## **EDITORIAL**

## Challenges and opportunities in global assertive community treatment services – Celebrating the launch of the Journal of Global Assertive Community Treatment Association

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It is with great honour that we present the inaugural issue of the Journal of Global Assertive Community Treatment Association (J-GACTA). This new international journal is founded on a clear purpose: to provide an informative, accessible, open, and distinguished, professional venue for the global community of clinicians, researchers, programme leaders, policymakers, and individuals with lived experience who work in the specialized field of assertive outreach and community-based care for people with severe mental illness.

Assertive Community Treatment (ACT) is one of the most influential models in modern community psychiatry. Developed in the 1970s, ACT introduced a radically different approach to mental-health service delivery: mobile, multidisciplinary teams that bring comprehensive, continuous, and person-centred care directly to individuals with the most complex needs. Its emphasis on shared caseloads, continuity, assertive engagement, and 24-hour responsibility has been adopted across continents and has shaped many national mental-health systems for decades. ACT has consistently demonstrated its effectiveness in reducing hospitalization, improving community stability, continued

engagement with care, and supporting recovery for people who often face the great social and clinical barriers.

Yet the field has never been static. Around the world, ACT has been adapted, expanded, restricted, discontinued, rediscovered, and re-imagined. It is precisely this history of evolution—grounded in evidence but open to innovation and criticism —that underscores the need for an international scholarly platform dedicated to the model and its future directions. J-GACTA aspires to serve this role. Our mission is to facilitate open and rigorous exchange, informed debate, international collaboration, and shared learning that can advance the field and strengthen services for the people we collectively serve.

This inaugural issue brings together two pieces of writing that remind both the historical trajectory and forward momentum of the ACT tradition. The first by Dissanayaka, offers a critical reflection on the loss, and now renewed recognition, of classic high-fidelity ACT in England. Through current events and historical lessons, it examines the consequences of the dilution of assertive outreach teams across the country and considers the current shifts that holds potential for revitalizing interest in

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intensive community-based care. The second by Westen, details Flexible ACT (FACT), an innovative Dutch model that integrates ACT principles with population-based, stepped-intensity care. FACT represents a significant evolution of the original ACT framework, offering an adaptable system capable of meeting the full spectrum of community needs within an integrated and network of care, paying close attention to psychiatric recovery, and continued innovation and adaptation and evaluation based on dynamic adherence to a fidelity system. Viewed together, these contributions highlight a field that is both anchored in a strong evidence base and actively engaged in shaping its own future, while always interacting with the social, systemic and political milieus where they are situated.

The launch of this Journal marks an important milestone. It also provides an opportunity to express our deepest appreciation. We wish to thank our inaugural authors whose thoughtful contributions set excellent examples for future issues. We are grateful to the members of our editorial board for their expertise and guidance; and to our present and future reviewers for their commitment to scholarly excellence and constructive engagement. Above all, we acknowledge the ACT, FACT, and assertive-outreach teams across the world whose daily work continues to inspire clinical and academic communities alike.

Looking ahead, J-GACTA intends to support diverse forms of scholarship and reflection, with peer-reviewed and editor-reviewed sections, including original research, case reports, letters to the Editors, personal accounts, forums of discussions and debates, conferences related selected proceedings, book & media reviews, conceptual analyses, programme descriptions, insights and perspectives, policy discussions, methodological contributions, and related writing from practitioners, service users, supporters and families. Our commitment is to foster a professional space where new ideas may be proposed, longstanding challenges explored and shared expertise strengthened across contexts and cultures. The establishment of the Journal is both a celebration and a beginning.

We welcome you to the first issue of J-GACTA and thank you for joining us at the start of this new chapter.