Adaptation and validation of the Questionnaire on Exposure to Violence in young people (pp. 5-23)

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For just over a decade, interpersonal violence has impacted the daily life of the Mexican population, particularly adolescents. With the aim of having an instrument that assesses the perception of violent events in different contexts, the objective was to adapt and validate the "Questionnaire exposure to violence" (CEV), to which was added a group of items related to exposure to violent events through the mass media (TV, social networks, and streaming). The findings show that the CEV has a high psychometric quality in the Mexican adolescent population, and that the inclusion of items related to the perception of the occurrence of violent events through the mass media proved to be useful to evaluate violence on this scale. The model obtained in the confirmatory factor analysis was verified by means of absolute indices (GFI, AGFI, CFI, RMSEA and NFI Delta1), which were above the minimum acceptable, showing two clearly defined factors: the perception of violence in physical contexts and in mass media contexts.

Social appearance anxiety and self-esteem in women: could body mass index have a mediating role? (pp. 25-37)

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Social appearance anxiety has been associated with many concepts, especially body image and self-esteem, and has a very high level of comorbidity. We aimed to examine the relationship between body mass index (BMI), body perception, social appearance anxiety and self-esteem among women, with a particular focus on the possible mediating effect of BMI regarding the relationship between social appearance anxiety and self-esteem. We included 1344 volunteer women in this study. The self-esteem scale scores of women differed significantly according to body image, BMI, and weighing frequency. Social appearance anxiety was found to be inversely associated with self-esteem, and this relationship remained significant when adjusted for BMI as a mediating parameter. As a result, it is expected that improving women's body perception and reducing social appearance anxiety are the foremost interventions to increase the self-esteem of these women.

Construct validity and psychometric properties of the Responses to Positive Affect (RPA) questionnaire (pp. 39-57)

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Previous studies confirm the role of depressive rumination in the exacerbation of negative mood. However, less is known about rumination in relation to positive affect. We present the construct validity and psychometric properties of the Responses to Positive Affect (RAP) questionnaire in a sample of 302 people from the general population (55.2% female), aged 18-68 years (M= 28.6, SD= 12.0). Exploratory and confirmatory factor analyses indicate a two-factor structure: emotion- and person-centered positive rumination (α = .88) and buffering (α = .83), both with adequate configural, metric and scalar invariance by sex. The two factors present adequate convergent, discriminant and incremental validity with constructs related to negative and positive affect. The results are discussed according to the studies reviewed and the RAP is proposed as an assessment instrument in therapeutic procedures that seek to enhance positive affect and psychological well-being.

Validating a brief Empathy Quotient Test with adolescents from Mexico (pp. 59-76)

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Empathy is a skill that enables the identification with and interpretation of others' subjective experiences. The purpose of this study was to validate the Empathy Quotient (EQ) in adolescents in Mexico. A sample of 573 Mexican adolescent students (350 female and 223 male) with an age range of 12-19 years was employed ($M_{\rm age}$ = 14.8 years, SD= 1.96). An exploratory factor analysis (EFA) was carried out which identified two factors, one with 16 items associated with the affective dimension and one with 13 items related to the cognitive dimension (model fit indices: GFI= .984, RMSEA= .034, and RMSR= .072). To evaluate the resultant bifactor model, a confirmatory factor analysis (CFA) was performed, showing good fit indexes (RMSEA= .020, RMSR= .045, CFI= .998, GFI= .988). Regarding internal consistency, we found a McDonald's ω correlation coefficient of= .941 for the affective dimension and ω = .772 for the cognitive dimension, with p< .001. The validation of this empathy instrument will support its use as a clinical research assessment tool in Mexican adolescents.

Subclinical psychopathy and styles of intimate relationships (pp. 77-91) Mónica Guerrero-Molina, Carlos Barbosa-Torres and Juan Manuel Moreno-Manso *University of Extremadura (Spain)*

Different studies show the relationship between subclinical psychopathy and the strategies of distancing and avoidance that prevent the formation of stable and lasting emotional bonds in the couple. The study analyses subclinical psychopathy and the relationship style/love type in a sample of 1289 university students to determine its frequency, as well as the relationship between psychopathy and the relationship style/love type. The Integrated/Subclinical Psychopathy Questionnaire (CUPIS) and the Triangle of Love Scale (TLS) were used. It was found that a significant percentage of these students presents features that characterise subclinical psychopathy. In addition, it was found that the higher the score in psychopathy, the lower the intimacy, passion and commitment in their relationships. Furthermore, subclinical psychopathy was found to be a greater predictor of a lack of intimacy and commitment in intimate relationships between couples. In conclusion, we highlight that, in subclinical psychopathy, there are low patterns of intimacy and commitment in relationships; so these are unlikely to remain stable over time.

Analysis of psychopathological symptoms and aggressive expressive and instrumental behavior as a function of the risk of violence in offenders (pp. 93-109)

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The goal of this research was to identify the most characteristic psychopathological symptomatology and type of aggression (expressive and instrumental) in individuals who presented a higher risk of violence in a sample of offenders. The sample consisted of 285 incarcerated males aged 20 to 67 years (M=34.73, SD=10.34) and it was divided into three groups according to violence risk (high, moderate, and low). The instruments used were the Symptom Checklist-90-R (SCL-90-R), the Instrumental and Expressive Aggression Questionnaire (CAIE) and the Self-Appraisal Questionnaire (SAQ). The results showed that, as violence risk increases, the levels of psychopathological symptomatology increase, as do expressive and instrumental aggressive behaviors, although psychoticism and expressive aggression best predicted belonging to the moderate- and high-risk groups. Therefore, moderate violence risk is sufficient to establish prevention and intervention measures in this population.

Homework assignment and compliance review from a behavioural perspective: the verbal sequences between therapist and client (pp. 111-127)

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Therapeutic (homework) tasks are a characteristic strategy in behavioral psychology to achieve clinical change. The aim of the present study is to determine how behavioural therapists assign therapeutic tasks and review their compliance. Observational methodology was used to analyse the verbal interaction of therapists and clients in 211 recorded sessions (19 complete successful cases) using a validated coding system (SIST-INTER-INSTR). The values for inter- and intrajudge reliability were from good to excellent. The study shows that behavioural psychologists offer motivating verbalisations when assigning therapeutic tasks. During the review of task compliance, therapists frequently provide positive reinforcement when clients report complete compliance with the assigned task but stop the review of tasks when clients report non-compliance or only partial compliance with the task. These sequences provide information about how behavioural therapists provide instructions for therapeutic tasks and review their compliance. This is a first step to study how these verbal sequences favour the establishment of TC and the effectiveness of treatment.

Self-reported psychotic-like experiences: differences by age and associated psychopathology (pp. 129-148)

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This study aims to explore the differences in psychopathological symptoms that may exist in the general adult population with or without psychotic-like experiences (PLEs), depending on the age range. The presence of PLEs, self-reported general psychopathological symptomatology, and different sociodemographic and psychosocial characteristics were assessed in 216 participants without any record of personal psychiatric antecedents. The sample was divided into young adults (18-35 years) and mature adults (36-60 years). The young adults showed a higher expression of PLEs (33.6%). The mature adults with PLEs presented more psychopathological symptoms in the dimensions of hostility-anger, somatization, depression, and anxiety than mature adults without PLEs. Young adults with PLEs showed significantly more symptoms in the same dimensions, and in the obsession-compulsion dimensions, paranoid ideation, and psychoticism, than participants of this age without PLEs. PLEs are more frequent in people between 18-35 years old; however, PLEs can be present in different age ranges and could serve as an alert to high levels of affective and anger-hostility symptoms.

The processes of stress and coping in informal caregivers of people diagnosed on the schizophrenia spectrum. A longitudinal study (pp. 149-163)

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The goal of this study was to analyze the role of stress factors and coping strategies in explaining the burden and depression of family caregivers of people diagnosed with a schizophrenia spectrum disorder through a longitudinal design. An evaluation was made of thirty patients with a diagnosis on the spectrum of schizophrenia and thirty informal caregivers. Participants were assessed at three successive moments: baseline, after 5 months, and after 10 months. A decrease in caregivers' levels of subjective burden across time was found. At longitudinal level, most of the caregivers' coping strategies showed a relevant relationship with subjective burden and depression at some assessment time. In addition, subjective burden and depression showed a higher relationship with the patient's negative symptomatology. At longitudinal level, avoidant and resignation showed a relevant relationship with subjective burden and depression. The changes in the evaluation of the demands that the disorder placed on the caregivers and in their coping strategies suggest the development of a process of adaptation to the disorder by the caregiver.

Relationship between disorganised speech, cognitive functions, and social functioning in people with schizophrenia (pp. 165-178)

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People with schizophrenia exhibit a wide range of cognitive, behavioral, and emotional dysfunctions; among other difficulties, people with schizophrenia show disorganized speech, also called formal thought disorder or discourse disorder. The aim of this work is to analyze and find associations between disorganized speech, attention, cognitive impairment, and their relationship with the severity and social and adaptive functioning of patients with schizophrenia of chronic evolution living in an institution. A descriptive correlational and quantitative explanatory design is carried out with 71 patients diagnosed with chronic schizophrenia with different clinical scales, cognitive assessment scales and social functioning scales. The results show that people with schizophrenia have difficulties in all the areas assessed. Disconnected or disorganized speech is found to correlate positively with cognitive function, clinical severity, and social functioning. In conclusion, several associations between these variables are observed and need to be considered for proper intervention with this population.

Perceived physical self-concept profiles: intention to be physically active and emotional regulation (pp. 179-196)

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The objectives of the study were to identify physical self-concept profiles and examine their role in the intention to be physically active and emotional regulation. A sample of 606 physical activity practitioners (M_{age} = 34.19, SD= 13.05), completed a series of self-report measures that evaluated physical self-concept, the intention to be physically active, and emotional regulation. Cluster analyzes revealed three profiles of physical self-concept. Profile b with relatively high physical self-concept experienced significant differences in intention to be physically active, self-blame, and positive reappraisal. Profile a with low physical self-concept showed significant differences in acceptance, rumination, and catastrophizing. Profile c with a very low physical self-concept revealed significant differences in blaming others. In conclusion, profile b with relatively high physical self-concept and with optimal scores in condition, attractiveness and strength is associated with a higher intention to be physically active and the use of functional emotional regulation strategies.

Enhancement of quality of life in older people through positive reminiscence intervention: a pilot study (pp. 197-215)

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Older age is associated with a higher prevalence of cognitive and affective decline than in the younger population. For this reason, considering the increasing population aging, and with the continuous growth of this demographic, it is necessary to consider better types of interventions to prevent such decline from manifesting. This study measures the effectiveness of the "Positive reminiscence program" (REMPOS), a non-pharmacological therapy that increases life quality in older people, with a pre-post randomized design with control group in three types of aging: healthy aging (n= 24), mild cognitive impairment (n= 22) and Alzheimer's Disease (n= 21). The results of the experimental groups revealed higher cognitive levels, lower depressive symptoms, higher specific positive memories recall, and higher life satisfaction after intervention. This study extends the evidence of effectiveness of positive reminiscence interventions for older adults in other cultural backgrounds and types of aging.