

## Schizophrenia

### *What is it?*

- Schizophrenia is a complex mental health problem, which can manifest itself in a number of ways. Each individual will experience a range of symptoms, not everyone will have them all.
- Schizophrenia and similar illnesses can affect people from all walks of life. The first symptoms often develop in early adulthood, but may remain undiagnosed.
- How schizophrenia begins varies from person to person. For some, the illness starts suddenly: the (usually) young person becomes unwell very quickly and quite severely. His or her thoughts may become muddled or he or she may experience hallucinations.
- For others, the change is gradual and the person may show signs of withdrawal or neglecting themselves. These changes in behaviour can be very difficult to understand especially when no one has recognised that the person is ill.
- No one really knows the causes of schizophrenia, but a combination of certain factors (such as stress, hereditary factors and drug abuse) have been shown to affect the risk of developing it.

### *Facts*

- Nearly 1 in 100 people will experience schizophrenia in the course of a lifetime.
- After a first episode of schizophrenia, approximately 25% recover within five years, 50% will have fluctuating problems over decades and may experience further episodes of the illness in their lives, 15% will have severe persistent problems and a further 10% will be permanently incapacitated.
- Approximately 30-40% of people with schizophrenia attempt suicide during their lifetimes. One in every 10 people eventually takes their own life.

### *Signs and Symptoms*

Although schizophrenia affects people in different ways, there are recognised signs and symptoms that people may experience, for example:

- The person may experience hallucinations (seeing, hearing, feeling, smelling or tasting something that does not exist, as if it were real). Hearing voices is the most common hallucination experienced with schizophrenia.
- The person may hold false and often unusual beliefs with unshakeable conviction. For example, someone might fear that he or she is being watched or followed by another who wants to control or do them harm. These beliefs are called delusions.
- The person appears to show little emotion or if he or she does express any it may appear out of context, for example crying at a joke. They may become withdrawn, avoiding the company of friends and family and staying in their room.
- The person may say very little and rarely initiate a conversation. They may speak in a way that will seem muddled and illogical, conveying little meaning. They may think or act in a way that cannot easily be understood. He or she may become uncharacteristically hostile to members of the family.

Not everyone will experience all of these symptoms. It can be difficult to recognise these as signs of a mental health problem. It is easy to perceive the person as disinterested in life. It is important to remember that this behaviour is not deliberate.

### *Recovery*

- Generally, getting appropriate care and treatment for schizophrenia as soon as possible after symptoms appear results in a greater chance of a good recovery.
- Recovery means different things to different people and no two individual journeys of recovery will be the same. Regardless of symptoms or past experiences, people with mental health problems should be given every opportunity to, and can, lead fulfilling and satisfying lives.

- Medication aimed at reducing the symptoms of schizophrenia is commonly used. These medications have varying levels of benefit and side effects. With careful use and a good relationship with support teams, most people find some measure of help from medication, and many feel they have “their lives given back”
- Some people find that medication helps but acceptance and support from the community at large as well as good community care services, are vital in promoting the wellbeing of people with schizophrenia.
- At times, some people with schizophrenia may require hospital care however, most live in their own homes in the community.

## ***Stigma and Schizophrenia***

- Schizophrenia is one of the most widely misunderstood and stigmatised mental health problems. It was chosen as the diagnostic term to lead the first year campaign for ‘see me’ because of that reason.
- There is widespread misconception that people with schizophrenia are dangerous, unstable people. The media, who use terms like “schizo” to describe people who commit violent acts, often reinforce this impression.
- Many people with schizophrenia recover fully. Others continue to live with some degree of disability. Others are severely affected by symptoms throughout life. The reality is that many people with schizophrenia live in fear in our communities, trying to put together a life in spite of the stigma that exists.
- Stigma prevents people coming forward for help. It has been suggested that good public information and reduced stigma encourages people to come forward early with symptoms. This in turn is associated with a much greater chance of recovery.

## ***Myths and Misunderstandings***

- Schizophrenia is not a split personality, nor does the behaviour of people with this diagnosis swing dramatically between ‘normal’ and dangerous. Violence is not a symptom of schizophrenia.
- There is a belief that having schizophrenia leaves a person outwith reality and permanently disabled. People with schizophrenia can and do lead productive lives. In reality, many people with schizophrenia work in responsible jobs, raise a family and take higher degrees.
- Some people believe that people with schizophrenia are permanently incapable, unable to make rational decisions, or take an active part in determining their own treatment. In reality most people with schizophrenia are able to take full control of their lives, with or without assistance from support or advocacy.

## ***Contacts***

### **National Schizophrenia Fellowship (Scotland)**

<http://www.nsfscot.org.uk/>

### **Schizophrenia.com**

<http://www.schizophrenia.com/>

### **Royal College of Psychiatrists Information on Schizophrenia**

<http://www.rcpsych.ac.uk/info/schiz.htm>

### **@-Ease**

<http://www.rethink.org/at-ease/siteindex.htm>

### **Hearing Voices Network (Dundee)**

<http://www.hearingvoicesnetwork.com/>