

Observation of stigmas in relation to schizophrenia assignment

[Psychology](#)



Observation of Stigmas in Relation to Schizophrenia Misty Ann Bird Montana State university Billings Abstract This case study will be an examination of stigma in relation to schizophrenia. A comprehensive view of attitudes, behaviors, and knowledge will be analyzed in order to gain a perspective of the stigma associated with schizophrenia. The areas of focus will be perceptions, recognition, and increased knowledge of schizophrenia. Peer reviewed articles will be used to validate information and correlate on issues brought up in this case study.

The paper is concluded by a discussion of the results of the writer's survey, Schizophrenia Survey, and the information gathered through an interview with Joe Chula, the director the Mental Health Centers HUB. Keywords: schizophrenia, stigma, attitudes, behaviors, knowledge Observation of Stigmas in Relation to Schizophrenia Introduction Attitudes and behaviors are a result of the knowledge that people consume within their environments. Stereotyping creates discrimination, which results in damage. Societal stereotypes associated with a mental illness such as schizophrenia have created public stigma.

Stigmatize attitudes about schizophrenia are commonly associated with negative labels. These aspects significantly touch on the biases centered on people who meet the criteria of schizophrenia. The information referenced within this document can be used to identify social stigma related to attitudes, behaviors, and knowledge associated with persons with schizophrenia. Perceptions Individuals use their perceptions to organize and interpret information. Understanding happens when people build connections with information that is familiar to them.

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As they become more knowledgeable in a subject, the awareness of factual inputs becomes clear. Perception is a process of knowing. Individuals know reality through seeing and interpretation. Knowledge is accumulated through colonization that creates growth and understanding. Social perceptions are created by impressions and judgments of information and people through their ability to observe and understand existing information. Individuals use information to make conclusions based on the information they collect individually and in society.

No perception is completely accurate and no one is immune from inheriting the biases of society, which causes inaccurate perceptions (Sue, 2010).

Misconceptions create stigma within societies. The impact of standardization attributes to increased discriminatory behavior and social distancing from people CITATION Marco 1033 (Martin, Peccadilloes, ; Touch, 2000).

Standardization is obvious and direct, or subtle. Direct expressions have become less acceptable In society' (Rush, Corcoran, Todd, & Boathouses, 2011). When someone passes judgment based on a personal trait the result is stigma. Unfortunately, this is a common experience for people who have a mental health condition such as schizophrenia (Duran- Azaleas, Scott, Rolling, & Laborer, 2012). Recognition There is lack of public familiarity with schizophrenia. Societal attitudes generated about schizophrenia have concluded that it as the most recognizable and the least accepted disorder (Stuart & Referenda-Floret, 2001 Individuals with schizophrenia are commonly stereotyped as dangerous and violent, and suffering from multiple personalities.

These stereotypical personality traits attached to the label of schizophrenia have been correlated with a negative effect on the emotional reactions of people with schizophrenia (Rush, Corcoran, Todd, & Boathouses, 2011). As mentioned earlier stigmas are created through misconceptions. Increased Knowledge Positive personal and social perceptions may benefit from fact-based knowledge CITATION HA II 1033 (Holmes, Williams, Canal, & Kabuki, 1999). In order to support a more positive understanding of schizophrenia the perceptions and inherited biases related to the inaccurate perceptions on schizophrenia needs examination.

Becoming aware of negative attitudes influences the ability to create positive change. Once a person's attitude begins to change, their behavior does the same thing. This chain reaction can be created through the effects of education. Knowledge becomes transparent with the reduction of businessmen schizophrenia. Exposure to educational information on schizophrenia may challenge the stigma associated with inaccurate perceptions. Researchers have examined the effects of education on the attitudes about severe mental illnesses such as schizophrenia.

They have concluded that education programs increase factual knowledge and may improve attitudes about mental illness CITATION HA M 1 033 (Holmes, Williams, Canal, ; Kabuki, 1999). Schizophrenia Survey

INSTRUCTIONS AND NOTES: This survey is anonymous, please do not write our name or anything else that might link you to this survey. The purpose of this survey is to accumulate a broad understanding of public attitudes regarding schizophrenia. 1. How would you rate your knowledge of

schizophrenia? No prior knowledge Minimal knowledge Average knowledge Significantly knowledgeable Expert 2.

How confident are you that people with this label have the ability to change? Not confident at all Minimal confidence Average confidence Significantly confident Extremely confident 3. To what extent would you be comfortable with people diagnosed with schizophrenia living in your neighborhood? Not comfortable at all Slightly comfortable Reasonably comfortable Moderately comfortable would like them to live right next door to me 4. What do think the cause(s) of schizophrenia are? Alcoholism and drugs Genetic inheritance A traumatic childhood experience Life style choices A combination of genetic and environmental factors 5.

Please select your emotional reaction(s) to schizophrenia Anger Disgust Cheerfulness Sadness Us reprise Apprehension Pride Relief Affection Curiosity do not know 6. Do you believe people who are diagnosed with schizophrenia and receiving treatment can recover? Yes NO 7. What are your thought and reactions to the usage of the term "schizophrenic" in our society? 8. Do you know someone who has been diagnosed with schizophrenia? If so, what is your relationship to the person who has been diagnosed? Spouse Immediate family member Friend Caregiver Physician Acquaintance Other Thank you for taking the time to complete this survey!

Result HYPOTHESIS: Education and exposure to schizophrenia improves a person's attitude on the disorder and those who are afflicted by it. NULL

HYPOTHESIS: Education and exposure to Schizophrenia does not improve a person's attitude on the disorder and those who are afflicted by it.

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OBJECTIVE: surveyed people in the helping professions attitudes, behaviors, and knowledge towards individuals with schizophrenia as part of my semester project on public awareness and attitudes towards schizophrenia. This study was conducted to establish the effects of knowledge and exposure on the stigma of Schizophrenia.

METHODS: conducted an anonymous survey with 20 respondents in the helping profession (aged 24 years or over) residing in Billings, Montana (100% response rate). Using the survey, information was collected on the knowledge level of schizophrenia, causes of schizophrenia, confidence in change and recovery, levels of social distance felt toward people with schizophrenia, emotional reactions to schizophrenia, thoughts about the use of the word usage schizophrenic, and relationships with people with schizophrenia **RESULTS:** All individuals had prior knowledge of schizophrenia.

Of those individuals, 9 had average knowledge. A Peterson-product measurement for correlation was measured between the self-proclaimed knowledge of schizophrenia, and well established causes for the disorder (a combination of genetic and environmental factors); with the results as tested being ($t = 2.6349$, $UDF = 18$, $p\text{-value} = 0.01682$) and a correlation measured as a positive correlation of (0.53; Graph A). This measurement was made to establish a relationship and add validity to the participant's self-proclaimed knowledge of schizophrenia.

A measurement was also made of the emotions people had in relation to schizophrenia. The measurement was made by assigning a positive point (+1) for positive emotions, a negative point (-1) was given for a negative

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emotions, and a score of zero (0) was given in the case of the response “ I onto know This was measured with a Peterson-product correlation between the self-proclaimed knowledge of the survey participants in an attempt to offer, not a cause and effect relationship, but a relationship between a working knowledge of schizophrenia and a positive view of people with the disorder.

This measurement resulted in a positive correlation as ($t = 1.8259$, $UDF = 18$, $p\text{-value} = 0.08451$); and a positive correlation score of (cord. 0.40; Graph B). These measurements are offered to show a significant relationship between education and exposure to schizophrenia and holding a positive view of people with the disorder. One-half of the samples had known someone treated for schizophrenia or another mental illness. Of those able to identify a cause of schizophrenia (two-thirds), most identified a biological cause, usually a brain disease.

Greater knowledge was associated with less- distancing attitudes. Upon completion of the survey respondents were given a report from the National Alliance of Mental Illness (NAME) called Schizophrenia: Public Attitudes, Personal Needs CITATION Harsh 1033 (National Alliance on Mental Illness, 2008). Graph A Graph B Interview The following interview is self-proclaimed knowledge from the director, Joe Chula, of the community-based program know as The HUB.. The interview is based On interactions and observation s of clients diagnosed with schizophrenia who participate at The HUB.

The HUB is a drop-in center, which serves both homeless and the at-risk of becoming homeless population CITATION Craig 1033 (Granger, 2012). Public <https://assignbuster.com/observation-of-stigmas-in-relation-to-schizophrenia-assignment/>

Awareness, Attitudes, and Labels Towards Individuals with Schizophrenia

How relevant is schizophrenia in the population of the HUB/in your facility?

Very relevant, if I took an educated guess I would say 5% of the population has schizophrenia. Do you live that your employees and co-workers are knowledgeable about schizophrenia? Yes, we have ongoing training, refreshers, and meetings.

In the meetings, the supervisor is a well-educated therapist. If my employees or co-workers have any questions involving the nature of the patients they can contact case management and therapists can be reached at any time.

How comfortable do you think our community is with individuals diagnosed/show symptoms of schizophrenia? Not at all, they are afraid of what they do not know. The stigma of awareness has gotten a little better but it is still poor. In our experience, have you witnessed medication have (negative/positive) side effects that affect an individual's ability to function?

I have. Negative Side Effects= When physicians over medicate the clients and they become lethargic, think sometimes they feel worse for getting help. Positive Side Effects= With the right combination of medication, connections, and support individuals can function really well. How likely do you think it is for someone diagnosed with schizophrenia to function in society? It is very likely; they have great success with the right medication, supports, and models. Do you believe there is support from families of individuals diagnosed with schizophrenia?

Yes Do you think that community education would improve individuals functioning ability? Yes, if the community were more educated then they

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would be more apt to set up outlets for additional community support and education. Are there educational or supportive programs for family members/community members that you can recommend or are aware of? The support groups that I can think of off the top of my head are NAME, Therapist Buddy with Families, Therapist support groups, and Forever Families.

The information gathered from my interview with Joe Chula complemented the information that I had requested in the Schizophrenic Survey. The interview provided me with a more personal perspective on public awareness, attitudes, and labels regarding individuals with schizophrenia.