

Title 1:

Evaluate the transferability of Open Dialogue approach in the context of Italian mental health services

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Abstract

Open dialogue is a compassionate and resource oriented approach to cope with mental health issues, involving patients and significant persons of their social networks.

Outcomes evaluation had proven the effectiveness of this approach in Wester Lapland- Finland (Seikkula et al, 2011), where it was developed, but other studies need to investigate the transferability of this approach in other contexts.

In 2015, the CCM of the Italian Ministry of Health financed a national project, still running, to evaluate the transferability of OD in the context of 8 Italian mental health departments (MHDs), located in different regions and cities (Turin, Savona, Trieste, Rome, Modena, Catania). The National Research Council is involved in the evaluation research.

This contribution aims to present the different steps of the Italian OD research program.

At the very beginning, a preliminary evaluation of the transferability from the point of view of the director of the MHDs involved in the program was conducted. The results were then shared and discussed in an international workshop in July 2015, involving representatives of other international OD programs.

From June 2015 to October 2016, the program was dedicated to the OD training (and supervision), delivered to eighty mental professionals. In this phase, the research was devoted to evaluate: a) training; b) transfer from training to workplace with a mixed methods approach, c) adherence of the clinical practice to the OD approach. Results of the research were shared with- and discussed in all the departments involved.

In February 2017, a pilot study was designed to continue with the evaluation of the transferability of OD in the Italian context and to test feasibility of outcomes evaluation. The research protocol of the pilot study was submitted to approval of the local ethical committees. All the new cases (age ranges 16/18-64) will be enrolled in a defined area of each department during the first month of the study. Research will investigate processes and outcomes for 12 months.

Symptoms functioning and social network dimension will be assessed at the beginning of the OD therapy, at month 6 and 12, using Italian versions of SCL-90-R, CORE-OM, GAF and LNS-6.

After every OD-session, information about contexts, meetings, participants, use of services and therapies will be collected by professionals using a diary, while clients' satisfaction will be investigated using SRS and ORS,

Fidelity to key OD-elements (Olson, Seikkula, Ziedonis, 2014) will be assessed by two independent raters periodically- analyzing videotapes of OD sessions.

Even if the official deadline of the project established by the Ministry of health is October 2017, the partnership is very committed to continue the implementation and evaluation process of OD and the initial OD-project is by now considered as the Italian OD-program.

Title 2:

Assessing adherence after one year of OD training- first Italian findings

Authors:

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Abstract (max 3000 characters):

As Open Dialogue is implemented and evaluated there is a need to assess fidelity. We present the results of the first assessment concerning the adherence to the open dialogue approach in eight Italian mental health departments. These departments are involved in an ongoing project financed by the CCM of the Italian Ministry of Health in 2015.

The project includes a first phase of OD-training delivered to eighty mental health professionals from June 2015 to October 2016 in each of the involved mental health departments. The fidelity assessment was done after 8 months of OD training during the summer 2016. With consent, the OD-fidelity scales developed by Olson, Seikkula and Ziedonis (2015) were translated into Italian. Each department videotaped and sent to the research-unit (ISTC-CNR) videotapes of their OD network meetings and some information about the participants, collected by the means of a check list. The fidelity scale was used by two independent raters (JC & RP) to assess twelve videos. Interrater-reliability between the two raters was acceptable: $r=.683$. Some systematic differences between raters were found in two main dimensions- relational attention in the dialogue and being transparent.

Overall, the assessment of fidelity found most items were adhered to; however, there were differences in levels and items of non-adherence between the teams. Especially the following dimensions need to be potentiated:

- Open Questions (“Unsatisfactory” = 27.8%)
- Polyphony (“Unsatisfactory” = 31.1%)
- Relational attention in the dialogue (“Unsatisfactory” = 38.9%).

The results of the fidelity assessment were presented and discussed in a coordination meeting and in all the departments to inform about the next steps of the Italian OD-program. Anonymity of the outcomes of the different teams was guaranteed.

Taking into consideration these results, there is a need to assess fidelity more frequently and provide helpful feedback to the clinicians. Also, a 12 months’ pilot study was designed to assess transferability, including periodically fidelity assessment. Starting from May 2017 onwards, one video will be sent from each department every three months and assessed by the research unit. The results will inform research outcomes and it will be shared with clinician and supervisors to improve clinical practice.

References

Olson, M., Seikkula, J., & Ziedonis, D. (2014) THE KEY ELEMENTS OF DIALOGIC PRACTICE IN OPEN DIALOGUE: FIDELITY CRITERIA-
<http://umassmed.edu/psychiatry/globalinitiatives/opendialogue/>

Dialogic Practice Adherence Scales of Olson, M., Seikkula, J. e Ziedonis, D. (2015). Italian adaptation by Pocobello, R. and Negri, I. (2016)

Title 3:

Open dialogue training evaluation- a mixed methods approach

Authors:

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Abstract:

The open dialogue training in Italy took place in Rome and Turin from June 2015 until October 2016 and involved eighty mental health professionals. It was delivered by a pool of expert trainers, coordinated by Prof. Jaakko Seikkula and financed in the context of a project financed by the CCM of the Italian Ministry of Health.

We integrated the models of summative evaluation (Kirkpatrick's approach) and transfer related factors (Holton's approach) to investigate whether, how and why the OD training program worked, using a mixed method approach. Participatory observation was used to describe the training process, methods and contents, similarities and differences between the two classes. A questionnaire was developed and administered at the end of the training to all the trainees, consisting of four sections: 1. information about the trainee; 2. representations about OD through free associations; 3. an adaptation of the Training Transfer Audit Checklist¹; 4. comments and an image related to the training and facilitating and hindering factors for transferability. Moreover, trainees' essays were collected at the end of the training.

The data of the participatory observation evidenced trainees' interests, involvement and satisfaction about the trainings. Significant (and moving) witnesses of personal- and team-changes were given, such as the re-discovery of a professional purpose. Trainees outlined the use of the Reflective-Team-setting to improve their clinical practice and their relation between colleagues. Overall, a strong sense of belonging to the OD-program emerged, paired with worries about the fate of the program.

With respect to the trainees' evaluation, participants considered the training content highly valid, the program well designed, the majority without any negative outcomes or sanctions. Significant differences between the mental health departments emerged with respect to performance, commitment to the transfer, personal positive outcomes, support of colleagues and/or the directors, perceived self-efficacy.

Concerning the representations of OD shared by the trainees, three distinct profiles emerge where OD tends to be conceived by the group of psychiatrists in terms of *open questions*, *reflective team* and *polyphony*, by the group of psychologists as *reflectiveness* and *equality*, while nurses and social workers related OD to *listening*, *flexibility*, *tolerance* and *dialogically*. The unify core of the OD representation is constituted by *sharing*, *transparency*, *trust* and *respect*.

References

Holton E.F. (2005) "Holton's Evaluation Model: New Evidence and Construct Elaborations". in *Advances in Developing Human Resources* 7(1):37-54 · February 2005 with 953 Reads

¹ Training Transfer Audit Checklist Original version of Holton Consulting Inc. (2008); Italian adaptation by F. Pisanu and F. Fraccaroli (2008); final adaptation for the evaluation of the transferability of the open dialogue to the Italian mental health departments by R. Pocobello (2016)

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