

SCHIZOPHRENIA

A factsheet for Journalists

Schizophrenia is a serious and lifelong neurodevelopmental disorder affects how a person thinks, feels, and behaves. People with schizophrenia experience delusions, hallucinations, disorganised speech or behavior, and impaired cognitive ability. They may hear voices or see things that aren't there. They may believe other people are reading their minds, controlling their thoughts, or plotting to harm them. These behaviors can be upsetting to people with the illness and make them withdrawn or extremely agitated.

People with schizophrenia may cope with symptoms throughout their lives, but treatment helps many to recover sufficiently and pursue their life goals. The signs and symptoms of schizophrenia usually appear between ages 16 and 30.

Positive symptoms are additional behaviors not generally seen in healthy people and include:

- Hallucinations: When a person sees, hears, smells, tastes, or feels things that are not real. Hearing voices is common for people with schizophrenia.
- Delusions: When a person believes things that are not true.
 For example, a person may believe

that people on the radio and television are talking directly to him or her. Sometimes people who have delusions may believe that they are in danger or that others are trying to hurt them.

- Thought disorders: When a person has ways of thinking that are odd or illogical. People with thought disorders may have trouble organising their thoughts. Sometimes a person will stop talking in the middle of a thought or make up words that have no meaning.
- Movement disorders: When a person exhibits abnormal body movements. A person may repeat certain motions over and over—this is called **stereotypies**. At the other extreme, a person may stop moving or talking for a while, which is a rare condition called **catatonia**.
 - · Talking in a dull voice
 - Showing no facial expression, such as a smile or frown
 - Having trouble experiencing happiness
 - Having trouble planning and sticking with an activity, such as grocery shopping
 - Talking very little to other people, even when it is important

These symptoms are harder to recognise as part of schizophrenia and can be mistaken for depression or other conditions:

- Difficulty processing information to make decisions
- Problems using information immediately after learning it
- Trouble paying attention

Most people with schizophrenia are not violent. The risk of violence is associated with untreated schizophrenia.

People with schizophrenia are much more likely to be harmed by others as well as harm themselves.

Impact

It is common for people with schizophrenia to have problems with illicit drugs and alcohol. A treatment program that includes treatment for both illnesses is critical for recovery. Drug abuse can increase the risk of suicide, trauma, and homelessness in people with schizophrenia as well as increase the risk of developing other mental illnesses.

Risk factors

Many factors may cause schizophrenia, including genetic and environmental factors which could also result disruptions in brain structures, function, and chemistry.

Treatment

Two main types of treatment can help with symptoms:

antipsychotic medications and psychosocial treatments. Some people have side effects when they start taking medications, but most side effects go away after a few days.

A person with schizophrenia should not stop taking a medication without first talking to a doctor. Suddenly stopping medication can be dangerous, and it can make schizophrenia symptoms worse. Psychosocial treatments help patients deal with everyday challenges of schizophrenia. These treatments are often most helpful after patients find a medication that works.

References:

- 1) National Institute for Mental Health, USA https://www.nimh.nih.gov/health/topics/schizophrenia/index.shtml
- 2) Mayo Clinic

https://www.mayoclinic.org/diseases-conditions/schizophrenia/s

Examples of treatment include:

- **Family education**: Teaches the whole family how to cope with the illness and help their loved one.
- Illness management skills: Helps the patient learn about schizophrenia and manage it from day to day.
- Cognitive behavioral therapy (CBT):

 Helps the person identify current problems and how to solve them. A CBT therapist focuses on changing unhelpful patterns of thinking and behavior.
- Rehabilitation: Helps with getting and keeping a job or going to school and everyday living skills.
- **Peer counseling:** Encourages individuals to receive help from other people who are further along in their recovery from schizophrenia.
- **Self-help groups:** Provides support from other people with the illness and their families.
- Treatment for drug and alcohol misuse: Is often combined with other treatments for schizophrenia.

How to help someone cope?

Supporting a loved one with schizophrenia can be hard. It can be difficult to know how to respond to someone who makes strange or clearly false statements. It is important to understand that schizophrenia is a biological illness.

- Help them with treatment and encourage them to stay on treatment.
- Remember that the beliefs or hallucinations seem very real to them.
- Be respectful and kind without tolerating dangerous or inappropriate behavior.
- Become part of a support group.

Schizophrenia: A factsheet for Journalists This resource was designed by REACH as part of our efforts to help improve the quality and frequency of media reporting on NCDs.





