Schizophrenia and Psychosis

WebQuest Description: Schizophrenia usually has its onset between the ages of 15 and 25 and can cause serious disruption in the life of not only the individual who develops the disease, but also the individual's family. This training will help the clinician learn the signs of schizophrenia and some tools for use when working with someone who experiences hallucinations or delusions (psychosis).

Introduction

You are working with clients and have discovered that you need to know more about Schizophrenia and psychosis. Your supervisor has advised that you sign up for this training and complete all of the tasks so that you will not only know more about psychosis and Schizophrenia, but will also have a better idea of how to work with your clients. Your learning objectives are:

- State three factual pieces of information about psychosis and Schizophrenia.
- Name five things that you should do or not do in responding to psychosis.
- Be able to describe the experience of hearing voices.
- State the steps of the skill of orienting and grounding with a person in a psychotic crisis.

Tasks

Your tasks in this training are to visit and explore the websites at the links provided, take notes or print out information that you think will be helpful in your work with clients, and complete the final test and a course evaluation to receive your CEUs. You don't need to do all of this in one sitting.

- You can leave and come back and pick up where you left off.
- The training is expected to take four hours to complete (including the test).
- The ultimate goal is that you learn about and feel more comfortable working with people who have Schizophrenia.

Process

When you open a link, it will appear in a new tab. Close it to return to the training or click on the tab labeled "WebQuest: Schizophrenia." First, what do I need to know first? To get started, familiarize yourself with some terms. Term Definitions:

- Bipolar
- Drug induced
- Perception
- Schizoaffective
- Blunted
- Emotions
- Grandiosity
- Prodromal
- Schizophrenia
- Delusions
- Hallucinations
- Psychosis
- Withdrawal

Answers to Term Definitions:

- Bipolar: A mood disorder characterized by periods of extreme elation or depression.
- Drug induced: Reactions to substances that affect the user's central nervous system.
- Perception: The process by which individuals interpret their sensory input.
- Schizoaffective: A diagnosis that indicates a co-occurrence of schizophrenia and mood disorder.
- Blunted: Diminished emotional responses.
- Emotions: The overall emotional state of an individual, including joy, sadness, fear, anger, etc.
- Grandiosity: Exaggerated self-esteem, often associated with delusions.
- Prodromal: Symptoms that precede the full manifestation of a psychiatric disorder.
- Schizophrenia: A chronic and severe mental illness characterized by disturbances in thinking, perception, and behavior.
- Delusions: Fixed beliefs that are not based on reality.
- Hallucinations: Sensory experiences that occur in the absence of external stimulation.
- Psychosis: A term often used interchangeably with schizophrenia, referring to a range of mental health conditions characterized by disturbances in perception and thought processes.
- Withdrawal: The state of being detached or isolated from others.

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4 CEUs available to qualified staff.
about these things: What did you notice first about Cecelia McGough? What stood out to you about her struggle? How does she fit with media portrayals about psychosis? What facts did she share about her experience with psychosis? Fourth: So what do I do when someone is having hallucinations? Queensland MIND Essentials: Watch for cues that the person may be experiencing hallucinations. These include watching an empty space in the room with eyes darting back and forth, speaking to an invisible person, talking to himself or herself, and appearing to listen to someone when no one is speaking. If your relationship is appropriate, directly ask the person whether he or she is experiencing hallucinations. For example, you could say: ‘Are you hearing voices now? Is it a man? A woman? What are they saying to or about you? It is not appropriate or necessary to repeat this questioning frequently. It may be difficult for the person to concentrate on what you are saying because of the distraction of the hallucinations. Without being condescending, speak clearly and keep sentences simple. Do not respond as if the hallucinations are real. For example, do not argue back to voices that the person may be hearing. Do not deny the person’s experience, but suggest your own perceptions. For example, you could say: I understand that you are feeling worried now. I don’t see or hear anything, but I can understand that it may be difficult, worrying or unpleasant for you. Take a look at this site and see what they have to say about helping someone to manage psychosis symptoms: Recovering from Psychosis. This PSYCOM.net page has some other great information on it. Check it out: Caring for someone with Schizophrenia. Make some notes in your Participant Guide. Fifth: What is Orienting and Grounding? Read what Heidi Hanson has to say about orienting and grounding: Grounding for PTSD. Make some notes in your Participant Guide. Orientation = Getting someone focused on the here and now. Grounding = Connecting them to the here and now through their senses. What are the steps to Orienting and Grounding? Steps to orienting and grounding: 1. Remind them of your name/position or duty. (This is Dana I am the training director/your therapist/your staff.) Ask: Who am I? / who did I say I am? Where are you? 2. Assure them you are there with them. (This is Dana I will stay with you.) Ways to ground someone: 3. Once they are present with you and respond with these first questions, then ask grounding questions. Ask them to: Name 5 things you see in this room right now. Name 5 things you hear in this room right now. Name 5 things you can touch in this room right now. Make some notes in your Participant Guide. 5. Finally, watch Quentin’s story about diagnosis and recovery from Schizophrenia: After Winter: A Real Life Schizophrenia Treatment Story. Video used under the Fair Use Clause of The United States Copyright Act of 1976, 17 U.S.C. Â§ 107, and is intended for educational purposes. Congratulations, you’re almost done! Now just read through the Evaluation and Conclusion tabs on the left and then you’ll be redirected to complete the test and course evaluation in Stars University.
types of hallucinations in schizophrenia, schizoaffective disorder, bipolar disorder, and depression. Schizophrenia Research, 176(2-3), 371-377. doi: https://doi.org/10.1016/j.schres.2016.06.027


