

From the Editors

The end of January brought a very lively discussion in Poland about the approach to historical politics and the shaping of historical memory. The motive behind this difficult discussion is the approach to evil and crime in the painful history of our nation. This issue must arouse reflection of psychiatrists – in our everyday work we encounter all dimensions of humanity: we meet a man with his greatness, heroism, the ability to sacrifice up to the life sacrifice, but we also see the fall, contempt, hatred, we witness defeat in the face of tearing emotions and passions. We face with humility and astonishment this thin border dividing sublimity and meanness, courage and fear, greatness and shallowness, and finally good and evil. We are aware that, as Zimbardo wrote, “... *Every act that was ever made by a man, no matter how terrible, could be committed by us – under good or bad situational pressure. This knowledge does not justify evil. Rather, it democratizes it*” [1]. Accompanying people, we sometimes help them regain their selves: their dignity, their identity, their inner strength. We know that a difficult and painful process is needed to gain insight, to be truthful to oneself and to act in truth. A disgraceful act does not negate a man, on the contrary – the willingness to know one’s own dark side, to name an evil by its name testifies to bravery and the dominance of good, encourages optimism and evokes respect. We, psychiatrists and psychotherapists, understand this very well in an individual context. We also know that the same truths apply to society, the nation and the so-called collective memory.

A negative attitude toward the Other, stigmatization and discrimination against the mentally ill is an undoubted evil that we face every day. Unfortunately, throughout much of human history, mental illness was a stigma, people affected by it raised fear, were misunderstood, isolated, treated worse than the lepers. This topic periodically makes its way back in our magazine – Babicki et al. deals with it in the current issue. Recently, Suwalska et al. have dealt with the problem of stigmatization due to depression among medical students [2, 3], while Kochański and Cechnicki have made a kind of “examination of conscience” of psychiatrists, examining their attitudes toward the mentally ill. It has been revealed that the examined psychiatrists, despite their education and professional mission, present similar stigmatizing attitudes toward people suffering from mental illness as the general population and they participate in the process of stigmatization [4].

Violent and aggressive behavior, and more often self-aggressive one, including suicide, may be dramatic consequences of illness. Several articles in the current issue are devoted to these problems. It is worth recalling an interesting paper written by Rodziński et al. on suicidal ideations in the light of various suicidal models [5] as well as an extremely important article on suicidal behaviors among young Europeans [6]. Aggressive and self-aggressive behaviors quite commonly accompany borderline personality disorder, impairing the functioning of patients. Mosiołek et al. write about the level of functioning in this group of patients. Here we also recommend to read an article on the relationship between borderline personality disorder and trauma published in Archives of Psychiatry and Psychotherapy [7].

In turn, Religioni et al. deal with an important issue related to psychooncology. The mental state of patients treated for various types of cancer undoubtedly has a significant impact on the quality of life, motivation and power to fight the disease. Therefore, the cooperation between oncologists and psychologists, psychotherapists as well as psychiatrists plays an important role. In our journal, we return to these issues from time to time (e.g., an article on the quality of life in women with breast cancer [8]). Whereas an interesting paper on the possibility of applying art therapy in psychooncology was published last year in Archives of Psychiatry and Psychotherapy [9].

The team of the Krakow Chair of Psychotherapy presented the results of their research on the effectiveness of short-term comprehensive psychodynamic psychotherapy. This is another analysis based on many years of experience in conducting group psychotherapy in this formula [10–11]. Other centers also deal with similar issues, as recently published in Psychiatria Polska [12].

Of course, there is no good, effective treatment without proper organization of psychiatric care. That is why we also return to this issue from time to time. In the current issue, we recommend an article written by Lisiecka-Bielanowicz et al., whereas in the previous issues – article written by Chojnowski and Załuska on psychiatric wards in general hospitals [13], and article by Heitzman and Markiewicz on problems of financing forensic psychiatry [14].

The above-mentioned topics do not cover all the aspects that the Reader will find in the first issue of *Psychiatria Polska* in this year. We hope that an interesting reading will encourage everyone to read our journal regularly and to cite articles in their publications!

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