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**SOCIAL SKILLS TRAINING AND COGNITIVE TRAINING: ARE THEY EFFICACY TO REACH SOCIAL COMPETENCE AND COGNITIVE ABILITIES?**

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The majority of data on long term interventions on social disabilities are shown in international experiences for systematized models which are mainly cognitive-behavioural informed. Few dates are related to the experiences carried out in Italy after the changes in the psychiatric services.

Emerging evidences demonstrated a relationship between cognitive deficits and social disability in patients with schizophrenia; currently they are considered an important target of both pharmacological and psychological (in particular, Cognitive Trainings, CT) treatments of these patients. The aim is to demonstrate the efficacy of Social Skills Training and Cognitive Training to achieve social competence, cognitive abilities and reduce vulnerability of patients with schizophrenia. Patients with schizophrenia can clearly improve their social competence with social skills training and cognitive remediation, which may translate into a more adaptive functioning in the community.

Thirty adult inpatients (from 18 to 55 years of age) with ICD-10-based diagnoses of schizophrenia were randomly assigned to three different groups: active intervention from 30 months (IPT-a group); active intervention from 18 months (IPT-b group); and treatment as usual (control group). Outcome measures were cognition (ENB-2) and social skills assessment (Valutazione Abilità Sociali) of five sub unit.

Cognitive behavior therapy may benefit the large number of patients who continue to experience disabling psychotic symptoms despite optimal pharmacological treatment. The results of studies investigating the efficacy of TC and SST are not univocal, probably due to differences in the implementation of the programs and the heterogeneity of participants.