

# HOW DO WE MAKE SENSE OF THE WORLD?

How do we make sense of the world begins with our senses. We gather information from our environment using our senses, these being:

VISUAL	(sight)
AUDITORY	(hearing)
GUSTATORY	(taste)
OLFACTORY	(smell)
TACTILE	(touch).

We then begin to try to make sense of the world around us using the ability of our brain to:

- **PERCEIVE:** how we apprehend the objects and events around us.
- **REMEMBER:** where we record the past and later refer to it so that it might affect the future.
- **THINK:** here I'm talking about the ability to ponder or reflect, where we might use such skills as Problem Solving, Reasoning and Decision Making, Spatial Thought and Abstract Thought.
- **BELIEVE:** an individual responds to a situation depending upon what she/he understands it to be. Romeo killed himself in grief because he believed Juliet to be dead. Had he known she was only drugged the play would have had a happy ending.

This is a brief overview of some of the complex workings of our minds that help us comprehend and interpret the world around us. Our conversations, our moods and our behaviours are a visible reflection of this understanding.

## WHAT IS PSYCHOSIS?

The word is used specifically to describe a group of disorders in which **misinterpretation** and **misapprehension** of the nature of reality are the key features.

What does this mean?

For the person experiencing psychosis this means that the way in which the individual's mind makes sense of the world can be distorted or fragmented.

This can be reflected in:

- **Hallucinations** (disturbances in perception) and/or
- **Delusions** (distorted beliefs) and/or
- **Thought Disorder** (disorganised or confused thinking)
- **Changes in mood and loss of motivation and poor concentration** can also occur.

When someone experiences some or all of these features we call this a **psychotic episode**.

These symptoms of a psychotic episode may also affect how well a person manages their day-to-day affairs.

For example, a **deterioration in work or study** or a **withdrawal or loss of interest in socialising**.

## PSYCHOSIS AS A HUMAN EXPERIENCE

There are many difference reasons why a person may experience psychosis. It can happen to anyone.

Almost anyone would experience psychosis if they were deprived of sleep for long enough and particularly if they were placed under an added burden of stress. For example, many competitors in long-distance yachting races experience psychosis with very vivid hallucinations. People who have been in solitary confinement or who have experienced torture also report experiencing psychosis.

In more every situations people sometimes experience psychosis as a result of taking drugs such as amphetamines or marijuana, or after an operation.

Some people have a nervous system, which is so sensitive that when they experience stress, they may experience psychosis. As they try to make sense of what is happening, they often jump to distorted or false conclusions, thinking that it's the outside world that is changing.

Psychosis occurs in all sorts of people, all over the world. It is not a result of poor parenting. It can happen to anyone.

## PSYCHOSIS - PRODROME

Imagine you find the world suddenly changing around you?

Things of importance to you and your social environment.

- No one understands what you say.
- Your friends are often confused or argue with what you say
- Your family starts believing other things.

Suddenly your fundamental beliefs about life are challenged.

What is important and what is not? I can't connect with people all of a sudden, or with myself. What is almost taken for granted being in most social settings becomes awkward and somewhat prefabricated – something is missing, beyond the simple humanity of these things. External questioning becomes involved internal questioning.

Confused as to where you stand in life, it seems people start messing with your mind, manipulating your thoughts, changing your thoughts, stealing thoughts....

What would you feel?

What would you believe?

Would you withdraw?

Would you be scared?

## **THREE PHASES OF PSYCHOSIS:**

The onset of psychosis can be quite gradual and usually occurs in phases. These phases vary from one individual to another and from one episode to another.

There are generally understood to be three phases of psychosis; the prodromal (or pre-psychotic) phase, the active (or psychotic) phase, and the recovery phase.

### **PRODROMAL PHASE:**

Can last from a period of days or weeks to many months and can affect a person in a number of ways:

- **CHANGES IN AFFECT (MOOD)**

Suspiciousness, depression, anxiety, mood swings, feelings of tension, irritability and anger

- **CHANGES IN COGNITION (THINKING)**

Odd ideas, vagueness, difficulties with concentration or recall

- **PHYSICAL AND PERCEPTUAL CHANGES.**

Sleep disturbances, appetite changes, somatic complaints, loss of energy or motivation, perceptual disturbances.

# THREE PHASES OF PSYCHOSIS

## PRODROMAL PHASE (EARLY SIGNS) cont....

Some of the benefits of getting help early are:

- Decreasing immediate risk to self and others
- Decreasing the likelihood of long term disability
- Decreasing the likelihood of relapse
- Minimising the distress for the person and their family
- Maintaining social connections.
- Improving long term outcomes
- Increasing the person's understanding of and choice of appropriate treatment and reducing trauma related to involuntary admission to hospital (use of police etc).
- Increasing the chance for people to achieve important development tasks (complete school, personal development)

# **THE ACTIVE PHASE OF PSYCHOSIS**

## **POSITIVE AND NEGATIVE SYMPTOMS.**

When health professionals talk about psychosis, we sometimes talk about **positive** and **negative** symptoms or features of psychosis. It may be a little confusing why we would use the words positive and negative. It doesn't mean good and bad. We use the word positive to describe features that are added to our usual experience of the world, and negative to describe features that reduce our involvement in our day to day lives.

## **POSITIVE SYMPTOMS OF PSYCHOSIS**

- **DELUSIONS** (Distorted beliefs).

- Persecution (plotted against, victimised)

- Reference (objects have personal messages)

- Grandiosity (special powers)

- Control/influence (being controlled/influenced by others)

- **HALLUCINATIONS** (Perceptions in the absence of external stimuli)

- Auditory voices, usually outside head)

- Visual (things and people)

- Somatic (something happening inside the body)

- Tactile (tingling, burning or crawling)

- Olfactory (smell odours, poison, smoke)

- Gustatory (food or drink tastes strange)

- **DISORGANISED THINKING AND SPEECH**

- Loose associations (jumping from one topic to another without a clear connection)

## POSITIVE SYMPTOMS OF PSYCHOSIS (Cont)

Perseverations (repeating words/statements)

Peculiar verbal expressions

Neologisms (made-up words)

Other features associated with psychosis can be low motivation and changed/or inappropriate affect (moods).



# THE ACTIVE PHASE OF PSYCHOSIS

## NEGATIVE SYMPTOMS

- POVERTY OF SPEECH

Say a lot with little content or meaning

- BLUNTED OR FLAT AFFECT (MOOD)

Lack of emotional expressiveness

- DISTURBANCES IN MOTIVATION

Apathy, ambivalence, low motivation for everyday tasks.

- EMOTIONAL & SOCIAL WITHDRAWAL

Lack of interest in recreation and people  
Pre-occupied with own ideas and fantasies

- ATTENTION PROBLEMS

## **TYPES OF PSYCHOSIS**

### **• DRUG INDUCED PSYCHOSIS**

Use of, or withdrawal from, alcohol and drugs can be associated with the appearance of psychotic symptoms.

Sometimes these symptoms will rapidly resolve as the effects of the substances wear off. In other situations, the episode may last longer, but begin with drug induced psychosis.

### **• ORGANIC PSYCHOSIS**

Sometimes psychotic symptoms may appear as part of a head injury or a physical illness which disrupts brain functioning. There are usually other symptoms present, such as memory problems or confusion.

### **• BRIEF REACTIVE PSYCHOSIS**

Psychotic symptoms arise suddenly in response to a major stress in the person's life, such as a death in the family, or a change in living circumstance. Symptoms can be severe, but the person makes a quick recovery.

### **• DELUSIONAL DISORDER**

The main problem is strong delusional beliefs, without the other features usually associated with psychosis.

### **• SCHIZOPHRENIA**

Relates to a psychotic illness in which the changes in behaviour

## TYPES OF PSYCHOSIS (cont)

or symptoms have been continuing for a period of at least six months. The symptoms and the length of the illness vary from person to person.

- **SCHIZOPHRENIFORM PSYCHOSIS**

This is just like schizophrenia except that the symptoms have lasted for less than six months.

- **BI-POLAR DISORDER**

Psychosis appears as part of a more general disturbance in mood, in which mood is characterised by extreme highs (mania) or lows (depression).

- **SCHIZOAFFECTIVE DISORDER**

This diagnosis is made when the person has concurrent or consecutive symptoms of both mood disorder and psychosis.

- **PSYCHOTIC DEPRESSION**

This is a severe depression with psychotic symptoms mixed in, but without periods of mania occurring at any point during the illness. This distinguishes the illness from bi-polar disorder.

- Note that depression can occur as a result of experiencing psychosis.

# CAUSES OF PSYCHOSIS

## 1. GENETIC FACTORS

- For some psychotic disorders there seems to be no genetic link at all
- For others, research suggests an inherited predisposition
- However it is only one of several factors.

## 2. CHEMICAL IMBALANCE

- 'Natural' imbalance... naturally occurring imbalance of chemical neurotransmitters in the brain
- Substance abuse... some illicit drugs and alcohol can cause a disturbance in the brain chemistry, leading to psychotic experiences
- Organic.....head injury, AIDS dementia, brain tumours

These factors can interfere with the available levels of chemical neurotransmitters in the brain (dopamine and serotonin), which send messages from one brain cell to another. Medication is designed to address this imbalance.

## 3. ENVIRONMENTAL STRESS

A stressful environment can be a factor in psychosis, eg

- Home
- Work
- School
- Neighbourhood
- Foreign or strange places

#### **4. SOCIAL STRESS**

Some events can be stressful, and can be a factor in psychosis, eg

- Relationship breakdown
- New relationships
- Loss of job
- New Job
- Family gatherings
- Change in school
- Christmas

#### **5. PSYCHOLOGICAL STRESS**

This refers to the way in which we deal with stressful situations, eg

- Avoiding suppressing or ignoring stressful issues is not helpful
- This can result in 'everything catching up with you'

#### **6. UNKNOWN FACTORS**

Research is constantly providing new information. Our understanding of psychosis is becoming richer and more comprehensive.

\* Note how all of the above factors interrelate, and how many of them are common causes for stress related feelings in most of us.

## RECOVERY

Recovery from psychosis may vary greatly from one individual to another.

Recovery may occur rapidly with a quick return to a 'normal' lifestyle. Others may take weeks or months to get back on track. For many (about 25%), their first episode of psychosis will be their last. About 25% may experience a few episodes and around 50% may remain vulnerable to relapse.

The outcomes for most people are much more hopeful than it is generally thought, particularly if help is received early.

We have included a handout that includes some suggestions that family members, friends and others may find useful in helping the young person's recovery. Please discuss these with the person experiencing psychosis.

There will be a session dedicated solely to recovery later in the program, which will obviously provide you with more information and opportunity for discussion on this vital area.

## **TIPS FOR RELATING WELL WITH A PERSON EXPERIENCING PSYCHOSIS**

- Be a friend.
- Relate as you would to anyone, with care, consideration and respect.
- Remember, you are not relating to a child or to someone who is stupid.
- Remember that they may be experiencing the symptoms of schizophrenia. Take time to consider what that might be like for them and respond with care.

### **If they are experiencing Delusions or Hallucinations:**

- Recognise they are real for them.
- Don't say they are talking rubbish or are stupid.
- Don't agree with them. Say you see it differently. Be honest.
- Give real responses, reality based.
- Don't get into an argument – you are unlikely to convince them.
- Encourage them to check out their experiences/beliefs with others who can be trusted to be honest.
- Encourage them to take steps in their thinking.

### **If they are having Paranoid Thoughts:**

- Speak really clearly.
- Be careful not to leave the room for double meetings – misinterpretations may result in paranoia.
- Help them find solutions that allow them to feel safe, eg. Leave the room or prepare their own food etc.

### **If they are experiencing Thought Disorder:**

- Keep sentences short.
- Give one message at a time.
- Don't give too many choices at once.
- Check they are following or understanding

- Help them to think step by step through an issue.
- You may need to assist them to keep on track with the conversation.

**If a person experiencing psychosis is behaving in an irritating or annoying way:**

- Everyone can be annoying and it is usually best to give honest and clear feedback.
- Be honest about how it is affecting you.
- Be clear about how you would prefer they behave and why.
- Be prepared to give and take, but be clear about what you do not want to tolerate.
- Don't put people down because of their behaviour before you have been clear about how you feel about their behaviour.
- Be gentle.

**If a person experiencing psychosis is behaving in a frightening or dangerous way:**

- This may happen at times and it is important to remember they may be feeling confused, frightened or angry because of the way they are experiencing their environment.
- Be clear that you are not going to harm them.
- Act and speak calmly.
- Ask what is wrong and if you can help.
- Be prepared to move away quickly if necessary.



Chapter 10: *Learning to deal with negative thoughts and moods*

Chapter 11: *What you can do if any symptoms persist*

## Recognising Warning Signs


Most people with psychotic disorders experience signs that something is not quite right in the weeks before a psychotic episode. As well, people who are continually experiencing psychotic symptoms can often learn to notice the warning signs that things might be about to get worse.

If you learn to recognise the warning signs that your nervous system is stressed, then you can do things to reduce the stress level, and so reduce the chance of a relapse.

If you don't learn to recognise the warning signs, the stress could build up and bring on a relapse.

The main idea of this chapter is that you think ahead and plan how you will manage if you were to experience warning signs. When people do this planning, they usually *feel a lot happier in themselves* and can very often *avoid problems occurring*.



 Here is a list of common warning signs that a person may experience that may tell them that something is not quite right. Tick any that you've experienced when you've been stressed.


**TICK**

- ☐ *Problems sleeping*
- ☐ *Tense or restless*
- ☐ *Anxious or worried*
- ☐ *Withdrawn or quiet*
- ☐ *Depressed or unhappy / Feeling life is hopeless*
- ☐ *Irritable or quick tempered or aggressive*
- ☐ *Suspicious of others / Feeling that others are against you*
- ☐ *Problems concentrating*
- ☐ *Excited / High. Talking a lot, but not getting anything done*
- ☐ *Dwelling on past events or preoccupations*
- ☐ *Other people being irritable or annoyed with you*
- ☐ *Increased drinking or drug-taking*
- ☐ *Hearing voices*

One interesting thing to notice is that these are signs of stress for any person. They are not necessarily related to psychosis. (That may seem surprising in relation to the last one, but it is reasonably common for anyone to hear their name being called when they're in a crowd of people, or to hear a voice when drifting off to sleep.)

If you have experienced psychosis in the past, you'd do well to practise recognising when signs of stress, like these, appear, so that you can act to reduce your stress levels. If you don't, you may find that you start to become psychotic again.

**So, we can start this practice right now.**

 First, write down any signs of stress that you experience that aren't on the list.

☒ Second, look back over the list, and what you've just written, and tick any signs of stress you've been experiencing *in the last week*.

TICK

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SPECIFIC EXAMPLES

- ☐ \_\_\_\_\_ *Problems sleeping*
- ☐ \_\_\_\_\_ *Tense or restless*
- ☐ \_\_\_\_\_ *Anxious or worried*
- ☐ \_\_\_\_\_ *Withdrawn or quiet*
- ☐ \_\_\_\_\_ *Depressed or unhappy*
- ☐ \_\_\_\_\_ *Irritable or quick tempered / Aggressive*
- ☐ \_\_\_\_\_ *Suspicious of others / Feeling that others are against you*
- ☐ \_\_\_\_\_ *Problems concentrating*
- ☐ \_\_\_\_\_ *Excited / High. Talking a lot, but not getting anything done*
- ☐ \_\_\_\_\_ *Dwelling on past events or preoccupations*
- ☐ \_\_\_\_\_ *Other people being irritable or annoyed with you*
- ☐ \_\_\_\_\_ *Increased drinking or drug-taking*
- ☐ \_\_\_\_\_ *Hearing voices*
- ☐ \_\_\_\_\_ *OTHER (from box at bottom of previous page)*

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Third, for any that you've ticked, try to make that warning sign *more specific*. (For example, *in what situation* was it difficult to concentrate? Or if you were withdrawn, *what did you actually do?*) Write your specific examples in the space next to that warning sign.


Fourth, you can practice using numbers to indicate *how frequent* each sign seems to be; that is, *how often it has happened in the last week*. We suggest using a number from 0 to 10, like this: (e.g. a rating of 4 would mean "almost half the time this week")

0	1	2	3	4	5	6	7	8	9	10
not at all this week		occasionally this week		about half the time this week			very frequently this week			almost all the time this week

For each of the warning signs that you ticked, add a number from 0 to 10 next to the tick, to indicate how frequently you have experienced that warning sign during the last week.

## Other warning signs that have applied to you in the past

Now that you have practised identifying and rating common warning signs, it is worth thinking back to times when you've experienced psychosis in the past. You may be able to identify warning signs that you showed then that are particularly relevant to you.

 Thinking about and discussing the following questions may help you identify an even more helpful list of warning signs.

***What was happening and how were you, in the weeks before you experienced psychosis in the past?***

- ***What was happening around you?***
- ***What were you doing? Were there any unusual changes in what you were doing?***
- ***What moods were you experiencing?***
- ***What were you thinking about?***
- ***What might have been troubling you?***

Who would be a suitable trusted ally, someone who knows you, who might know other warning signs that you've shown? They might be a health worker, a family member, a friend, or someone else.

**NAME:** \_\_\_\_\_

When might you read through this unit with them, and hear if they have any other helpful suggestions as to what warning signs you might have shown in the past?

**WHEN:** \_\_\_\_\_

After discussing these questions and talking to your trusted allies you may be able to list some more warning signs here.

- **Warning signs you've shown before:**

## Early warning signs and more serious warning signs

The next step is to think about which warning signs occur earliest and which occur later, after stress has built up. The later signs are usually more serious signs of a possible relapse.

The early warning signs are important because the earlier you notice stress, the easier it is to reduce your stress level and avoid a relapse.

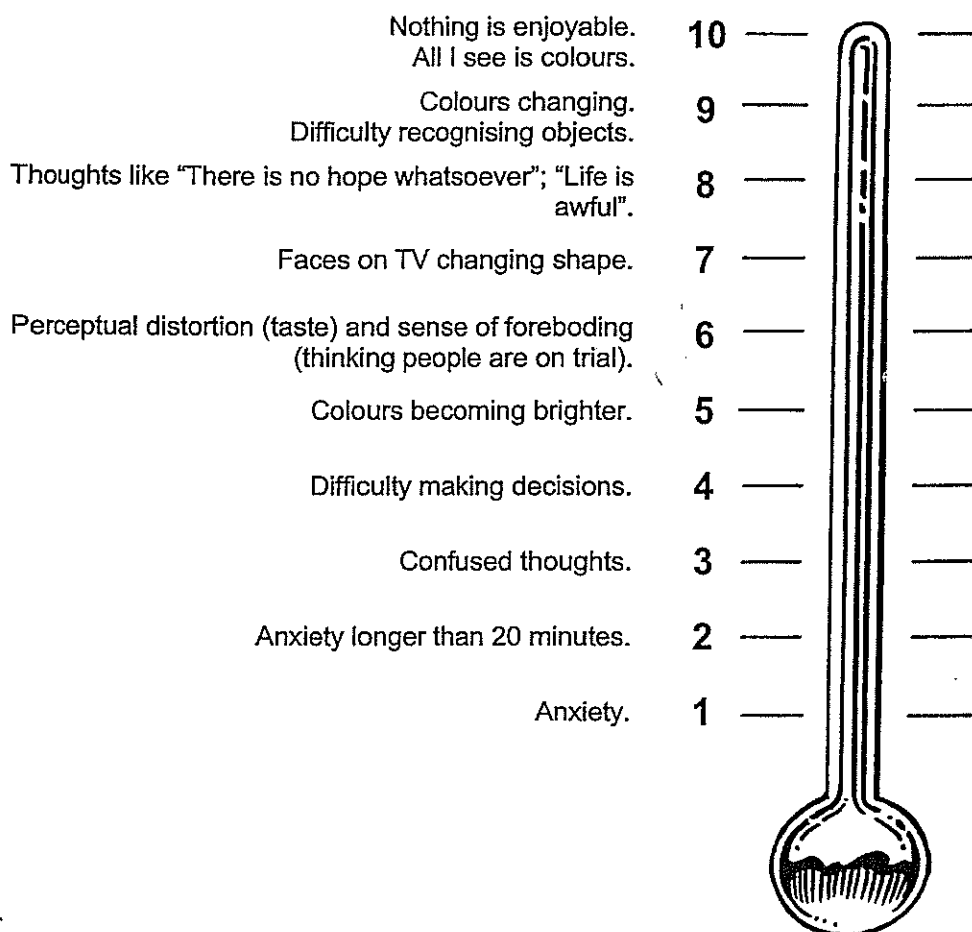
The more serious signs are also very important because they are a much more definite sign that relapse is possible or may even be starting to happen. If serious warning signs are experienced, you'll probably want to act straight away.


You can use a *Warning Sign Thermometer* to show the order in which your warning signs occur. The first, early warning signs go at the bottom of the thermometer. The more serious signs of stress building up go nearer the top of the thermometer. Here is an example.

### EXAMPLE:

### WARNING SIGN THERMOMETER

#### **SIGNS**



 Look at the warning signs that you listed in the last box, those you've experienced before, and place them in the appropriate order on a *Warning Signs Thermometer*.

## WARNING SIGNS THERMOMETER

## SIGNS

Once you've put your warning signs on the thermometer, in the order that they are most likely to happen, then look back to the list of common warning signs from page 39.

- Which of those are important to have on your

Once you've put your warning signs on the thermometer, in the order that they are most likely to happen, then look back to the list of common warning signs from page 39.

- Which of those are important to have on your thermometer?
- Where would they go on the thermometer?


It's o.k. to have two or maybe three warning signs at a particular point on the thermometer. On the other hand, you will want to try to identify the most relevant warning signs. If you end up with fifteen or twenty, it might all seem too complicated. This is where working out the thermometer with your health worker or an ally can be helpful. Because they are not so involved, they can help you keep the amount of detail to a practical level.

You'll probably meet to discuss this topic a few times. You can always change your list of warning signs to make it more relevant to you.

In the next chapter, you'll have the opportunity to work on strategies for dealing with warning signs and you can add them to the right hand side of the thermometer. The thermometer will remind you of your warning signs and strategies.

## When and how to actually make your ratings of the warning signs

Although the *Warning Sign Thermometer* is a good summary and will be worked on again in the next chapter, the check-list format is the easiest way to rate the frequency with which you've been experiencing warning signs. Here is a grid for doing this.

		DATE:										
<b>WARNING SIGNS</b>		<b>RATINGS (0 - 10)</b>										
early warning	1.											
	2.											
	3.											
	4.											
	5.											
	6.											
	7.											
	8.											
	9.											
	more serious	10.										
		0	1	2	3	4	5	6	7	8	9	10
		not at all this week	occasionally this week			about half the time this week		very frequently this week		almost all the time this week		

 Starting at the top with the early signs, fill in your warning signs in the grid.

You will come back to the grid at regular times to record how often each of the warning signs has been occurring. For now, use only the first "Ratings" column. Put today's date at the top and then a rating from 0-10 to indicate how often each warning sign has occurred in the last week.

Filling in this grid regularly will make it easier to see if there is a build up in your warning signs. So think of a regular time when you can rate your warning signs in this way (for example, before each appointment with your health worker, during the appointment, just before a weekly T.V. show, or just before you see your doctor).

When do you think might be a good time for you? \_\_\_\_\_

If your warning signs include becoming suspicious of others or having trouble thinking, it may be unrealistic to expect that you will notice and let people know about your warning signs. In that case, you'd best ask a trusted ally to regularly rate the warning signs you've come up with. You (or, if you wish, your health worker) will be able to explain to your ally, how to do this, when to do it and that the reason for this is so that you can act to avoid relapse.

The next chapter discusses the importance of developing a clear plan of action which everyone concerned understands.

Practise rating your warning signs and talking to your health worker about them for a few months. This will help you clarify any aspects of this procedure that you're not quite sure about. And you'll be able to clarify what the most helpful warning signs are. The first list you come up with is a first draft. It takes most people a while to get to a list that they are really happy with.

After that, your health worker will occasionally ask you to do the ratings. And, most importantly, you can fill the sheet in if you're concerned about your stress levels and then contact your health worker to work out what to do, so that you minimise the chance of a relapse.

Remember, the warning signs may be normal signs of stress. They do not necessarily mean that you are becoming ill. They are signs that you are affected by something stressful. By recognising the stress and acting to reduce its impact on you, you can reduce the likelihood that a build up of stress could trigger a relapse.

" IT DOESN'T COME LIKE A BOLT OUT OF THE BLUE ,..  
... LET ME EXPLAIN ! "

