

EMBRACE

An illustration featuring a large, rounded orange shape on the left. Two hands are shown embracing it: one is white with orange outlines, and the other is orange with white outlines. The orange shape is decorated with several circles in teal, light green, and dark green. To the right, there are horizontal purple stripes of varying thicknesses on a light beige background.

As a caregiver to someone with schizophrenia, you pour your heart and soul into providing care and support for your loved one. It's a journey filled with challenges, uncertainties, and moments of profound connection. That's why we created **Embrace, our Caregiver Toolkit**, to be your trusted companion on this deeply personal journey.



You embark on a journey fraught with challenges and uncertainties. But within the pages of this guidebook lies a roadmap—a guiding light to illuminate the path ahead.

- 1** Journey of discovery
- 2** Watch out for !
- 3** Lurking in the shadows - Stigma
- 4** Fighting stigma
- 5** Web of myths
- 6** The shore to safety

Embrace is more than just a collection of resources – it's a symbol of our unwavering support and understanding for caregivers like you. With Embrace by your side, you'll find the guidance, empathy, and practical tools you need to navigate the complexities of schizophrenia caregiving journey with grace.



Journey of discovery

Schizophrenia : What is it and how to
manage symptoms and behaviour

About Schizophrenia

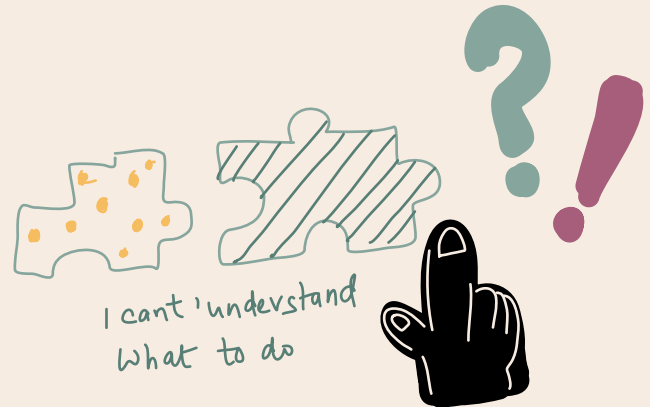
Schizophrenia encompasses a spectrum of intricate brain disorders that profoundly alter an individual's perception of reality. It manifests in various ways, including:



Delusions: Firm beliefs in ideas or concepts that lack factual basis, such as possessing extraordinary abilities or being controlled by unseen forces.



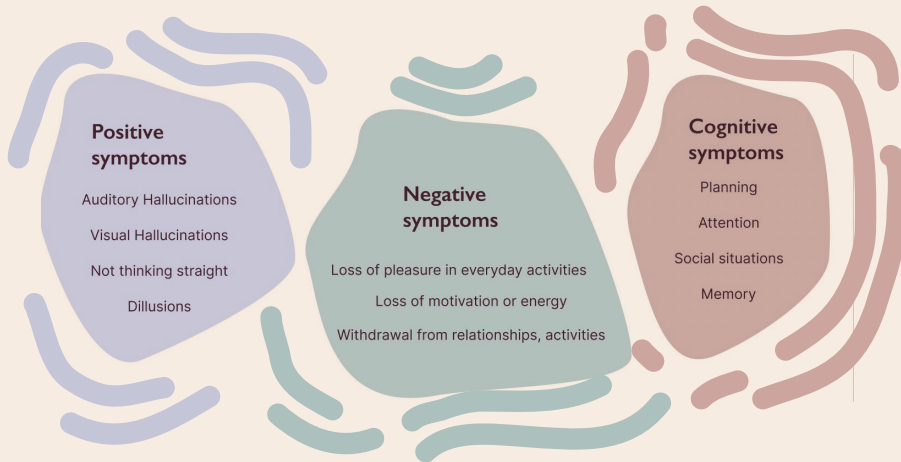
Hallucinations: Sensory experiences, like hearing voices or seeing things, which aren't grounded in reality.



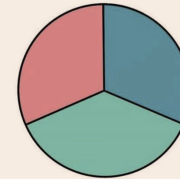
Cognitive impairments: Difficulties in organizing thoughts, decision-making, and clear communication.

Symptoms

Psychiatrists divide the symptoms of schizophrenia into "positive" cognitive and "negative" categories. "Positive" denotes those symptoms which are present and should be absent"; "negative" those " that are absent but should be present.

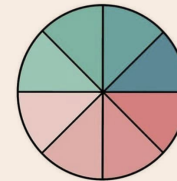


What people think schizophrenia is



- Hearing things
- Seeing things
- Having multiple personalities

What schizophrenia actually is



- Disorganized thinking
- Disorganized speech
- Socially withdraw
- Loss of interest in everyday activities
- Hallucinations (Visual, olfactory, gustatory, tactile or auditory)
- Extremely disorganized behaviors
- Delusions
- Lack of ability to function normally

Schizophrenia is not a simple black and white only problem, rather it has a lot of grey areas when it comes to symptoms

Questions

What causes Schizophrenia?

We are still trying to understand all of the causes. Research has not identified one single cause of schizophrenia. It is thought that an interaction between genes and a range of environmental factors may cause schizophrenia. Psychosocial factors may also affect the onset and course of schizophrenia.

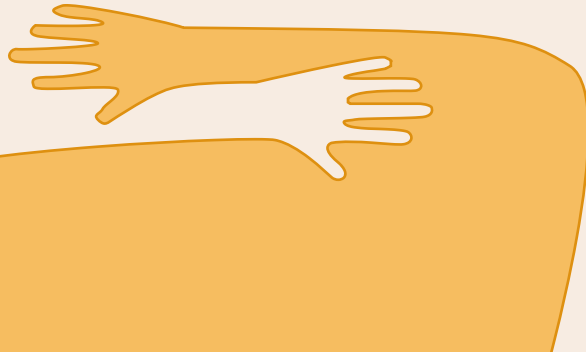
**DID YOU
KNOW ?**

World Schizophrenia Day is observed every year on 24th May 1984 to educate the public about Schizophrenia



Will my loved one recover from this?

Individuals living with schizophrenia often need ongoing care to address their symptoms, and discovering the most effective treatment plan can be a journey in itself, filled with its own set of challenges and moments of hope. Yet, with the right care and encouragement, those facing schizophrenia can find ways to flourish. Building a supportive treatment team, one your loved one feels comfortable with, can make all the difference, as they navigate this path alongside you, providing guidance and compassion every step of the way.



Questions

Does it affect other people too?

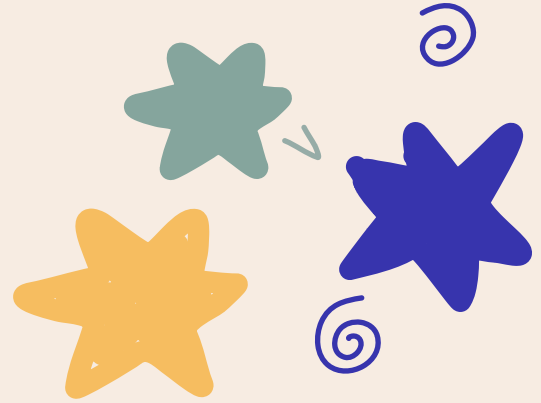
Schizophrenia affects approximately 24 million people or one in 300 people (0.32%) worldwide. This rate is one in 222 people (0.45%) among adults. It is not as common as many other mental disorders. Onset is most often during late adolescence and the twenties, and onset tends to happen earlier among men than among women. (WHO)



Diagnosis

There is, as yet, no simple lab test to make a diagnosis. Therefore, the diagnosis is based on the symptoms - what the person says and what the doctor observes. No matter what happens during the first visit to the doctor, the diagnosis of schizophrenia usually takes a long time. This is because it can be a very difficult diagnosis to make: the symptoms necessary for diagnosis either go unrecognised, or do not show themselves fully, until the illness is advanced.





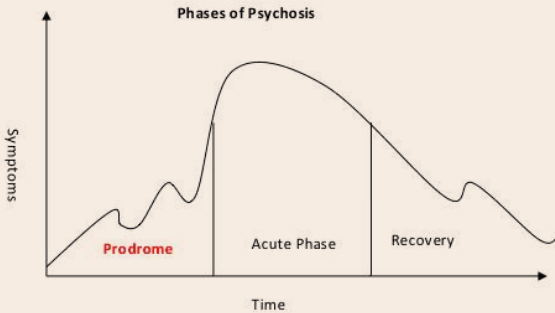
Watch out for !

Schizophrenia : Recognising something isn't right

Early symptoms



Recognising something isn't right



Various mood changes such as anxiety, depression, mood swings, sleep disturbances, irritability, anger, and suicidal ideas are reported as part of **prodromal symptoms**. Before a full-blown episode of schizophrenia, your loved one might show subtle signs like feeling anxious, sad, or having trouble sleeping. When the **acute phase** hits, things can get really intense. They might start having strange thoughts, seeing or hearing things that aren't there, or have trouble speaking clearly. This phase can come on suddenly, even without warning signs.

It's crucial to get the right **treatment** during this time to help them get better. And even after they start feeling better, it's important to keep an eye out for any signs of the illness coming back in recovery phase.

inability to sleep, unusual waking hours, day/night mixed up

social withdrawal, isolation, indifference

deterioration in social relationships

hyperactivity, or inactivity

unusual preoccupation with religion or the occult

inability to concentrate, noticeable difficulty in making decisions

hostility, suspicion, fearfulness

over-reaction to peer or family disapproval

unusual emotional reactions

deterioration in personal hygiene

flat, expressionless gaze
staring, not blinking, or blinking incessantly

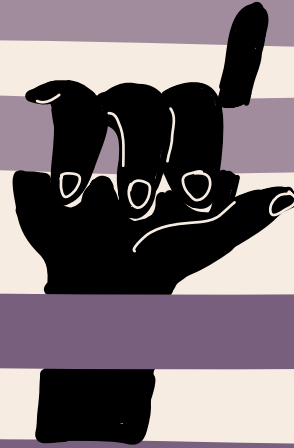
peculiar use of words or language structure

bizarre behaviour: refusal to touch people, constant wearing of gloves, shaving head/body hair, cutting oneself, threats of self-mutilation

unusual sensitivity to stimuli (noise, light)

Early warning signs and symptoms

Family members commonly reported that they knew at an early stage that something wasn't right with their relative.



Lurking in the shadows

Tackling schizophrenia stigma

Schizophrenia stigma

Stigma and what to do about it

Stigma surrounding mental health issues, including psychosis, is unfortunately prevalent. However, there's truly no reason to feel ashamed if you've experienced psychosis. The stigma arises from a lack of understanding about psychosis among others.



People call someone with psychosis as violent or has a split personality. Unfortunately, when someone is seen as 'different,' they're often not accepted.

When people stigmatize schizophrenia, they perceive those who've experienced it negatively. This often happens because of misinformation or a lack of knowledge. This stigma can make it challenging to form and maintain friendships, as well as to find and keep a job. It can also lead to various forms of unfair discrimination.



Schizophrenia stigma

Stigma and what to do about it

Somebody who experiences stigma may actually come to believe that there is something unacceptable about himself or herself.

Remember that the negative attitudes that others may hold toward psychosis are the result of misunderstanding.

Work hard at not allowing stigma change how you feel about yourself. If people contact stigmatised individuals in conditions of relatively equal power and status, the interaction is far more likely to generate positive attitudes and chip away at stigma.



Regular, informal contact is most likely to eradicate negative perceptions of stigmatised individuals. Shared goals and cooperative work toward common ends between people with and without mental illness promote an environment where attitudes are more likely to be positive and contact is likely to continue.



Plan for Coping with Stigma

Understand your stigma around you and your loved ones so that you are conscious of it next time a situation comes



Have you experiences stigma ? from Whom?

Things to do when I have thoughts about stigma toward myself

Things to do when I experience stigma from others



Web of myths

Tackling schizophrenia Myths

Schizophrenia Myths vs Facts

Myth

Schizophrenic people are dangerously violent

Fact

Most people are not violent, only 3-5% are acts due to severity/ non treatment

Myth

Patient has been possessed by a ghost, must be taken to priests

Fact

Antipsychotic medicines are needed although religion provides calm

Myth

Its a split personality disorder

Fact

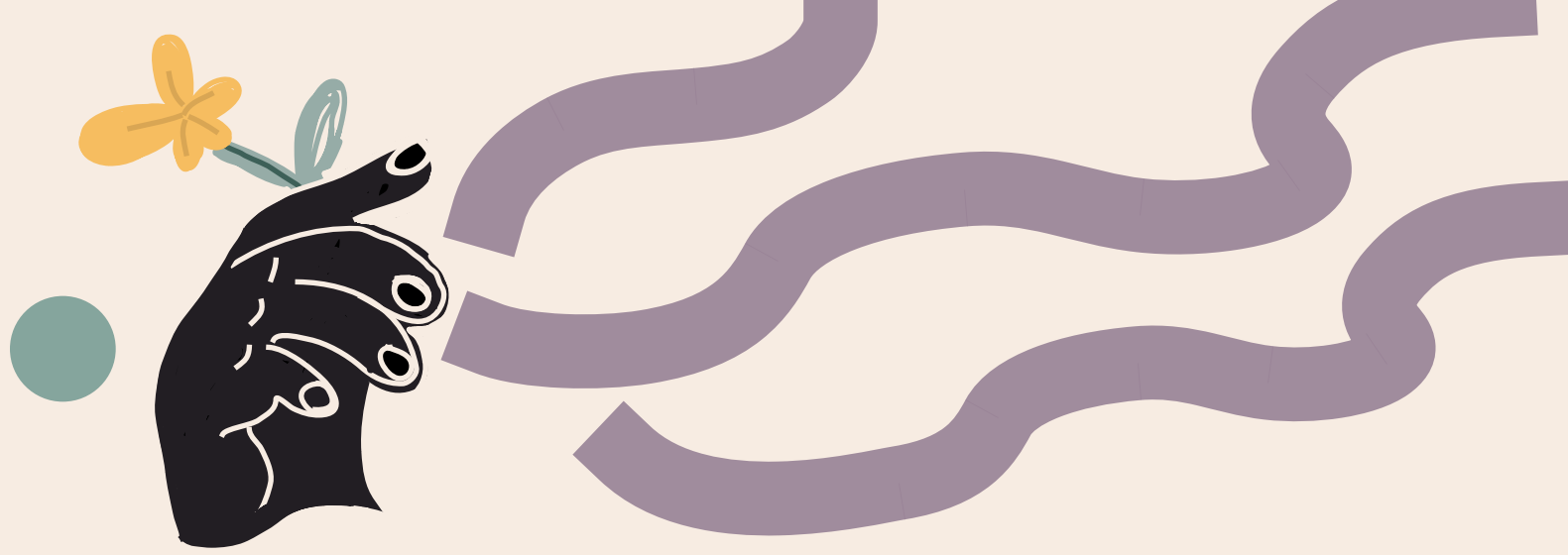
It is not split personality as that is BPD in terms of symptoms

Myth

Schizophrenia cannot be treated ever

Fact

People can live fulfilling lives with medication



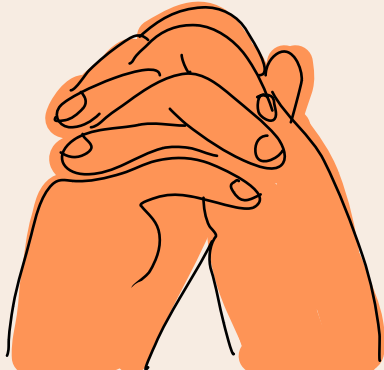
Shore to safety

Schizophrenia Treatment

Treatment

People with schizophrenia can heal and thrive when given the right care. Long-term results are better the earlier treatment is started. But, receiving treatment at any stage can have a profound and positive impact on the life of your loved one.

Given that the demands of your loved one will probably alter over time, treatment should be a dynamic and continuing process.



Medication

Psychological
services

Supportive
services

Effective treatment for schizophrenia includes

- medication,
- psychological services and
- supportive services such as employment and education support

An ideal treatment program will involve all three of these types of interventions. There are many strategies to address the side effects of schizophrenia treatments that you can discuss with your doctor, including changes in nutrition and exercise and supplemental medications.

Treatment

MEDICATION

For schizophrenia, medication—more especially, antipsychotic medication—is usually the first treatment recommended by a medical professional. There are numerous antipsychotic drugs on the market, and their administration methods might vary (some may be taken orally once a day, while others may be administered as an injection that lasts for several months).

There are two broad types of antipsychotic medications:

First-generation or “typical” antipsychotic medications.

These older medicines can have more severe side effects.

• Second-generation or “atypical” antipsychotic medications.

These medicines are more common today because they have fewer side effects

Contact your doctor or nearest hospital for specific treatment medication for your loved one.

Finding the right medication and dosage for your loved one may take some time.

There are many strategies to address the side effects of schizophrenia treatments that you can discuss with your doctor, including changes in nutrition and exercise and supplemental medications.



Treatment



PSYCHOLOGICAL THERAPY

It is believed that both group and individual therapy are essential ongoing treatments for people with schizophrenia and those close to them.

They are essential for "re-entering" society following the change that schizophrenia can bring about. Psychological counselling can offer:

- Tailored information regarding/understanding of symptoms.
- Tools for reducing the stigma associated with the diagnosis, accepting it, and managing the illness in general.
- Developing skills (such as assisting in the identification of symptom triggers and enhancing medication adherence).
- Assistance with crisis planning.
- Social ties and assistance.

Cognitive Remediation: A Therapeutic Approach That Aims To Enhance Cognitive Skills Such As Memory

Cognitive Behavioral Therapy (CBT) For Psychosis

•Family Psychoeducation

Illness Self-Management Training

Social Skills Training