

# SCHIZOPHRENIA

Schizophrenia spectrum and other psychotic disorders are defined by abnormalities in one or more of the following five domains:

DIMINISHED EMOTIONAL EXPRESSION (NEGATIVE SYMPTOMS)

ABNORMAL MOTOR BEHAVIOR

DELUSIONS

HALLUCINATIONS

DISORGANIZED THINKING & SPEECH

## SCHIZOPHRENIA IN ADULTS

- Difficulty thinking clearly and controlling emotions
- Unable to work or live independently
- Difficulty building social relationships
- Social isolation

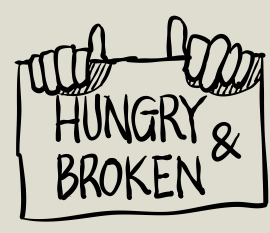
## SCHIZOPHRENIA IN ADOLESCENCE

- Usually appear in late adolescence or young adulthood
- Blurred lines between ordinary teenage moodiness and signs of more serious illness
- Withdrawal from friends and family
- A drop in performance at school

# SCHIZOPHRENIA IN SCHOOLS

Many of these students show difficulties with attention and concentration, confused reasoning, strange ideas, language deficits and eccentricities, distrust of peers and teachers, anxiety, flat emotional expression, self-imposed social isolation, unanticipated aggression, and disregard of self-care (Asarnow & Asarnow, 2003; Madaan, Dvir, Bestha, & Wilson, 2011).

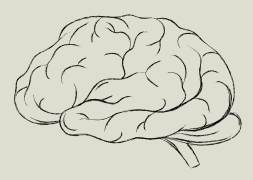
## RISK FACTORS



Environmental Factors



Genetic Factors



Brain Structure

# ADDRESSING SCHIZOPHRENIA IN SCHOOLS

## SCREENING & EARLY INTERVENTION

Longer Duration of Untreated Psychosis  
(DUP) = **worse outcomes**  
Early Intervention = shorter DUP

### Signs of Clinical High Risk for Psychosis

- Alienating experiences
- Experiences of being influenced
- Experiences of threat
- Unusual sensory perceptions
- Confusion and difficulty concentrating

## SIX MYTHS ABOUT SCHIZOPHRENIA, BUSTED:



## MEDICATION MANAGEMENT

- Obtain a release of information so that school-based service providers can be in communication with community-based providers
- Understand what your signs and symptoms to look out for



- Having more than one person in the school setting monitor the student using the same tool.

## RE-ENTRY AFTER PSYCHIATRIC HOSPITALIZATION

- Encourage school-family communication
- Co-develop Re-entry Plan with team members and family
- Identify specific triggers, coping strategies, and goals
- Monitor and revise plan as needed