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Angaben über Beziehungen zur Industrie Ich erkläre hiermit, dass ich keine geschäftliche, persönliche und materielle Beziehungen zu Industrieunternehmen unterhalten habe oder gegenwärtig unterhalte, welche bezüglich zu dem von mir hier vorgetragenen Thema relevant sind.

Disclosure Information

I hereby declare that I have had no business or personal interests in industrial enterprises which are related to the topic of my speech.













































Enhancing Patients' Empowerment through the Administration of a Transcultural Clinical Protocol

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- 1. our work
- Hypothesis
- 3. The transcultural protocol
- Data section
- Analysis 5.
- Results 6

Conclusive remarks

The patient's initial clinical consultation is fundamental importance reaching an accurate diagnostic profile and in fostering a positive therapeutic alliance.













































2. <u>Hypothesis</u>

- 3. The transcultural protocol
- 4. Data section
- 5. Analysis
- 6. Results
- 7. Conclusive

This study aims at demonstrating how the administration of a newly devised transcultural protocol inspired by the DSM IV TR Cultural Formulation, promotes a therapeutic alliance by means of:

- enhancement of the patient's level of empowerment, thus strengthening the patient-treater collaboration;
- reduction of the patient's level of anxiety, perceived or real, prior to the clinical consultation;
- culture-free response patterns.

























FMPP Annual Congress of 20th IFP World Congress of Psychotherapy June 16th - 19th 2010 KKL Lucerne. Switzerland





















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The Transcultural Clinical Protocol has been devised and designed in order to administered to a heterogeneous population of patients from a transcultural viewpoint with a of providing homogeneous results.



































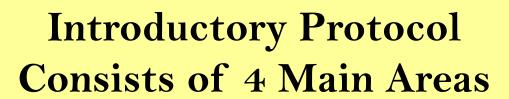








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- Information about 'Who We Are'
 - Personal Information Form

- Clinical Evaluation Form

- Rating Questionnaire

Clinical modules were compiled by clinicians, while questionnaires were compiled by patients

































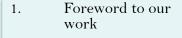












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'Who We Are'

- Information about the studio's location
- Presentation of Studio Venosta and its philosophy
- References to specialization in adjustment disorders and transcultural approaches
- Biographical profile about the treater who will see the patient



























































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Personal Information Form

- Asks the patient to reflect on his/her discomfort
- Asks the patient to disclose information such as:
 - age
 - national culture
 - level of education
 - reason for visit
 - symptoms/manifestations of their current state











































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Clinical Evaluation Form

- Compiled together with the treater to review personal information
- Anamnesis
- Co-Morbidity and/or medical condition(s)
- DSM-IV Multi Axial Evaluation













































Hypothesis 2.

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Rating Questionnaire

The patient is asked to rate on a response scale 1-5 or 1-7, accompanied by explanatory adjectives:

- the material given prior to his/her arrival
- the overall satisfaction of how they perceived the information received, NOT the interview with the clinician

































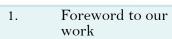












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Rating Questionnaire

Information about the studio's hours/appointments/cancellation policy etc. how it made me feel...

sure	1	2	3	4	5
bored	1	2	3	4	5
gratified	1	2	3	4	5
overwhelmed	1	2	3	4	5

Considering all the information together are you satisfied that you received it?

1 2 3 4 5 6 7

Do you think that the filling out of the Personal Information Form was an advantage to your relationship with the doctor at the first consultation?

Yes

No

































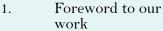












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The sample is composed of 125 patients: 95 women (76%) and 30 men (24%).

Average patients'age is almost 39 years old, and the most represented age group is between 30 and 49 years (60.8%).

The Italian population is 73.6% (N 92) of the sample. The USA population is the most representative (N 14) of the non Italian portion of the sample.

The education level is very high: 52% (N 65) have a university degree, while the 70.4% (N 88) is currently employed.































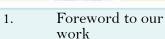














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- Factor analysis is used to describe the information contained in the responses to the questionnaires, by using a lower number of factors;
- reliability analysis in order to validate factors extrapolated by means of the factor analysis;
- Correlation analysis in order to evaluate possible relations between the factors;
- Anova (partial and bivariate) in order to verify if the means of score factors is affected by socio-cultural and/or clinical dimensions.





































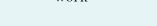












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Factor analysis has highlighted the presence of two common factors regarding the dimension "decrease anxiety" and two common factors regarding the dimension "enhance empowerment". We named these factors: Anxiety Helpful, Anxiety Re-assurrance, Empowerment Sure, Empowerment Trust.

The Reliability Analysis has shown the high reliability of all factors:

- •Anxiety Helpful (.873)
- •Anxiety Re-assurrance (.770)
- •Empowerment Sure (.785)
- •Empowerment Trust (.852)



























































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Anxiety Helpful:

- •Info about the studio's location was helpful
- about the studio's •Info confidentiality policy was helpful
- •Info about the studio's services available was helpful

Empowerment Sure:

- •Info about the studio's location made me feel sure
- •Info about the studio's confidentiality policy made me feel sure
- •Info about the studio's services available made me feel sure

Anxiety Reassurrance:

- •Personal Info Form has generated re-assurance in me
- •Personal Info Form made me feel at ease

Empowerment Trust:

- Personal Info Form has of generated a sense empowerment in me
- •Personal Info Form has generated trust in the consultant















































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Correlations

All factors have shown a high correlation between each other. In other words, a change to one, changes the other.

The partial correlation has shown that socio-cultural and clinical variables do not seem to affect the correlation between factors Empowerment Anxiety













































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Are the scores in the scales "All info together satisfaction", "Advantage personal info form" and "Satisfaction personal info form", affected by socio-cultural and/or clinical dimensions?

Is the average of the scores of factors Anxiety and Empowerment affected by socio-cultural and clinical dimensions?

The findings of the Anova indicate that socio-cultural and clinical variables do not affect neither the scores in scales "All info together satisfaction", "Advantage personal info form" and "Satisfaction personal info form", nor the average of the score of factors Anxiety and Empowerment.

Thus, the socio-cultural and clinical differences between patients do not seem to affect the answers provided in the questionnaires.





































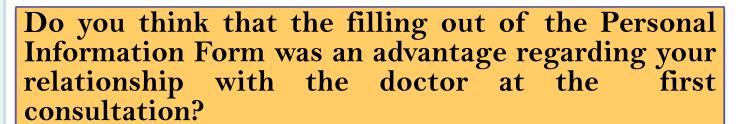








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83.2% (N 104) of the samples have provided a positive answer to this question, while the satisfaction score average is 5.60 on a response scale of 1-7.

Considering all the information together, are you satisfied that you received it?

The satisfaction score average regarding all the information received is 6.02 on a response scale of 1-7.





































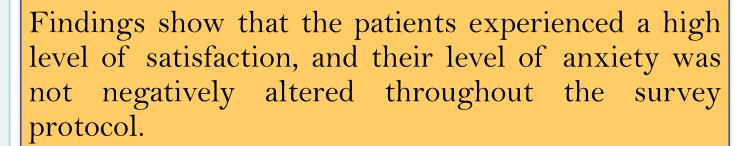






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Socio-demographic and clinical variables did not appear to affect overall satisfaction or empowerment levels, and patients' responses did not vary with psychopathology.

The survey is sensitive to some aspects of pathology but further research is required.













































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Conclusive remarks

Transcultural Protocol proposed Venosta International Studio of Mental Health does not appear to be culture-bound and is independently applicable to a wide range of pathological pictures, and can thus serve as a basis for establishing an effective therapeutic relationship

















































































