



**EUROPEAN COMMISSION**  
DIRECTORATE-GENERAL JUSTICE FREEDOM AND SECURITY  
Direction B : Immigration, asylum and borders

# GRANT APPLICATION FORM

***INTI***  
***PREPARATORY ACTIONS 2006***

Initials of the representative of the Applicant organisation:

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<b>CHECK-LIST</b>
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<b>DOCUMENTS TO BE PROVIDED IN <u>ELECTRONIC FORMAT</u> (DISKETTE OR CD-ROM)</b>
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1. "Detailed forward Budget Form" duly completed (Excel)	<input type="checkbox"/>
2. Grant application form duly completed	<input type="checkbox"/>
3. "Staff Treatment details" form duly completed (Excel)	<input type="checkbox"/>

<b>DOCUMENTS TO BE PROVIDED ON <u>HARD COPY</u> (PAPER) – 1 ORIGINAL + 3 COPIES</b>
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1. Completed application form dated, initialled on each page and signed by the authorised representative of the applicant organisation	<input type="checkbox"/>
<b>Information regarding grant applicant (Part 1 of the application form)</b>	
2. Financial identification form (print-out of the provided Excel document) signed and dated both by the applicant organisation and the bank branch in which the bank account is held	<input type="checkbox"/>
3. Official registration certificate (not applicable for Public Bodies)	<input type="checkbox"/>
4. Articles of association/Statutes (not applicable for Public Bodies)	<input type="checkbox"/>
5. List of directors/executive board members (names and forenames, titles or positions in the applicant organisation) (not applicable for Public Bodies)	<input type="checkbox"/>
6. Annual accounts for the financial year 2005 (not applicable for Public Bodies)	<input type="checkbox"/>
7. If the requested grant exceeds 300.000 EUR, attach an auditor's report issued within the last two years by an approved auditing firm (not applicable for Public Bodies)	<input type="checkbox"/>
8. Annual activity report for 2005	<input type="checkbox"/>
<b>Information regarding the project applied for (Part 2 of the application form)</b>	
9. Timetable for implementation of the project (print-out of the provided Excel document duly signed)	<input type="checkbox"/>
<b>Information regarding the financing of the project (Part 3 of the application form)</b>	
10. Detailed forward budget , initialled on each page, dated and signed (print-out of the Excel file)	<input type="checkbox"/>
11. Declaration of partnership by each partner organisation (including the amount of co-financing where applicable)	<input type="checkbox"/>
12. Declaration of co-financing by any additional co-financing organisation (specifying clearly the amount of funding)	<input type="checkbox"/>
13. "Staff Treatment details" form (print-out of the provided Excel document duly signed)	<input type="checkbox"/>

Initials of the representative of the Applicant organisation:

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**1. INFORMATION CONCERNING THE APPLICANT**1.1 Identity of the applicant

1.1.1 Full legal name (in original language) :

**SANTE MENTALE EXCLUSION SOCIALE - EUROPA**

1.1.2 Short name (where applicable):

**SMES-EUROPA**

1.1.3 Organisation name in English:

**MENTAL HEALTH SOCIAL EXCLUSION**

1.1.4 Registration number (where applicable):

6202002

1.1.5 Legal status:

AISBL Non profit – International - Association

1.1.6 VAT number:

476429158f.

1.2 Authorised signatory legally representing the organisation

1.2.1 Title:

Mr

1.2.2 Name:

LEONORI

1.2.3 First name:

Luigi

1.2.4 Position:

President

1.3 Address (of registered office – address for contract)

1.3.1 Street, Number:

Rue Rempart aux Moines 78

1.3.2 Post code:

B-1000

1.3.3 Town/city:

Brussels

Initials of the representative of the Applicant organisation:

1.3.4 Country:

EU	Belgium
Candidate	
Other (official ISO 2 code) <sup>1</sup>	BE

1.4 Contact address for the Commission (address for correspondence)

1.4.1 Street, Number:

Place Albert Leemans N° 3
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1.4.2 Post code:

1050
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1.4.3 Town/city:

Brussels
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1.4.4 Country:

EU	Belgium
Candidate	
Other (official ISO 2 code) <sup>2</sup>	BE

1.4.5 Telephone + country code (area code) number:

+	32	(	02	)	53.85.887
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1.4.6 Fax + country code (area code) number:

+	32	(	02	)	53.85.887
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1.4.7 E-mail:

smeseu@smes-europa.org
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1.4.8 Website:

http://www.smes-europa.org
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1.4.9 Language:

fr
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1.5 Contact person

1.5.1 Title:

Mr
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1.5.2 Name:

Luigi
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1.5.3 First name:

LEONORI
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1.5.4 Position:

Manager of project
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1.5.5 Direct telephone + country code (area code) number:

+	32	(	02	)	53.85..887
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1.5.6 Direct fax + country code (area code) number:

+	32	(	02	)	53.85..887
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1.5.7 E-mail:

smeseu@smes-europa.org
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1.6 Financial Identification Form

<sup>1</sup> Consult <http://publications.europa.eu/code/pdf/370000fr.htm> for the complete list of ISO 2 country codes

<sup>2</sup> Consult <http://publications.europa.eu/code/pdf/370000fr.htm> for the complete list of ISO 2 country codes

Initials of the representative of the Applicant organisation:

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**Please attach the print-out of the provided Excel document to the application form duly signed and dated both by the applicant organisation and the bank branch with which the bank account is held.**

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Initials of the representative of the Applicant organisation:

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## 1.7 Additional information about the applicant organisation

### 1.7.1 Summary of the organisation's objectives and usual activities (max 20 lines):

**SMES-EUROPA is a non-profit International Association (aisbl)** operates at interface - intersection of mental health and social exclusion, in order to improve mental, physical & social well-being, promoting inclusion, citizenship and solidarity in European Countries for people living in extreme social and health precariousness. Despite national differences, in both the nature and severity of the problem, discrimination and exclusion especially concerning "homeless people: local – national – European and immigrants", this epiphenomenon is a structural problem in European society and constitutes a political challenge for Europe: the building of the "**European Community**" must take place within a framework of respect of right, access to citizen's services and of solidarity.

**TARGET** : are local – national – European & Immigrants men and women "home/belonging"- less : mentally ill people without adequate assistance, young people at risk of losing viable society's contact, addicted to alcohol & drugs, ex/prisoners, elderly people who have been abandoned, refugees & immigrants without full integration

#### OBJECTIVES :

**1. Research/action**: Not enough is known yet about needs & services for this target excluded population in the European context to adapt a prescriptive approach. Rather we seek: to identify innovative services, to develop and evaluate new interventions, to translate knowledge into practical action, especially concerning immigrants people.

**2. Information and heightening of awareness** : SMES promotes awareness in society as a whole, and more specifically among social and health workers, policy makers and mass-media.

**3. Networking** : SMES is an European network improving opportunities of working together and promoting multi-disciplinary co-operation, co-working professional salaried and not people, voluntary ad volunteer people.

**4. Education and training** : SMES works for the promotion and dissemination of effective projects and practices by means of study days, seminars & conferences: the 10<sup>th</sup> will be in Rome 2007. The intention is to offer an opportunity to workers, ex/users and their relatives, immigrants of exchanging ideas, experiences and know-how.

Initials of the representative of the Applicant organisation:

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1.7.2 Number of permanent staff:

One in Brussels, supported by secretary of Brussels & Rome

1.7.3 Organisation's usual sources of finance:

1. inscriptions of members
2. projects of Commission

1.7.4 Shareholders (groups/companies holding a share of the applicant's capital, when applicable) :

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Initials of the representative of the Applicant organisation:

1.7.5 Subsidiaries:

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1.7.6 Community grants, contracts or loans obtained (as applicant or as partner) by the applicant organisation in the three previous years from European institution or Community organisation

Year of award	Community programme in question / for procurement contracts name of Unit and DG	Reference number and title of the operation:	Amount of the contract or grant (EUR)
2003-04	DG Elargissement	064-949 2003 Dignity and Health 5 P / 1	58,219
2004-05	DG Elargissement	082-870 2004 Dignity and Health 5 P / 2	58,657

1.7.7 Grant applications submitted (or due to be submitted) by the applicant organisation to European institutions in the current year

Year of award	Community programme in question / for procurement contracts name of Unit and DG	Title of the operation:	Requested amount of the contract or grant (EUR)

Initials of the representative of the Applicant organisation:

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**2. INFORMATION ABOUT THE PROJECT FOR WHICH FINANCIAL ASSISTANCE IS REQUESTED**2.1 General project information

## 2.1.1 Project Title:

**" MED-INTI: mediation – integration through health and mental health promotion".**

## 2.1.2 Acronym/Short title:

**MEDINTI - SMES**

## 2.1.3 Duration:

**15** months

## 2.1.4 Start date of the project:

**01-01-07**

## 2.1.5 End date of the project:

**31-03-08**

## 2.1.6 Date(s) of main event(s) (if applicable):

**January 2007, 1°Pathway: Prato;  
2° March: Palermo; 3° May : Malta;  
4° June : London;****X Conf. SMES 18-21/XI/07 ROME**

## 2.1.7 Location(s) where the project will be implemented:

**ROME and Athens - Lisbon – Malta – Paris and Brussels – Copenhagen - London**

Initials of the representative of the Applicant organisation:

## 2.1.8 Summary of the project: (max 5.000 characters) - In English

**SMES-EUROPA network in 15<sup>th</sup> years of action** in social and health field for marginalised and excluded people have a large experience, knowledge and how know in the field of "approach – rehabilitation - reinsertion and inclusion".

**CONTEXT** : between our partners, some countries have a long experience in the immigration area whereas others have only just started developing national policies. But in both, the practitioners of health & mental health care and of social services met more and more immigrants with very important social and health & mental health problems. **2004 : in the 8<sup>th</sup> Conference of Prague**, the Members of SMES and participants beginning to present the problem of health & mental health of immigrants in EU and especially in Med Countries. MSF -IT offers an important data contribution. **2005: In the 9<sup>th</sup> Conference of Berlin** the health & mental health needs of immigrants was more relevant and propose discussion and exchange in 3 workshops, again with an important testimony (*temoignage*) of MSF -B & IT and with a really strong defence of the right of health presented by Ms Gaby Zimmer MP of European Parliament. **2006: In the Seminar of Milano**, after study/visits in health dispensaries of Associations NAGA, Opera St Francesco and exchange with C.P.S. Centro consultazione Etnopsichiatrica, the problem of access of immigrants to health and mental health services become for SMES-EUROPA a real priority for complete integration of immigrants people.

**PRIORITY: 3.000.000 of homeless** was in Europe of 15 countries, according to an esteem of Feantsa 2002. **And today ?** During these four years we had 10 more countries in EU and so many of immigrants in our MED countries. **What about ?** **If in European population of homeless between 30-40% of homeless is suffering of mental health problems, what about immigrants?** Who many time "**regular**" are without housing, without job, because lost, without resources, without family, without welcoming and friendly environment ? Also heath & mental health is to loss risk. **What we must to do ?**

**PREVENTION & INTERMEDIATION** : A real good **policy of welcome** is the first integration policy. If we don't would find the local health centres and social assistance services full up of immigrants in health & mental health needs, we must have an important action of prevention and intermediation. We must create a strict collaboration in observing & knowing, analysing & research, training & informing between association working for homeless, health centres of national health system and trans-cultural mediators. Its absolutely important also **to promote dialogue with civil society**, in order to prevent once again the most serious recrimination that can address to the immigrants: who occupy the places in Health and Social National Services (hospitals, ambulatory, working, housing, etc.) that are up of right to the national ones.

**PROJECT "M E D – I N T I" : The integration pass trough the good "holistic health : physical – psychical - social"**

The underlying principle is to promote new and innovative ways of integrating immigrants, concerning also the "Right to Health" and – consequently – the access to the National system and services, building wherever possible on past experience. For this reason the project propose in the first :

1. **Knowledge : to collect in synoptic way the legislations and low decree** concerning the health system and right of access for all people, (*with short comment*), in relation with EU recommendations in new NAP/inclusion
2. **Analysis: to analyse the barriers and the facilitations in access to health/ mental health services**  
Barriers internal of users, of Institution's workers, of civil society. And the same for intermediation.
3. **Exchange of reflection and experiences:** realising 4 or 5 exchanging mini program comprehensive of lesson by expert on a priority definite topic, study visits, workshop for exchange and proposals.
4. **Participation in X SMES Conference in Rome (18-21/XI/07)** for exchange, dissemination and proposals.
5. **Publication of report : composed by the 4<sup>th</sup> previous objects.**

Initials of the representative of the Applicant organisation:

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**IN ORDER TO REALISE THESE 5 OBJECTIVES WE PROPOSE :**

- A. FOUR MEETINGS** where, in relationship with National Health Services – Associations – Users – Civil Society, we will:
- a. To study, with support of academic presentation and discussion in workshops, 4 particular topics in health / mental Health field :
    - i. Trauma: intermediation – care;
    - ii. Depression: self esteem - self help;
    - iii. Addiction : alcohol – drug – medicament;
    - iv. Psychosomatic disturb.
  - b. To prepare booklet for workers in this field
  - c. To prepare brochure for users.
- B. One Large CONFERENCE**, the X SMES-EUROPA Conference : " 15 years after ..."

**EXPECTED RESULTS :**

- A. Increasing of knowledge**
- B. Improve & developing of Network**
- C. In concrete way :**
- 1) 4 mini-programs of exchange
  - 2) 1 European Conference for 300 – 500 participants
  - 3) 1 training booklet for workers
  - 4) 1 brochure for information of users
  - 5) 1 complete rapport
  - 6) Recommendations for workers, users, political body at local, national European level.

**PREVISIONAL BUDGET :** +/\_ **110.000 €** = 77.000 Commission and 33.000 co-financing

**INVOLVEMENT OF 10 PARTNERS** : 6 from MED countries (IT – E - GR – FR - PO – ML) +  
4 from: BE - DK – UK – SW ( other ?)

- 1) TIME Involvement request to each partners : 6 days x 5 meetings = **30 days**
  - a. at less 2 day for preparing each meeting
  - b. **2 day for each meeting**
  - c. at less 2 day for preparing report of each meeting

- 2) Economical resources : request to each partners  
salary time: 100 € /day x 30 days = **3.000€**

Initials of the representative of the Applicant organisation:

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2.1.9 Specification of the content of the project

**ACTIONS AND PRIORITIES 2006 (see section 3 of the Call for Proposals) (maximum 1 selection)**

**A : To support the setting up of trans-national co-operation networks or pilot projects designed to identify, exchange and evaluate good practices and new approaches in the field of integration**

**B : To increase knowledge base for the development of integration policies EU-wide**

**C : To support trans-national dialogue and awareness on integration issues and its impact on society**

**TYPE OF PROJECT (several choices are possible)**

Conferences/seminars for exchange of best practice

Information campaigns and events

Introducing programmes for immigrants

Training

Creation and development of network

Exchanges and placement

Study and research

Seminar/conference for presentation of results

Dissemination of information, publication, website

Other: **Mental Health promotion**

2.1.10 Other projects directly related to this proposal:

Have you or any of your partners, already obtained financial support for a project directly related to this proposal within this programme or under other Community programmes/initiatives in the last five years?	<input type="checkbox"/> YES ( <i>please complete the table below</i> )  <input checked="" type="checkbox"/> NO
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Year	Programme or Initiative	Identification number	Contracting organisation	Title of the project	Organisation to which the proposal was submitted

Initials of the representative of the Applicant organisation:

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List of partners involved in this project

## 2.1.11 Partners:

	Name	Country (official ISO 2 code) <sup>3</sup>	Post code	Town/City
1	<b>Serviço Jesuíta aos Refugiados</b> Portugal Estrada da Torre, nº 26,	PT	1750-296	Lisboa
2	<b>Solidarity Overseas Service Malta</b> 9, Camilleri Court in Testaferrata Street,	MT	GZR03	Ta' Xbiex, Malta
3	<b>Projekt UDENFOR</b> Ravensborggade2,3 sal	DK	2200	Copenhagen
4	<b>Association Emmaüs</b> 32, rue des Bourdonnais	FR	75001	Paris
5	<b>PRAKSIS</b> Stournari 57	GR	10432	Athens
6	<b>AEN – SMES Madrid</b> C/ Villanueva N°11	ES	28001	Madrid
7	ASL ?	IT		Rome
8	ULYSSE ?	BE		Brussels
9		UK ?		London
10		PL ?		Warsawa
11				
12				
13				
14				
15				

Please attach declaration of partnership by each partner organisation (including the amount of co-financing when applicable)

<sup>3</sup> Consult <http://publications.europa.eu/code/pdf/370000fr.htm> for the complete list of ISO 2 country codes

Initials of the representative of the Applicant organisation:

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## 2.2 Content of the project

### 2.2.1 What specific problem / question does your project address?

**Start point** : "health and wellbeing are at the base of any integration"

In the same way that exists the indivisibility for the RIGHT: to health - to work - to housing (declaration of the universal human right art 23-25), as exists a strict interconnection for the HEALTH: wellbeing physic - psychic - social.

A strict interdependence exists between people who welcome and people who ask hospitality, but only with inter / mediation & dialogue - trough the health - between all and sundry there, will be possible building the citizen integration.

**The problem is: the real risk of homelessness & mental disturbs for immigrants**

If the policy of integration does not go from pair with the policy of the *welcome* and *respect* (=access to) of right health – housing – job, which are the condition sine qua non for the real & concrete integration & participation in citizenship, the risk of homelessness and mental disturbs for immigrants is very important.

**Why SMES, which works especially for the homeless, now is particularly also interested in the projects & initiatives for immigrants ?**

At least three among the more significant reasons:

1. in reason of immigrants nombre : because among the local, national and European homeless, in the European metropolises, there are immigrants more and more either 'accidentally and temporarily' homeless, or in a permanent way and with the risk of chronicisation.
2. in reason of complexity of needs : because there are a very great similarity between the complexity of the problems and needs for the ones and others, despite everything the differences given especially by the "*not belonging*" (on the ground, community, culture, ecc.) : .
3. in reason of workers: very often are the same workers which works as well in the field of social as that of health and mental health for the ones and for the others.

**The aim** of the project "*MED-INTI: mediation – integration through health and mental health promotion*" is to co-working, exchanging of experiences, knowledge and know how between workers for immigrants and workers for homeless, who in SMES network from many time are working for "Dignity & Health", in order :

- a) to promote Mental Health for immigrant people as for homeless: its means in the street, in the housing or shelters, but also in CTP to prevent the mental health problems and disturbs,
- b) to diagnostic, accompany and take care as soon as the mental disturb beginning the immigrant as the homeless.

Poverty, humiliation, shame, despair, the loss of identity, the loss of social links, the need to forget with alcohol and drug and finally pulsing to make it ended with the life... ; immigrants in this un-existential situation joins the our European homeless who are marginalised & discriminated, rejected & excluded.

The great difference consists in the personal resources of immigrants that are more important that homeless resources at level of health, culture, courage and desire of success, when they are not also they completely destroyed and without hope.

The work then of intermediation, inter-dialogue for participation and integration to social and sanitary levels, it demands one preparation and theoretical - practical training for workers and a complete and clear information for the new immigrant and with the immigrant already integrated.

And this makes part of objects of our project .

Initials of the representative of the Applicant organisation:

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## 2.2.2 Objectives of the project (your answer to the problem / question mentioned above):

1) **Promotion of the RIGHT of Health & Mental health** :

In 'general way' in almost all European country government recognise the human right of health for all. But non in all countries exists clear law and disposition promoting health and mental health and – over all – the access to services for immigrants and families.

For this reason we would like to support the Organisations who presented the Proposal of Resolution of European Parliament for the extension of the sanitary assistance for all immigrants present on the territory of the European Union, in order to assure the full realization of the right to the health for every individual to the inside of the European Union, and to guarantee the protection of the collective health.

In order to achieve this objective we would like :

- a. **Knowledge on the Right** : to know exactly the legislation of countries of partners and to collect in synoptic way the information about national legislation and local disposition and regulations concerning the health for immigrants people in the divers European countries.

2) **ACCESS to Helath & Mental Health services** in almost all European country is accepted the human right declaration and in this sense also the right to health and mental health. But 'normal' ACCESS to health services offered to local citizens, its not so 'normal' for immigrants, but full of difficulties, similarly for homeless:

- i. Individual 'psychological' barriers both in users and in workers
- ii. Institutional barriers: appointments, documents, etc
- iii. Lack of knowledge (frequently also of language and of culture)
- iv. From time to time discrimination

In order to achieve this second objective and to insure, guarantee and facilitate the access we propose :

b. **To observe the barriers in access of health services:**

- i. to collect the complaints of migrants, with a special attention to prevention
- ii. to collect the complaints of workers, with a special attention to after care
- iii. to prepare a Decalogue of "good practices".

3) **Training for workers who stay in frequently contact with homeless and immigrants** : this is our 3<sup>rd</sup> objectives put together in training initiative workers for homeless and for immigrants. We propose 4 or 5 main topics , but will be the participants in this initiative that will propose the themes that will be more urgent . This are only as example :

- i. Trauma: post traumatic stress disturbs.....
- ii. Depression: lack of self esteem – culpability & guilt sense;
- iii. Addiction : alcohol – drug – medicament;
- iv. Psychosomatic disturb : allergy – gastric , respiratory disturbs - head evils...
- v. Others

4) **Information for users is our 4<sup>th</sup> objective** : to create a very simple brochure – evidently in collaboration with the immigrants - for offer a very practical information about (also these are only example of topics):

- i. Health right & access to services
- ii. Main health services and contact people
- iii. Any frequently disturbs and medicaments
- iv. Any frequently disturbs and medicaments

Initials of the representative of the Applicant organisation:

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