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schizophrenia
in the Finnish Adoption Study of children at high risk for schizophrenia, it was associated with schizophrenia spectrum disorders. Gottesman (1991) cites another example. While the relationship of some illicit drugs to psychosis remains a matter of scientific debate for the population at large, some such drugs (including amphetamines, LSD and PCP) do involve the same dopamine pathways that have been implicated in schizophrenia. So the person with a family genetic history of psychosis may be at much higher risk than their peers due to exposure to these drugs.

To these two I would add two other closely related questions:

**Just what is he/she at risk of?**

While the family thinks of psychosis and often the most negative end of that with chronic disability, the reality can be quite different. The person at risk may have some of the schizophrenia spectrum symptoms or hypomania, so that they are ‘different’, but still capable of living a good life. Even if the person does become psychotic, genetics does not appear to be able to predict the severity of the illness. While another relative may have had an unremitting illness, the next family member diagnosed may have one episode and thereafter manage well.
usual age for the onset of prodromal signs. There certainly are reports of earlier differences in everything from social behaviour to reading ability, but these tend to be statistical differences between two groups of children, rather than anything that would warrant a formal prediction for an individual child. The situation is complicated by factors in the child and in the parent. The child may have had much experience of adults with mental illness and may be imitating their behaviour or reacting to it. If their ill parent rarely interacted with them, then there may well be some limitations in the children’s social behaviour towards others. At the same time, a parent who grew up with an ill parent may have less knowledge of ‘normal’ child development. I remember a mother whose own mother had experienced psychosis finding it difficult to believe that her three year old’s ‘imaginary friend’ was part of normal development and not the first signs of psychosis!

What can we do to reduce the risk?

Our knowledge of environmental risk factors is remarkably poor, and includes such factors as pregnancy and delivery complications (Tsuang, 2000) which most would not regard as environmental. Both Tsuang (2000) and Cottlesman (1991) differentiate between what may be an environmental risk factor across the entire population and one which may only come into play in the presence of a genetic predisposition. So while a dysfunctional family environment does not ‘cause’ schizophrenia in the general population,
usual age for the onset of prodromal signs. There certainly are reports of earlier differences in everything from social behaviour to reading ability, but these tend to be statistical differences between two groups of children, rather than anything that would warrant a formal prediction for an individual child.
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By: Love, Keisha M.; Murdock, Tamera B. *Journal of College Counseling*. Jul 2012, Vol. 15 Issue 2, p117-129. 13p. Abstract: In an attempt to understand the cognitive mechanisms by which parental attachments predict depression among African American college students, the authors examined a mediational path model containing parental attachment, cognitive working models, and depression. The model demonstrated a close fit to the data, and several significant paths emerged. The authors provide recommendations for counselors practicing in college counseling centers and suggest directions for future research. [ABSTRACT FROM AUTHOR] DOI: 10.1002/j.2161-1882.2012.00010.x (AN: 77825553)

Subjects: AFRICAN American college students; ATTACHMENT behavior; PARENT & child; MENTAL depression; COLLEGE students; COGNITIVE ability; COUNSELING in higher education

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Parental Attachment, Cognitive Working Models, and Depression Among African American College Students

Keisha M. Love and Tamera B. Murdock

In an attempt to understand the cognitive mechanisms by which parental attachments predict depression among African American college students, the authors examined a mediational path model containing parental attachment, cognitive working models, and depression. The model demonstrated a close fit to the data, and several significant paths emerged. The authors provide recommendations for counselors practicing in college counseling centers and suggest directions for future research.

Keywords: attachment, working models, depression, African Americans, college students

Counselors strive to promote emotional well-being by equipping clients with the tools necessary to mitigate daily life stressors (Gelso & Fretz, 1992). To do this, counselors must have an understanding of factors that buffer emotional distress (e.g., depression) to develop interventions that will foster emotional well-being. Attachment theory is a commonly used theoretical framework that researchers and clinicians have used to explain emotional well-being among clients. According to attachment theory, parental attachment relationships are enduring, affective bonds between individuals and their primary caregiver formed during childhood (Bowlby, 1969, 1988; Bretherton, 1992). Parental attachments have been important to counselors for years because of their known associations with psychological well-being, emotional well-being, interpersonal relationships, and social adjustment (Ferry,
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Integrating Religion and Spirituality in Marriage and Family Counseling
Chelsea T. Wolf and Patricia Stevens.
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In the fields of counseling and psychology, interest in religious and spiritual issues is expanding. The authors examined integrating religion and spirituality with marriage and family counseling. They explored potential...

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Hope-focused and forgiveness-based group interventions to promote marital enrichment.
Integrating Religion and Spirituality in Marriage and Family Counseling

Chelsea T. Wolf and Patricia Stevens


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In the fields of counseling and psychology, interest in religious and spiritual issues is expanding. The authors examined integrating religion and spirituality with marriage and family counseling. They explored potential obstacles and negative consequences for this integration, as well as clinical implications. The positive impact of incorporating a religious or spiritual perspective into clinical practice is discussed. Ethical considerations, techniques, and strategies are presented.

According to a 1991 Gallup poll, 94% of adult Americans believe in God or a universal spirit. In addition, 68% of adult Americans are members of a church, synagogue, or place of worship, and 56% of the same population rate religion as being very important in their lives (Gallup, 1993). Richards and Bergin (1997) also noted a recent growth in interest in spiritual and religious issues in the United States, as evidenced by increased coverage of these topics in leading newspapers, magazines, books, and television specials. Likewise, in the fields of counseling and psychology, there has been a growing awareness about the importance of incorporating spirituality and religion into
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**JOURNAL ARTICLE**

**Poverty Comparisons with Dependent Samples**

Buhong Zheng

*Journal of Applied Econometrics, Vol. 19, No. 3 (May - Jun., 2004), pp. 419-428*

**Topics:** Welfare reform, Standard error, White people, Poverty rates, Public assistance programs, Inference, Statistical inferences, Covariance

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Poverty Comparisons with Dependent Samples

Buhong Zheng

JOURNAL OF APPLIED ECONOMETRICS
Published online in Wiley InterScience (www.interscience.wiley.com). DOI: 10.1002/jae.779

POVERTY COMPARISONS WITH DEPENDENT SAMPLES

BUHONG ZHENG

Department of Economics, University of Colorado at Denver, USA

SUMMARY

Standard inference procedures for poverty comparisons require samples to be independent. For many commonly used income samples, however, this requirement is not fulfilled since samples are rotated. This article introduces an easy-to-use method of correction for sample dependency. We also apply the method to test changes in US poverty in the 1990s and to evaluate the marginal effects of public assistance on poverty before and after the recent welfare reform. Copyright © 2004 John Wiley & Sons, Ltd.

1. INTRODUCTION

In 1999 the estimated US poverty rate was 11.8% while the rate for the previous year was 12.7%. Using the standard inference procedures for sample proportion, the Census Bureau concluded that poverty in the USA had decreased from 1998 to 1999 and the drop was statistically significant at the 10% level. This conclusion, however, can be questioned based on both the poverty measure used and the statistical method applied. The deficiency of using the poverty rate as the indicator of poverty has been widely recognized since Sen’s (1976) influential work on poverty measurement. A poverty measure, Sen argued, should reflect not only the ‘incidence’ of poverty but also the
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Neuropsychological functioning, age, and medication adherence in bipolar disorder

Nadia Corrèard, Julia-Lou Consoloni, Aurelie Raust, Bruno Etain, Romain Guillot and Sophie Job


DOI: http://dx.doi.org/10.1371/journal.pone.0184313

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Author(s): Nadia Corrèard 1,2, Julia-Lou Consoloni 1,2,3, Aurélie Raust 2,4, Bruno Etain 2,5, Romain Guillot 2,6, Sophie Job 2,6, Joséphine Lottus 2,7, Isabelle Médecin 2,7, Thierry Bougerol 2,8, Mircea Polosan 2,8,9, Benjamin Fredembach 2,8, Sébastien Gard 2,10, Katia M'Bailara 2,10,11, Jean-Pierre Kahn 2,6,12,13, Paul Roux 2,14, Anne-Sophie Homassel 2,14, Mathilde Caminati 2,5, Lucile Matos 2,15, Emilie Ollé 2,15,16, Frank Bellvillé 2,5, Philippe Courtet 2,15,16, Chantal Henry 2,4,17, Marion Leboyer 2,4,17, Jean-Michel Azorín 1,2,18, Raoul Belzeaux 1,2,3,*; FACE-BD collaborators

Introduction

Bipolar disorder (BD) is a chronic and severe mental disorder often characterized by residual symptoms as well as heterogeneous impairment of cognitive functioning [1-3]. Pharmacological treatment is essential to treat symptomatic mood episodes and to prevent relapses and recurrences [4]. Unfortunately, treatment nonadherence is frequent in BD. About 20% to 60% of patients are considered as poor or nonadherent without regard to the phase of the illness, including symptomatic...
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3. Effects of structured vocational services on job-search success in ex-offender veterans with mental illness: 3-month follow-up.
9. The Association of Pain Severity and Pain Interference Levels with Abuse Experiences and Mental Health Symptoms Among 300 Mothers: Baseline Data Analysis for a 7-year Prospective Study.

By: Symes, Lene; McFarlane, Judith; Nava, Angeles; Gilroy, Heidi; Maddoux, John. Issues in Mental Health Nursing. Jan 2013, Vol. 34 Issue 1, p2-16. 15p. Abstract: Women who experience interpersonal violence are at increased risk for anxiety, depression, posttraumatic stress symptoms, and chronic pain and other physical disorders. Although the effects of mental health disorders on women's functioning and well-being are well established, less is known about the effects of pain. We examined participants' (n = 300 mothers) experiences of pain severity and pain interference. Higher levels of pain severity and pain interference were significantly associated with anxiety, PTSD, and depression symptoms. Mental health symptoms compounded by pain, may leave abused women less able to access resources or practice safety behaviors to protect themselves and their children. [ABSTRACT FROM AUTHOR] DOI: 10.3109/01612840.2012.709916. (AN: 84676527)

Subjects: CHRONIC pain -- Psychological aspects; ABUSED women -- Psychology; ANALYSIS of covariance; ANALYSIS of variance; CHI-squared test; CORRELATION (Statistics); DISTRESS (Psychology); INTERVIEWING; LONGITUDINAL method; MENTAL illness; MOTHERS -- Psychology; PSYCHOLOGICAL tests; QUESTIONNAIRES; RESEARCH -- Finance; SCALES (Weighing instruments); SEX crimes; SOCIAL networks; PAIN measurement; SEVERITY of illness index; DESCRIPTIVE statistics; TEXAS; Scale and Balance Manufacturing; All other general-purpose machinery manufacturing; Other Individual and Family Services

10. High School Dropouts in Emerging Adulthood: Substance Use, Mental
The Association of Pain Severity and Pain Interference Levels with Abuse Experiences and Mental Health Symptoms Among 300 Mothers: Baseline Data Analysis for a 7-year Prospective Study

Lone Symes, PhD, RN, Judith McFarlane, Dr. PH, FAAN, Angeles Nava, PhD, Heidi Gilroy, MS, and John Maddoux, MA
Texas Woman’s University, College of Nursing, Houston, Texas, USA

Women who experience interpersonal violence are at increased risk for anxiety, depression, posttraumatic stress symptoms, and chronic pain and other physical disorders. Although the effects of mental health disorders on women’s functioning and well-being are well established, less is known about the effects of pain. We examined participants’ (n = 300 mothers) experiences of pain severity and pain interference. Higher levels of pain severity and pain interference were significantly associated with anxiety, PTSD, and depression symptoms. Mental health symptoms compounded by pain, may have caused women less able to access resources or practice safety behaviors to protect themselves and their children.

Women survivors of interpersonal violence (IPV) are more likely than other women to suffer from chronic pain and other physical and psychological illnesses. Recent studies support this conclusion across nations and ethnic groups. Ellsberg et al. (2008) in a report of the World Health Organization’s (WHO) multi-country study of women’s health and domestic violence against women, wrote that of the 19,589 ever-partnered women participants, 15% to 71% (varied by site) reported that they had experienced physical or sexual abuse. Women who had a history of abuse were significantly more likely to report that their or more times. Ellsberg et al. noted that because of the cross-sectional study design, the findings do not identify whether the onset of the health symptoms preceded the assaults. Nevertheless, they argue that because of the strength and consistency of the associations, the injuries that resulted from the abuse, and because they did not consider lifetime abuse but only recent health symptoms, the likelihood that the health symptoms are the result of the abuse is strengthened. Ellsberg et al. conclude that the WHO study findings demonstrate an urgent need to address partner violence at national and international levels because the relationship between partner violence and reported ill health is consistent across cultures and has related high costs in human suffering and health expenditures.

Bonomi et al. (2009) completed telephone surveys to determine the women’s abuse status and then, using the women’s US health plan medical records, compared the health information for those abused in the past year (n = 242) with those who were never abused (n = 1686). After controlling for age, they found that women reporting abuse had a greater relative risk for psychological/mental problems, musculoskeletal problems, female reproductive disorders, acute respiratory tract infections, osteoarthritis/osteoarthritis, reflux disease, chest pain, abdominal pain.
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