

STUDY OF DIGNITY IN BORDERLINE CONTEXTS: PERSPECTIVES AND CRITICAL ISSUES

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SUMMARY

In 2020 Dignity Therapy Protocol was administered to the patients taken in charge by Avellino Ser. D (Addiction services of Avellino healthcare unit) for addiction problems and assigned to U.E.P.E. (Office of External Enforcement) on parole and to complete the full term of sentence. Before and after administering Dignity Therapy Protocol, Beck Depression Inventory was used in order to evaluate the possible improvement of the quality of life of the patient, associated with a decrease in depressive symptoms.

This experimentation has allowed to highlight perspectives and issues in the application of Dignity Therapy Protocol, in different contexts than the one in which it was born.

A decrease in the scores in the detected items has been observed in almost all participants.

Key words: *Dignity Therapy – depression – addiction - sense of guilt*

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INTRODUCTION

Dignity is the need of everyone to be recognized, if it is possible, interpreted in gestures, behaviour and words (Borgna 2013).

Dignity Therapy is a short, individual psychotherapeutic intervention, initially designed to reduce psychosocial and existential distress of terminally or life-threatening ill patients (Chochinov et al. 2005).

Currently, the use of this protocol has been extended to other contexts (Chochinov 2016).

People who have to atone for a sentence in prison or through alternative punishment modalities, have often lost hope in their personal existential project and experience intense emotions such as shame, sense of guilt and sadness.

Dignity Therapy Protocol was administered to some users of Avellino Ser.D - Addiction services of healthcare unit- in order to assess whether preservation of dignity, life storytelling and observation of roles had during one's own existential journey, affect the perception of the sense of self and the emotions most experienced as shame and sadness, contributing to improve the quality of life.

In particular, those who have to atone for a sentence often identify themselves with the crime committed and find hard to get out of the role of "guilty". The recovery of certain dimensions related to dignity could allow these people to start seeing themselves regardless of the crime committed.

SUBJECTS AND METHODS

Dignity Therapy Protocol was administered to some users of Avellino Ser. D (Addiction services of Avellino healthcare unit) for addiction problems and

assigned to U.E.P.E. (Office of External Enforcement) with long periods of detention or subjected to alternative measures to detention.

The interviews were administered by a psychologist who did not usually follow the users selected for the interview. First, an interview and the introduction to the protocol were carried out with each patient. Before and after administering Dignity Therapy Protocol, Beck Depression Inventory (Beck 1976) was used both for ease of administration, and to assess whether the narration of personal topics could have influence on depressive symptoms.

The selected people were ten. They were between 21 and 60 years old. They had addiction problems and 5 suffering from psychiatric problems and also in charge of the Mental Health Service.

After the informed consent, the conversation was recorded, transcribed and subjected to an editing process and then given to the patient.

RESULTS

The results at Beck have showed dimensional changes in all prisoners. There has been a change in the degree of depressive severity and in particular a decrease in the scores obtained in all the tests administered. Two people have had a significant decrease in scores associated with the guilt assessment items.

V., 54 years old, released from prison after twenty years and subjected to a semi-liberty regime for two years, with a twenty-year history of drug addiction behind him, has gained improvements on the relational level and on the symptoms related to shame and the sense of guilt.

M., 21 years old, in charge of the Ser.D for three years and assigned to the U.E.P.E. for one year, pen-

ding trial, has showed disappearance of self-damaging thoughts, improvement of interpersonal skills and decrease in the sense of guilt.

The main issue found, compared to the administration already carried out in other contexts such as in Casa Circondariale (the prison for people awaiting trial or serving a sentence of no more than three years), is that because of the situations and the problems of addiction experienced, these people tend to be reluctant to open up spontaneously and to show manipulative and seductive attitudes. So obtained profiles could be partly distorted.

CONCLUSION

Drugs are the subject of all stories, especially in the first part of interviews. It seems that the same substance had prevented these people from thinking in some moments of their life.

However, Dignity Therapy Protocol, taking into account these aspects, could find a useful application in borderline contexts, where an individual must be rehabilitated to the thought and the need to look at his own history with different eyes, free from filters and prejudices.

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