but the ethics applied here were antiindividualistic and bore dangers to humanity.