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ABSTRACTS
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THE RELATIVE INFLUENCES OF PROACTIVE COPING SKILLS, EMOTIONAL DISTRESS AND SELF-ESTEEM ON FUNCTIONING AND QUALITY OF LIFE OF SCHIZOPHRENIC PATIENTS

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Aims: Persons with schizophrenia tend to fail using effective coping skills in order to adaptively face daily life stressors. There is evidence linking the use of active problem-solving coping skills to better functional outcomes. However, few studies attempted to analyze the impact of proactive coping skills in functioning and quality of life. The aim of this study was to examine the relative associations between proactive coping skills, emotional distress, self-esteem, functioning and quality of life (QOL) among persons diagnosed with schizophrenia.

Methods: Sample consisted of 23 Portuguese persons diagnosed with Schizophrenia. Measures of proactive coping (Proactive Coping Inventory), emotional distress (Anxiety, Depression and Stress Scale) and self-esteem (Rosenberg Self-Esteem Scale) were correlated with measures of psychosocial functioning (Life Skills Profile) and QOL (World Health Organization Quality of Life Brief).

Results: We performed Spearman correlation analysis in order to determine the relationships between variables. Results: Proactive coping, reflective coping, strategic planning and preventive coping correlated positively with different dimensions of functioning and QOL. Avoidance coping wasn’t correlated with any functional outcome. We also didn’t found significant correlations between distress symptoms and functioning and QOL, excepting depressive symptoms, which were correlated with communication skills and social relationships. Stress symptoms significantly correlated with physical domain of QOL. Self-esteem was positively associated with several quality of life domains.

Conclusions: Schizophrenic patients can positively influence their functional outcomes, QOL and well-being, if using proactive coping strategies and goal striving. These skills should be emphasized in psychosocial rehabilitation programs.

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RESOCIALISATION - A CONDITION FOR ACTUAL PSYCHIATRIC THERAPY

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The authors are working in a clinic which had a great experience during some decades with the application of new conception of resocialisation. The conclusion is that actual, usual treatment with the medicines is insufficient. It must be, in the same time be completed by new habits of work, in order to learn the schizophrenic how to gain money and how to spend it. That suppose a program of working and teaching the skills in group and individually. This approach is able to fight realistically with stigma. It is a very great task which must be assumed by the new generation of psychiatrist, educated in the spirit of value of work and character. Of cause neuroscience will bring probably new insights and medicine, but cannot explain the indispensable need to be included in social life and economic mechanism. That is what the East proposes, but is not able to realize because the orientation at whole society is toward profit not to really help the durable weak and costly patient. That why resocialisation should be teach to new generations and every psychiatrist to know, to become practical and real helping at long term and socially the patient. The same ideologia, in the best meaning, is to be preached to the parents. This policy should be supported by the set, medical authority and law. So we can hope at some results in psychiatry. Otherwise, all are just words.