

A training program for family members of patients with borderline personality disorder based on dialectical behaviour therapy (pp. 219-236)
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Family members of patients with borderline personality disorder (BPD) experience suffering, anxiety, and depression, and are involved in a dysfunctional family atmosphere. Although effective treatments for patients with BPD have been developed, family members have received less attention. The aim of this paper was to adapt the dialectical behaviour therapy skills training group for family members in 14 sessions. The sample comprised 12 family members: 50% mothers, 41.7% fathers, and 8.3% partners. The levels of depression (BDI-II), anxiety (OASIS) and expressed emotion (LEE-S) were measured before and after the intervention. The results show a statistical and clinical improvement in depression, and a clinically significant improvement in anxiety, hostility, lack of tolerance and expressed emotion after the intervention. Negative attitude toward illness presents a statistical improvement. Furthermore, intrusion increases both statistically and clinically. However, the levels of intrusion are equal to those in the general population. Further research into the effectiveness of family interventions is essential.

Reducing stigma, depression, and anxiety in people with HIV through a cognitive behavioral therapy group (pp. 237-257)

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A number of people with HIV participated in a 48-hour cognitive behavioral group intervention, divided into four monthly workshops. Twenty-six participants started the program and 18 completed it and responded at the four-month follow-up. After treatment, significant improvement was achieved in declared stigma, internalized stigma, depression, and state anxiety. All these improvements were maintained at the follow-up measurement four months later, with trait anxiety also improving in this last measure. Participants' results were compared with an HIV control group. Twenty-four respondents completed the first test battery and 16 completed the last. The evolution of this group was assessed, as well as the differences between both groups at three time points: pre-intervention, post-intervention, and follow-up. Intragroup and inter-group comparisons were examined with the Student t-tests for related samples and for independent samples respectively. In addition, the effect size was calculated for each comparison. The results support the efficacy of the group intervention presented.

Depression as a mediator between bullying and suicidal behavior in children and adolescents (pp. 259-281)

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Few studies have explored the mediating effect of depression on the relationship between school bullying and suicidal behavior. This study analyzed the mediating effect of depression on the association between school bullying and suicide risk and attempt in a sample of 221 children and adolescents between 11 and 17 years old ($M= 13.52$, $SD= 1.74$). Regression analysis showed that depression (OR= 1.2) and school bullying (OR= 1.4) explain between 34% and 54% of the variance in suicide risk. Depression (OR= 1.1) and the symptomatology of anxiety, depression, post-traumatic stress, and effects on self-esteem (OR= 1.3) explain between 25% and 41% of the variance in suicide attempt. Two structural equation models were constructed to demonstrate that depression mediates the relationship between school bullying, risk and suicide attempt. These findings will guide intervention strategies to prevent school bullying and suicide risk in school and community settings.

Erroneous beliefs held by minors about online child grooming, and evaluation of a preventive program (pp. 283-296)

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Online child grooming is the process by which an adult manages to sexually victimize a minor using the Internet as a tool. The objectives of the current study were to determine and analyze the erroneous beliefs held by minors about online grooming and develop and evaluate the efficacy of a preventive program in mitigating these misconceptions. A sample comprising 395 adolescents aged 12-16 years (52.8% girls, $M= 13.33$ years, $SD= 1.01$) completed self-report questionnaires. A relatively high proportion of the sample had been sexually solicited by an adult (19%) or had engaged in online sexual interaction with an adult (13%). Most adolescents were unaware that online grooming is a form of sexual harassment and that male adolescents could also be victims of online sexual harassment. The intervention group showed a higher level of knowledge than the control group for eight of the 11 items. These findings suggest that greater awareness of online child grooming will contribute to its prevention.

**Problematic Internet use and negative impact of WhatsApp:
Negative emotions as a risk factor (pp. 297-311)**

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The use of the Internet and instant messaging as an escape from discomfort can make users vulnerable to the development of Internet and WhatsApp addictions. The aim of this research was to analyse the relationship between psychological well-being and negative emotions with problematic Internet use and negative impact of WhatsApp. A total of 630 university students (75.7% female) aged 18-62 years ($M= 21.23$) participated and answered the Problematic and Pervasive Internet Use Scale, the WhatsApp Negative Impact Scale, the PANAS Positive and Negative Affect Scales, and the Psychological Well-being Scale. Psychological well-being and negative emotions correlated significantly and predicted problematic Internet use and negative impact of WhatsApp. Displaying negative emotions was the strongest predictor for problematic Internet use and the negative impact of WhatsApp. People with low psychological well-being and negative emotions may have a greater predisposition to developing problematic Internet use and suffering a greater negative impact of WhatsApp.

Empathy, coping styles and attitudes towards consumption as protective factors of binge drinking and polyconsumption in adolescence (pp. 313-330)

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From a positive youth development perspective, the promotion of personal protective resources against certain risks such as drug consumption is especially relevant. The objective of this study was to analyze the influence of empathy, coping styles, and attitudes related to consumption with respect to binge drinking and polyconsumption in a sample of 799 students. The results of a regression analysis revealed that unproductive coping predicted binge drinking, while attitudes such as turning down a drink and admiration of non-users of institutionalized drugs were associated with a lower consumption habit. As for polyconsumption, affective empathy, active coping, a negative attitude to, and the rejection of drug consumption, as well as the admiration of non-users of institutionalized drugs, predicted a lower simultaneous use of alcohol and cannabis. These findings offer new evidence that may be useful in guiding interventions to promote healthy habits at early ages.

COVID-19 pandemic lockdown responses from an emotional perspective: Family function as a differential pattern among older adults (pp. 331-344)

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Family can be an essential resource at times of loss or vital crisis. Loneliness and isolation in older adults might have serious negative consequences for their mental health. For this reason, this research aims to analyze the role of family function in the anxiety and depression experienced by older adults during the pandemic caused by COVID-19. Participants were 882 Spanish community-dwelling adults over 60 years of age. Sociodemographic characteristics, characteristics related to the coronavirus, self-perceived health, family function, avoidance, depression, and anxiety were analyzed. Data suggest a buffering effect of family function on anxiety and depression during the pandemic. Furthermore, being unmarried or a female, greater fear of COVID-19, worse self-perceived health, greater avoidance, and worse family function were associated with higher levels of anxiety. Likewise, greater fear of COVID-19, poorer self-perceived health, greater avoidance, and poorer family function, were associated with greater depression. These results point out that family dysfunction is a predisposing factor for the development of the emotional problems of anxiety and depression in older people in potentially stressful and loss situations.

The impact of COVID-19 pandemic and lockdown measures on eating disorder risk and emotional distress among adolescents and young people in Spain

(pp. 345-364)

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This cross-sectional study aimed to determine the impact of COVID-19 lockdown on emotional distress and disordered eating in a community sample of Spanish youngsters. A total of 2847 participants (95% women; aged 14-35) completed depression, anxiety, stress, self-esteem, and disordered eating measures. Given the small proportion of men and as significant differences were found between genders in several variables, most results were only reported for women. Severe levels of depression, anxiety and stress were found in 30.8%, 25.4% and 20.5% of the sample, respectively. Sleep quality, eating habits, appearance concerns, preoccupation about one's future, health concerns and other life domains were also affected by lockdown. Younger age, being single, being unemployed, not having contracted COVID-19 or not being sure about it, having a loved one infected or deceased due to coronavirus, and not having a place to relax at home were significantly associated with psychological distress and disordered eating. A structural equation model confirmed the direct influence of lockdown-related variables into psychopathology symptoms. The findings of this study suggest that COVID-19 and its associated lockdown might have a significant effect on psychological wellbeing and eating disturbances.

Spanish validation of the Parent version of the Spence Children's Anxiety Scale (SCAS-P) in a clinical sample (pp. 365-381)

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The child version of the Spence Children's Anxiety Scale (SCAS-C) has demonstrated good psychometric properties, but research has scarcely focused on the parent version of the questionnaire (SCAS-P). We aimed to validate the Spanish version of the SCAS-P in a clinical sample ($N= 137$) of children and adolescents through their parents' responses. The Spanish version of the SCAS-P showed good internal consistency for the total scale and for most subscales (Cronbach's alpha between .49 y .83) and excellent test-retest reliability for all subscales (r between .71 and .91). Furthermore, convergent, and divergent validity were supported by higher correlations with other measures of anxiety ($r= .51$), and lower correlations with measures of depression ($r= .43$) and externalizing problems ($r= .34$). For the first time in an exclusively clinical sample, the original factor structure of the SCAS-P based on six correlated factors was partially confirmed. The validation of the SCAS-P in a clinical sample provides professionals with a tool that better reflects the characteristics of their patients

**Psychometric properties of the Chilean version of the WHOQOL-BREF
for quality of life (pp. 383-398)**

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The objective of this study was to determine the reliability and the factorial structure of the Chilean version scale of quality of life WHOQOL-BREF (World Health Organization). A non-probabilistic sample of 1205 adults ($M_{age}= 18.6$, $SD= 1.8$; 57.8% female) was surveyed during 2018. Using a polychoric correlation matrix, we tested and compared several models with a confirmatory factor analysis. Total scores were compared by sex and socioeconomic status, confirming the hypothesis about the construct validity. A bifactorial model, compared with a correlated factor model and a second-order model, showed better fit indexes ($\chi^2 [222]= 961.694$, $p < .001$, CFI= .966, TLI= .958, RMSEA= .053 [.049-.056]). The internal reliability was excellent ($\omega = .94$). The Chilean version of the WHOQOL-BREF is psychometrically sound, allowing to measure this construct reliably and validly in Chilean young adults

Impulsivity-compulsivity axis in the abuse of Information and Communication Technologies (ICT) from the perspective of the Research Domain Criteria Project (RDoC) (pp. 399-415)

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The habit formation model to explain addiction involves the transition from an initial phase in which the prefrontal cortex ceases to control the behavior, to a phase in which control is transferred to the dorsal striatum, progressing towards compulsive consumption. This model, widely supported by empirical evidence, implies that each subject is at a certain point in the impulsivity-compulsivity continuum. Using two questionnaires recommended within the framework of the Research Domain Criteria Project which measure impulsivity and compulsivity, an attempt was made to confirm the existence of such a bipolar axis, applied to the abuse of information and communication technologies (ICT). The results of this study provide empirical support for the existence of this axis. The abuse of ICT seems to have many more compulsive components than impulsive ones, except in the case of video games, which are little related to both concepts. These results have important clinical implications since there are very different therapeutic approaches for impulsivity and compulsive behavior.

Psychometric evidence using SEM and network analysis of the Posttraumatic Growth Inventory in Peruvian adolescents (pp. 417-436)

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Posttraumatic growth is the psychological capacity to perceive positive changes in the face of highly stressful or potentially traumatic events and may be especially useful in buffering their effects in the lives of adolescents. The aim of this study was to evaluate the psychometric properties of the Peruvian adaptation of the Posttraumatic Growth Inventory (PTGI). A total of 2103 adolescents (50.7% male) between 13 and 19 years of age, who were exposed to some highly stressful event in the previous five years, participated in the study. Confirmatory factor analysis, factorial invariance, network analysis and correlation of the PTGI with a measure of well-being were performed. The best parsimonious fit was observed in a 21-item unidimensional model, the PTGI was shown to be gender invariant, and network analysis determined a greater measure of strength centrality in item 2 (appreciation of life). These results indicate that the PTGI is a test with construct validity, invariant, reliable and adequate to evaluate the level of psychological growth in Peruvian adolescents who suffered some stressful event during the previous five years.

Improving the comparability of Brief-COPE results through examination of second-order structures: A study with Spanish adolescents (pp. 437-454)

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The Brief-Coping Orientation to Problems Experienced (Brief-COPE) is a widely used instrument, although with limitations regarding reliability and factorial structure. This study with 611 adolescents examines the Brief-COPE's internal structure, reliability, and convergent validity. Structures tested through confirmatory factor analysis were the original 14 subscales, as well as three second-order structures derived from previous COPE research and from Connor-Smith and Flachsbart's proposal. All the structures examined obtained a good fit. However, internal consistency and convergent validity findings only supported the use of a model in which religion and self-blame constitute independent subscales while the remaining subscales shaped three second-order factors: self-sufficient, socially supported, and disengagement coping. This hierarchical structure reflects a model emphasized by research with adolescents, makes the use of this instrument valuable, and does not prevent the exploration of original subscales with appropriate reliability levels. Consequently, our results constitute a significant step forward in the improvement of the usefulness and comparability of the coping results obtained with the Brief-COPE.

**Multidisciplinary treatment for fibromyalgia and chronic fatigue syndrome:
A systematic review (pp. 455-488)**

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The aims of this systematic review were to analyze and to compare the efficacy of the multidisciplinary treatment (MT) applied to patients with fibromyalgia and chronic fatigue syndrome (CFS). Also, predictors, mediators and moderators of results were examined. An exhaustive literature search was carried out in the databases Medline, PsycInfo, Scopus and Cochrane Library in the period 1990-2018. In total, 31 articles on fibromyalgia and six on CFS were identified. The results showed that in fibromyalgia, MT was more effective than waiting list controls (WLC) and the usual treatment, producing the most consistent improvements in functionality, pain, quality of life and physical fitness. As to CFS, there were fewer benefits than in fibromyalgia, and the MT was only more effective than the WLC, and it mainly decreased the disability. However, the evidence was not enough to confirm the superiority of MT over other active treatments, nor to consolidate the prognostic value of the predictors, mediators and moderators of the reported results.

Life satisfaction and prefrontal symptoms as predictors of the level of dispositional mindfulness in rural women (pp. 489-503)

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In recent years there has been an increase in research on mindfulness as a state or dispositional trait, and on its relationship with different variables pertaining to the health and well-being of the individual. The objective of this study was to analyze the relationship and the predictive character of life satisfaction and prefrontal symptoms in dispositional mindfulness levels in rural women. The participants were 239 women from different rural communities in Spain, between the ages of 17 and 87 years ($M= 56.13$, $SD= 4.98$). The results confirmed that high levels of life satisfaction and low levels of prefrontal symptoms and executive control problems were predictive of a higher level of dispositional mindfulness in the women evaluated. After discussing our findings with their clinical and socio-health implications, we recommend further inquiry into this specific line of research, given the proven benefits of mindfulness for general personal well-being, where it acts as a protective factor for mental, physical and emotional health.