



From Cajal's Desk

## Cibersam: A change in the paradigm of mental health research in Spain

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It was not so long ago that fragmentation, unproductiveness, and underfunding were hallmarks of psychiatry and mental health research in Spain.<sup>1</sup> This resulted in a low degree of cooperation and scientific impact on the international scene. Development of integrated research networks in mental health was lagging behind other medical disciplines in Spain. In 2007, the Spanish government and its funding body Instituto de Salud Carlos III decided to fund a public research consortium to foster excellence in mental health research, which was called the CIBERSAM (Mental Health Biomedical Network Research Center). The CIBERSAM, which was actually inaugurated in 2008, initially included Spain's 24 most competitive research groups, whose main focus was psychiatry and mental health. Most of them had never collaborated before, and although they were productive at an individual level, their level of cooperation was minimal.<sup>2</sup>

Fifteen years later, we can objectively say that the CIBERSAM has had a before-and-after effect on mental health research in Spain. The CIBERSAM is probably the single European institution with the highest number of scientific publications in recent years (more than 7000 since 2008), more than 290,000 citations and an h-index of 187 (as extracted from Web of Science on December 11, 2023), and more than 1000 papers published per year since 2020. Some of the most productive collaborative research projects in Europe were born within the CIBERSAM.<sup>3,4</sup> The experience acquired from the CIBERSAM has led to the launch of similar networks in other European countries, e.g., the future German Center for Mental Health.<sup>5</sup> Beyond the numbers, the contributions of CIBERSAM have significantly advanced the knowledge in many mental health conditions such as schizophrenia, bipolar disorder, depression, autism, obsessive compulsive disorder, and many more.

However, it has not always been a bed of roses since its creation. For instance, the economic crisis in 2009 caused a significant drop in structural funding that has never been restored to initial levels. In addition, based on the prevalence and impact of mental disorders, mental health research continues to be underfunded at both the national and European levels, especially when com-

pared to the associated disability that mental disorders may cause (Fig. 1).

In the present paper, its two coauthors – both past Scientific Directors (C.A. from 2007 to 2014 and E.V. from 2015 to 2023) of the CIBERSAM – take a look back in the rearview mirror to identify the key elements for its success, as they may be of interest for future European national or international networks. We believe that one important success factor was that we fought the nepotism and running chairs system that reigned in our country, where last names were more important than scientific excellence and objective productivity indicators. Groups had to compete openly to be part of the CIBERSAM, and those not performing for three consecutive years had to leave the network – something that happened frequently after the third year of operation – giving way for new groups to join. It was clear to us from the beginning that the CIBERSAM would become inefficient if it was another closed and unidirectional center (sort of a “club”), and not a flexible and dynamic one. Research groups were able to join according to their merits, efforts, capability, and results, in fair competition.<sup>2</sup> Funds were also distributed based on the productivity of each group, with special emphasis on output-based objectives (e.g., papers or guidelines written by more than one CIBERSAM group). As part of the yearly assessment of each group, a clear prioritization indicator was the translatability of findings into real changes that improved clinical services and patients' quality of life. This included not only patents and intellectual property, but also measurable changes in clinical procedures.

An obvious advantage of funding collaborative research is the ability to gather larger samples<sup>6</sup> and avoid duplications and redundancies. But we also believed that the inclusion of groups with many different backgrounds (hospital, university, research centers) and interests (pharmacology, social sciences, epidemiology, genetics, imaging, animal models, phenomenology, etc.) would not only enrich the consortium, but also attract research groups that might otherwise have prioritized other areas of medicine to our field. The involvement of women researchers, particularly at the highest levels, was also a clear objective from the inception. The number of female group principal investigators rose from less than 10% to the current 36%.

The international search to select some of the best European psychiatrists and scientists in our field for our external scientific

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**Fig. 1.** Inaugural PI meeting in Benasque in 2009. Some PIs still meet annually there during the ski session.

committee also proved to be the right decision. The objective of internationalizing Spanish mental health research was facilitated by the possibility of using the CIBERSAM as an umbrella for various groups to join in submitting EU-funded applications. These would otherwise have been perceived as too many groups from one single country. In addition, we lobbied at the European level to prioritize and invest in Networks of Excellence. One example was our leadership role in the Roadmap for Mental Health Research in Europe (ROAMER).<sup>7</sup> The ROAMER included researchers, service users, caregivers, professionals, and policy and funding stakeholders interested in identifying mental health priorities and unmet needs that could be addressed by collaborative research of excellence. Another example of CIBERSAM leadership in Europe was the Madrid Declaration, promoted by representatives from seven nationally funded mental health research networks, along with leaders of EU-funded mental health projects.<sup>8</sup>

Finally, one of the most important keys to success was to prepare for our replacement from the very outset. Training new generations of researchers was another practice unheard of in our traditional academic psychiatry. Many principal investigators have now been replaced by younger researchers. From the very beginning, we invested in the training of predoctoral researchers from different backgrounds. Our network provided a unique infrastructure linking health care institutions, universities, and research centers, which enabled high-quality, integrative, structured educational activities. As one example of many, the CIBERSAM created Spain's first interuniversity postgraduate master's degree program in mental health research.<sup>9</sup>

Mental health research in Spain is at the highest level ever, but there are still many potential improvements in store for the near future. We are certain that future steps will build on the decision of what was, at that time, a large group of young and still brave

psychiatrists and psychiatry researchers: that it was about time to change the way things were traditionally done in our country. It was not easy, but it was definitely worthwhile.

### Conflicts of interest

Celso Arango has been a consultant to or has received honoraria or grants from Acadia, Angelini, Biogen, Boehringer, Gedeon Richter, Janssen Cilag, Lundbeck, Medscape, Menarini, Minerva, Otsuka, Pfizer, Roche, Sage, Servier, Shire, Schering Plough, Sumitomo Dainippon Pharma, Sunovion and Takeda.

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