

# COORDINATING CENTERS of EXCELLENCE

Best Practices in Schizophrenia Treatment (BeST) Center • Criminal Justice Coordinating Center of Excellence (CJ CCoE) • Ohio Program for Campus Safety & Mental Health (OPCSMH)

## SCHIZOPHRENIA: THE MYTHS, THE REALITIES AND HOW TO HELP

Commonly heard and held views of schizophrenia are *often inaccurate, stigmatizing* and *unduly pessimistic*.

With the right treatments and support, people with schizophrenia can and do recover.

They can finish school, graduate from college, get good jobs, have long-term friendships, relationships and families of their own, vote, volunteer, live independently, pursue hobbies and special interests, enjoy life and more!

## SIGNS AND SYMPTOMS OF SCHIZOPHRENIA

People with schizophrenia experience misperceptions that can affect their senses, ideas or behaviors.

Signs and symptoms may include:

Difficulties at work or school

Unusual thoughts or beliefs

Suspiciousness or extreme  
uneasiness with others

Social withdrawal

Trouble thinking clearly  
or concentrating

Hallucinations

Emotional changes

## MYTHS AND REALITIES ABOUT SCHIZOPHRENIA

### MYTH:

*People with schizophrenia rarely, if ever, get well.*

### REALITIES:

- Although schizophrenia may not be “cured,” people can and do cope with symptoms and lead meaningful, productive lives.
- With timely and appropriate treatment, between 43 and 84 percent of people with schizophrenia recover or improve significantly (*Jansen, 2014*)

### MYTH:

*People with schizophrenia are dangerous.*

### REALITIES:

- The vast majority of people with schizophrenia are neither violent nor dangerous to others.

### MYTH:

*It is impossible to relate to symptoms of psychosis if you have not experienced them yourself.*

### REALITIES:

- Many experiences of psychosis exist on continuum with “normal” experiences. All of us experience odd things at some point.
- Nine out of every 100 people will experience symptoms of psychosis at some time in their lives (*Linscott & van Os, 2013*)

## FACTS ABOUT SCHIZOPHRENIA

Schizophrenia affects approximately one percent of Americans regardless of culture, race, economic status, gender or ethnicity.

Average age of onset: for males, late teens to early 20s; for females, mid-20s to early 30s.

Risk factors for developing schizophrenia include a family history of mental illness, stress and possibly substance use, especially cannabis.

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## SCHIZOPHRENIA: HOW TO HELP

Offer encouragement for participating in mental health treatment and provide practical help with finding **treatment resources**. If a youth or young adult has recently begun experiencing symptoms of psychosis, sharing information about Coordinated Specialty Care for FIRST Episode Psychosis (CSC for FEP) treatment and encouraging them to **get help early** is very important. Early identification and CSC for FEP treatment promote a faster, more complete recovery from early psychosis. Visit [mha.ohio.gov/GetHelpEarly](http://mha.ohio.gov/GetHelpEarly) to find treatment.

**Engage treatment system partners**. In an emergency, call 9-1-1 and ask if a Crisis Intervention Team (CIT) member (a law enforcement officer trained to recognize signs of possible mental illness, use de-escalation techniques for mental health crises and connect individuals to community resources) is available in your community. People with schizophrenia and other serious mental illnesses are over-represented in the criminal justice system, and CIT officers are trained in a variety of community response intervention strategies that support individuals with serious mental illnesses throughout the recovery process.

**Believe in recovery and hope**. Visit [neomed.edu/recoveryandhope](http://neomed.edu/recoveryandhope) for stories of how the practices and programs of the NEOMED Coordinating Centers of Excellence are helping people with schizophrenia and other serious mental illnesses improve their lives.

*Promoting Innovation. Restoring Lives.*

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