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Counselling - the popular name for psychotherapy - has a pivotal role to play in the recovery process of any kind of mental illness. And when the mental illness amounts to Schizophrenia, the recovery process turns out to be denser, primarily because of the multifold demands of the situation. And this in turn demands the role of psychotherapy to be more accommodating, cooperative and effective.

The role of psychotherapy in schizophrenia

The role of psychotherapy in schizophrenia as compared to its role in other mental illnesses is:

1. More expansive - as it has to transact with an array of issues ranging from personal to social.
2. More intensive - as the damage caused by the illness is severe in terms of physical and mental fitness, intra-personal and interpersonal relationships, and social and within family integration.
3. More subtle - as it is expected to deal with several delicate, sensitive and yet specific issues in the life of the sufferer which are closer to his heart and which may have an ever-lasting impact on the life of the sufferer and his/her closer circle.

The psychotherapist or the counsellor has to consider three objectives

1) Illness related objectives

a) Managing symptoms and impairment - Though symptom management is primarily a domain of pharmacotherapy, when a patient experiences them, understanding those symptoms and coping with them to attain a good functional level is counsellors' area. Being anxious about 'what is happening to me?', fearful about 'Am I going crazy?' depressed about 'Do I have any future now?' are some examples where the counsellor helps the person to manage the 'problem' out of the 'problem'. Symptoms like disorganised thinking, hallucinations and delusions, cause considerable amount of problems in the day-to-day life of a patient. Only an expert psychotherapist is able to teach the patient to live with these symptoms by using psychotherapeutic tools and techniques and try to lead a normal life.

b) Preventing acute episodes and relapse - To achieve this objective the counsellor has to be an educator not only to the patient but also to his/her caregiver. Illness, its causes, its nature, likelihood of relapse, role of medicine are various issues about which the patient and the family are normally ignorant. Along with early diagnosis, "relapse prevention" is a key factor in recovery process.

c) Long term management and planning - Recovery is an indefinite process in schizophrenia. So the patient and the caregivers need a long term planning about management of their internal and external resources. (Man, money, material, time, energy, etc.) The counsellor has also to discuss issues like the patient's career, job, marriage in the context of the nature of illness.

2) Identifying and managing stressors

a) Fostering social and interpersonal reintegration - With the onset of the illness the bizarre behaviour damages the personal, interpersonal and social life of a patient and his family. Because of the stigma, the patient withdraws from the external world and the family withdraws socially. Here the counsellor's job is to impart the skills like communication, self-disclosure etc. and help them rebuild the social support.

b) Managing family and carer symptomatology -Schizophrenia is an illness which places lots of demands on the family members. Right from understanding the illness, empathizing with the patient, being at the receiving end of his bizarre behavior and emotional outbursts, constantly worrying about the future, providing financial support and this too may be for an endless period of time. This affects the mental health and family dynamics on a large scale. Parent-child relation, sibling relation all are stressed and strained. To maintain the physical and mental health of the family members by facilitating healthy family interaction is the counsellor's job.

c) Reducing the handicap - Social stigma, lack of self-acceptance, lack of acceptance of reality are the major blocks in reducing a handicap. Counsellor has to help the patient and the family to overcome his block so that the person can regain a grip on his career and meaningful productive life in spite of the limitations put by the illness.

3) Other objectives

a) Enhancing self help - Taking "continuous efforts" for getting well is a prime requirement and responsibility of a sufferer but maintaining his or her motivational level is a big task for the counsellor as the process of recovery is tough, exhaustive and many a times frustrating for the patient.

b) Generalisation of skills - Many acquired skills, e.g., social skills like communication, emotional skills like expressiveness, assertiveness, thinking skills like goal setting, problem solving etc. are lost with the progressing illness. Sometimes even the self-care skills are lost. The patient has not only to relearn these skills but he also needs a special training in using these skills in a variety of situations and conditions.

c) Mobilising extra-familial support, liaison and cooperation amongst other helping agencies, influencing social policy towards preventive ways - are some of the various issues which a counsellor has to tackle with the help of other support systems from self-help support groups to even the professionals from the field of law.

Thus the counsellor, as an expert, empowers the patient and the caregivers and, as a responsible human being, creates awareness in the society so that non-threatening, accepting and accommodative surrounding, conducive to recovery of the patient afflicted with schizophrenia, prevails.