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Family Aided Community Treatment as an intervention for the Treatment of Early Psychosis: A Proof of concept Study

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Abstract

Major psychotic disorders are one of the leading causes of disability worldwide, having severe impacts on the people who suffer from the conditions, their families and society. There is evidence that if these conditions are identified and treated early, the prognosis is improved. The purpose of this study is to produce findings related to the use of year long trial of family aided community treatment (FACT) with individuals who are experiencing a first episode psychosis as defined by the SIPS. Using a proof of concept design with multiple repeated-measure t tests, this study focused on first-episode psychotic disorder participants ($n = 8$), with an average age of 19.6 ($sd = 3.28$) and males comprising 75% of the sample engaged in a family aided community treatment (FACT) protocol in order to examine if psychiatric symptoms scale scores improved post-intervention. The participants were from an Oregon USA sample of the Robert Wood Johnson Foundation funded Early Detection and Intervention the Prevention of Psychosis Program.

Results

Variables	Mean
SIPS P Scale	3.60
Pre	3.93
Post	0.33
SIPS N Scale	1.27
Pre	2.52
Post	1.25
SIPS D Scale	1.81
Pre	2.09
Post	0.28
SIPS G Scale	2.22
Pre	3.28
Post	1.06
PANSS P Scale	1.77
Pre	2.96
Post	1.20
PANSS N Scale	1.00
Pre	2.27
Post	1.27
GFS-Social	1.13
Pre	6.00
Post	7.13
GFS-Role	0.50
Pre	4.13
Post	4.63

Summary

The hypothesis which stated that a year-long family aided community treatment (FACT) intervention would reduce psychiatric symptoms when assessed by the Structured Interview for Prodromal Syndromes (SIPS), the Positive and Negative Symptoms Scale (PANSS), and the Global Functioning Scales in a first episode psychotic disorder sample, is supported. The FACT intervention decreased psychiatric symptom scores in this population. Implications of this study include improved training on early recognition for mental health clinicians and students, implementation of a specific treatment model in community settings, and policy around treatment funding allocation.

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Research Screening and Eligibility of Participants

