



Integrative Approaches to Psychiatric Treatment: The Verona Mental Health Centre CSM (Centro Salute Mentale)

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Preface

Mental health challenges can be described via the application of multiple lenses, from clinical-medical perspectives, to social and community-based, to further understandings in the context of public health. While these challenges can represent multiple issues to the scientific community at-large, especially because of the translational issues attached to the application of research and practice to the sphere of community services, it is useful to understand that the triad ethics, evidence, and experienceⁱ can be instrumental in navigating the complexity of the issue-at-hand. Furthermore, the work of researchers and practitioners is rooted in a solid understanding of the specific needs of psychiatric patients, particularly from the perspective of possible misunderstandings, ostracization, and stigmatization of psychiatric issues and related presentation, affect, and behaviours.ⁱⁱ Years of research have indicated how a proper interaction between resources at the level of scientific research and the community is a fundamental cornerstone for a practice rooted in both science and true care for individuals affected by mental health disorders. In this presentation we will discuss the case of the Centro Salute Mentale (Mental Health Centre, CSM) of Verona.

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The Centro Salute Mentale (CSM) of Verona

The Centro Salute Mentale (Mental Health Centre, CSM) of Verona is part of the Department of Medicine and Public Health, Section of Psychiatry and Clinical Psychology at the University of Verona, Italy. It is a World Health Organization Collaborating Centre for Research and Training in Mental Health and Service Evaluation. This health service centre specializes in the care and treatment of people with mental disorders and represents an important part of the public health care system in Italy, especially as a result of the application of the “Legge Basaglia,ⁱⁱⁱ” and in other EU countries. Furthermore, the CSM hosts a multidisciplinary treatment team responsible for the diagnosis, evaluation and treatment of mental disorders in the local community.

The CSM of Verona provides a range of services, including standards of care in psychiatry and clinical psychology, psychotherapy, pharmacological intervention, integrative approaches to care such as creative arts and art therapy, physical exercise, the direct involvement of family and community, as well as the intervention of multidisciplinary teams. The CSM clinical team, thus includes psychiatrists, clinical psychologists and psychotherapists, psychiatric nurses, creative art therapists as well as OSS /social workers. The main objective is to offer care and support to people suffering from mental health problems, in order to promote their well-being and full recovery. The approach used in the CSM of Verona is based on principles of person-centered care, collaboration between professionals and patients, and the integration of different professional skills.

Integrative and Multidisciplinary Therapeutic Strategies for Mental Health Disorders: The case of Schizophrenia

Schizophrenia is a chronic and severe mental disorder that affects the triad behaviour, cognition, and emotion of the patient. More specifically, schizophrenia is characterized by a combination of symptoms that can include delusions, hallucinations, diminished or impaired emotional expression, and difficulties with motivation and social interactions, and disorganized thinking and

speech, often combined with sociocultural issues related to misrepresentations and false perception of the above in the community context.

From a broader angle, symptoms of Schizophrenia are typically divided into positive symptoms (unusual presentations and/or distortions of normal functioning such as hallucinations, delusions, disorganized speech, and disorganized behaviour) and negative symptoms (reductions or deficits in normal functioning, for instance reduced emotional expression, social withdrawal, diminished motivation, and difficulty experiencing pleasure). Schizophrenia typical onset is manifested in late adolescence or early adulthood with sex-specific differences (as it is the case of clinical depression)^{iv}, although it can occur at any age. Early signs may include social withdrawal, deteriorating school or work performance, unusual behaviour, and changes in thoughts and perceptions. While the scientific community is still not in full agreement on the etiological factors which determine the origin of schizophrenia, the consensus is on a combination of genetic, environmental, and neurochemical factors. In this sense, a family history of schizophrenia increases the risk, and certain brain abnormalities and, in general, the theory of imbalances in neurotransmitters is also considered as part of the standard of research in this area of psychiatric assessment and treatment. The above considerations are fundamental in both diagnostic and treatment terms. More precisely, the diagnosis of schizophrenia is often associated with sociocultural stigma. This is important to note, as the very concept of a ‘split mind’ contained in the official DSM label for this disease, can result in effects, linked to pathological states, which can be as debilitating as the associated symptoms^v. Standards of care often involve long-term treatment and management. A pharmacological approach involves a combination of antipsychotic medication, while psychosocial interventions involve art therapy, integrative strategies such as physical exercise, socialization, family education, and vocational activities, in combination with support services. This multidisciplinary treatment aims to reduce symptoms, improve overall functioning, prevent relapses, and enhance quality of life. With proper treatment and support, many individuals with schizophrenia can experience significant improvement in their symptoms and lead fulfilling

lives. From a prognostic perspective, recovery is often a lifelong process, and ongoing management of the condition is essential. Support from mental health professionals, family, and friends can play a crucial role in the recovery journey.

One of the core aspects of the CSM – Centro Salute Mentale of Verona is the focus on integrative approaches to care, which are inclusive of both physical activities and exercise and creative arts and art therapy. More specifically, art therapy is a therapeutic approach that utilizes various forms of artistic expression to support individuals in their emotional, psychological, and cognitive well-being. art therapy utilises multiple techniques, both in the areas of visual and performing arts. The CSM – Centro Salute Mentale focuses on visual arts, especially painting, drawing, and sculpting or installations. art therapy is typically used as a complementary approach alongside other forms of treatment, such as medication and psychotherapy. Furthermore, it is important to distinguish art therapy from similar disciplines and orientations such as outsider arts or expressive arts, all of which are incorporated in the offerings of the CSM.

From a psychiatric-psychological standpoint, art therapy focused more on both the therapeutic and diagnostic element of healthcare, while outsider art, similarly to expressions in art history such as Art brut or Arte povera, focuses on the creative self-expression of the artist first. The relation between the fields of art therapy and outsider art has been widely debated. The term art brut was first coined by French artist Jean Dubuffet to describe "art created outside the boundaries of official culture".^{vi} Dubuffet used the term art brut to focus on artistic practice by insane-asylum patients. The English translation "outsider art" was first used by art critic Roger Cardinal in 1972.^{vii}

Both terms have been criticized because of their social and personal impact on both patients and artists. Art therapy professionals have been accused of not putting enough emphasis on the artistic value and meaning of the artist's works, considering them only from a medical perspective. This led to the misconception of the whole outsider art practice, while addressing therapeutical issues within the field of aesthetical discussion. Outsider art, on the contrary, has been negatively judged because of the

labelling of the artists' work, i.e. the equation artist = genius = insane. Moreover, the business-related issues on the term outsider art carry some misunderstandings.^{viii} While the outsider artist is part of a specific art system, which can add a positive value to both the artist's work as well as his personal development, it can also imprison him within the boundaries of the system itself.^{ix}

In the context of schizophrenia, art therapy can provide a non-verbal outlet for individuals to express themselves, explore their emotions, and enhance self-awareness. It allows for the creation of visual or tangible representations of thoughts and feelings that may be difficult to articulate verbally. Engaging in art-making activities can promote relaxation, improve mood, foster self-esteem, and encourage self-reflection. Art therapy sessions involve various artistic mediums, such as collage, drawing, painting, sculpting, etc. The art therapist works collaboratively with the individual to establish goals and explore themes or issues that are meaningful to them.

Through the creative process and the subsequent reflection on the artwork, individuals can gain insights, develop coping skills, and improve their overall well-being. At the CSM, the therapist can adapt the art interventions to meet the specific needs and abilities of the individual. Additionally, art therapy should be integrated into a comprehensive treatment plan that may include medication management, individual or group therapy, and other forms of support.

Which standards of care? Psychotherapy and Neuroimaging strategies for depression and psychosis

Standards of care in neuroimaging techniques for psychiatric disorders are varied and constantly developing. A common technique is the investigation modulated by functional Magnetic Resonance Imaging techniques, or fMRI. fMRI is a non-invasive imaging technique that measures brain activity by detecting changes in blood flow and oxygenation. It has been widely used in psychiatric research to investigate the neural correlates of mental disorders, including depression,

schizophrenia, and psychosis. By examining brain activation patterns and connectivity, researchers aim to gain a better understanding of the underlying neurobiology and potential biomarkers of these conditions. In the context of depression, fMRI studies have explored alterations in brain regions involved in emotion regulation, such as the prefrontal cortex, amygdala, and anterior cingulate cortex. By identifying specific neural markers, researchers hope to develop more targeted treatments and improve diagnostic accuracy. In schizophrenia and psychosis research, fMRI has been utilized to investigate abnormalities in brain networks related to perception, cognition, and social functioning. Studies have examined brain regions such as the prefrontal cortex, hippocampus, and thalamus to unravel the neural basis of hallucinations, delusions, and cognitive deficits seen in these conditions.

Psychosis is a mental health condition characterized by a loss of touch with reality, which can include symptoms such as hallucinations, delusions, disorganized thinking, and abnormal behaviour. Stress can play a role in triggering or exacerbating symptoms of psychosis, especially in individuals who are already vulnerable to developing psychotic disorders. When someone experiences high levels of stress, it can potentially disrupt the balance of neurotransmitters in the brain, such as dopamine, which is thought to be involved in the development of psychotic symptoms. Stress can also affect the functioning of the hypothalamic-pituitary-adrenal (HPA) axis, a system involved in the body's response to stress, which may contribute to the onset or worsening of psychosis. From an epidemiological and integrated perspective, studies indicate that psychosis is a complex condition with multiple factors involved, including genetic predisposition, brain chemistry, environmental influences, and psychological factors. However, stress can be a contributing factor in triggering or intensifying psychotic symptoms in susceptible individuals. Managing stress is crucial for individuals with psychosis or those at risk of developing psychosis. The Centro Salute Mentale (Mental Health Centre, CSM) of Verona utilizes multiple strategies aimed at psychotic symptomatology, among which we find Psychotherapy, including cognitive-behavioural therapy (CBT), to help individuals develop coping

strategies to manage stress and reduce the impact of psychotic symptoms. More specifically, Cognitive-Behavioural Therapy for Psychosis (CBTp): CBTp is an evidence-based approach specifically designed for individuals with psychosis. It aims to identify and challenge unhelpful thoughts and beliefs (delusions) and to develop coping strategies for managing hallucinations and other distressing symptoms. CBTp also focuses on improving problem-solving skills, enhancing social functioning, and promoting relapse prevention. Other psychotherapeutic techniques include Acceptance and Commitment Therapy (ACT): ACT focuses on accepting one's experiences, including psychotic symptoms, while actively committing to pursuing a meaningful life. It helps individuals identify personal values, develop mindfulness skills, and take steps toward valued goals, even in the presence of distressing symptoms. At the CSM of Verona, therapeutic sessions are conducted both in the form of individualized, person-centred psychotherapy, as well as group psychotherapy sessions, both within the framework of standards of care, as well as with the assistance of Creative Arts and Art Therapy. Group therapy provides an opportunity for individuals with psychosis to connect with others who have similar experiences. It offers a supportive and non-judgmental space for sharing experiences, learning from others, and developing social skills. This type of therapy can be particularly helpful in reducing isolation and improving interpersonal relationships, especially when fully connected to the family- and community-based approach, inclusive, when applicable, of Family therapy, thereby involving the participation of family members in the treatment process. Of course, these approaches can also be interpreted, in this very specific context, as a form of system therapy, thus involving strategies aimed at a support network to provide emotional support, understanding, and assistance in managing stress, while promoting self-care through a healthy lifestyle, regular exercise, a balanced diet, sufficient sleep, and avoiding substances like drugs and alcohol can contribute to overall well-being and stress reduction. Furthermore, pharmacological-assisted therapy is also utilized to help alleviate symptoms and manage stress-related psychosis. Integrative techniques include Stress management skill development, relaxation exercises, mindfulness, and proper breathing.

Conclusion

Psychiatry and Clinical psychology represent the best standards of care within a science-based and science-informed medical framework. The Centro Salute Mentale (Mental Health Centre, CSM) of Verona is in this sense an exemplary centre for scientific research, academic training, and clinical care for the population at large, thereby including patients and their families and significant members of their every day life, following the parameters of WHO Centres. This includes the aforementioned standards of care in medicine but expands upon

integrative methodologies in Mental Health and Service Evaluation. Being part of the Department of Medicine and Public Health, Section of Psychiatry and Clinical Psychology at the University of Verona, Italy, the Centre has a unique perspective in the continuous amelioration of the studies and the services provided to both the scientific community and all the patients served, to foster an ever-increasing quality of care for the entire spectrum of mental health disorders.

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