

Schizophrenia and its Impact on the Family

The Diagnosis of Schizophrenia

The diagnosis of schizophrenia is made only when very specific criteria are met. Different combinations of symptoms distinguish various types of schizophrenia. For this reason, one individual with the disorder may appear very different from another person with the same disorder. The diagnosis can be made only by a trained mental health professional.

Symptoms may include the following:

- DELUSIONS (false beliefs)
- HALLUCINATIONS (sensory experiences with no outside stimulation, such as hearing voices or seeing things others do not see)
- DISORGANIZED SPEECH (speech that is irrelevant or not on topic)
- DISORGANIZED BEHAVIOR (behavior that is inappropriate or an inability to take care of necessary daily activities)
- CATATONIC BEHAVIOR (staying in the same position for a long time)
- NEGATIVE SYMPTOMS (lack of interest, low motivation, lack of emotional expression)

Tips on Being in a Relationship with Someone Who Has Schizophrenia

1. Educate yourself about schizophrenia through reading, attending lectures, and talking to others in similar situations.



Good Books on Schizophrenia:

The Family Intervention Guide to Mental Illness: What You Need to Know About Symptoms, Therapy, Medication, and Recovery. (2007). B. Morey & K. Mueser.

The Complete Family Guide to Schizophrenia: Helping Your Loved One Get the Most out of Life. (2006). K. Mueser & S. Gingerich.

I'm Not Alone: A Teen's Guide to Living with a Parent Who Has a Mental Illness. (2006). M. Sherman and D. Sherman. Available at www.seedsofhopebooks.com

Surviving Schizophrenia: A Manual for Families, Patients, and Providers. (2006). E. Torrey.

When Someone You Love Has a Mental Illness: A Handbook for Family, Friends and Caregivers. (2nd ed). (2003). R. Woolis.

Memoirs about Schizophrenia:

Tell Me I'm Here. (1992). A. Deveson. (mother's experience of son with schizophrenia)

My Mother's Keeper: A Daughter's Memoir of Growing up in the Shadow of Schizophrenia. (1997). T. and J. Holley.
The Quiet Room: A Journey out of the Torment of Madness. (1994). L. Schiller and A. Bennett
The Day the Voices Stopped: A Memoir of Madness and Hope. (2001). K. Steele and C. Berman.

Relevant Web Sites:

www.schizophrenia.com – Schizophrenia Home Page

www.mentalhealth.com/book/p40-sc01.html – Schizophrenia: Handbook for Families

www.schizophreniadigest.com – magazine focusing on providing inspiration and information about mental illness

2. If you suspect that your loved one is experiencing hallucinations (appearing distracted, talking to self, laughing suddenly and for no obvious reason):
 - a. Ask the person about his/her current experience and what will help him/her to feel safe and in control.
 - b. Suggest the possibility that the experience is a symptom, without casually dismissing it.
 - c. Calmly yet firmly remind your loved one of any necessary limits (e.g., “You need to stop screaming.”).
3. When your loved one makes delusional statements:
 - a. Avoid discussing the details of these comments in depth. Do not try to convince him/her that the delusion is wrong or not real.
 - b. If your loved one is agitated, listen calmly and respectfully. Respond by focusing your attention primarily on reality-based remarks.
 - c. If strong feelings accompany the delusions, you can address the emotions and offer assistance in coping without commenting on the specific delusion.
4. Respond to disorganized speech by communicating calmly and directly:
 - a. Don't worry about being unable to understand the content of the speech; rather, focus on conveying your respect for the person.
 - b. Respond to single thoughts or the emotional tone of the speech.
5. Recognize that your loved one's symptoms have nothing to do with you or your relationship.

6. Do not tolerate abuse. Set clear limits, and ask your loved one to change his/her behavior when acting inappropriately. If he/she does not respond, take steps to protect yourself and others from injury.
7. Pay attention to warning signs of a potential relapse, including discontinuing medications, insomnia, increased social withdrawal, auditory/visual hallucinations, worsening in personal hygiene, etc.
8. Communicate honestly and regularly with your loved one's providers.
9. Encourage your loved one to participate fully in his/her treatment by taking medications regularly and attending various therapies.
10. Choose your battles! Practice tolerance for annoying behaviors.
11. Do not neglect your own needs, as doing so may build resentment toward your loved one.
12. Take any comments that your loved one makes about suicide or harming others very seriously, and seek professional help immediately.
13. Notice and praise any positive behaviors (taking medicine regularly, staying calm when experiencing upsetting hallucinations or delusions, etc.) in your loved one often.

Treatment Options for Individuals with Schizophrenia

- Medication management (pills and/or regular injections)
- Family psychoeducation/education
- Compensated work therapy/supervised job coaching
- Assertive Community Treatment (ACT) teams/Mental Health Intensive Case Management (MHICM) program
- Self-help groups
- Day Treatment Center
- High-Functioning Schizophrenia Group

Parts adapted from *Surviving Schizophrenia: A Family Guide* by E. Torrey (1995)
When Someone You Love Has a Mental Illness by R. Woolis (1992)