

EXTENDED SUMMARY

The present project is a territorial diagnosis of the Specialized Social Services, specifically for Disability and Mental Illness. This study is framed in the New Valencian Model of Social Services whose purpose is to carry out a series of improvements (economic, labour, territorial, etc.) in order to guarantee care services for all people in the Valencia Region and make social services a fundamental pillar of the Welfare State.

Different steps have been taken in the preparation of this study. First, a theoretical review of the legal framework has been carried out, based on which work has been carried out in both sectors. It has been found that with regard to disability, numerous legislative updates have been made in recent years, *Law 11/2003 on the Valencian Statute of People with Disabilities* has been amended on several occasions, and a *Charter of Social Rights* has been created to ensure equal opportunities, integration, universal accessibility, autonomy and participation in the social life of the community.

As for the *Social Services Law*, it confers responsibility for analysing needs in the territory and managing social services on local authorities.

On the other hand, with respect to the Mental Illness sector, the changes at the legislative level have not been as notorious as in Disability, since *Order 3 of 1997* the different resources of attention have been developed, later on *Decree 81/1998* is formed which defines and structures the resources directed to this sector and *Law 10/2014 of Health* the purpose of which is to prevent and promote mental health and to eradicate discrimination.

Subsequently, the current situation of Social Services was analysed and it was found that they are divided into two types, Generalised Social Services, whose action is more basic and universal, and Specialised Social Services, which are the resources directed to a specific sector of the population and which is the focus of the present study. These resources can be either publicly owned, they are services provided by the public administration (Generalitat Valenciana and municipal councils) or privately owned, in this case it would be the private entities or associations (third sector and private companies) created by society itself in the presence of a problem.

It was also found that the participation of individuals in social affairs, through associations and entities, creates a sense of community that is positively related to personal well-being and a higher quality of life.

In order to guarantee good compliance with the law, good care, a health guarantee and the inclusion of people who belong to these sectors, it is very important that the specialized services have a stable structure, an appropriate territorial distribution and a number of professionals adapted to the needs of each place.

From this time forward, the study focuses on the main objective which is the territorial diagnosis of resources for disability and mental illness. After collecting data about the resources currently available in the province of Castellón, it was observed that there is a wide variety of centres for people with disabilities, such as day centres, early care centres, occupational centres, residences and sheltered housing. While for mental illness there are day centres, specific centres for people with mental illness, sheltered housing and rehabilitation and social integration centres.

Subsequent to the collection of data, a series of tables have been created with information about the number of resources, places, whether they are publicly or privately title and who manages them. The distribution of the different resources has also been made on maps of the territory of Castellón organised by region.

The results obtained provide very relevant information about the situation of specialized resources for the care of disability and mental illness. First, the resources for both sectors are highly concentrated in the most densely populated and metropolitan areas like *Castellón de la Plana* or *Villa-Real*, while the most rural areas have practically no resources such as those located in the regions *Alto Mijares* or *Els Ports*

As for total resources, it can be seen that it is higher for disability (39) than for mental illness (15), but it can also be seen that for mental illness resources there is more public management than for disability where there almost is the same proportion of private and public management.

In order to improve this situation, action measures are proposed including the analysis of the needs of each territory and either redistributing the resources or creating new ones; greater responsibility on the part of public policies in the management of resources; and raising awareness in society in order to bring the reality of the disabled and people with mental illness situation closer to the people, since society is the first to detect the needs.