

## **The community coalition for young people at risk of severe mental illness. A reflective account about mistakes, promises and possibilities**

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The Centre for Disease Control funded a project aiming at introducing into mental health services skills and procedures for the identification of people at high risk of psychosis and for including them in tailored care, support, or monitoring. This intervention involving mental health staff and creating multi-professional teams was accompanied by a wide work of involvement of community subjects and agencies having to do with young people, and aimed to have them more informed, more able in accompanying people with mental disorders, and more effective in referring them to specific services. The project was active in the period 2014-2016 in six Italian areas.

In the areas participating to the project, an accurate survey of the relevant agencies present in the area was conducted and they were then invited to participate to a conjoint action where their inclusion-oriented activities could integrate actions promoting early referral to appropriate services and inclusive pathways for young people experiencing mental difficulties. The agencies interested were then organized into local community coalitions, which involved different stakeholders (associations, schools, religious and spiritual organizations, ethnic group representatives, etc.), and *boards* were set up for the coordination of the community coalitions. Training sessions were offered to the boards about the main project issues, severe mental disorders, ethnic specific issues, the non-pharmacological support for people at risk of severe mental disorders. However, the aim was having boards and community coalitions as independent as possible from the mental health services in their activities, although in connection with them. Eventually, support from the mental health services was diversely necessary, with boards very autonomous and others having more difficulties in finding their way. All the boards implemented activities and created a network of agencies. After the closure of the project, some had found their way and continued their activities, others stopped.

A survey addressing boards participants' experiences highlighted either strengths and weaknesses of the project. This project should also be seen in light of some authors' more critical approach of to the ultra high risk concept. Both issues will be discussed.