

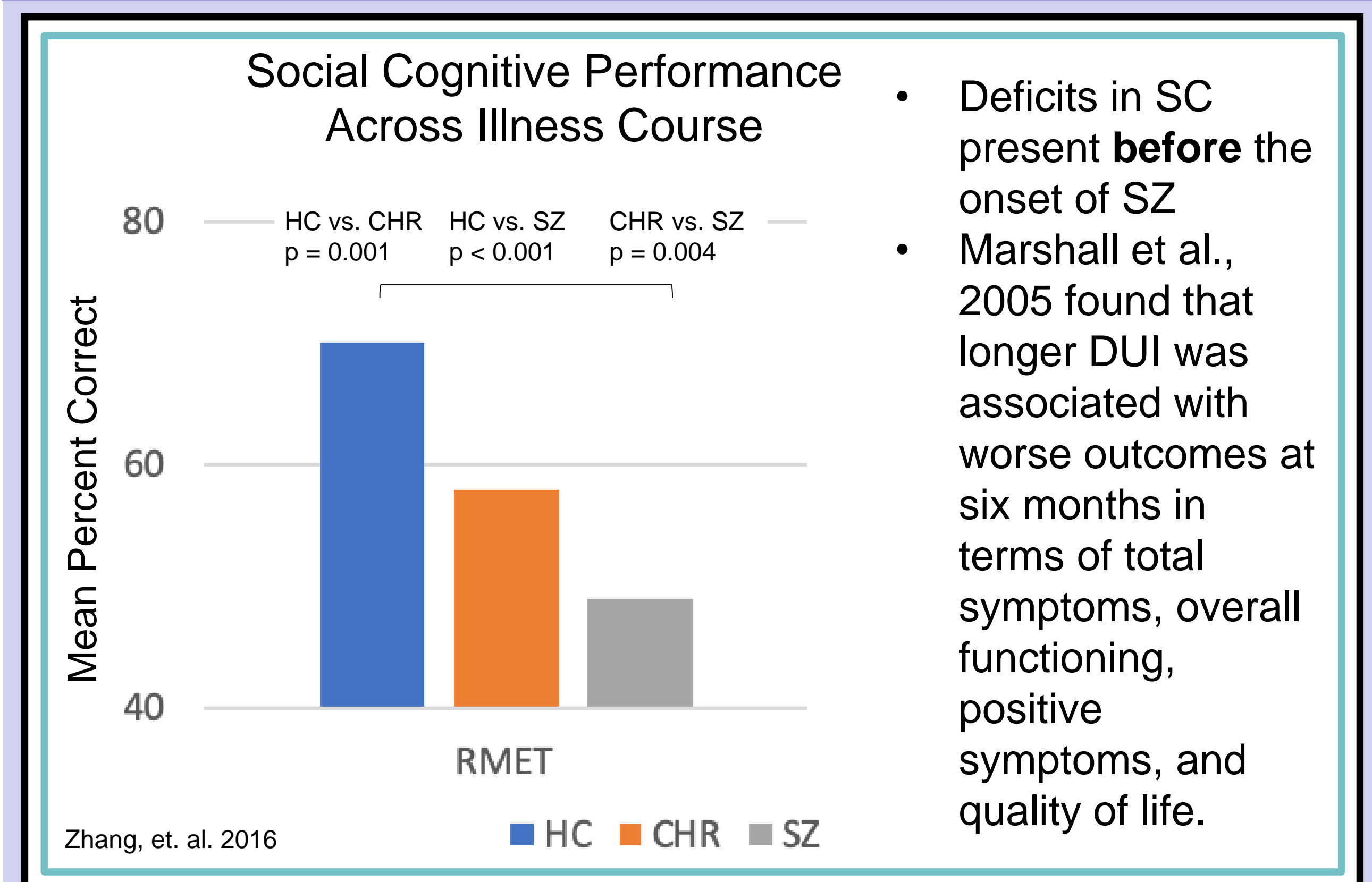
BACKGROUND

- Individuals with a longer duration of untreated psychiatric illness (DUI), particularly those with schizophrenia and those at-risk (AR) for the disorder, demonstrate **more severe symptomatology** and **dysfunctional outcomes**, such as isolation and disability.
- As such, early intervention is *critical* to mitigate the risk of conversion to psychosis and/or enhance outcomes.
- In AR, deficits in **social cognition (SC)** have been associated with a negative illness course, which may be mediated by prosocial **help-seeking** attitudes and actions.

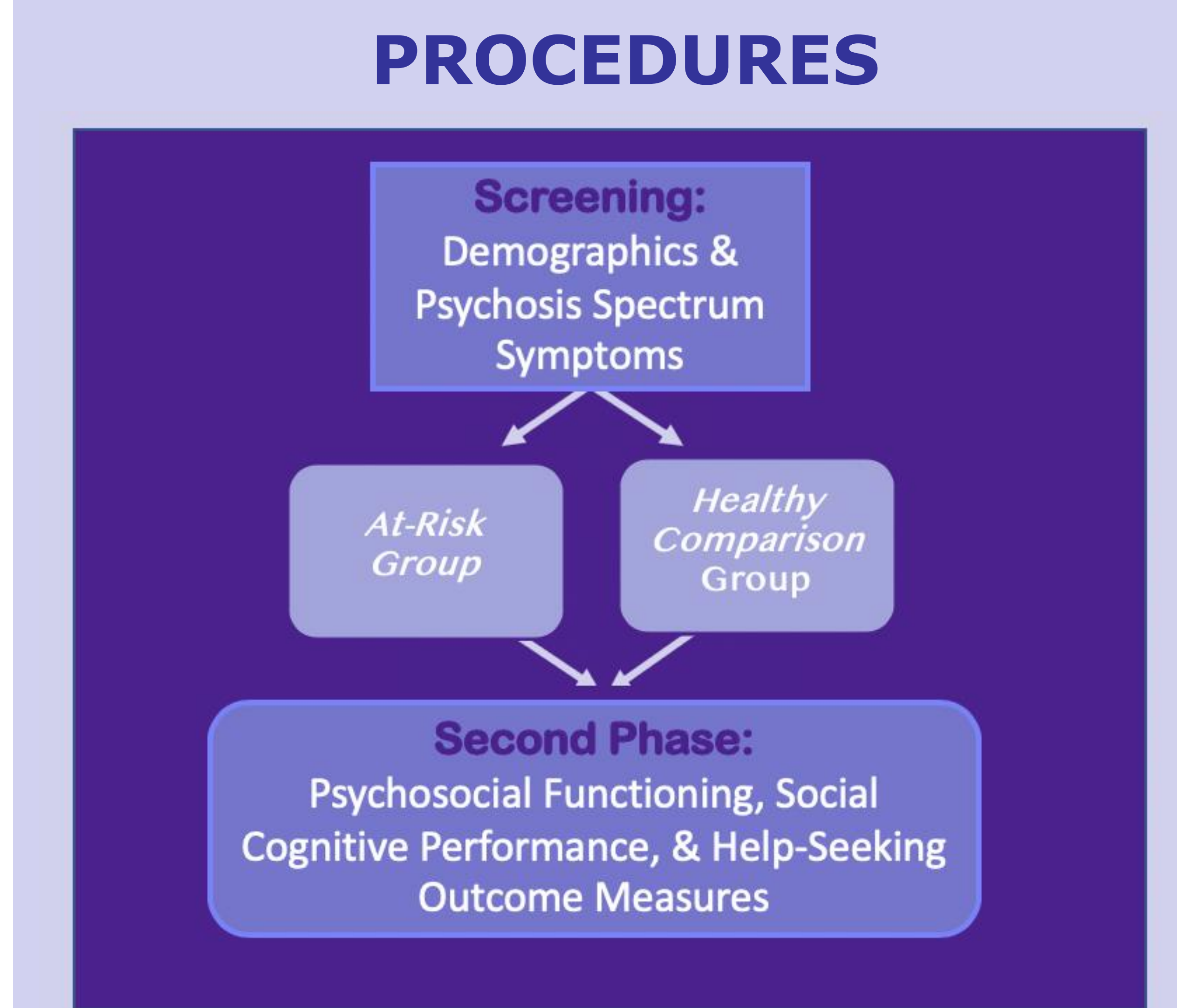
Study AIM

Examine social cognitive predictors of help-seeking in an at-risk (AR) group compared to healthy comparisons (HC).

Social Cognition in AR and SZ



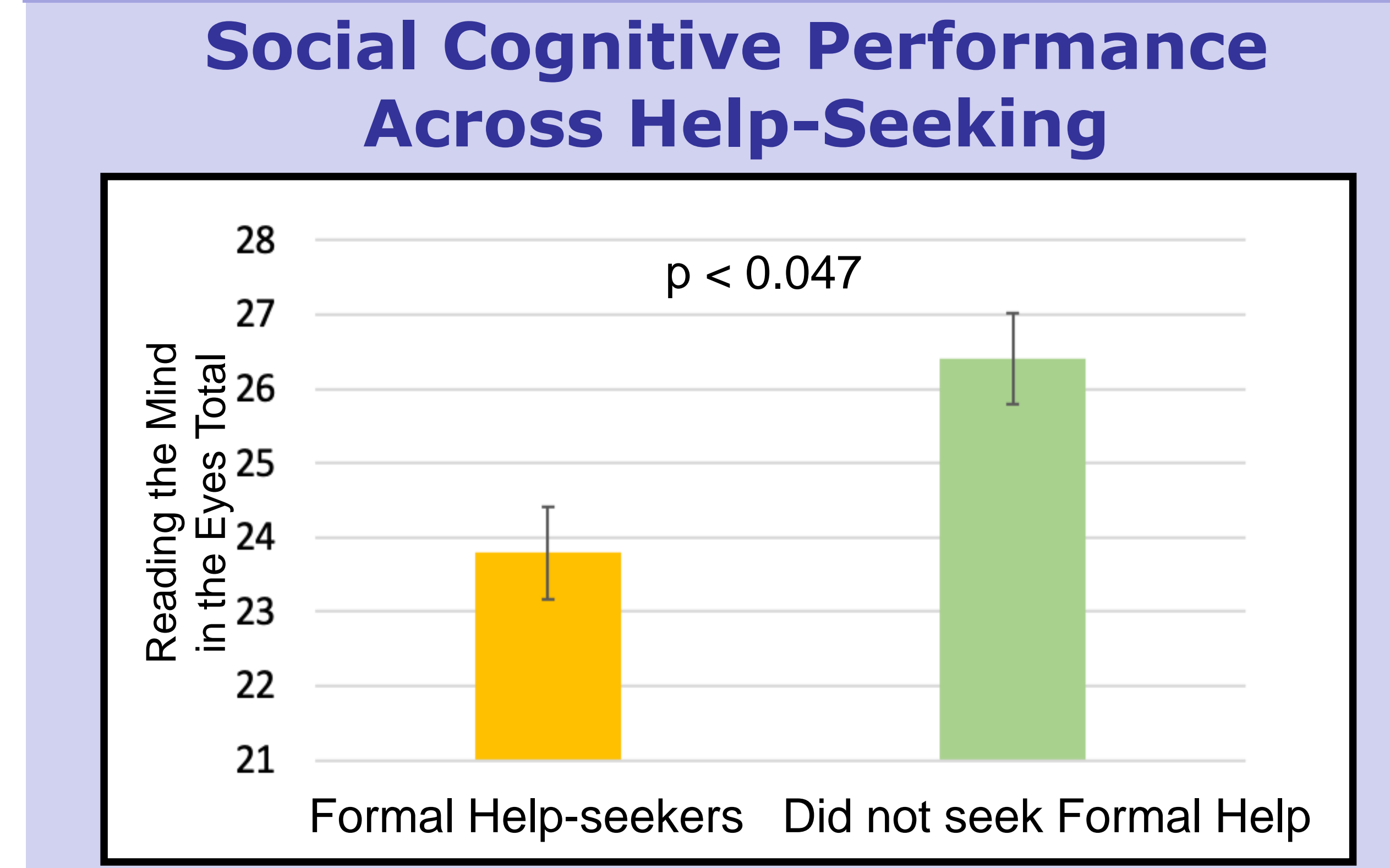
METHODS



SOCIAL COGNITIVE MEASURES

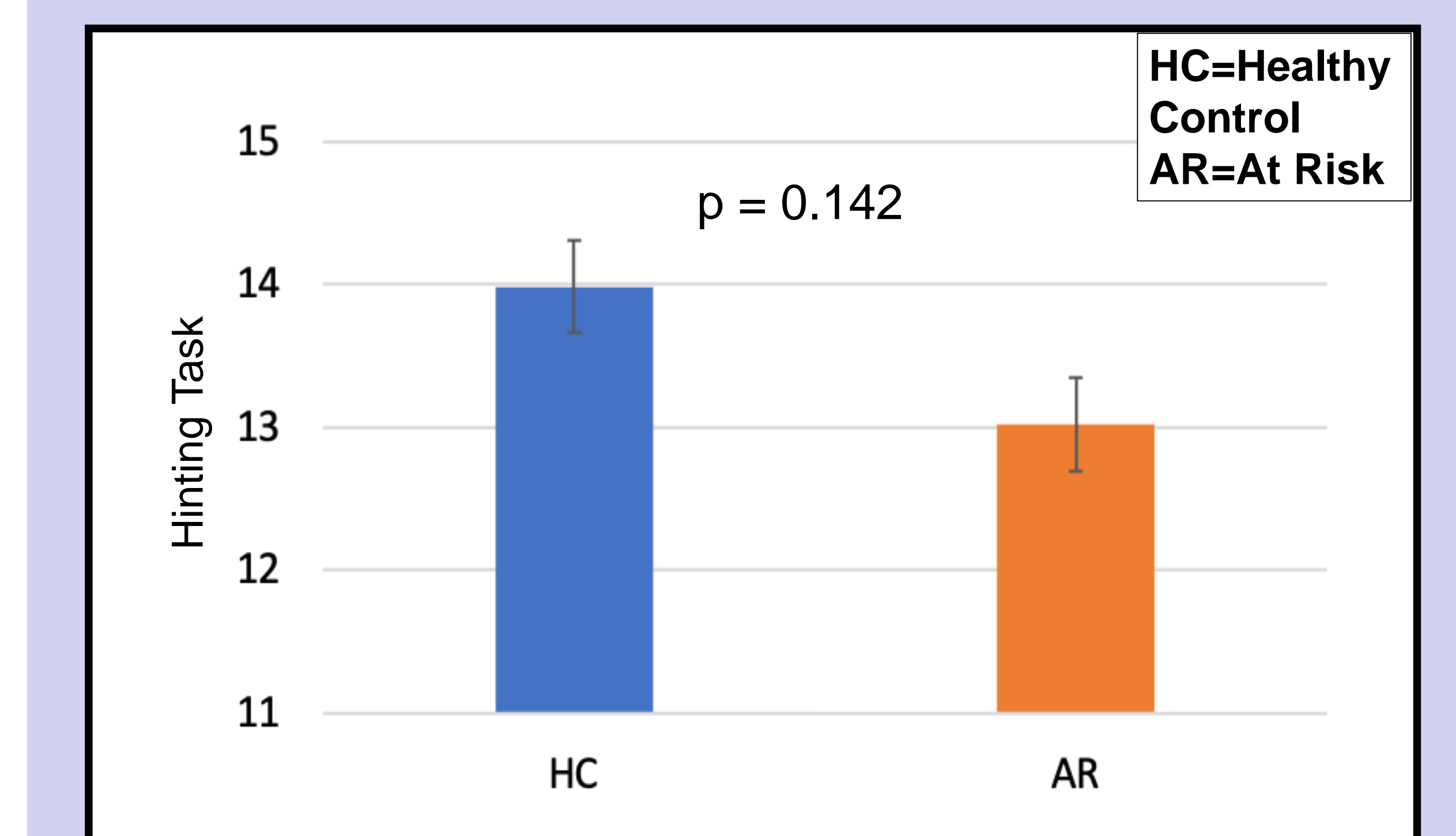


RESULTS



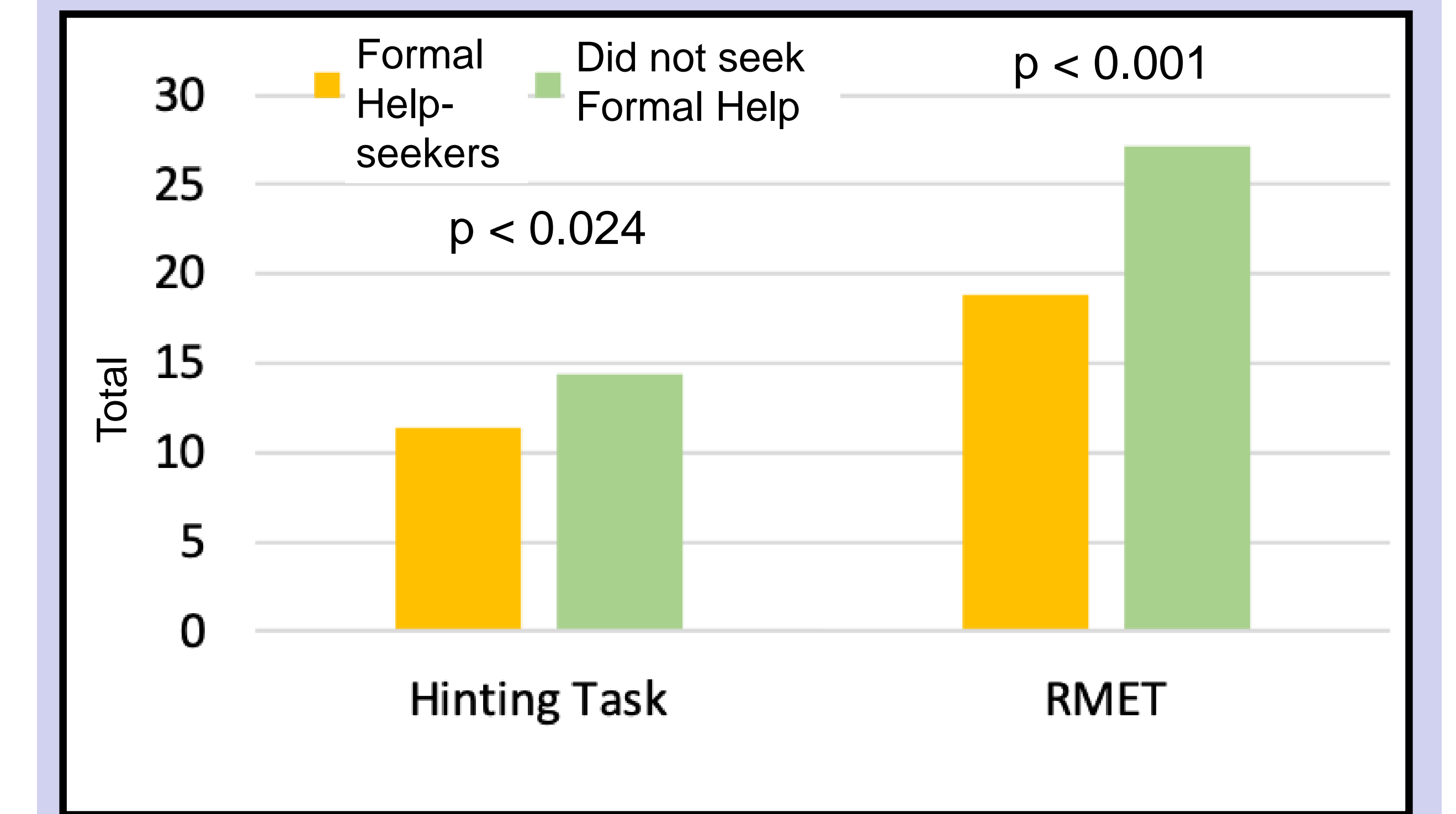
Formal help-seekers had **worse** performance on Eyes than non/informal-help-seekers.

Social Cognitive Performance Across Groups



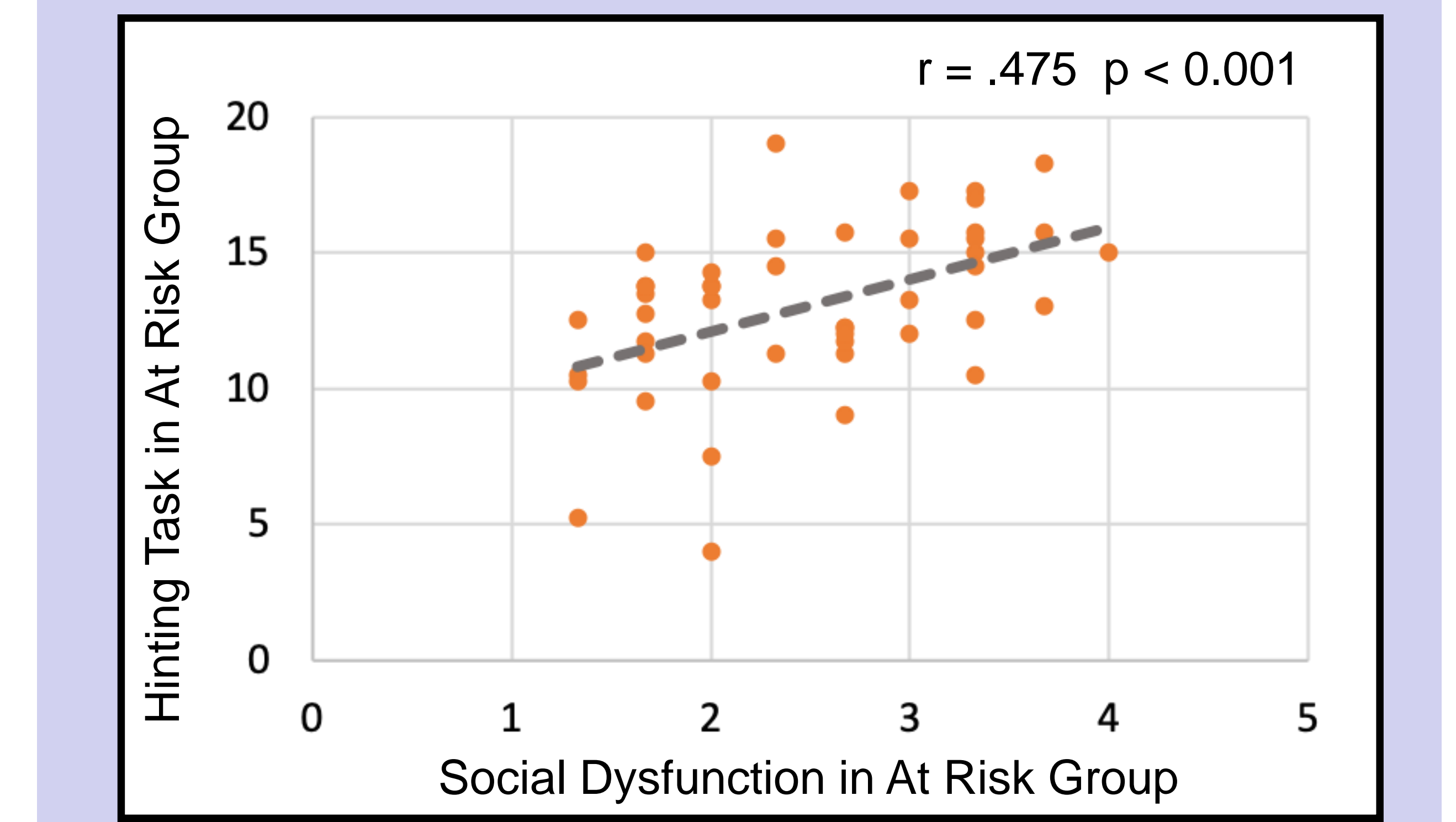
Though not significant, AR performed worse than HC, replicating trends from previous research.

Social Cognitive Performance in Healthy Comparisons



Within the HC group, those who sought formal help recently, had **worse** performances on the Eyes and Hinting Task.

Social Cognitive Performance and Social Dysfunction in At Risk



HT performance associated with social dysfunction.

CONCLUSIONS

- Social cognition is *inversely* associated with seeking formal or professional help for personal and emotional problems.
- AR participants with stronger performances on the Hinting Task paradoxically reported *more* social dysfunction.
- Difficulties with social cognition may facilitate seeking professional help over the utilization of informal social support.