

Abstract

The present thesis presents my main scientific activity accomplished after 2001, when I received the PhD title as well as my academic preoccupations in the last 13 years and in the present.

My research interests have always been closely linked to my academic believes that we must promote the idea of making a difference in our clients' lives. This is one of the main convictions I have and I will continue to do this as long as I will work as an academic.

This is why I organized the Master studies of *Clinical Psychology and Psychological Counseling* in accordance to the requirements of the Romanian Psychologist College, allowing our graduates to become practitioners in the fields of clinical psychology and psychological counseling. In the same time I focused on presenting during the two years of the master studies the main directions in psychotherapy, enabling them to see the connection between theory and practice, diagnoses, assessment and treatment.

The thesis is structured in two main parts: in the first part I described the past accomplishments, while in the second I present the future plans I have on three levels: research, academic and professional.

In the first (main) part of the thesis, I present my scientific accomplishments in terms of publications in journals with international visibility (journals indexed Thompson ISI Web of Science and/or other mainstream databases). I present the findings of my major studies structured in the three major fields of my research interest: 1. health psychology, emphasizing the topics of suicide, stress, age related problems, 2. couple and family related studies and 3. systemic family therapy related topics. After this part I move on to my most recent research interest, namely studies of links between health psychology and family psychology. In this part I present briefly several studies concerned with the psychological changes in spouses and parents of persons diagnosed with diabetes, breast cancer, sterility, tuberculosis and chronic diseases in general. The next chapter reflects my current topic of interest, namely to further continue and see how we can implement therapeutic intervention programs for the above mentioned topics so as to enhance the psychological wellbeing of the ill subjects and their families. In the last chapter of this part I present some teaching methods that can be applied in this field to our master students or in training.

To illustrate the most significant aspects presented in this part of my thesis I added a serial of proofs meant to support my request for obtaining the habilitation certificate. After receiving the doctor title in 2001 with the thesis entitled *Long-term outcome and psycho-intellectual performances of prematurely born babies*, I continued my academic research and I published 5 ISI indexed articles, which had up to now 28 ISI citations, 9 studies published as ISI proceedings, 16 studies indexed in more than three recognized data bases. Also, I coordinated 4 European grants and I was a member in other 5 national and international projects.

The future plan section is structured in 3 parts: scientific/research, professional and academic.

1. Scientific/research level:

From a scientific point of view, I wish to pursue the research areas presented in the previous section, with focus on three main topics:

- a. The effect of chronic diseases (diabetes, cardiac diseases, cancer, tuberculosis, rheumatoid arthritis, etc.), on the spouse and on the family
- b. The effect of a child's illness (diabetes, cancer, etc.) on the parental couple and the family relationships
- c. The effect of physiological (pregnancy, menopause, etc.) or pathological events (sterility, accidents, etc.) on the couple relationship.

This step will be followed by conceiving and implementing intervention programs from the field of systemic family therapy with applicability in the direct benefit of the above mentioned clients/patients.

Social support has been proven to have a protective role against life stress and poor health. The mechanism through which social support acts in this protective way is not explained yet.

The reason for focusing on the impact of chronic illnesses is the fact that chronic diseases are the first causes of death. This is true both in the USA as in Romania. Romania is known to have the highest cardiac morbidity and mortality rate in Europe, as stated by the WHO statistics. USA statistics put cardiovascular disease and cancer as the first and second leading cause of death accounting for 26 % and 22% of all deaths (Kung, Hoyert, Xu & Murphy, 2008). In preventing death from these causes a special attention must be given along with prevention to psychosocial management. Although numerous behavioral risk factors as smoking, unhealthy eating behavior, sedentary lifestyle are well-known, we will emphasize the role of psychological stress as a risk factor for both cardiac diseases and cancer.

In order to assess the family members we will use both quantitative and qualitative methods, due to the fact that qualitative research continues to have more and more importance in health research (Morse, 2010), mostly when considering the facts of social and cultural worlds. Qualitative, interpretative research has made valuable contributions to medical science and has been noted as essential for enhancing clinical knowledge and care (Collingridge & Gantt, 2008). Within clinical psychology, qualitative research has been cited as beneficial for bridging the gap between research and clinical practice, and for developing culturally-competent practices (Silverstein & Auerbach, 2009). We find relevant two out of four aspects underlined by Chamberlain and Murray in 2008, concerning the qualitative approach: examining and highlighting social processes around health and illness and by promoting change within health related contexts.

This is why besides carrying out studies to assess family relationships, level of stress, coping mechanisms in the families where one member is affected by a chronic disease we would like to continue the research by creating intervention programs based on systemic family therapy to enhance the life-quality of all the involved family members, lower their

stress level, improve their communication skills, improve their coping mechanisms in this specific situation they are confronted with.

2. Professional level:

I would like to suggest to the National College of Psychologists a research on national level focusing on the psychological impact on the patient and his family of the major chronic diseases present in Romania: cardiac diseases, cancer, and diabetes.

Besides the research projects mentioned, I would be very interested to implement projects meant to improve the life quality by preventing diabetes, cardiac diseases, for instance by adapting and using the intervention program we have created in the EU project WELNESS – Skills for true wellbeing (2013-2014), which I have coordinated and in which there were 7 partners from 6 partners and which developed materials to reduce the stress level and enhance wellbeing at adult educators and learners. The findings of this study could be adapted and the research extended as to be applicable in families confronted with chronic diseases.

3. Academic level:

I will encourage PhD students to seek joint supervision with foreign PhD coordinators of thesis on this topic in order for them to see the approach that exists at European level towards these most permanent but also current topics of research.

The master students will have the possibility to actively be involved in the research projects as part of their master thesis. The results of the studies will be made available to the master students of the Clinical Psychology and Psychological Counseling program. The intervention sessions will be video-recorded by respecting all the ethical requirements and by having the consent of the patients and the materials will be made available to our master students. The master program is conceived as to focus on health psychology topics and to open the interest of our graduates to continue to study to be a therapist.

In order to further improve the quality of our master studies I will work out a program in English, to be able to have a better international participation both of students and of academics.

The master courses in health psychology and family psychology/ family therapy will be up-dated and published at internationally recognized publishing houses.

The main idea that I hope would emerge after reading my habilitation thesis is that my research profile is that of a psychotherapist focusing on health psychology and family psychology concerning issues with the purpose of linking these two topics in efficient intervention programs, meant to enhance the wellbeing and the life-quality of all those affected: the ill person, its spouse, the parents or the child, so as to achieve systemic results.