Racial/ethnic differences in defeatist performance attitudes among individuals with schizophrenia during the course of Cognitive Behavioral Social Skills Training (CBSST)

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ABSTRACT & BACKGROUND

Psychosocial rehabilitation has been increasingly used with racial/ethnic minority persons, and the growing body of research in this area shows promising results. However, evidence also suggests that racial/ethnic and cultural factors can affect symptom expression, diagnosis, treatment outcome and health care service utilization. Consequently, psychosocial interventions may be more or less effective for certain groups.

CBSST is a manualized, 24-36 week psychosocial rehabilitation intervention involving weekly 2-hour group therapy sessions. This intervention combines cognitive behavioral therapy (CBT), neurocognitive compensatory aids, social skills training (SST), and problem-solving training. CBSST was designed to help patients with schizophrenia achieve a higher level of functioning, alleviate cognitive impairments, reduce symptom-related distress and disability, and attain personalized functioning goals. A focus of CBSST is in challenging thoughts that interfere with the execution of activities in the community (e.g., "*I will be harmed if I go out*," "*I won't be able to do it*"). By challenging illness-related thoughts (e.g., paranoia) and thoughts that interfere with the execution of everyday activities, CBSST patients are more likely to engage in social activities.

Performance attitudes are one domain of social cognition considered relevant to persons with schizophrenia and the study of deficits frequently found in SMI. Defeatist attitudes are a form of attributional bias, recently of interest in schizophrenia research. Beck's cognitive model of depression illustrates how early life experiences may lead to the formulation of defeatist beliefs, which in turn are followed by a distorted view of the self, the world, and the future. Beck described these defeatist beliefs as persisting in a latent state until activated by a set of environmental cues or stressors. Defeatist performance attitudes may be an important treatment target of psychosocial rehabilitation for consumers with SMI, which can be used to modify defeatist beliefs interfering in the performance of difficult social and daily functioning tasks. Little is know about defeatist attitudes across racial/ethnic backgrounds.

HYPOTHESIS & METHODS

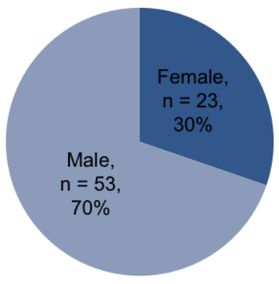
Participants included individuals diagnosed with schizophrenia spectrum disorders (N=149) who were recruited in the San Diego County community. Of these participants, 41 White and 32 ethnic minority participants were randomized to Cognitive Behavioral Social Skills Training (CBSST), and 44 White and 32 ethnic minority participants were randomized to Supportive Contact.

The Defeatist Performance Attitudes Scale (DPAS) is a 15-item self-report measure derived from the Dysfunctional Attitude Scale, indexing defeatist beliefs about one's ability to perform tasks (e.g. *"If you cannot do something well, there is little point in doing it at all"*, *"If I fail at my work, then I am a failure as a person"*). Responses are made on a 7-point scale ranging from 1 (agree totally) to 7 (disagree totally), with higher scores indicating greater endorsement of defeatist attitudes. The DPAS was administered at Baseline, Mid-treatment (4.5 months), End of Treatment (9 months), 1st Follow-up (13 months), and 2nd Follow-up (18 months).

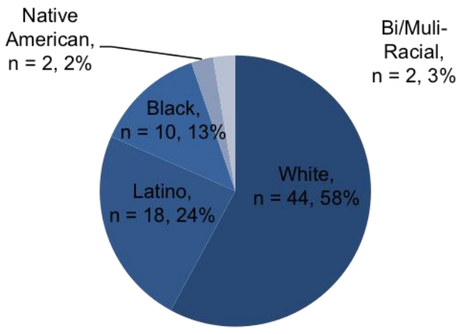
The relationships among race/ethnicity and defeatist attitudes were analyzed using multilevel models to more accurately represent unequal time between assessments, missing data, and dependency across time.

We hypothesized that participants in CBSST would show better sociocognitive outcomes compared to those in Supportive Contact (SC), regardless of racial/ethnic background.

Gender

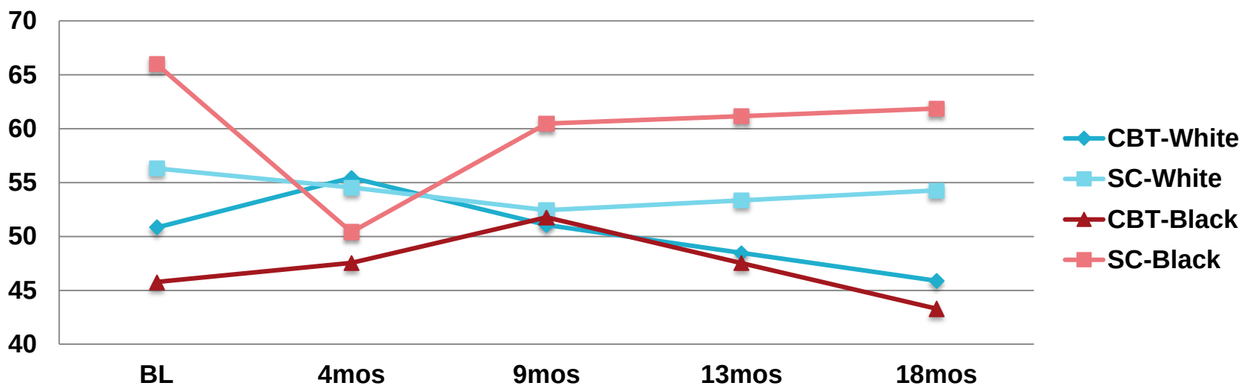


Racial/Ethnic Background



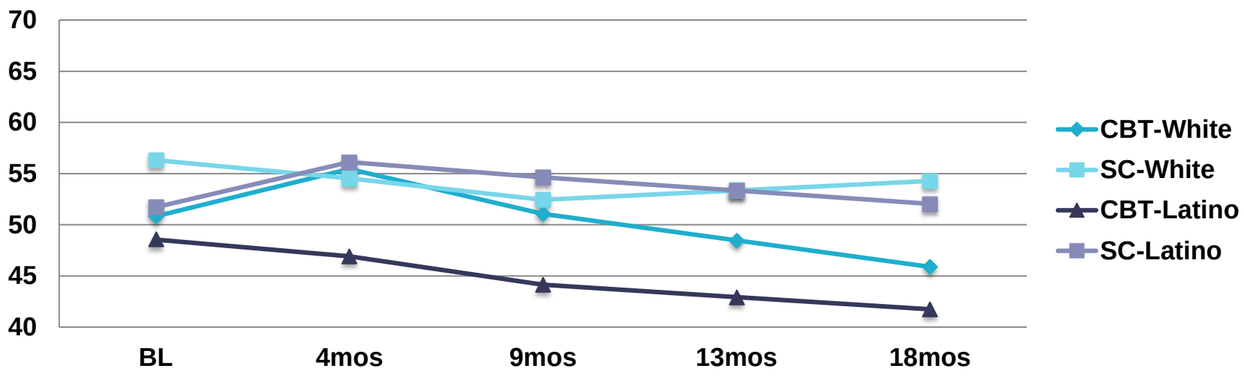
RESULTS

DPAS scores over the course of CBSST- White compared to Black participants



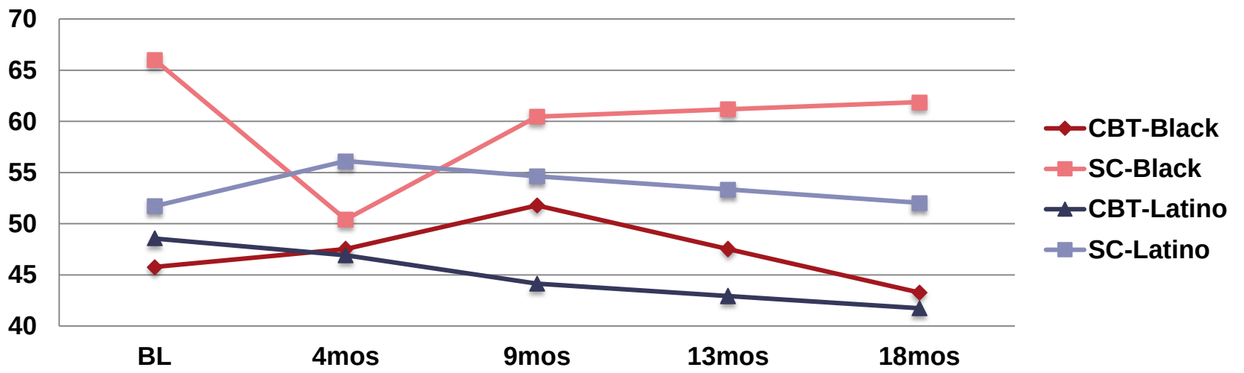
❖ Treatment group by racial background by time was statistically nonsignificant, $F(1,247)=0.02$, $p<0.881$

DPAS scores over the course of CBSST- White compared to Latino participants



❖ Treatment group by racial background by time was statistically nonsignificant, $F(1,244)=0.04$, $p<0.837$

DPAS scores over the course of CBSST- Latinos compared to Black participants



❖ Treatment group by racial background by time was statistically significant, $F(1,94)=4.22$, $p<0.0428$

DISCUSSION

Latinos in CBSST endorsed lower levels of defeatist attitudes compared to Blacks (see bottom graph). We found no other significant differences in defeatist attitudes between White, Latino, and Black participants. Analyses suggest that CBSST is effective for non-white minorities in complex ways.

These findings support the value of social cognition in understanding determinants of outcome in racial/ethnic minorities with SMI, and suggest that psychosocial interventions such as CBSST can target these attitudes and beliefs to facilitate recovery of racial/ethnic minority individuals with SMI.

Overall, this study provides additional information about the sociocognitive functioning of real-world individuals with SMI. Additional follow-up analysis is recommended for further interpretation of results.

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