Into the psychosocial dimension of schizophrenia essay

Experience, Belief



Summary of Psychological Journal -" Toward an Integration of Spirituality and Religiousness

In this psychological study, the authors sought to find out what part religion and spirituality plays when dealing with patients that have psychotic disorders. There have been previous studies that claimed that there was a connection between schizophrenia and spirituality, but the extent of that connection was not previously explored. With that in mind, the authors have chosen to perform this study and find out these answers, or at least get a better idea of religion's role. Their hypothesis was that there existed a concrete link between religion and psychotic disorders, and that they carried both positive and negative effects within the emotional well-being of these patients.

In order to gather the data for the study, informal interviews were performed with 115 outpatients of a number of psychiatric facilities in Geneva, all of which met the diagnostic criteria for schizophrenia or similar psychoses. Independent variables of this study include the presence of some kind of religion or spirituality, and the dependent variable is how that affected their mental state or sense of well being.

Extraneous variables include specific religious faith of the patient, as well as the level of support the patient felt they received from their religious community.

The demographics of the patients, as evidenced by the information that was given in the interview, informed the authors that the group was 70% male,

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30% female, 79% of them white, 78% of them single, and 46% of them were living alone. Their average age was 39, and had been dealing with schizophrenic disorders for an average of 15 years. In terms of religion, 61% of the sample were Christian, 9% associated with Islam, Buddhism or Judaism, 12% belonged to minority religious organizations, and 18% were not religiously affiliated.

In the study, it was revealed that 71% of the patients used their religious affiliation to cope with their illness in a positive way. For the purposes of this study, positive effects included a better sense of confidence, self-worth, comfort, and a better overall feeling about their life as a result of their religious beliefs. One third of that number could count on their religious communities for support and comfort, and many more were able to alleviate their anxiety and depression with their faith. There were even patients who at least allowed it to serve as validation for their sickness, if not allowing their beliefs to make them feel better about it. However, there were 14% who had negative effects to their well-being as a result of their religious affiliation, as it merely caused them to feel additional guilt and shame for what they are or what they perceive to have done wrong. There were 16 patients who, regardless of their feelings on religion, were using their religion to fuel hallucinations or delusions as part of their disorder. They would have the typical hallucinations that someone with schizophrenia experiences, but theirs would be centered around religion - seeing God, becoming God, following orders from God, etc.

If I were to perform a study to expand on the one I have critiqued above, it would be a study on disassociative identity disorder. I would focus on the types of patients who used religious belief to shape their delusions, and use the same spirit of interviews in order to understand in better detail the role that religion plays in their disorder specifically, and what causes could lead to that specific type of hallucination.