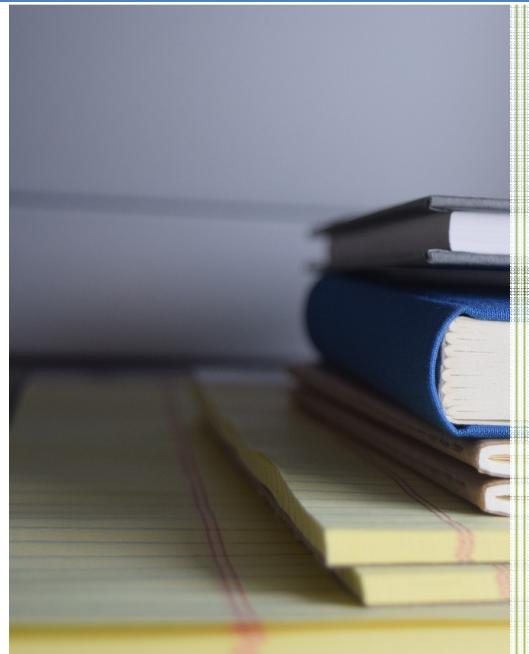




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**Diciembre
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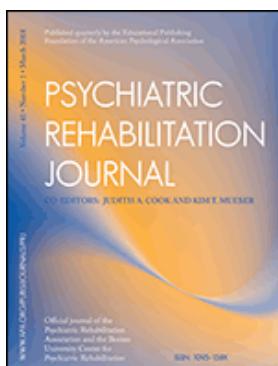
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REHABILITACIÓN PSICOSOCIAL

Psychiatric Rehabilitation Journal



2018, Volume 41, Issue 3 (Sep)

Subtle ways of stigmatization among professionals: The subjective experience of consumers and their family members.

Amsalem, Doron; Hasson-Ohayon, Ilanit; Gothelf, Doron; Roe, David.

Abstract

Objective: Subtle expressions of stigma or microaggressions consist of insensitive and demeaning remarks or statements which negate an individual's perception of their reality. They are differentiated from more traditional and overt forms of discrimination in that they are often voiced by well-intentioned individuals who are unaware of the negative underpinnings and potentially harmful effects of their comments. This study aimed to explore the subjective experience of stigma and macroaggression among consumers and their family members during their encounters with mental health care providers. **Method:** Sixteen individuals who were recently diagnosed with schizophrenia spectrum disorders and 15 of their family members were interviewed. The interviews were recorded, transcribed verbatim, and analyzed using grounded theory. **Results:** Three major forms of subtle stigma expressions or microaggressions were identified: that lived experience is not relevant, people diagnosed with a psychosis have no hope for recovery, and sharing and discussing professional knowledge is not necessary. **Conclusions and Implications for Practice:** Encounters with mental health care providers include subtle conveyance of stigmatizing messages that are well recognized as a barrier to recovery. Psychoeducational interventions for staff that emphasize the importance of lived experience and sharing professional knowledge are recommended, as well as further studying the subtle ways of stigmatization among staff. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

A manual-based phenomenological art therapy for individuals diagnosed with moderate to severe depression (PATd): A randomized controlled study.

Blomdahl, Christina; Guregård, Suzanne; Rusner, Marie; Wijk, Helle.

Abstract

Objective: This study investigated the effects of manual-based Phenomenological Art Therapy for individuals living with depression in addition to treatment as usual (PATd/TAU) compared with only treatment as usual (TAU) for individuals diagnosed with moderate to severe depression. **Method:** 79 adults (men = 29.1%) were included in this randomized-controlled-trial (RCT), multicenter study in Sweden with an

intention-to-treat design. Participants were randomized into either the PATd/TAU-group ($n = 43$) or TAU-group ($n = 36$). Data were collected at baseline and at end of treatment. The main outcomes were depression levels and self-esteem. Secondary outcomes were suicide ideation and sickness absence. Results: The PATd/TAU-group showed a significant decrease of depression levels. The PATd/TAU-group returned to work to a higher degree than the TAU-group. Self-esteem significantly improved in both groups. Suicide ideation was unaffected. Conclusion and Implications for Practice: Manual-based PATd works as expected, being an effective treatment, and contributes to recovery for individuals with moderate to severe depression. This outcome needs to be confirmed and its long-term effects examined in further studies. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

What is social inclusion? A thematic analysis of professional opinion.

Filia, Kate M.; Jackson, Henry J.; Cotton, Susan M.; Gardner, Andrew; Killackey, Eoin J.

Abstract

Objective: Social inclusion is increasingly recognized as an important contributor to positive mental health outcomes, particularly for people with mental illness. There is a lack of consensus regarding what it means to be socially included and what the key contributors to social inclusion may be. The aim of this investigation was to determine such key contributors, as identified by those with professional experience. Method: A thematic analysis of literature regarding social inclusion was conducted to obtain the opinions of professionals regarding key contributors of social inclusion. Seventy-one pieces of literature were reviewed: peer-reviewed literature (academic literature regarding social inclusion in general [$n = 25$] and social inclusion and mental illness [$n = 26$]), and gray literature (organizational reports [$n = 20$]). Within- and between-groups analyses were performed to determine group differences and increase understanding of which contributors were deemed important consistently across groups. Results: A comprehensive list of 90 contributors to social inclusion and exclusion was compiled, categorized into 13 domains based on commonalities. Contributors related to employment and education, housing and neighborhood, and social activities and support were highly cited. Differences were observed between-groups regarding specificity of contributors, with organizational reports reporting more detailed contributors. Conclusions and Implications for Practice: A comprehensive and specific understanding of social inclusion was obtained. This improved understanding will allow for better measurement of social inclusion which will assist in evaluating programs and interventions, identifying areas of greatest need, and in planning services, policy and strategies to target specific contributors proven to improve social inclusion and subsequent mental health outcomes. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Empowering individuals with psychiatric disabilities to work: Results of a randomized trial.

Russinova, Zlatka; Gidugu, Vasudha; Bloch, Philippe; Restrepo-Toro, Maria; Rogers, E. Sally.

Abstract

Objective: Supported employment has experienced immense growth as an evidence-based intervention targeting the disproportionately high rates of unemployment among individuals with psychiatric disabilities who actively want to work. However, employment services are often not available to individuals who are ambivalent about work or lack work self-efficacy. The purpose of this study was to pilot-test the efficacy

of a new peer-run photography-based group intervention (Vocational Empowerment Photovoice [VEP]) designed to empower individuals with psychiatric disabilities to consider employment services and pursue work. Method: A total of 51 individuals with serious mental illnesses enrolled at a university-based recovery center, who were not employed or enrolled in any vocational services, were randomly assigned to the VEP program or to a wait-list control group. Mixed-effects regression models were used to examine the impact of the VEP program on both extrinsic (enrollment in employment services and employment rates) and intrinsic (work hope, motivation and self-efficacy, vocational identity, overall empowerment and internalized stigma) work-related outcomes. Results: Participation in the VEP program was associated with a significantly higher rate of engagement in employment services over the course of the intervention and with significantly higher overall empowerment and decrease of internalized stigma sustained through the 3-month follow-up assessment. Stronger engagement in the VEP program was associated with increased work hope, self-efficacy and sense of vocational identity. Conclusions and Implications for Practice: The study highlights the malleable nature of defeatist beliefs which prevent many individuals with mental illnesses from pursuing employment services despite their inherent interest in working. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Social support and housing transitions among homeless adults with serious mental illness and substance use disorders.

Gabrielian, Sonya; Young, Alexander S.; Greenberg, Jared M.; Bromley, **Abstract**

Objective: Research suggests that social supports are associated with housing retention among adults who have experienced homelessness. Yet, we know very little about the social support context in consumers find and retain housing. We examined the ways and identified the junctures in which consumers' skills and deficits in accessing and mobilizing social supports influenced their longitudinal housing status. Method: We performed semi-structured qualitative interviews with VA Greater Los Angeles consumers ($n = 19$) with serious mental illness, substance use disorders, and a history of homelessness; interviews explored associations between longitudinal housing status (categorized as: stable, independent housing; sheltered housing, continually engaged in structured housing programs; and unstable housing) and social supports. We compared data from consumers in these 3 mutually exclusive categories. Results: All participants described social support as important for finding and maintaining housing. However, participants used formal (provider/case managers) and informal (family/friends) supports in different ways. Participants in stable housing relied on formal and informal supports to obtain/maintain housing. Participants in sheltered housing primarily used formal supports, for example, case management staff. Unstably housed participants used formal and informal supports, but some of these relationships were superficial or of negative valence. Interpersonal problems were prevalent across longitudinal housing status categories. Conclusions and Implications for Practice: Social context, including patterns of formal and informal support, was associated with participants' longitudinal housing status. Within interventions to end homelessness, these findings suggest the value of future research to identify, tailor, and implement practices that can help consumers improve their social resources. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Implementing CommonGround in a community mental health center: Lessons in a computerized decision support system.

Bonfils, Kelsey A.; Dreison, Kimberly C.; Luther, Lauren; Fukui, Sadaaki; Dempsey, Abigail E.; Rapp, Charles A.; Salyers, Michelle P.

Abstract

Objective: Although shared decision making (SDM) is a key element of client-centered care, it has not been widely adopted. Accordingly, interventions have been developed to promote SDM. The aim of this study was to explore the implementation process of one SDM intervention, CommonGround, which utilizes peer specialists and a computerized decision support center to promote SDM. **Method:** As part of a larger study, CommonGround was implemented in 4 treatment teams in a community mental health center. The implementation process was examined by conducting semistructured interviews with 12 staff members that were integral to the CommonGround implementation. Responses were analyzed using content analysis. Program fidelity and client program use were also examined. **Results:** Although key informants identified several client and staff benefits to using CommonGround, including improved treatment engagement and availability of peer specialists, most clients did not use CommonGround consistently throughout the implementation. Key informants and fidelity reports indicated a number of program (e.g., technological difficulties, increased staff burden) and contextual barriers (e.g., poor fit with service structure, decision support center location, low staff investment and high turnover) to the successful implementation of CommonGround. Strategies to maximize the implementation by increasing awareness, buy-in, and utilization are also reported. **Conclusions and Implications for Practice:** This implementation of CommonGround was limited in its success partly as a result of program and contextual barriers. Future implementations may benefit from incorporating the strategies identified to maximize implementation in order to obtain the full program benefits. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Sociodemographic characteristics, health conditions, and functional impairment among older adults with serious mental illness reporting moderate-to-severe pain.

Brooks, Jessica M.; Umucu, Emre; Huck, Garrett E.; Fortuna, Karen; Sánchez, Jennifer; Chiu, Chungyi; Bartels, Stephen J.

Abstract

Objective: To compare adults aged ≥50 years with serious mental illness reporting moderate-to-severe pain to older adults with serious mental illness without pain with respect to sociodemographic characteristics, health conditions, and functional impairment. **Method:** Secondary data analyses were conducted using baseline assessments of 183 participants recruited for the Helping Older People Experience Success (HOPES) study from three community mental health centers. The primary outcome was self-reported, nonexperimentally induced, moderate-to-severe pain (referent = no-to-mild pain). Predictor variables consisted of sociodemographic characteristics, health conditions, and functional impairment. We conducted univariable and multivariable logistic regression analyses to examine the associations between these variables. **Results:** Sixty-one participants (33.3%) from our sample reported pain. Pain was associated with all of the sociodemographic and health-related factors in univariable analyses. In the multivariable model, only older age, pain-related activity interference, and physical and emotional health-related social limitations were significantly associated with pain. **Conclusions and Implications for**

Practice: The presence of moderate-to-severe pain in older adults with serious mental illness is associated with pain-attributable impairment of activities and social problems above and beyond the substantial functional limitations routinely experienced by this high-risk, high-need group. Given the high rates of preexisting conditions and persistent social impairment among these older adults, our findings suggest that pain may contribute to worse overall functional outcomes. Future research and clinical interventions focused on improving outcomes should include an evaluation of pain as a contributor to decreased functioning and assess the need for early intervention, nonpharmacological pain management, or other health promotion services in psychiatric rehabilitation. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Trauma and posttraumatic stress disorder in Spanish public mental health system clients with severe psychiatric conditions: Clinical and demographic correlates.

Gottlieb, Jennifer D.; Poyato, Natalia; Valiente, Carmen; Perdigón, Antonio; Vázquez, Carmelo.

Abstract

Objective: Compared with the general population, those with severe psychiatric conditions have a substantially higher likelihood of trauma exposure, increased probability of developing posttraumatic stress disorder (PTSD), and more severe consequences if trauma is left untreated. Nevertheless, identification of trauma/PTSD continues to be a neglected mental health system priority. In Spain, few investigations have examined the prevalence of trauma, particularly in persons with severe psychiatric conditions. **Method:** This study reports findings from a trauma/PTSD screening within a large Madrid public mental health agency serving clients with severe psychiatric conditions. **Results:** Of the 323 participants, 272 (84.2%) reported at least 1 traumatic event; and 124 (38.4%) met criteria for "probable" PTSD, although none had a medical record diagnosis of PTSD. Those with probable PTSD were predominantly male, were in their mid-40s, had received mental health services for 16 years on average, and endorsed 5.64 types of lifetime traumatic events. The most frequent and distressing traumatic event was the sudden, unexpected death of a loved one. The number of traumatic event types reported was positively correlated with PTSD symptom severity. **Conclusions and Implications for Practice:** Despite lower Spanish general population prevalence of trauma/probable PTSD (compared with the United States and other Western countries), rates within those with co-occurring severe psychiatric conditions are high. These findings reinforce the importance of conducting system-wide screening in public mental health clinics serving persons with severe psychiatric conditions in Spain (and beyond), in order to address this ongoing but neglected issue, and begin to offer much-needed recovery services. (PsycINFO Database Record (c) 2018 APA, all rights reserved)

Psicothema



APPLYING THE UNIFIED PROTOCOL TO A SINGLE CASE OF MAJOR DEPRESSION WITH SCHIZOID AND DEPRESSIVE PERSONALITY TRAITS.

Jorge Osma, Arantxa Sánchez-Gómez y Óscar Peris-Baquero.

Psicothema, 2018, Vol. 30, pág. 364-369.

Resumen

Aplicando el protocolo unificado en un caso de depresión mayor y rasgos de personalidad depresivos y esquizoides. Antecedentes: presentamos la utilización del Protocolo Unificado (PU) en un caso de un hombre diagnosticado con Trastorno Depresivo Mayor y rasgos de personalidad Esquizoides y Depresivos. El PU se centra en identificar las conductas de regulación emocional desadaptativas y entrenar en nuevas estrategias de regulación como la re-evaluación cognitiva o la exposición emocional. Método: estudio de investigación de caso único. La intervención se desarrolló en 20 sesiones de 1 hora de duración durante 6 meses. Se realizaron seguimientos a los 3, 6 y 12 meses. Resultados: a los 12 meses de seguimiento se produjo un cambio clínico significativo en la sintomatología depresiva ($RCI_{BDI-II} = -5.51$), afecto negativo ($RCI_{NEGATIVE PANAS} = -3.61$), calidad de vida ($RCIICV-Sp = 4.61$) y rasgos de personalidad esquizoides ($RCIMCMI-III-Esquizoide = -4.36$) y Depresivos ($RCIMCMI-III-Depresivos = -5.24$). Los rasgos de personalidad no interfirieron en la implementación, curso y adherencia al tratamiento. Los resultados se discuten con respecto a estudios similares basados en la utilización del PU para el entrenamiento en regulación emocional en casos con comorbilidad clínica. Conclusiones: el entrenamiento en estrategias de regulación emocional a través del PU puede ser una propuesta efectiva para el tratamiento de trastornos emocionales con rasgos de personalidad patológicos comórbidos.

REVISTA *de la Asociación Española de Neuropsiquiatría*

Vol 38, No 133 (2018)

EDITORIAL

[La intervención temprana en psicosis](#)

Vicente Ibáñez Rojo

Evaluación del modelo comunitario de atención a los trastornos mentales en España

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Joanna Moncrieff

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Luis Carlos Saiz Fernández



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- La Rueca: hilando lo deshilachado.
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Descargar Boletín nº 31

Trabajo Social Hoy



La (situación de) dependencia en la diversidad funcional: De lo biológico y patológico en la persona

Autoría: Muyor Rodríguez, Jesús

Resumen

En este artículo proponemos una reflexión de los significados a partir de los cuales se clasifica la diversidad funcional como objeto y problema de intervención desde los servicios sociales. Nos centramos en la categoría de dependencia en tanto que la Ley 39/2006 de promoción de la Autonomía personal y Atención a las personas en situación de dependencia (LAAD) compone la mayor parte de la acción pública de servicios sociales para las personas con diversidad funcional. Como conclusiones podemos extraer que la LAAD relaciona discapacidad y dependencia con un estado disfuncional de la persona que se asocia con ciertas carencias o anomalías en el estado de salud. Así la LAAD tiende a focalizarse en los factores bio-físicos sin tener demasiado en cuenta los contextos y las restricciones sociales que generan las situaciones de dependencia.

Descarga del artículo:

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Revista de Educación Social



NÚMERO 27

El proyecto enroscados: una experiencia socioeducativa de sensibilización sobre la enfermedad mental desde la práctica del balonmano

Diego Royo Laviña, educador social

RESUMEN

El Proyecto Enroscados es una experiencia socioeducativa desarrollada en los centros educativos aragoneses. La desarrolla el Club Deportivo Hispanos del Carmen perteneciente al Centro Neuropsiquiátrico Nuestra Señora del Carmen de Zaragoza de las Hermanas Hospitalarias del Sagrado Corazón de Jesús. La sensibilización sobre la enfermedad mental y la iniciación a la práctica deportiva del Balonmano son dos de sus objetivos fundamentales. Esta iniciativa cuenta con el respaldo institucional de la Real Federación Española de Balonmano, Federación Aragonesa de Balonmano, Gobierno de Aragón y Zaragoza Deporte. La intervención socioeducativa en los centros educativos aragoneses la lidera un educador social y coordinador técnico que es responsable de la escuela deportiva con la ayuda inestimable de deportistas con enfermedad mental del club, profesionales del balonmano, integradores sociales, técnicos deportivos de la Federación Aragonesa de Balonmano y voluntariado. Son múltiples las herramientas socioeducativas utilizando como metodología fundamental la participativa combinándolas con herramientas educativas como la dramatización (role playing) y la lluvia de ideas (brainstorming). Más de 1000 escolares aragoneses han sido sensibilizados en la comunidad autónoma aragonesa tanto del medio rural como de las principales localidades de Zaragoza, Huesca y Teruel. El análisis de los resultados pone de manifiesto la eficacia de las acciones desarrolladas.



Camino hacia la ciudadanía: la cultura como estrategia/agente de participación social de personas en riesgo de exclusión social y como medio hacia una percepción holística de las personas con enfermedad mental.

Víctor Lamor Rodríguez

Resumen

Introducción: con este proyecto, se pretende establecer una intervención basada en el uso de la cultura presente en el municipio de Santa Coloma de Gramenet, como medio para promover la participación social de las personas con trastorno mental grave que acuden al Servicio de Rehabilitación Comunitaria Martí i Juliá perteneciente El Institut de Neuropsiquiatria i Addiccions del Parc de Salut Mar. Métodos: este proyecto, consta de siete fases, que van desde establecer contacto con el Ayuntamiento, un Análisis Ambiental de los Elementos Culturales del Municipio, la creación de un grupo de personas del Servicio de Rehabilitación comprometidas e interesadas en participar, hasta la Implementación del Programa y la Evaluación y Análisis de datos. Conclusión: con la implantación de este programa se quiere lograr, por una parte, reducir el estigma presente en la sociedad acerca de las personas que sufren trastornos mentales graves, y por otro lado, se pretende alcanzar una participación social de este colectivo de personas mediante el uso de los elementos culturales como agentes de inclusión.

Valoración de las actividades de la vida diaria en personas con deterioro cognitivo, estudio psicométrico de la escala VAVDI.

Blanca Martínez Martínez, Pilar Duran Carrill, Raquel Escudero Bonet, Juan Ignacio Arrarás Urdániz

Resumen

Objetivo: la valoración del nivel desempeño en actividades de la vida diaria es de gran utilidad para desarrollar tratamientos adaptados a las necesidades de cada paciente. Los objetivos de este artículo son presentar la escala de "Valoración de las actividades de la vida diaria e instrumentales" creada por Mariel Pellegrini, realizar un estudio psicométrico de la fiabilidad y validez de dicha escala, estudiar las relaciones entre el deterioro cognitivo y las variables demográficas con las actividades de la vida diaria básicas e instrumentales. Método: se ha evaluado con ella a 80 pacientes que iniciaron tratamiento en la Unidad de Deterioro Cognitivo. Se ha administrado el Mini-Mental State Examination. Se han realizado análisis de fiabilidad y validez de la escala. Resultados: las dos subescalas o secciones (actividades de la vida diaria básicas y actividades de la vida diaria instrumentales) y el global de la valoración de actividades de la vida diaria e instrumentales cumplieron el criterio Alpha de Cronbach > 0.7 . Las puntuaciones totales de la valoración y de sus dos subescalas (actividades de la vida diaria básicas e instrumentales) diferencian el desempeño funcional entre grupos

organizados por edad y sexo, pero no por nivel de funcionamiento cognitivo. Conclusión: la escala presenta un funcionamiento psicométrico adecuado en los pacientes con deterioro cognitivo leve. Se han encontrado relaciones entre la escala Valoración de las actividades de la vida diaria e instrumentales y las variables demográficas estudiadas. Destacar el factor protector de los roles desempeñados a lo largo de la vida para el mantenimiento de la autonomía. Tras este estudio disponemos de una escala que va a permitir evaluar los diferentes niveles de actividades de la vida diaria en pacientes con deterioro cognitivo.

Recensión: intervenciones de terapia ocupacional para la recuperación en las áreas de integración comunitaria y roles de vida normativos para adultos con enfermedad mental grave: una revisión sistemática.

María Asencio Ponce

Resumen

El terapeuta ocupacional ejerce un papel muy importante en el campo de la salud mental. Las personas que padecen una enfermedad mental presentan un conjunto de afectaciones que no solo se reducen a síntomas clínicos, sino que se ven afectados otros muchos aspectos como la participación social y comunitaria. El objetivo de este artículo es investigar sobre la efectividad que tiene un programa basado en el entrenamiento de habilidades sociales, entre otros, sobre dichas personas que consecuentemente sufren exclusión social. No es menos importante destacar que, a ser posible, las intervenciones deben ser realizadas en el contexto natural de la persona, de cara a asimilar lo aprendido de forma más fluida. Por otro lado, se ha demostrado que tener una red de apoyo social-familiar es un factor primordial para integración social, es por ello que la familia ejerce un papel muy importante durante el tratamiento de la persona con enfermedad mental. En referencia al método utilizado, se tuvieron en cuenta una serie de criterios de inclusión y exclusión para escoger a la población diana. Los resultados identificaron las habilidades sociales mejoradas después de dicha intervención.

American Journal of Occupational Therapy



August 2018, Vol. 72,

Effectiveness of Occupational Therapy Services in Mental Health Practice OPEN ACCESS
Margaret Swarbrick; Susan Noyes

Evidence for Occupational Therapy Intervention With Employment and Education for Adults With Serious Mental Illness: A Systematic Review
Susan Noyes; Helena Sokolow; Marian Arbesman

Evidence for Interventions to Improve and Maintain Occupational Performance and Participation for People With Serious Mental Illness: A Systematic Review
Mariana L. D'Amico; Lynn E. Jaffe; Jennifer A. Gardner

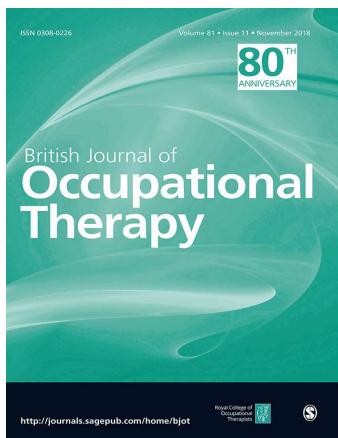
Effectiveness of Interventions for Weight Loss for People With Serious Mental Illness: A Systematic Review and Meta-Analysis
Catana Brown; Lydia C. Geiszler; Kelsie J. Lewis; Marian Arbesman

Early Intervention in Mental Health for Adolescents and Young Adults: A Systematic Review
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Employment Outcomes After Vocational Training for People With Chronic Psychiatric Disorders: A Multicenter Study
Hui-Ling Lee; Eric J. Hwang; Shang-Liang Wu; Wei-Mo Tu; Ming Hung Wang; Fong Chan

Minimal Detectable Change on the Lawton Instrumental Activities of Daily Living Scale in Community-Dwelling Patients With Schizophrenia
Sheau-Ling Huang; Wen-Shian Lu; Candy Chieh Lee; Hsuan-Wen Wang; Shu-Chun Lee; Ching-Lin Hsieh

British Journal of Occupational Therapy



Meaningful occupation with iPads: Experiences of residents and staff in an older person's mental health setting

Jodie Swan, Danielle Hitch, Ruth Pattison, Angela Mazur, Samantha Loi, Alissa Westphal, Kate Bolton

Abstract

This study aimed to explore the experience of staff and residents of mental health residential care facilities, using iPads as a medium to engage in meaningful occupation.

Method

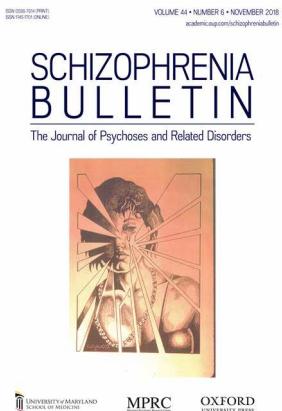
A mixed method was used, which combined descriptive quantitative and thematic qualitative analysis. The Pan Occupational Paradigm was used as a theoretical framework, to maintain an occupational perspective. Residents participated in semi-structured interviews, and staff completed surveys and participated in a focus group or individual interview. The responses were then coded and analysed for their description of 'doing', 'being', 'becoming' and 'belonging' experiences.

Findings

Analysis found that residents engaged in personally meaningful occupations with the iPads, often with staff facilitation. The study also found that staff and residents responded positively to the iPads, particularly regarding developing positive connections and opportunities for growth and mastery. However, barriers associated with resource availability (particularly hardware and infrastructure) were also identified.

Conclusion

The use of iPads in these facilities provided opportunities for residents to engage in meaningful occupation, and overcome the occupational limitations inherent in the service setting. iPad use also enabled residents to engage in the community outside the facility.



Selective Attention, Working Memory, and Executive Function as Potential Independent Sources of Cognitive Dysfunction in Schizophrenia

James M Gold; Benjamin Robinson; Carly J Leonard; Britta Hahn; Shuo Chen ...

Abstract

People with schizophrenia demonstrate impairments in selective attention, working memory, and executive function. Given the overlap in these constructs, it is unclear if these represent distinct impairments or different manifestations of one higher-order impairment. To examine this question, we administered tasks from the basic cognitive neuroscience literature to measure visual selective attention, working memory capacity, and executive function in 126 people with schizophrenia and 122 healthy volunteers. Patients demonstrated deficits on all tasks with the exception of selective attention guided by strong bottom-up inputs. Although the measures of top-down control of selective attention, working memory, and executive function were all intercorrelated, several sources of evidence indicate that working memory and executive function are separate sources of variance. Specifically, both working memory and executive function independently contributed to the discrimination of group status and independently accounted for variance in overall general cognitive ability as assessed by the MATRICS battery. These two cognitive functions appear to be separable features of the cognitive impairments observed in schizophrenia.

The Effects of Metacognition-Oriented Social Skills Training on Psychosocial Outcome in Schizophrenia-Spectrum Disorders: A Randomized Controlled Trial

Felix Inchausti; Nancy V García-Poveda; Alejandro Ballesteros-Prados; Javier Ortuño-Sierra; Sergio Sánchez-Reales ...

Abstract

A pilot study of the effects of metacognition-oriented social skills training (MOSST) on social functioning in patients with schizophrenia spectrum disorders (SSDs) reported promising results. The main purpose of the current trial was to compare the effectiveness and potential benefits of MOSST vs conventional social skills training (SST). Single-blind randomized controlled trial with 2 groups of patients aged 18–65 with SSDs on partial hospitalization. Participants were randomly assigned (1:1) to receive 16 group sessions with MOSST or conventional SST, both in addition to standard care, over 4 months, with a 6-month follow-up. Psychosocial functioning, metacognition, and symptom outcomes were measured by blind assessors. Statistical analyses used mixed models to estimate treatment effects in each postrandomization time point. Thirty-six patients were randomly assigned to the MOSST group and 33

patients to the conventional SST group. Between-group differences were significant in favor of MOSST on Social and Occupational Functioning Assessment Scale (SOFAS) and Personal and Social Performance Scale (PSP) total scores at post-treatment and follow-up. Concerning PSP subscales, there were significant between-group differences in favor of MOSST at follow-up on socially useful activities, personal and social relationships, and disturbing and aggressive behaviors. Metacognition only improved following MOSST group. For people with SDDs, MOSST appears to have short- and long-term beneficial effects on social functioning and symptoms. Further studies are required to replicate the current results in other samples.

Anomalous Perceptions and Beliefs Are Associated With Shifts Toward Different Types of Prior Knowledge in Perceptual Inference

Daniel J Davies; Christoph Teufel; Paul C Fletcher

Abstract

Psychotic phenomena manifest in healthy and clinical populations as complex patterns of aberrant perceptions (hallucinations) and tenacious, irrational beliefs (delusions). According to predictive processing accounts, hallucinations and delusions arise from atypicalities in the integration of prior knowledge with incoming sensory information. However, the computational details of these atypicalities and their specific phenomenological manifestations are not well characterized. We tested the hypothesis that hallucination-proneness arises from increased reliance on overly general application of prior knowledge in perceptual inference, generating percepts that readily capture the gist of the environment but inaccurately render its details. We separately probed the use of prior knowledge to perceive the gist vs the details of ambiguous images in a healthy population with varying degrees of hallucination- and delusion-proneness. We found that the use of prior knowledge varied with psychotic phenomena and their composition in terms of aberrant percepts vs aberrant beliefs. Consistent with previous findings, hallucination-proneness conferred an advantage using prior knowledge to perceive image gist but, contrary to predictions, did not confer disadvantage perceiving image details. Predominant hallucination-proneness actually conferred advantages perceiving both image gist and details, consistent with reliance on highly detailed perceptual knowledge. Delusion-proneness, and especially predominance of delusion-proneness over hallucination-proneness, conferred disadvantage perceiving image details but not image gist, though evidence of specific impairment of detail perception was preliminary. We suggest this is consistent with reliance on abstract, belief-like knowledge. We posit that phenomenological variability in psychotic experiences may be driven by variability in the type of knowledge observers rely upon to resolve perceptual ambiguity.

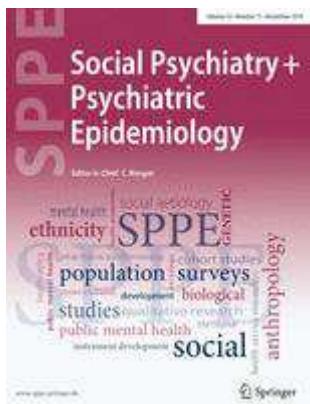
Social Cognitive Skills Training for Psychosis With Community-Based Training Exercises: A Randomized Controlled Trial

William P Horan; Michelle Dolinsky; Junghee Lee; Robert S Kern; Gerhard Hellemann ...

Abstract

Impairments in social cognition are key determinants of poor functioning in psychosis and an important new target for treatment development. Initial studies support the feasibility and efficacy of training interventions for social cognition, but have been small and have had substantial methodological limitations. This report describes the largest rigorously controlled study of a social cognitive treatment to date. We evaluated the efficacy of a refined version of the 24-session Social Cognitive Skills

Training (SCST) program, and whether adding in vivo training sessions in community settings would enhance generalization to functional improvements. One hundred thirty-nine outpatients with psychotic disorders were randomly assigned to one of 3 time- and format-matched conditions: (1) SCST plus in vivo community-based training, (2) SCST plus clinic-based training, or (3) Illness management control condition. SCST targeted the domains of emotion processing, social perception, attributional bias, empathy, and mentalizing. Assessments of social cognition, nonsocial cognition, symptoms, and functioning were completed at baseline, mid-treatment, posttreatment, and 3-month follow-up. On the primary social cognitive outcome measures, there was significant, durable SCST-related improvement in facial emotion identification. There was also a significant SCST benefit for emotional intelligence and an in vivo training effect for empathy, though these improvements were not durable. Further, there were no overall or in vivo-related changes in functioning. This study bolsters and extends support for the efficacy of SCST in a relatively large and rigorously controlled trial, although our effort to enhance generalization to functional improvements through in vivo community-based training was not successful.



October 2018

[Positive and negative impacts of schizophrenia on family caregivers: a systematic review and qualitative meta-summary.](#)

Shiraishi N, Reilly J.

Abstract

PURPOSE:

Schizophrenia places a heavy burden on the individual with the disorder, as well as on his or her family; this burden continues over the long course of the disease. This study aimed to provide an overview of the positive and negative impacts of schizophrenia on family caregivers.

METHODS:

From April to June 2017, two investigators conducted a systematic review and meta-summary of studies obtained from five electronic databases and the footnotes and citations of eligible studies. Qualitative studies that explored the experiences of family caregivers of individuals with schizophrenia were included. Study findings published between 1993 and 2017 were extracted and synthesised using narrative and summative approaches.

RESULTS:

After the removal of duplicates, independent reviewers screened 864 records. Subsequently, 46 full-text articles were assessed for eligibility and 23 papers were included in the synthesis. Negative impacts identified were traumatic experiences, loss of expectation of life and health, lack of personal and social resources, uncertainty and unpredictability, family disruption, conflict in interpersonal relationships, difficulty in understanding, and stigma and heredity. Meanwhile, the positive impacts identified were family solidarity, admiration, affirmation, affection, compassion, learning knowledge and skills, self-confidence, personal growth, and appreciation.

CONCLUSIONS:

Analysis of the studies suggested that family members of individuals with schizophrenia face a series of traumatic situations during the course of the illness. Their subsequent experiences can be conceptualised as a continuous circle of caregiving, in which the positive impacts can be centrally positioned within the negative impacts.

World Journal of Psychiatry



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Psychiatry*

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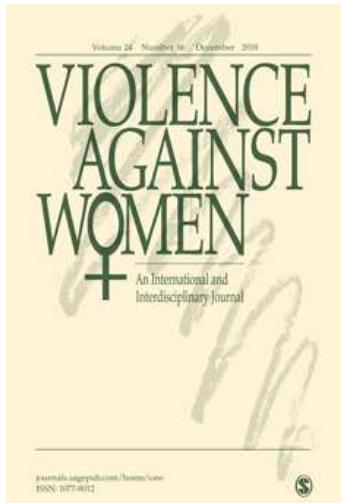
[Women who suffer from schizophrenia: Critical issues](#)

Mary V Seeman

Abstract

Many brain diseases, including schizophrenia, affect men and women unequally - either more or less frequently, or at different times in the life cycle, or to varied degrees of severity. With updates from recent findings, this paper reviews the work of my research group over the last 40 years and underscores issues that remain critical to the optimal care of women with schizophrenia, issues that overlap with, but are not identical to, the cares and concerns of men with the same diagnosis. Clinicians need to be alert not only to the overarching needs of diagnostic groups, but also to the often unique needs of women and men.

Violence against women



Mental Health Among Help-Seeking Urban Women: The Relationships Between Adverse Childhood Experiences, Sexual Abuse, and Suicidality

Kevin Hamdullahpur, Kahá:wi J. Jacobs, Kathryn J. Gill,

Abstract

Adverse childhood experiences (ACEs) and adult mental health were explored in a sample of urban Aboriginal ($n = 83$) and non-Aboriginal ($n = 89$) women. Childhood sexual abuse (CSA) was associated with negative home environments, teenage pregnancy, lifetime suicide attempts, and treatment seeking. Aboriginal women with CSA witnessed higher levels of physical/sexual abuse of family members. The severity of current psychological distress was associated with a history of childhood neglect. The results indicate that CSA rarely occurs in isolation, and that multiple ACEs are strongly associated with suicide attempts and treatment seeking in adulthood. Future studies should focus on the role of CSA in suicidality, as well as familial, community, and cultural protective factors.

Acta Psychiatrica Scandinavica



[December 2018](#)

[Trends in mortality in schizophrenia and their implications](#)

Ellis Onwordi, Oliver Howes

[Mortality in schizophrenia: 30 - year nationwide follow - up study](#)

A. Tanskanen, J. Tiihonen H. Taipale

[Mortality in unipolar depression preceding and following chronic somatic diseases](#)

A. Koyanagi, O. Köhler-Forsberg, M. E. Benros, T. Munk Laursen, J. M. Haro, Merete Nordentoft, Carsten Hjorthøj

[The relationship between childhood adversities and dissociation in severe mental illness: a meta-analytic review](#)

S. Rafiq, C. Campodonico, F. Varese

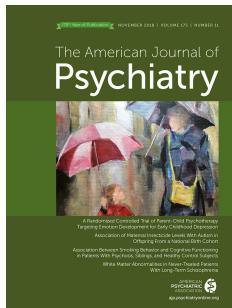
[Social media and its relationship with mood, self-esteem and paranoia in psychosis](#)

N. Berry, R. Emsley, F. Lobban, S. Bucci

[Long - term cognitive trajectories and heterogeneity in patients with schizophrenia and their unaffected siblings](#)

Md. A. Islam, T. D. Habtewold, F. D. van Es P. J. Quee, E. R. van den Heuvel, B. Z. Alizadeh, R. Bruggeman, GROUP Investigators

The American Journal of Psychiatry



November 2018

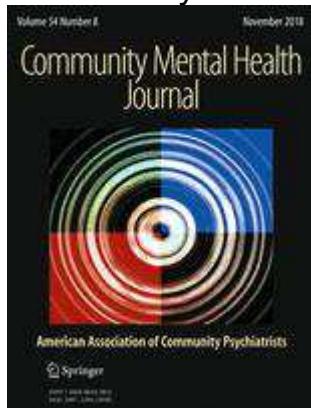
Cigarette Smoking, Cognitive Performance, and Severe Mental Illness: Quitting Smoking Really Does Seem to Matter

Philip D. Harvey, Ph.D.

Association Between Smoking Behavior and Cognitive Functioning in Patients With Psychosis, Siblings, and Healthy Control Subjects: Results From a Prospective 6-Year Follow-Up Study

Jentien M. Vermeulen, M.D., Frederike Schirmbeck, Ph.D., Matthijs Blankers, Ph.D., Mirjam van Tricht, Ph.D., Richard Bruggeman, M.D., Ph.D., Wim van den Brink, M.D., Ph.D., Lieuwe de Haan, M.D., Ph.D., Genetic Risk and Outcome of Psychosis (GROUP) investigator

Community Mental Health Journal



Five Year Outcomes of Tapering Antipsychotic Drug Doses in a Community Mental Health Center

Sandra Steingard

Evaluating the Impact of Integrated Care on Service Utilization in Serious Mental Illness

Heidi C. Waters, Michael F. Furukawa, Shari L. Jorissen

Integrating Behavioral Health and Primary Care Services for People with Serious Mental Illness: A Qualitative Systems Analysis of Integration in New York

Parashar Pravin Ramanuj, Rachel Talley, Joshua Breslau

An Examination of Peer-Delivered Parenting Skills Programs Across New York State

Mary C. Acri, Nancy Craig, Josh Adler

Art and Mental Health Recovery: Evaluating the Impact of a Community-Based Participatory Arts Program Through Artist Voices

Tracey A. Bone

Small Things, Micro-Affirmations and Helpful Professionals Everyday Recovery-Orientated Practices According to Persons with Mental Health Problems

Alain Topor, Tore Dag Bøe, Inger Beate Larsen

Factors Associated with Changes in Community Ability and Recovery After Psychiatric Rehabilitation: A Retrospective Study

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A Path Analysis of Self-determination and Resiliency for Consumers Living with Mental Illness

Dana Perlman, Ellie Taylor, Luke Molloy, Renee Brighton

ADICCIONES

Revista Española de Drogodependencias



EDITORIAL

Deshojando la marihuana: Cannabis, cannabinoides y salud mental

Autores: Sergio Fernández-Artamendi.

REVISIONES

Estudio de las relaciones entre adicciones comportamentales, impulsividad y consumo de sustancias en adolescentes: Validación del MULTICAGE CAD 4 y del DEN en Ecuador

Autores: María D. Chávez-Vera, Ana Estévez, Leticia Olave, Janire Momeñe, Daniel Vázquez, Itziar Iruarrizaga.

ORIGINALES

Prescripción de clonazepam en Costa Rica

Autores: Consuelo Cubero Alpízar, Ligia Rojas Valenciano, Mauricio Campos Fernández, Luis Esteban Hernández Soto.

Cambios autopercibidos en profesionales de Centros de Atención y Seguimiento a las drogodependencias de Cataluña (CAS) tras recibir formación en intervención en tabaquismo

Autores: Gemma Nieva, Sílvia Mondon, Montse Ballbè, Eugeni Bruguera, Grupo de trabajo de

Tabaco de la Coordinadora de CAS de Cataluña.

Consumo de alcohol de los adolescentes en Madrid: la influencia de la identidad étnica latinoamericana y nacional española

Autores: Carmen Meneses-Falcón, Belén Charro, Jorge Uroz-Olivares, María Prieto-Ursúa.

SECCIÓN JURÍDICA

De nuevo sobre la venta y consumo de bebidas alcohólicas a menores en el Derecho español

Autores: Mª Pilar Montes Rodríguez

Adicciones



Posverdad del consumo de cannabis: de regreso a la medicina basada en la evidencia

Hugo López Pelayo, Laia Miquel De Montagut, Cristina Casajuana Kögel, Mercè Balcells Oliveró

Originales

Dismorfia Muscular: detección del uso-abuso de esteroides anabolizantes androgénicos en una muestra española

Irene González-Martí, Juan Gregorio Fernández-Bustos, Onofre Ricardo Contreras Jordán, Marina Sokolova

Cribaje de trastornos por uso de alcohol en pacientes psiquiátricos ambulatorios: influencia de género, edad, y diagnóstico psiquiátrico

Mónica Sánchez Autet, Marina Garriga, Francisco Javier Zamora, Idilio González, Judith Usall, Leticia Tolosa, Concepción Benítez, Raquel Puertas, Belén Arranz

Consumo de alcohol, tabaco y cannabis en adolescentes de una población multicultural (Burela, Lugo)

Ainara Díaz Geada, Alicia Bustos Miramontes, Francisco Caamaño Isorna

Desarrollo y validación de la versión corta del cuestionario sobre expectativas de los efectos del alcohol (EQ-SF)

Laura Mezquita, Laura Camacho, Carlos Suso-Ribera, Generós Ortet, Manuel I. Ibáñez

Propiedades psicométricas de la versión española del Marijuana Motives Measure en población adolescente consumidora

Josep Matalí Costa, J. Simons, M. Pardo, M. Lleras, A. Pérez, O. Andión

Pacientes con trastorno por uso de alcohol: resultados iniciales de un registro multicéntrico en la Red de Trastornos Adictivos-RTA. Estudio CohRTA

Arantza Sanvisens, Paola Zuluaga, Inmaculada Rivas, Gabriel Rubio, Antoni Gual, Marta Torrens, Antoni Short, Francisco Javier Álvarez, Jordi Tor, Magí Farré, Fernando Rodríguez de Fonseca, Roberto Muga

Cartas al editor

La influencia de fumar cigarrillos en la elección de pareja para una relación íntima y ocasional

Isaac Amigo Vázquez, María Álvarez Fernández, Roberto Secades-Villa

Desmotivadora evolución de la desconexión asimétrica del Núcleo Accumbens en el trastorno por consumo de cocaína: un punto de vista traslacional

Gonzalo Haro Cortés, Julia Renau-Lagranja, Víctor Costumero, Abel Baquero, Emilio Meneu, John Salamone, Mercè Correa

Clínica y Salud



Alteraciones de la Conducta Alimentaria en Pacientes con Trastorno por Abuso de Sustancias María Jesús Flores-Fresco, María del Carmen Blanco-Gandía y Marta Rodríguez-Arias

Resumen

La comorbilidad psiquiátrica entre los trastornos de la conducta alimentaria (TCA) y los trastornos por uso de sustancias (TUS) suele darse con frecuencia, complicando el tratamiento y pronóstico de ambos. En el presente trabajo se estudió la prevalencia de los trastornos alimentarios en pacientes que demandan tratamiento por un TUS, principalmente alcohol, cocaína y cannabis, así como el papel modulador de la impulsividad y la adicción a la restricción alimentaria. Los instrumentos utilizados fueron la escala de impulsividad de Barratt, el Inventory de Trastornos Alimenticios (EDI) y el Cuestionario Valencia de Adicción a la Restricción (CVAR). Los resultados muestran que los pacientes con un TUS presentan una prevalencia mayor de TCA, especialmente en mujeres. Estos resultados confirman que los trastornos de alimentación tienen una prevalencia elevada en la población con adicciones; especialmente las mujeres presentan trastornos de alimentación con más frecuencia, así como mayores niveles de impulsividad.

El Desarrollo de la Estabilidad Emocional en Patología Dual: una Propuesta de Intervención Breve

Araceli García-Pardo

Resumen

El objetivo del estudio fue conseguir la adquisición del equilibrio emocional mediante el aprendizaje de la gestión y regulación de las emociones en pacientes afectados de patología dual. La metodología fue mixta (cualitativa-cuantitativa). La muestra total fue de 27 participantes voluntarios, distribuidos en dos grupos: tratamiento ($n = 21$) y control ($n = 6$). Los datos cualitativos se obtuvieron mediante la entrevista por objetivos, el Test de los Ojos y una encuesta final ad hoc. Respecto a los resultados cualitativos, el grupo tratamiento mejoró en regulación emocional, alcanzando abstinencia y alta terapéutica. En lo cuantitativo se evaluó la desregulación emocional (DERS) a nivel transversal y longitudinal. Los resultados al comparar los grupos en el postest mostraron diferencias significativas a favor del grupo tratamiento en la dimensión desatención. A nivel longitudinal, se detectaron diferencias en el grupo tratamiento en el postest respecto al pretest en desatención y descontrol y no se encontró ninguna diferencia en el grupo control. La conclusión del estudio indica que hay una mejora de la comprensión de las emociones junto al afrontamiento adecuado de las experiencias negativas por parte de los participantes del grupo tratamiento.

International Journal of Clinical and Health Psychology



Polydrug use trajectories and differences in impulsivity among adolescents

Víctor Martínez-Loredo, José Ramón Fernández-Hermida, Alejandro de La Torre-Luque, Sergio Fernández-Artamendi

Background/Objective:

Although alcohol, tobacco and cannabis are the most widely consumed drugs, sparse data exist regarding polydrug use in adolescents and its relationship with impulsivity. This study aims to identify trajectories of polydrug use and analyze differences in impulsivity between them. Method: A total of 1,565 adolescents (54.4% males; mean age = 13.02, SD = 0.57) were annually assessed over three years using the Barratt Impulsiveness Scale, the Zuckerman Impulsive Sensation Seeking Scale, a Stroop Test and a Delay Discounting Task. Frequency of alcohol, tobacco, and cannabis use, intoxication episodes and problem drinking were also assessed. Polydrug trajectories were identified using latent class mixed modelling. To examine differences in self-reported and behavioral impulsivity two mixed multivariate analyses of covariance were used. Results: Three trajectories of substance use were found. The 'Experimental use' and the 'Early use' trajectories presented the lowest and highest impulsivity, respectively. Substance use increases in the 'Telescoped used' trajectory were associated with parallel increases in impulsivity. Conclusions: individuals with divergent patterns of substance use during adolescence differ in their impulsiveness, primarily in general impulsivity and sensation seeking. Present findings suggest the relevance of these facets as possible targets for interventions preventing the onset and escalation of substance use.

Informaciones Psiquiátricas



[ASERTIVIDAD EN PERSONAS DEPENDIENTES AL CONSUMO DE ALCOHOL](#)

Mar Montagud Pla y Raquel Allepús Encinas

Resumen

La asertividad es un estilo de comunicación relacionado con las drogodependencias y presente en los planes de prevención y tratamiento porque, según el nivel de asertividad, puede ser un factor de protección o de riesgo. El siguiente estudio tenía como objetivo identificar si había una diferencia significativa en el nivel de asertividad entre población no alcohólica ($n = 20$) y dos grupos en diferentes fases del tratamiento grupal para dependencia al alcohol en el CAS de Granollers ($n = 32$; $n = 21$). Se ha administrado un cuestionario sociodemográfico y la Escala de Asertividad de Rathus para obtener datos sociodemográficos y el nivel de asertividad. Los resultados muestran que, aunque la media de asertividad de la población no alcohólica es la más elevada, no hay diferencias significativas entre el nivel de asertividad de los 3 grupos. Esto puede ser debido a que a los sujetos ya no se encuentran en un consumo activo y, por lo tanto, la diferencia no es tan evidente. En cambio, sí que hay diferencias significativas en las respuestas ante ciertos ítems de la escala de Rathus, aunque no se identifiquen en la puntuación general. El presente estudio abre la puerta a futuras investigaciones sobre asertividad, adicciones y terapia de grupo y remarca la importancia de continuar investigando sobre la asertividad y los drogodependencias.