ABSTRACT
Objective: analyzing the scientific production of skills of independent life of individuals in psychological distress. Method: an integrative review, in order to answer the research question "What is the scientific production of the independent living skills of people in psychological distress?" in PubMed and BIREME databases with Descriptors in Health Sciences (DeCS): daily activities, rehabilitation, social adjustment and psychiatric rating scales. The articles were analyzed and presented in a figure. Results: at first were found 27 publications that met the inclusion criteria, all written in English, with all articles published in journals, after refining the search, there were found 13 articles, seven in international literature and five in national. Conclusion: it can still be identified broadly what has been produced in scientific field relating to social functioning and abilities of independent life of individuals with psychological distress. Descriptors: Mental Health; Rehabilitation; Activities of Daily Living, Psychiatric Status Rating Scales.

RESUMO
Objetivo: analisar a produção científica das habilidades de vida independente de sujeitos em sofrimento psíquico. Método: revisão integrativa, com o fim de responder a questão de pesquisa "Qual a produção científica das habilidades de vida independente de pessoas em sofrimento psíquico?" nas bases de dados PubMed e BIREME com os Descriptores em Ciências da Saúde (DeCS): atividades cotidianas, reabilitação, ajustamento social e escalas de graduação psiquiátrica. Os artigos foram analisados e apresentados em uma figura. Resultados: no primeiro momento foram encontradas 27 publicações que atenderam aos critérios de inclusão, todas escritas em inglês, sendo todos artigos publicados em periódicos, após refinar-se a busca foram encontrados 13 artigos, sete na literatura internacional e cinco na nacional. Conclusão: ainda pode identificar de maneira ampla o que vem sendo produzido no meio científico referente ao funcionamento social e habilidades de vida independente de sujeitos com sofrimento psíquico. Descriptors: Saúde Mental; Reabilitação; Atividades de Vida Cotidiana, Escalas de Graduação Psiquiátrica.

RESUMEN
Objetivo: analizar la producción científica de las habilidades de la vida independiente de las personas en los trastornos psicológicos. Método: una revisión integradora, con el fin de responder a la pregunta de investigación "¿Cuál es la producción científica de las habilidades para la vida independiente de las personas en los trastornos psicológicos?" en PubMed y BIREME, con Descriptores en Ciencias de la Salud (DeCS): actividades diarias, la rehabilitación, el ajuste social y escalas de grado psiquiátricas. Los artículos fueron analizados y presentados en una figura. Resultados: en el primer momento fueron encontradas 27 publicaciones que cumplieron los criterios de inclusión, todos escritos en inglés, con todos los artículos publicados en revistas, después de reinar la búsqueda encontraron se 13 artículos, siete en la literatura internacional y cinco en la nacional. Conclusión: todavía podemos identificar en términos generales lo que se ha producido en los medios científicos relacionados con el funcionamiento social y las habilidades para la vida independiente de las personas con trastornos psicológicos. Descriptors: Salud Mental; Rehabilitación; Actividades de la Vida Diaria; Escalas de Grado Psiquiátrica.

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INTRODUCTION

The Psychiatric Reform proposes a substitute care model to internment in asylums, with the expansion of organismic and biological exclusively for a multifactorial approach to mental disorder approach.

This proposed model has as fundamental axes deinstitutionalization and psychosocial rehabilitation, consisting of an ethic of solidarity that facilitates individuals with limitations to everyday duties, arising from severe and persistent mental disorders, as well as increased affective, social and economic contractuality that makes possible the best level of autonomy for everyday life.1

The classical models of Psychosocial Rehabilitation believe that it gives, after remission of symptoms, but the Brazilian experiences of empowerment of extended clinic, understood as the clinical work that aims to subject and disease, and the family context, aiming to produce health and increase the autonomy of the individual, family and community in substitutive care devices in psychosocial care has ensured survival chances through “good care” people in psychological distress.2

Several scales of psychiatric rating have been validated in Brazil in order to identify strengths and weaknesses in substitutive mental health services and the daily life of patients with psychological distress, among them stands out the ILSS-BR - Inventory Skills for Ability on Independent Living.3

The ILSS assesses the autonomy of chronic patients in various areas of social functioning and is an important measurement tool for planning and evaluation of programs related to psychosocial rehabilitation of individuals with psychological distress.4

OBJECTIVE

- Analyze the scientific production skills of independent living of people in psychological distress.

METHODOLOGY

In order to answer the research question << What are the scientific production skills of independent living of people in psychological distress? >> it was held the integrative review with a view that this is an alternative research that proposes seeking and analyzing the related knowledge published a particular topic, in a profound way. This makes available to professionals from different fields of expertise in health to the rapid results that are considered more relevant and thus underlie the decision making or the access conduits, providing critical knowledge.4

There was performed a search on two databases: PubMed and BIREME (Virtual Health Library) intending to identify studies that contribute to characterizing and identifying factors related to social functioning of independent living skills.

As inclusion criteria of the sample, it was held on searching databases mentioned before with the Health Sciences Descriptors Headings (DeCS), namely: daily activities, rehabilitation, social adjustment and psychiatric scales rate. The exclusion criteria, we chose not to analyze publications related to mental health clinic and description of specific psychopathologies. There were considered the analysis of articles published in journals documents.

Certain limits were: adults, with abstracts, studies in humans and in the following languages: Spanish, English, Italian and Portuguese. There were defined these databases because they are the main sources of publications in the field of health.

The revision in databases held in March 2010 and updated in January 2012 resulted in 63 percent and publications, being that 45 articles were found in two separate databases. After reading the abstracts of these studies and in view of the inclusion and exclusion criteria, 136 publications were excluded from the study. Thus, there were analyzed 27 publications in full.

At the end of reading the 27 articles in full, it was found that only eight had results that responded to the purpose of this article. Again refined the search, and was taken as strategy include the words ILSS and independent living skills in all fields, in addition to the aforementioned descriptors. Thus, we found five consistent Articles This paper proposes and came to data analysis.

Data analysis occurred in two stages: first we identified the issues contained in the summary of each article, which were grouped into an instrument constructed for this purpose, containing the location of publication, year, country, study type, goals, methodology and results; and in the second step, we performed a thorough reading of the articles in their entirety in order to extract the data for construction of the article in question.

DISCUSSION

The following are the data found, first organized in Table 1, in which one can view the publications relating to the proposed theme.
<table>
<thead>
<tr>
<th>Title</th>
<th>Author</th>
<th>Magazine</th>
<th>Year</th>
<th>Country</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Significante funcional do reconhecimento de afeto preservado na esquizofrenia.</td>
<td>Fiszdon JM; Johannesen JK.</td>
<td>Psychiatric Res.</td>
<td>2010</td>
<td>EUA</td>
<td>PUBMED</td>
</tr>
<tr>
<td>Atividades diárias, cognição e comunidade funcionamento em pessoas com esquizofrenia.</td>
<td>Aubin G; Gélinas I; Rainville Chapparo C.</td>
<td>Schizophrenia Research</td>
<td>2009</td>
<td>Canada</td>
<td>PUBMED</td>
</tr>
<tr>
<td>Evaluation of the skills of independent living and social behavior of psychiatric patients discharged,</td>
<td>Vidal CEL; Gontijo ECDM; Bandeira MB.</td>
<td>Revista Psiquiatria</td>
<td>2007</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Long- stay patients in a psychiatric hospital in southern Brazil.</td>
<td>Fleck MPA; Wagner L; Wagner M; Dias M.</td>
<td>Revista de Saúde Pública</td>
<td>2007</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Autonomy of long-stay psychiatric inpatients.</td>
<td>Wagner LC; Fleck MPA; Wagner M; Dias, MG.</td>
<td>Revista de Saúde Pública</td>
<td>2006</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Evaluations of social disablement, psychiatric symptoms and autonomy in long- stay psychiatric patients.</td>
<td>Abelha L; Munoz MD; Gonçalves S; Fagundes P; Barsbosa DR; Legay LF; Giovanni L Levy E; Shefler G; Loewenthal Umansky R; Bar GHL; Pervoliotis Granholm Patterson TL.</td>
<td>Revista Psiquiatria Clinica</td>
<td>2006</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Characteristics of schizophrenia patients and staff rejection in community mental health hostels.</td>
<td>Isr J Psychiatric Relat Sci</td>
<td>Schizophr Res.</td>
<td>2004</td>
<td>USA</td>
<td>PUBMED</td>
</tr>
<tr>
<td>Psychosocial functioning on the Independent Living Skills Survey in older outpatients with schizophrenia.</td>
<td>Lima LA; Bandeira M; Gonçalves S.</td>
<td>Jornal Brasileiro de Psiquiatria</td>
<td>2003</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Transcultural validation of independent living skills inventory for psychiatric patients.</td>
<td>Bandaire, M; Lima, La; Gonçalves, S.</td>
<td>Revista Psiquiatria Clinica</td>
<td>2003</td>
<td>Brazil</td>
<td>BIREME</td>
</tr>
<tr>
<td>Psychometric qualities in the role of independent living skills scale of psychiatric patients.</td>
<td>Bystritsky Liberman RP; Hwang S; Wallace CJ; Yapnik K; Maindment K; Saxena S.</td>
<td>Depression and Anxiety</td>
<td>2001</td>
<td>USA</td>
<td>PUBMED/BIREME</td>
</tr>
<tr>
<td>Social functioning and quality of life comparisons between obsessive-compulsive and schizophrenic disorders.</td>
<td>Wallace Liberman RP; Tauber R.</td>
<td>Schizophrenia Bulletin</td>
<td>2000</td>
<td>USA</td>
<td>PUBMED</td>
</tr>
<tr>
<td>Assessment of independent living skills for psychotic patients. Further validity and reliability.</td>
<td>Wallace CJ.</td>
<td>Schizophr Bull</td>
<td>1986</td>
<td>USA</td>
<td>PUBMED</td>
</tr>
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</table>

Figure 1. Scientific publications found in the database PUBMED and BIREME on scientific literature regarding factors that interfere in the independent living skills among network users of psychosocial care, according to the characterization of the title, journal, year, country and source.

All titles are scientific journal articles, found in national and international databases. From these publications were found in the PUBMED database, six of them on the basis of BIREME four of them and the other three remaining publications were found in both data bases. It is noteworthy that all of them are of quantitative approach.

The results found between national and international studies indicate as a matter of priority conducting validation studies scale in different places and use studies of the ILSS both to evaluate through cross-sectional studies as follow-up studies, especially among people who lived through the exclusion process at the asylum model and in another moment living processes of integration or reintegration.

By reading the full-text of this review, by similarity of content, these were grouped into two themes, namely: Instrument Construction
Skills Independent Living and Independent Living Skills in Subjects with Psychic Suffering.

♦ Construction of the Instrument for Independent Living Skills

In 1986 Wallace conducted a search about the instruments that assess the functional life of mentally ill individuals. Five instruments were reviewed, as its main characteristics: areas of assessment and evaluation methods.

After this analysis, the author found that none of the evaluated instruments had adequate applicability in terms of functional life skills, and the tools evaluated had a limited amount of data to assess rehabilitative practices because each instrument evaluated a specific area of everyday life.

These instruments have proved useful to describing the characteristics of subjects and evaluating treatments, but would still be relevant tools to assess different areas in daily life such as contribution to rehabilitation programs.6

In this article the author cites the above developed by ILSS (Wallace Kochanowicz and Wallace, 1985), this instrument that provides a detailed analysis of life in chronically mentally ill community, evaluating nine areas: eating habits, hygiene, household chores, food preparation, maintenance of health, economic capabilities, use of public transport, leisure skills and job search activities, as defined in 112 items, and measured the level to which each behavior is a problem (it’s never a problem, it is sometimes a problem, it is often a problem, and it is always a problem). We evaluated the internal consistency and reliability of this instrument and this was validated in 1986.

In 2000 there was tested an Inventory independent Living Skills (ILSS) in two versions, applied to an informant and self-administered. These versions showed satisfactory characteristics as the internal consistency, stability, reliability, sensitivity to the effects of skills and validity in test and retest. This scale also had a French version, which was applied to 145 patients (n = 145) psychotics who were living in the community, and with the exception of the employment domain, all domains showed good psychometric qualities.6

In Brazil this instrument has also been validated in 2003 due to lack of validated measurement instruments in Brazil to evaluate the autonomy of psychiatric patients.3

In the Brazilian version of this instrument is in a scale of Likert of 5 points (never, sometimes, frequently, most often and always) to identify how often the subject performed the daily activities necessary for independent functioning in community in nine areas, namely: food, personal care, household activities, preparation and storage of food, health, leisure, transport and employment.

In ILSS - BR some items were deleted because they did not fit our reality was even verified the construct validity, discriminant and internal consistency of the instrument.

The Survey of Independent Living Skills showed up with psychometric qualities of satisfactory validity and reliability, and significant correlation between the scores of the test and retest, and temporal stability, thus being able to assess the skills of independent living in the same areas of daily activities of the original version.7

The authors cited above also identified the ILSS-BR as an important measurement tool for planning and evaluation of related social reintegration of people suffering psychic programs, as well as a method of providing pertinent to the evaluation of mental health services information.

♦ Independent Living Skills of Subjects in Psychic Suffering

International studies that assessed social functioning through scales, mainly ILSS were used mostly among individuals in psychological distress related to schizophrenia, and given the results obtained in the performance of independent living skills to performance achieved by neurocognitive tests.

Another study sample was with 104 patients with schizophrenia (n = 104), 48 patients with affective commitment and 56 individuals with lesser level of impairment in affective recognition, which established the following inclusion criteria: patients with psychiatric diagnosis among 18 to 65 years old, without any hearing or visual impairment and / or mental retardation.7

Another author used the ILSS to measure daily activities, cognition and functioning in the community of people with schizophrenia, treated of a transversal study of eighty-two (n = 82) individuals and aimed to test the hypothesis that limitations in performance of daily activities adversely affect the social functioning of these subjects.8

The prevalence in the skills of independent living of those subjects was presented in the results, and through these data is concluded that rehabilitation interventions should consider possibilities to aid these people in their social functioning in order to reduce the difficulties encountered by persons living in the community.8
Rodrigues CGSS, Jardim VMR, Kantorski LP et al.

Another study found in the international literature, the sample consisted of 60 schizophrenic patients (n = 60) diagnosed according to DSM-IV. Of these 47% were men and were taking antipsychotic medications, and most of these subjects (n = 55) were admitted to a rehabilitation center. Besides the evaluation of ILSS scale, subjects underwent neurocognitive testings.8

The results were compared to the ILSS to the global scores of other instruments (UPSA - Assessment of social functioning, BACS - Measures of Cognition) and demonstrated through this skill independently from the evaluation of ILSS scale, subjects underwent neurocognitive testings.8

The main features of these subjects, identified in this study were: low level of schooling with residents, an average age of 41 years old, spent 20% of their life interned in psychiatric institutions and made use of atypical antipsychotic. As the skills for independent living, the findings of this study were: performance below the overall score in the domains: domestic activities, job search and health and these performances were related to older individuals.10

There were also conducted researches to evaluate the independent functioning of elderly psychotic patients using the Inventory of Independent Living Skills with the self-administered version. The sample consisted of 57 elderly patients with schizophrenia (n = 57) and 40 subjects without psychiatric disorders (n = 40).11

The ILSS in this study was shown to be sensitive to indicate functional impairment in the elderly, as well as evaluating rehabilitation programs. As the independent living skills coefficient for each functional area was compared to the overall scores 6, with the following findings: 0.79 hygiene, personal care 0.52, 0.56 food preparation, health 0.49, 0.56 money management, transport 0.71, 0.48 and 0.66 leisure employment. Thus overall scores compared to the original version of the instrument, all results showed to be significantly worse.

Some sub-items could not be evaluated in the fields of food preparation and personal care because the subjects did not have the opportunity to accomplish it, as the staff and carers who carry out the tasks. Although this study was related to the characteristics of positive and negative symptoms of schizophrenia with poor performance on the skills, but no consistent correlation was found.11

Among the studies found in the literature, is also noted for the study in which social functioning and quality of life were compared between subjects with different disorders: schizophrenia (n = 68) and Obsessive Compulsive Disorder (n = 31). The authors of this study had the assumption that the problems cited above lead to deficits in social functioning, interferes with quality of life and psychological distress.12

The score obtained in ILSS of the study described above, was similar for the two study groups before treatment, during treatment and diagnosed Obsessive Compulsive Disorder subjects showed the performance skills significantly higher than those diagnosed with schizophrenia independent living.

Besides the ILSS scales used to identify other aspects that influence the behavior and social functioning of these subjects as MRA (Measures Recognition of Affection), MMMAA (Proxy Measures of operation), SSPA (Performance evaluation of social skills) and beyond that were neurocognitive tests performed. The main findings were that there are relationships in the averages obtained in the scales with the variables age, education, gender, but no relationship with ethnicity and marital status, and that the lower the cognitive deficit and there is greater recognition of affect in performance skills independent living, functioning and performance of social skills.12

The study presented above also shows the averages found in each field of the ILSS between people diagnosed with OCD and schizophrenia respectively, namely: transport (3.05, 2.79), health (3.12, 2.79), household activities (2.77, 2.85), employment (1.89, 1.46), food (3.5, 3.28), food preparation (3.4, 3.3), leisure (1.93, 1.89), money management (3.18, 2.79), global score (3.70).

In this study one can visualize the averages found in each field of the ILSS, demonstrating that the individuals studied presented a performance to regulate the very good performance of independent life skills. In national studies, we assessed the independent living skills and social behavior of patients discharged psychiatric patients. This study had...
a sample of 75 chronic patients (n = 75) in the Sanitarium Barbacena and of CHPB (Belo Horizonte - Minas Gerais - Brazil) who were in the process of medical discharge.\textsuperscript{13}

Two scales were used in this study: Assessment scale of social behavior (SBS) and Inventory of Independent Living Skills (ILSS). The main findings were: predominance of men (58.7%) aged 31-88 years old, average length of stay 2-64 years between diagnoses stood him from schizophrenia and other psychotic disorders (54, 6%). As the skills of independent living individuals showed the limitations in the performance before the discharge, showing significant improvements in most subscales after two years living in the community, the employment domain was not assessed due to lack of performance in this area.

Still, in Brazil, a study in Porto Alegre with 586 patients (n = 586) hospitalized long term was found. Besides ILSS four other instruments were used: WHOQOLBref (questionnaire on quality of life, used to assess four domains, namely: psychological, psychic, social, relational), Brief Psychiatric Rating Scale (BPRS) questionnaire to assess the level of physical dependence (LPD) and Social Behavior Scale (SBS).\textsuperscript{14}

The results for the independent living skills they demonstrated in the fields related to leisure, money, employment, transportation, and housework and food preparation have shown that over 70% of subjects had difficulties in these performances of moderate to severe.\textsuperscript{14}

In a cross-sectional study as part of a project to evaluate the process of psychiatric reform in Brazil in a Psychiatric Hospital of Porto Alegre (Southern Brazil). 584 comprised the sample (n = 584) internal for over a year at that hospital. The Inventory of independent living skills (ILSS - BR) was applied to evaluate the frequency and performance of daily activities necessary to operate independently in the community.\textsuperscript{15}

The results of this study demonstrated that most individuals had great difficulty in autonomy, and that refers to the skills of independent living unsatisfactory medium was related to areas: leisure, employment and money management, and satisfactory means in health fields, food and personal care.\textsuperscript{15}

From the results, it can be seen that national studies, present in more detail the skills of independent subject in psychic life and suffering that these studies were performed on individuals in the deinstitutionalization process much with the view to assessing the impact of substitute services in the lives of individuals in psychological distress.

In the international literature, the Inventory of Independent Living Skills was used as a measure of association between social functioning and other measurement standards as cognitive, characterization of specific symptoms and disorders, and moreover as evaluation measure of autonomy of people living specifically in community.

**FINAL REMARKS**

During the analysis of the articles participants in this integrative literature review, one can see broadly what has been produced relating to the skills of independent living individuals in psychological distress, as well as identify measurement instruments are constructed and validated.

By searching in databases through the articles found, it was observed that the international literature there is a relative distribution of publications in the U.S. and Brazilian literature, show up studies in southern Brazil. Therefore, the data analysis in this study, its results are exposed and can be used as a source of information to reflect on the relevance of using the ILSS as a means of measurement for assessment of independent living skills of individuals in psychological distress and how to reflect on the look waived the condition of life of these subjects.

Yet it is worth considering that each society understands differently madness and being crazy, and that promoted by the Psychiatric Reform crazy look even need to break many barriers proposed by the traditional psychiatric model based on remission of symptoms and cognitive behavioral training.

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Rodrigues CGSS, Jardim VMR, Kantorski LP et al.

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