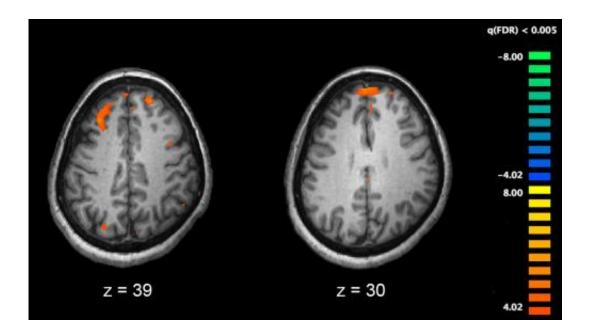


New therapy can help schizophrenia sufferers re-engage socially

December 11 2017



Functional magnetic resonance imaging (fMRI) and other brain imaging technologies allow for the study of differences in brain activity in people diagnosed with schizophrenia. The image shows two levels of the brain, with areas that were more active in healthy controls than in schizophrenia patients shown in orange, during an fMRI study of working memory. Credit: Kim J, Matthews NL, Park S./PLoS One.

A new therapy aimed at helping young people suffering from schizophrenia to reconnect and engage with the world around them has had promising results, according to a new University of Sussex-led study.



Social Recovery Therapy, which involves helping severely withdrawn individuals to identify personally meaningful goals and to set up day-to-day achievable activities, can significantly increase their amount of social interaction, say authors of the study published in *The Lancet Psychiatry*.

Sussex psychologist Professor David Fowler, who devised the <u>therapy</u> with colleagues at the University of East Anglia and the University of Manchester, said: "Non-affective psychosis - or schizophrenia - affects one per cent of the population, with the most at risk group being young people entering adolescence.

"Services currently provided by the health service for sufferers, such as <u>cognitive behavioural therapy</u> (CBT) and <u>medical intervention</u>, are effective - but only for those motivated to engage. There are many more sufferers with complex issues who are left isolated and may continue to be socially disabled across their life course."

The therapy, trialled on 154 patients aged between 16-35 during a twoyear period, found that the most effective outcomes were for those who received both the early intervention services provided by the NHS, followed by a nine-month period of Social Recovery Therapy.

During Social Recovery Therapy, patients and therapists worked together in a three-stage programme that involved identifying goals and expectations, followed by preparing pathways to match those goals (including referral to relevant vocational agencies, education providers and community providers of social and sports activities).

The final stage of the programme required patients and therapists to focus on managing debilitating symptoms, such as negative beliefs and feelings of stigma, while engaging in new activities.



"The key to the therapy is to see clients in their own homes and to work closely with them," said Professor Fowler. "We identified those most socially withdrawn as spending less than 30 hours a week outside of their home and found that, through a combination of early intervention services and Social Recovery Therapy, we can increase that weekly structured activity by eight hours.

"This is a meaningful and measurable success, which gives great hope not just to the individuals, but also their families.

"Our hope is that this now provides a framework for training others, especially in identifying <u>young people</u> at risk of developing disorders at an earlier stage."

An independent review that will be published alongside the paper in the *Lancet* described the work as is "one of the most promising developments for this severely debilitated population in many years".

More information: *The Lancet Psychiatry* (2017). <u>DOI:</u> <u>10.1016/S2215-0366(17)30476-5</u>

Provided by University of Sussex

Citation: New therapy can help schizophrenia sufferers re-engage socially (2017, December 11) retrieved 7 May 2024 from https://medicalxpress.com/news/2017-12-therapy-schizophrenia-re-engage-socially.html

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