Psychological-genetic determinants of mental health of all generations of the family

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Introduction

Psychological stability of the society, national mental health is directly put into dependence on the condition of the family. Genetic mechanisms of the human health expand in the family, which is the focus practically of all aspects of the human vital activity showing its psychological-social and biological nature. Ongoing transformations of the family and features of its functioning in the modern world (“new” families and forms of family structure), observed currently trend to integrative knowledge in the field of mental health (psychology, psychiatry, genetics), use of trans-diagnostic approach in the new methodological contexts of the clinical practice (dimensional criteria, domains, psychological phenomena), undoubted influence of social challenges (liberalization of public morals, gender and ethnic relations, digital technologies and mobility) determine the relevance of interdisciplinary approaches to solving mental health problems on the family-centered principles.

Objective – to study factors, parameters and dynamics of the functioning of the family system at various stages of the ontogenetic cycle of the family of several generations, associated with mental health, form a qualification system of psychological-genetic phenomena within the paradigm of transformation of family functioning for organization of psychological support of the family and creation of effective technologies of the maintenance of public health.

Methods and Materials:

Clinical-genealogical (psychological genealogy) with compilation of genealogies and identification of mental and somatic health of family members; if hereditary diseases suspected, biochemical, cytogenetic methods, molecular-genetic investigations of polymorphisms of candidate genes; psychodiagnostic methods (investigation of emotional, motivational, cognitive traits of family members), investigation of marital, parent-child and intergenerational relations; family diagnostics; methods of mathematical statistics. We investigated 326 children and adolescents aged from 19 months to 18 years including 161 persons from children’ preschool educational institutions and general schools and 271 their parents and other relatives; 165 persons with mental disorders of childhood and 109 their parents; 51 patients with schizophrenic disorders and 36 their relatives aged from 23 to 64 years; 677 healthy persons older than 18 years.

Results:

We propose definitions and diagnostic tools – “Multi-level model of functioning of the family”, “Ontogenetic cycle of the family of several generations”, “Family-genetic crisis”, “Adaptation-Prevention Potential of the family”, “Genetic Passport”, “Passport of Family’s Health”. Differences in emotional expressiveness, development of the intelligence, temperament, satisfaction with relations in the families at various stages of life cycle are revealed.

Families which are not able to have children nevertheless rate their marriage as successful and happy, 56.25% of spouses are satisfied with relations with the partner. In families with children different conditions and possibilities for psychological adaptation of children of the younger preschool age to conditions of socialization are observed. Interrelations of parents and parent-child relations play significant role in the cognitive development of the child of the older preschool age and are the adaptive potential of the schoolchildren. In dysfunctional families the intergenerational transfer of psychological trauma and occurrence of persons with mental health problems are frequently observed.

Psychological-genetic phenomena characterized behavior and adaptation of the individual, the healthy and the suffering from mental illness one, and family system in the conditions of a family-genetic crisis.

Technology of detection 1) identification of the level of mental health of the subject – mental health, psycho-adaptive – psycho-disadaptive state – pre-illness, clinical forms of mental disorders; 2) detection of comorbid states, genetic predisposition; 3) establishment of the stage of the ontogenetic cycle of the family and form of family structure; 4) diagnosis of individual-personality and interpersonal intra-familial and meta-familial relations of the nuclear family of the subject in the conditions of the family genetic crisis; 5) study of intergenerational interactions in the parental and expanded family of the subject; 6) formulation of psychological-genetic status and level of adaptation of subject’s family; program of care; 7) carrying-out interventions within family-genetic prevention and adaptation, psychosocial rehabilitation; 8) dynamic observation and assessment of efficiency of care provision.

Discussion and conclusion:

The technologies of psychological-genetic interventions within family-oriented genetic prevention in the field of mental health are developed. Promising directions are – advancing the ideas of “translational psychology” and creation of the “Clinic of the healthy family”, development of the system of intersectoral support and partnership with the family.