

ENGLISH ABSTRACTS ENGLISCHE ZUSAMMENFASSUNGEN

ABSTRACTS

KÁROLY VARGA, SÁRA JEGES & MIKLÓS LOSONCZ (p. 3)

Health Capital in the ‘Cis-Elbanian’ vs. ‘Trans-Elbanian’ Grand Regions: Frame Disputes about Framing Ambiguities and Misframings: The present study forms an operational variation of the task undertaken in the outlook paragraph of the authors’ earlier article to study with the help of the Sense of Coherence (SOC) as a group property, the health and general well-being of the Hungarian national community (in an international comparison). With Hungary being the only Eastern Central European (‘Trans-Elbanian’) country joining the EU-project with the title *Corporate Culture and Regional Embeddednes* (CURE), we Hungarians tried to help achieve this goal by making the following proposal to the researchers of the five Western-European (‘Cis-Elbanian’) countries partaking in the project: the drastically different Health Capital level of the Grand Regions situated on the two sides of the Elbe–Leitha boundary (‘centrum versus semi-periphery’) should be inserted as a control variable into the original research model of the project, which has propounded the hypothesis that the interaction between the organisational culture of the corporations operating in the sample region of the individual countries and the national culture of the respective regions has had an impact on the development of the region. We have presumed that this enormous difference between the Health Capital levels can bring to light the true underlying historical-social-economical impact factors which appear to be ‘cultural’ when approached for the first time. The leadership of the project allowed the Hungarian team to check, beyond the qualitative research design of the project, with the quantitative method of the research, the model variation enriched with a Health Capital variable. The conclusive results thus gained anticipate an affirmation of the results achieved in the original qualitative variation of the project design and may serve as an example for the whole research team to also implement an internationally exact investigation of the effect of the Health Capital as a control variable of the cultural impact in a possible follow up. The present study displays the first, pilot study results of this research undertaking, to be implemented in our country within the frame of the CURE project, and to be transferred into the international comparison if it proves successful. These preliminary results illustrate the interdependency of the cultural dimensions and the Health Capital apprehended in a salutogenic cross section.

Keywords: Health Capital, salutogenesis, frame analysis, regional study, national culture, organisational culture, control variable

LIDIA BERSZÁN (p. 27)

Chances of Coping with Having Disabled Children for Families in Rumania: Most studies deal with the way of how the hardships and stress aroused by the deficiency affect the family, the family relations and roles. However, some families having children with disabilities can face their situation due to their personality resources, their environment or with the help of social services. The article presents the results of a research on the coping strategies of parents with disabled children. The sample consists of 400 Rumanian families who brought up a disabled person aged 0 to 23. The primary intention of the research was to provide as much information as possible about the families having disabled children, based on which it can be explored how they fight against the situation of life changed by the deficiency. The other aim of the research was to explore the situation of the families living with deficiency through examining the risk and resiliency factors, and to investigate how those families can find those supportive possibilities in their immediate circumstances, in the supplies provided by the supply-system and in their own personalities which make it possible for them to stay balanced in spite of the problems. This paper is looking for protective factors and solutions, which are helpful for parents in finding successful coping strategies. It also examines risk factors, which usually lead to a lack of balance in the family life and makes coping difficult.

Keywords: adaptation approach, coping strategies, risk and resiliency factors, criteria of successful coping, the coping profile

ESZTER SZ. KOVÁTS (p. 41)

The Role of Family History References in Supervision: Supervision aims at grouping and processing experiences obtained in a professional context. It provides the client with a unique, personal method to reflexive experience based learning. Its goals are to strengthen the professional personality, and to change the specific professionalism through learning. Supervision, as a common reflection process, is based on the commitment of the supervised person to learning, and the assumption that the supervised person is able to make specific decisions regarding individual steps. In theory, the supervisor has no right to exceed the professional situations brought under supervision by the given person. However, behind some professional problems, difficulties or conflicts (uncertainties of competence, inhibitions or blocks appearing in certain work situations, conflicts with peers or superiors, etc.) there may lie unprocessed threads, which may be tracked to earlier socialisation experiences or even events or incidents in family history. Originating from personal history or the multi-generation history of a family (e.g. family beliefs, fears, stigmatisation experiences, prohibitions, commands, identity experiences, 'messages') these memories often even unconsciously influence the perception and reaction patterns of the supervised, and may lead to the establishment of 'blind spots', and thereby the undifferentiated and uncontrolled coalescence of the personal and professional spheres. We may and should especially react to these if they become implicitly expressed during supervision in the shape of metaphors, symbols, stories, etc. However, while doing so one should definitely avoid the danger of exceeding the limits of supervision, and thereby transforming the process into therapy. An individual and a group supervision process serve to illustrate how it is possible to contribute to the increasing of 'professional self-awareness' and thereby the strengthening of

professional identity by uncovering, increasing awareness of and integrating these personal or family history threads.

Keywords: supervision, individual supervision, group supervision, personal history, family history, learning through experience, professional personality, 'professional self-awareness'

JERZY W. ALEKSANDROWICZ (p. 57)

The History of Polish Psychotherapy During the Socialist Dictatorship: The paper presents the history of Polish psychotherapy from 1945 to 1989. Psychotherapy was developed primarily within the framework of psychiatry, under the influence of trends present in the 'western' world, due to relatively active international scientific contacts and weak political and ideological limitations. Psychotherapists were instructed in different approaches. The equal rights and position of medical doctors and psychologists – members of the Polish Psychiatric Association Psychotherapy Section – and the domination of the scientific approach in psychotherapy were the Polish specificity. In 1989 the Certificate of Psychotherapist, confirming proper professional qualifications, was introduced.

Keywords: psychotherapy, Poland, communism, state socialism, dictatorship, history, retrospect, helping profession, development, psychiatry

BÉLA BUDA, TEODÓRA TOMCSÁNYI, JÁNOS HARMATTA, ROGER CSÁKY-PALLAVICINI & GÁBOR PANETH (p. 67)

Psychotherapy in Hungary During the Socialist Era and the Socialist Dictatorship: This study provides an overview of how psychotherapy's Hungarian representatives tried to safeguard and transmit psychotherapeutic training and practice during the time of socialist dictatorship. At first, even some Soviet ideologists had considered psychoanalysis to be compatible with Marxist ideology. However, over the course of a few years, socialist ideology exerted pressure on psychotherapy's theory, training, and therapeutic practice. This was done initially on an ideological level, but later it increasingly resorted to physical violence as well, both there and through its export to a Hungary occupied by the Soviet army. All this was similar to its stand against the arts and literature. The first thing to appear as a result of this was a denial of the necessity of psychotherapy (stating that psychotherapy was only needed because of 'capitalist market conditions', with even the teaching of psychology being nearly stopped); later anyone could face serious repercussions for belonging to any school of psychotherapy, especially the analytic. It was also a part of the arsenal of those in power to put crucial centres of therapy decisively under the leadership of appropriately aligned neurophysiologists for long periods of time. The state kept these under strict control, and healing was reduced to medication procedures. The authors provide examples of the modest internal and external opportunities that nevertheless arose for prominent representatives of psychotherapy to solve these dilemmas. With the weakening of the dictatorship, the war on psychotherapy also subsided in a relative and inconsistent way. At this point, events in the politics of science were characterised by the degree of loyalty to the Soviet association, who were visibly abusing psychiatry, and the fight to preserve the relative independence of this field of science. The final part of the study touches

upon one or two dilemmas of the heroic age of starting over that surfaced at the time of the political system's change.

Keywords: psychotherapy, Hungary, communism, state socialism, dictatorship, history, retrospect, helping profession, ideological incompatibility, psychoanalysis, therapeutic workshops

JÜRGEN MATZAT (p. 101)

The Present State of Self-Help in Germany – with Special Regard to Addiction Self-Help:

This article presents the self-help scenery in Germany, which is unique in Europe. It deals with the dissemination of self-help groups and organisations, their various ways of proceedings, and their political influence. Different types of self-help groupings are described (12-steps-groups, psychologico-therapeutic talking-groups, and self-help organisations of chronically ill and handicapped persons). Special attention is given to self-help groups of addicted persons. In Germany only a small part of them are Alcoholics Anonymous. Beyond that a variety of other self-help groups devoted to abstinence of their members exist, in many cases attached to welfare organisations of the Catholic or Protestant Church. A specific factor in self-help groups for addicted persons is the possible recovery from the disease, which is not the case in self-help groups of chronically ill and handicapped persons. Finally the article presents some ideas about possible causes for the self-help movement, which developed over the last two or three decades, particularly in highly industrialised countries of Central, Western and Northern Europe. Some milestones along the German way to self-help are mentioned: the important role of research(ers), the support by state's legislation, and finally the obligation of Germany's statutory health insurance to support self-help financially.

Keywords: self-help group, self-help organisation, self-help clearinghouse, addiction, volunteerism, research, legislation