

**The Masterclasses** are held in the frame of the **IFPE Congress** by expert teachers who aim to present innovative topics in mental health and epidemiology.

**The Masterclass lasts 90 minutes.**

**Attendance to the Masterclass is free but requires registration to the IFPE 2021 Congress** (After Registering for the IFPE 2021 Congress, please fill in the MasterClasses Form and send it by mail to: [congress@ifpe2021verona.org](mailto:congress@ifpe2021verona.org)).

**It is specifically dedicated to junior colleagues, clinicians and researchers, interested in psychiatric epidemiology.**

**Participants in the Masterclass will receive a Certificate of Attendance**

## **Symptomatic trajectories across neurodevelopment: a preventative perspective**

**Teacher: Dr. Marco Colizzi (Verona, Italy and UK)**



Atypical neurodevelopment includes a broad range of common conditions affecting about 1 in 6 children. Recent data indicate that the prevalence of neurodevelopmental conditions has increased over the last two decades, with important public health implications. In addition to the personal impact on children and their families, neurodevelopmental conditions have a significant associated societal cost to meet long-term challenges including school difficulties, underemployment, and treatment of associated behavioral and psychiatric manifestations.

Growing and converging evidence supports the presence of signs of atypical neurodevelopment as early as in the first two years of life, allowing its effective identification and the implementation of early intervention strategies. However, while the last 20 years have witnessed a substantial advance in the ability to pose an early diagnosis of neurodevelopmental condition, the comprehension of neurodevelopmental trajectories is still an unmet need.

It is not uncommon that children and adolescents with neurodevelopmental conditions might suffer from comorbid psychological and behavioral difficulties, such as anxious-obsessive symptoms, mood alterations, and psychotic-like experiences, as well as impulsive, aggressive, and disruptive behaviors. Often, such additional difficulties represent the major cause of disability, requiring their prioritization above the core symptomatology of the neurodevelopmental condition. Thus, it is critically important to elucidate mechanisms underlying variable expression and pleiotropy of neurodevelopmental phenotypes. Gaining such knowledge may help predicting the longitudinal developmental patterns of neuromotor and psychosocial correlates of atypical neurodevelopment.

It is imperative to encourage further research into biomarkers, environmental determinants, and interventions for atypical neurodevelopment and overlapping conditions in a preventative perspective. Mapping neurodevelopmental trajectories may result in a better understanding of biobehavioral pathways potentially leading to an increased risk of neuropsychiatric conditions in adolescence and early adulthood. Such effort may inform healthcare professionals and the general public about the presence and the need for intervention of atypical neurodevelopmental traits, even in subclinical populations, which can undermine an individual's ability to reach satisfactory outcomes in life.

The workshop will address the potential outcome of the most common neurodevelopmental conditions, including autism spectrum disorders, attention deficit hyperactivity disorder, Tourette syndrome, and childhood depression. Theoretical considerations regarding the clinical high-risk mental state (CHARMS) concept and its application in clinical practice will also be discussed. Participants in the workshop will be asked to discuss their own experiences and are invited to bring clinical cases or submit clinical cases in advance for discussion.

### **Bio**

*Marco Colizzi, M.D., Ph.D., is a Consultant Psychiatrist working on the "border" between childhood and adulthood at the Integrated University Hospital of Verona, Italy. Over the last two years, he has been a Research Fellow in Psychiatry at the University of Verona. He is also a Visiting Researcher at King's College London where he received a Ph.D. in Neuroscience for the study of the neurocognitive and neurochemical effects of cannabinoids on the human brain. Dr Colizzi's research focuses on the neuropsychopharmacology and neurocognitive function of psychosis and neurodevelopmental conditions, with a focus on prevention and early intervention strategies in mental health. To date, he has published over 50 scientific articles in refereed international journals, also receiving awards and recognition by several prestigious institutions, including the Royal College of Psychiatry, the European College of Neuropsychopharmacology, the Schizophrenia International Research Society, and the Royal Society of Medicine. Upon national evaluation, in 2018 he successfully qualified to function as Associate Professor of Psychiatry in Italian Universities.*

# Conceptual, methodological, design and data analysis issues in complex interventions

**Teacher: Dr. Chiara Bonetto (Verona, Italy)**



Nowadays complex interventions are the rule in mental health care (just think about the many complex aspects of psychosocial interventions) and their effectiveness has become a crucial question.

Complex interventions comprise a number of separate elements which seem essential to the proper functioning of the intervention although the “active ingredient” of the intervention that is effective is difficult to specify.

About 50 years ago, the concern of whether trials produce results applicable to everyday practice was raised, leading to the concept of ‘pragmatic trials’ in contrast with the traditional ‘explanatory trials’. The term pragmatic was used for trials designed to test interventions in the full spectrum of everyday clinical settings in order to maximize applicability and generalizability.

Pragmatic trials were given a large boost when the CONSORT (Consolidated Standards of Reporting Trials) group published both a checklist for recommended elements in pragmatic trials and a tool to help in the design of pragmatic trials, known as PRECIS for Pragmatic-Explanatory Continuum Indicator Summary.

Feasibility considerations indicate that cluster randomization is the gold standard approach for trials evaluating complex interventions implemented at the institutional level with the aim of improving health. Cluster randomized trials are characterized by their multilevel nature. The main consequence of a cluster design is that the outcome for each participant cannot be assumed to be independent of that for any other participant since those within a cluster are more likely to have similar outcomes. This lack of independence influences the design and analysis of the trial.

In pragmatic trials we need to optimally target the intervention, that is to seek better interventions for non-responders or low responders and to strengthen, add, or remove certain intervention components to make the intervention either more efficacious or more cost-effective. This issue led to define moderation and mediation. A moderation effect is a causal model that postulates ‘when’ or ‘for whom’ the treatment most strongly (or weakly) causes the outcome. Potential moderators include for example socio-demographics or baseline clinical characteristics. A mediation effect is a causal model that explains the process of ‘why’ and ‘how’ a cause-and-effect happens, that is the treatment is presumed to cause the mediator and, in turn, the mediator causes the outcome. This permits to strengthen, add, or remove certain intervention components in order to make the intervention more efficacious.

This lecture will provide you guidance in recognizing the challenges which arise in the implementation and evaluation of complex intervention.

## **Bio**

*Chiara Bonetto, Ph.D., is a medical statistician at the Section of Psychiatry, Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona (WHO Collaborating Centre for Research and Training in Mental Health and Service Evaluation). She is co-author of about 100 papers published in international peer-reviewed journals. Her main research interests concern the application of statistical techniques for the evaluation of the outcome of community-based mental health care, both with cross-sectional and longitudinal methodological approach, and the implementation of trials evaluating psychosocial interventions. Upon national evaluation, in 2012 she successfully qualified to function as Associate Professor of Medical Statistics in Italian Universities.*

# The methods of supported housing and recovery in Psychiatric Rehabilitation

## What you get from this Masterclass

This Masterclass provides an overview of where we stand today in incorporating the social environmental factors in mental healthcare practice and what the role of SH is in this. In the introduction, we show what is the actual current level in rehabilitation and social inclusion of persons with SMI based on nowadays knowledge. Then, we provide the latest insights in the recovery profiles of SH clients, and the impact of SH and interventions provided in SH based on recent studies. The main characteristic and practical aspects to enable participants to learn basic skills and administer some instruments related to recovery and good practice in SH are going to be presented and discussed.

## Part 1. Different recovery and rehabilitation interventions in supported housing and the ingredients of their effectiveness

**Teacher: Dr. Diana Roeg (Tilburg, The Netherlands)**



- Recovery interventions in SH. What interventions are being applied in SH, and what is known about their impact
- Procedures and challenges for effective Individual placement and support (IPS) in SH



## Part 2. Methods to implement effective recovery models in persons with SMI

**Teacher: Dr. Alessandra Martinelli (Verona, Italy)**



- Methodology of Recovery Star as an instrument to achieve change and shared-decision making
- The use of QuIRC-SA ratings to evaluate quality and recovery in SH

### Bio

#### **Diana Roeg**

*Diana is head of research at Kwintes, organization for supported housing, and senior researcher at the collaborative centers Mental Health Care and Addiction of Tranzo, Tilburg University. Before, she worked as senior researcher at the mental health care organization GGzE for eight years. Trained as health scientist and mental health services researcher, Diana has worked in mental health recovery and participation research for over 20 years now. Her research interests include innovation in (public) mental health care. Her research includes projects on engagement, and destigmatizing of socially marginalized persons and persons with enduring mental illness. Her research further focuses on improving service provision in community mental health care to enhance the social and personal recovery in persons with mental illness and psychosocial problems.*

#### **Alessandra Martinelli**

*Reference Psychiatrist in mental health residential facilities in Verona. Ph.D. student in Neuroscience, Psychology, and Psychiatry, and Movement Science, University of Verona. Her research is focussed on mental health community care, and particularly, deinstitutionalisation, residential facilities, and recovery for people with severe mental illness. President of the Young EAOF (European Assertive Outreach Foundation) she is a certified teacher of the Mental Health Recovery Star®, and she has promoted with users of Verona an association (The Open Circle) to implement peer expertise and participation in the Mental Health Department boards. Italian translator of the Dutch Flexible Assertive Community Treatment (FACT) Manual and the English Quality Indicator for Rehabilitative Care - Supported Accommodation (QuIRC-SA), she has had clinical and research experiences in mental health services and universities around the world.*



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