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Nota di contenuto	PART I: THE MULTIMODAL BRIEF SYSTEMIC TRAINING PROGRAMME (MBSTP)'s CLINICAL CONTEXT AND EPISTEMOLOGICAL BASIS -- 1.1. The

MBSTP's Clinical Context; Dealing with mental health disorders in primary care settings -- 1.1.1. The Mental health challenges in Primary Health -- 1.1.2. The mental health training for primary health care clinical staff; limitations of the available approaches -- 1.1.3. The Multimodal Brief Systemic Training Programme (MBSTP)'s benefits -- 1.1.4. Books's objectives -- 1.2. The MBSTP's Epistemological Basis -- 1.2.1. The Integrated Brief Systemic Therapy (IBST); origins within the Problem and Solution-Focused Brief Therapy, along with the Narrative Therapy -- 1.2.2. Other epistemological, educational & clinical influences -- 1.2.2.1. The experience of the Family medicine residency program at the University of California. Cory Johnson & George Saba -- 1. Rationale for primary care training -- 2. The history, development and key personnel of the UCSF SFGH Family and Community Medicine Residency -- 3. The Philosophy and Theory Used to Develop the Training Program -- 4. The Behavioral Science Training Program -- 5. Implementation of the Training Program -- 6. Research effectiveness and recommendations -- 7. Conclusions -- 1.2.2.2. The experience of the Istituto di Psicoterapia Sistemica e Relazionale (ISCRA). Mauro Mariotti -- 1. Rationale for primary care training -- 2. The history of the development and the personnel involved -- 3. The philosophy and theory of a systemic based training -- 4. Applying the philosophy to GPs -- 5. Implementation of the training tools -- 6. Application by GPs, research/evidence and recommendations -- PART II: TRAINING PRIMARY CARE STAFF WITH MBSTP -- 2.1. MBSTP'S training course structure -- 2.2. Clinical psychology considerations -- 2.3. Psychiatry considerations -- 2.4. Social Worker considerations -- 2.5. Nurse considerations -- 2.6. Other Training important considerations -- 2.6.1. Primary care team considerations -- 2.6.2. Limitations and strenghts -- 2.7. MBSTP's Research evidence -- 2.7.1. Research evidence on ambulatory mental-health services -- 2.7.2. Research evidence on primary care settings -- PART III: DISCUSSION AND CONCLUSIONS -- 3.1. Discussion and Conclusions -- 3.2. Future investigations -- Acknowledgements -- References.

Sommario/riassunto

This textbook presents an innovative educational and training protocol for treating mental health patients in primary care: the Multimodal Brief Systemic Training (MBSTP). Blending theory with practice, this manual offers a rigorous, versatile, and integrative approach, grounded in research, that can be easily adopted by primary care professionals—including general practitioners, nurses, social workers, and psychologists. It is not only invaluable for psychotherapy students but also serves as a vital resource for physicians and other non-mental health professionals seeking to support individuals facing cancer, chronic pain, palliative care, and other conditions that intertwine emotional, mental, and behavioural challenges within their close relational systems. The MBSTP is a compelling alternative to existing evidence-based training programs, which often centre on Cognitive Behavioural Therapy. Designed as a continuing education course led by a team of mental health specialists, this training provides a structured pathway for professional development. This book will help to reignite practitioners' interest in systemic thinking, encouraging them to revisit its significance in their work, or, for those new to the concept, to embrace it as a crucial aspect of their professional growth and contribute meaningfully to their evolution in the field. Carles Barcons is a PhD Clinical Psychologist at Hospital Sagrat Cor Martorell – Germanes Hospitalàries, Spain. He collaborates with the research group Epi4Health, UVic-UCC. He has academic training in Marriage and Family therapy, Brief Strategic Psychotherapy, Group Therapy and Criminology. George W. Saba is Professor Emeritus of the Department of Family and

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