Decipher the Dimensions of Schizophrenia from a Social-Work Perspective

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Abstract: The burden of social, family, and occupational responsibilities creates many psychological problems. At the same time, mental illness is seen as insanity in today's modern era, whereas it is not so. In some cases, the mental disorder takes a severe form. Schizophrenia is a mental disorder that affects a person's ability to think; the person starts living in an imaginary world and hears voices that are not there. A person with schizophrenia faces problems in taking care of all the work in his life, such as education, job, and family responsibilities. According to the World Health Organization, Schizophrenia is a brain disease that affects about 21 million people worldwide. Despite this, about 50 percent of people who have schizophrenia do not get the proper treatment. This article makes a conceptual attempt to provide an overview of Schizophrenia and the function of social work in lessening the Schizophrenia problem.

Keywords: Decipherment, Dimensions, Schizophrenia, Social-Work

Introduction

Schizophrenia is a severe disorder characterized by several abnormal behaviors: hearing voices (hallucinations) and distorted or false perceptions, often strange beliefs. People with schizophrenia are unable to differentiate between reality and imaginary events. These unusual experiences make the person feel natural, while others think they are lost in their world. Depending on the symptom of the disease, the person with schizophrenia perceives or interprets reality in a way that is different from others and looks unusual. Such individuals may sense that people want to control or harm them and may feel compelled to act to protect or defend themselves that others do not understand (Torres, 2020).

People with schizophrenia are involved in their behavior and Unable to notice the changes. They remain ignorant about that. They will never admit that their behavior is different and strange because the lines between their outer and inner reality become blurred, and they cannot differentiate between them. This lack of complete identification or supervision leaves them isolated from family and friends, and they refuse to seek medical help (WebMD, 2003).

The term psychosis is mainly used to refer to schizophrenia and other severe mental disorders. Psychosis refers to a mood in which a person loses connection with reality (i.e., he cannot differentiate between real and imaginary events). This affects his attitude and behavior, due to which he becomes depressed, lonely and unsocial. A person who has schizophrenia begins to experience delusions or hallucinations, due to which symptoms such as fear, anxiety, doubt, anger, and depression appear. A psychotic episode, i.e., psychosis or mental illness, is when a person starts having intense delusions (Jeanie Lerche Davis, 2015).

A person usually comes into the grip of schizophrenia in adolescence or early youth. This condition develops gradually, it takes weeks or months. Symptoms seen in the early stages of schizophrenia are similar to other mental health issues, such as coordination problems, depression, and nervousness. In the early stages of the disease, the person may show negative symptoms such as spending time alone, being introverted, lonely, becoming unfriendly or disinterested and being isolated from friends and family. Such persons lose interest in daily activities and do not feel like doing their favorite activities. They also become indifferent toward their health and enhance their personality; whereas, in these matters, they may be very alert at first. Their behavior also changes— they can keep smiling or laughing to themselves without any reason. If the problem is not recognized and treated, it can be severe, and individuals can become verbally and physically violent (Mayo Clinic, 2016).
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<th>Table No 01: Forms of Schizophrenia</th>
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| Paranoid schizophrenia             | • In paranoid schizophrenia, the person suffering from doubts, obsessions, or delusions is very high, and in such a situation, he starts doing what he thinks is right.  
  • The person suffering from this condition may behave strangely, his emotional reactions are also not well, and his connection with everyday life is seen very little. |
| Catatonic schizophrenia            | • A person with catatonic schizophrenia becomes entirely mentally, physically, and emotionally blunt, so much so that he has little or no facial expressions on his face. For example, they cannot walk for long.  
  • There is no feeling of eating, drinking, or even passing urine. Sometimes the catatonia lasts for several hours, leading them to the hospital. |
| Undifferentiated schizophrenia     | • In undefined schizophrenia, a person has a variety of symptoms that fall into more than one type of schizophrenia. |
| Hebephrenic schizophrenia          | • This is the form of schizophrenia in which symptoms such as emotional changes, delusions, and changes in behavior, irresponsible and unpredictable behavior are expected within the patient.  
  • These patients’ minds are always depressed and never match the current situation. However, the patient may sometimes display pride, grin, and mischief. (National Institute of Mental Health, 2019) |

Indexes of Schizophrenia

A person with schizophrenia does not behave strangely all the time. Symptoms are unpredictable, sometimes appearing and sometimes disappearing. People with schizophrenia can have different symptoms. It may come on its own, or it may go away. In addition, these symptoms may occur only two or three times in a lifetime. At the onset of the disease, the symptoms can be sudden and severe. During the psychotic phase, the patient can perceive reality in many parts. These symptoms can appear in everyday life. These symptoms may also occur during essential activities such as working, eating, or walking around. In some severe cases, activities such as working may also seem limited. The intensity of unusual experiences also fluctuates. The most common symptoms of schizophrenia are:

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| Hallucinations                       | • Seeing people or things that do not exist or do not exist.  
  • The person also experiences the taste, touch, or smell of what is not there.  
  • Many people feel that they hear some voices talking to them, giving them orders, or calling them bad. |
| Misconceptions                       | • Some such beliefs are formed that persist even after being proved wrong and illogical.  
  • Some people believe that someone they know is trying to control or poison them.  
  • Some people feel that someone is talking to them through the secret code of TV. Such persons think that everyone is talking about them, and they are always suspicious of others.  
  • In rare cases, the person may feel that they are a celebrity or historical figure. |
| Disorganized Thoughts                | • Sometimes, a person is not able to think clearly.  
  • Their words seem illogical, irrelevant, and baseless, and these things have no justification for the people around them; they find these things useless.  
  • The victim may suddenly stop before the sentence is completed to answer questions ludicrously. |
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| Cognitive problems                                                                 | • Due to the distortion in the person's way of thinking, they cannot concentrate on even simple tasks for long periods.  
|                                                                                   | • People cannot pay attention to other people's things, and they find it difficult.  
|                                                                                   | • They also forget about the routine tasks of everyday life. Usually, it affects their academic performance and other tasks, which remain weak.  
|                                                                                   | • This problem is seen in the early stages of the disease. Still, family and friends fail to identify the disease because they usually do not know about the condition.  

| Disruption in normal behavior                                                   | • The person may try to avoid spending time with other people, i.e., he wants to be cut off and likes to be alone.  
|                                                                                   | • They speak monotonously, flatly. Sometimes the same letter is said.  
|                                                                                   | • Their facial expressions are like masks; their faces remain emotionless, and still, they do not show emotion.  

(National Institute of Mental Health, 2019)

Diagnoses of Schizophrenia

• There is no single test for schizophrenia. Because of the range of symptoms a patient can experience, a psychiatrist diagnoses a psychosis after thorough medical examinations.

• Psychiatrist during an analysis of the patient's behavioral and biological functioning (drowsiness, disinterest in eating, and social interactions).

• Information about changes in patient behavior is also collected from family or caregivers, or individuals.

• A person is said to be suffering from schizophrenia or identified as a patient with schizophrenia when the above symptoms persist for at least a month.

• Even if a person suffers from mental health disorders such as drug addiction, bipolar disorder, and depression, it may be deluded that he does not have schizophrenia. Because they also develop symptoms of delusions, hallucinations, delusions, and social isolation, which are considered primary symptoms of schizophrenia. Only a psychiatrist can better identify whether a person has schizophrenia or another disorder.

Treatment for Schizophrenia

Although there is no known treatment for schizophrenia, many therapies or treatments can help a person live his life independently and usually. Schizophrenia is a chronic disorder and its management, like diabetes or high blood pressure, requires efficient and appropriate management. The goal of treatment is to control the symptoms and ensure that the person remains active, and be able to lead an everyday life.”

• Antipsychotic drugs: Depending on the symptoms and progression of psychosis, the doctor recommends a treatment plan consisting of medication, therapy, and a rehabilitation program. The drugs given in this are called antipsychotic or antipsychotic drugs which help reduce positive symptoms such as hallucinations, delusions, and paranoia (hypnosis or hallucinations).

• Electroconvulsive therapy (ECT): In some cases, a psychiatrist may recommend electroconvulsive therapy (ECT). “There are many myths or beliefs about antipsychotic drugs and their side effects. But the antipsychotic drugs used in today's time are effective and have minimal side effects, such as the patient may experience stiffness and tremors. Contrary to popular belief, ECT is a safe method performed by trained professionals. “It is the safest therapy to patients who are suffering very badly or not responding to medicines. Therapy is given through anesthesia. It is mild and can provide relief in positive symptoms. It does not cause any stress or discomfort to the patient,”

• Psychological intervention: Cognitive therapy, psycho education, family intervention, social skills training, and assertive community treatment are essential, especially for patients who suffer from depression or substance abuse. Intervention reduces and replaces psychotic symptoms and accelerates improvement. This therapy helps to identify negative thinking and change intolerable
thinking and behavior. Psychology refers to educating and empowering patients and their families to understand and accept diseases and cope successfully. Having family and friends they trust can help them find comfort and help them battle schizophrenia. Social skills training can help improve their communication and social interactions and prepare them for jobs.

- **Caring for a person with schizophrenia:** Caring for a loved one with schizophrenia can be challenging. People get shocked by strange and unexpected behavior, and their minds get disturbed. Caregivers - especially parents or guardians - feel sad and guilty when their loved one is diagnosed with schizophrenia. The patient may unwittingly seek out emotional sources in how the family copes with the disease. The patient's condition will improve quickly if the family supports and takes proper care. If the family keeps cursing or criticizing the person for his illness, then the person may have to struggle a lot for improvement. And it may also happen that the patient recovering from such criticisms and accusations may return to the disease again. As a caregiver, it is essential to note that the person may not have a deep understanding of the symptoms - they may not know or understand why their behavior is not normal. From the messages their brain sends them, they know that hallucinations and delusions are real experiences. Because of this, the person also opposes the treatment because they feel that they are excellent and there is nothing wrong with them.

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<td><strong>Parable</strong></td>
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<td>A person with schizophrenia has a fragmented personality or multiple personalities. (or) Schizophrenia is similar to multiple personality disorder</td>
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<tr>
<td>Individuals with schizophrenia are dangerous, can be very violent, and harm themselves or those around them.</td>
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<tr>
<td>Schizophrenia is caused by poor parental behavior and some incident of childhood sexual abuse</td>
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<td>A person with schizophrenia needs to be hospitalized for care.</td>
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(World Health Organization, 2022)

**Stages of Schizophrenia**

- **Initial Stage:** In the early stages of schizophrenia, the sufferer does not feel any change in his behavior because the change is minor. Usually, the people related to the patient feel the difference in his behavior. The person may feel depression, nervousness, and other normal and abnormal mood fluctuations. It is ubiquitous to feel these feelings during late adolescence and early adulthood. The more obvious symptoms of schizophrenia are feeling angry, behaving strangely, or social isolation. This phase of schizophrenia can last for months or even years before developing into the acute phase.

- **Acute phase (active phase):** This is the stage where schizophrenia is fully developed. In the acute phase, the actual symptoms of schizophrenia appear with a high degree of intensity. Sudden mood swings at this stage may at first cause the sufferer to feel that they have a problem. This indicates that the problem appears at full intensity but does not always occur suddenly. The diagnosis can be made
by visiting the hospital and psychiatric specialist at this stage. This phase of highly active and intense symptoms lasts six weeks but can last as long as four weeks or as long as eight weeks. The symptoms then move into the reduction phase.

- **Subtraction Phase**: Symptoms begin to subside in this phase after the acute activity of symptoms. In this phase, the intensity and presence of symptoms may be significantly less, and some signs may even go away completely. With treatment, symptoms can be prevented from occurring for a long time, and normal functions can be continued. It is not that the symptoms will go away forever; sometimes, these symptoms may recur.

- **Residual phase**: The symptoms reappear at an acute stage in this phase. It can be avoided or reduced by using the treatment and medicines prescribed by the doctor. The patient may be familiar with the feelings and symptoms. The biggest reason for this stage is that when the patient's symptoms begin to subside, they feel they do not need medication and stop treatment.

**Social Work Intervention**

- **Counseling**: Counseling is a psychological process in social work; the worker advises the client to solve his problem. Its purpose is to discuss various aspects related to the client's situation judiciously, clarify his problem, bring to the fore his conflicts with reality, discuss the feasibility of different types of action options, and choose among various alternatives.

- **Psychological support**: Social worker helps the client in the manifestation of feelings by providing psychological support, understanding and accepting feelings, developing self-determination in the client, generating the desired interest for problem-solving, and formulating problem-solving systematically. The client creates psychological shelter by getting self-consciousness, self-help ability, ability to increase problem-solving skills, etc.

- **Development of Insight**: In social work, it is mainly seen that conflicting emotion and stimulating emotions sometimes destroy the power to understand reality. As a result, the person suffers from a lack of inner perception and becomes unable to make appropriate decisions; this inner perception is called insight. The social worker tries to develop this inner perception so that the client can cope with the internal conflict.

- **Interpretation**: As a healer, the social worker interprets social or individual factors and the interactions between them with great care. In the performance, he uses the methods of providing support to the ego under explanation and transfer.

- **Respiration**: by using various methods, the worker instills confidence in the client that he is trying to get rid of the problem, and by this effort, the client's situation will end. Apart from this, the worker also emphasizes adopting and following the therapy methods in the client and assures them that his problem will end soon.

- **Re-education**: The process of education plays an essential role in creating the ability to understand reality in the individual in any sphere of life. In individual social work, the worker tries to educate the client about all the aspects that have caused the problem. Along with this, re-education makes the client aware of the causes of the problem, etc.

- Strengthening the patient's motivation to behave appropriately
- Reducing Emotional Pressure by Ways of Expressing Emotions
- To release the patient's potential for growth and development
- Helping to change one's undesirable habits
- Modifying the cognitive structure of patients
- Encouraging communication and interpersonal relationships
- Enhancement of Self-knowledge and Insight
- To bring about a change in the present conscious state of the patient

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To bring about a difference in the social environment of the patient.

To bring about a change in the unadapted behavior of the patient.

To develop the patient's interpersonal relationships and other types of abilities.

Reducing internal conflicts and personal stress of the patient.

To bring about changes in the patient's surroundings and unrealistic preconceptions about himself.

Eliminating the factors or conditions that contribute to the unadapted behavior in the patient.

To assist the patient in adjusting well to the realities of his environment.

Clarifying self-realization and self-understanding.

Conclusion

A patient of schizophrenia may have to struggle for life even in battling this disease. Schizophrenia is considered the most dangerous problem among mental disorders. A person with schizophrenia can quickly become frustrated with life, and sometimes the patient also has a strong desire to commit suicide. Schizophrenia is a severe mental illness. This disease mainly occurs in childhood or adolescence. Schizophrenia is considered the most dangerous of mental illnesses. If schizophrenia is not treated correctly, about 25 percent of patients are at risk of committing suicide. About 40 lakh people have schizophrenia of various degrees in India. About 90 percent of patients who do not get treatment for schizophrenia are in developing countries like India. Schizophrenia can occur in 10 people per 1000 adults. The typical victims of this disease are primarily people in the age group of 16-45.

References


