



Effect of self-consistency group intervention for adolescents with schizophrenia: An inpatient randomized controlled trial



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ABSTRACT

Objective: The aim of the study was to explore the efficacy of structural group therapy on the self-consistency and congruence of inpatient adolescents with a diagnosis of schizophrenia.

Method: Sixty inpatient adolescents with schizophrenia were randomly assigned to an intervention group (n = 30) and a control group (n = 30). The intervention group was provided with a 12-session structural group therapy program for six weeks (1 h, two times per week), while the control group participated in a handicraft group. All patients were assessed with the Self-Consistency and Congruence Scale (SCCS) and the Positive and Negative Syndrome Scale (PANSS) at pretest, posttest, three-month and one-year follow-up. The results were analyzed using *t*-test and repeated measures ANOVA.

Findings: The two groups had no significant difference at the pre-test of outcome measures ($p > 0.05$). Significant differences existed between the two groups in ego-dystonic, self-flexibility, SCCS scores, positive syndrome, general psychopathology and PANSS scores after the intervention ($p < 0.05$). At the three-month follow-up, ego-dystonic, self-flexibility and PANSS scores were also found to be significantly different between the two groups ($p < 0.05$). But the outcome measures were not significantly different between the two groups at the one-year follow-up.

Conclusion: Structural group therapy in a mental health setting had a positive effect on improving self-consistency and congruence, positive symptoms and general psychopathology of inpatient adolescents with a diagnosis of schizophrenia.

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1. Introduction

Schizophrenia is a chronic and serious mental disorder of unknown etiology that can profoundly impair individuals' health and well-being (Soundy et al., 2014), affecting approximately 1% of the population worldwide (McClellan and Stock, 2013). It consists of a group of psychotic disorders characterized by disruptions in perception, thinking, behavior, emotion and the sense of self (Cai et al., 2014; Lu et al., 2013) and also has a serious effect on social and role functioning (Soundy et al., 2014). From the estimation of a meta-analysis, the prevalence of schizophrenia in Mainland China is relatively high and significantly related to location distribution;

people living in urban areas have been found having a higher risk of schizophrenia than rural dwellers (Long et al., 2014).

Early onset schizophrenia occurs at ages 13 to 17, with a minority expected to achieve complete recovery and many suffering a moderate to severe impairment in the beginning (Masi and Liboni, 2011). There are no adequate studies on the prevalence of early onset schizophrenia (Lachman, 2014); however, the World Health Organization (WHO) (2015) reports that globally 10–20% of children and adolescents are suffering from mental disorders. This places these children in situations of facing challenges of discrimination, isolation, losing access to education and healthcare services and potential violation of basic human rights. The incidence of schizophrenia also increases as children become older; with a higher incidence in adolescents, male adolescents present a significantly earlier onset of this illness (Schulz and deOreo, 2008) and tend to have a higher frequency than female adolescents (McClellan and Stock, 2013).

Early onset schizophrenia may be more severe and debilitating leading to a poor prognosis when compared with adult onset

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schizophrenia, as it negatively influences the vulnerable stages of physical growth, psychosocial and cognitive development in children, adolescents and young adults (Stafford et al., 2015). A study involving the reassessment of 27 adolescents with schizophrenia 13 years after the first admission, showed poor psychopathological and psychosocial outcomes. Impaired by early onset schizophrenia, many social development tasks could not be completed by the youth (Reichert et al., 2008). Many could not live independently, continue their education to a degree level, or obtain employment in a non-sheltered setting. However, early detection and intervention may be effective in improving long term functional outcomes for individuals with early-onset schizophrenia after the first episode (Ammingner et al., 2011).

Antipsychotic medication has been the primary type of treatment for patients with schizophrenia. Advancements in medications have contributed to the stabilization of symptoms and a reduction in re-hospitalization (Elis et al., 2013). However, attention to public health concerns has been raised considering the adverse effects and health risks of antipsychotic medications (Sikich, 2008; Stafford et al., 2015). A combination approach of pharmacological treatment and psychotherapeutic interventions has been widely accepted and used to help patients gain relief from symptom distress (Dixon et al., 2010; McClellan and Stock, 2013). A commonly held viewpoint is that pharmacological treatment plus psychotherapeutic activities may play a vital role in recovery from schizophrenia and be of benefit to the self-experience of patients (Lysaker et al., 2010).

Group therapy helps to focus the expression of participants' feelings through activities and play instead of by verbal means. It also provides a sense of acceptance and freedom, enhances the interactions of group members, and allows opportunities for communications with each other in the group (Shen and Armstrong, 2008). Art activities can be used in group therapy and this provides children and adolescents a unique way of self-expression that works well with them. It is believed that structured expressive art activities can provide adolescents with possibilities to change their perceptions of self, others, and the world (Shen and Armstrong, 2008).

Group therapy, widely facilitated by psychiatric nurses in acute psychiatric inpatient units, was reported effective and beneficial in service users (O'Donovan and O'Mahony, 2009). The participants felt supported, understood, were able to relate to others and showed improvement in confidence, mood and overall well-being. Group therapy intervention for the adolescents who repeatedly harmed themselves was found promising as it led to a decrease of repetition of deliberate self-harm (Hazell et al., 2009). Group psychosocial therapy proved effective for social functioning rehabilitation of a group of adolescents with schizophrenia in a pilot study (Koren and Stepunina, 2015). Patients with schizophrenia participating in integrated group psychosocial programs presented significant improvement in social cognition, neurocognition, psychosocial functioning, and negative symptoms and maintained the positive outcome for an average period of 8.1 months (Roder et al., 2011). Eight sessions of visual arts and poetry intervention were helpful for adolescents who were abused to make sense of themselves, construct identities and create new self-perceptions (Brillantes-Evangelista, 2013).

Researchers have learned that schizophrenia involves different symptoms, particularly, major change of the sense of self. Laing (1960) discussed the divided self of individuals with schizophrenia from the perspective of existentialism-phenomenology (Liu et al., 2013). Sass and Parnas (2003) believed that fundamentally schizophrenia included self-disorders or self-disturbance, characterized by the distortion of consciousness and behavior (enhanced or decreased sense of self). Anomalous self-experience

appeared in the prodromal period of schizophrenia, which was also the basic factor leading to the emergence of other symptoms (positive symptoms, negative symptoms, etc.) (Liu et al., 2013).

Self-consistency and congruence is one of the most important concepts in Rogers' theory of therapy, personality and interpersonal relationship. Self-consistency and congruence refers to the individual's internal harmony and the coordination between self and experience, including self-evaluation of ability and emotion and self-congruity (Rogers, 1959). Self-harmony of a person is closely related to the individual's mental health; one will feel anxious or nervous if he or she experiences the gap between self and experience, which creates a state of incongruity. Various defense reactions to maintain self-concept provide a mechanism for exacerbating the symptoms of psychotic disorders (Rogers, 1959). The incongruity between self and experience is an important factor leading to psychological disorders.

Young people have to experience a developmental period of trying to find what social behaviors are appropriate in various social contexts and answers to identity related questions. A positive self-concept was proved strongly associated with internalizing problems (depression, anxiety, somatic complaints and withdrawn behavior) and negatively related to externalizing problems (delinquency and aggression) (Ybrandt, 2008). It was suggested that promoting a positive self-concept could contribute to the well-being of adolescents as it was vital for their mental health, social functioning and positive development (Ybrandt, 2008).

Schizophrenia disorders involve varieties of anomalous self-experience, but the effectiveness of group psychotherapy on rebuilding self-concept, rehabilitation in functions and relieving symptoms needs to be explored. Higher levels of self-consistency and congruence were proved a positive relationship to better subjective well-being in adolescents (Liu and Zhang, 2013); self-consistency and congruence played a mediating role between personality and subjective well-being (Tang et al., 2014). Self-consistency and congruence was also found to be significantly related to perfectionism and depression among college students (Li et al., 2014).

Many Chinese studies about self-consistency and congruence were conducted among normal adolescents, college students, nurses, and other population groups, exploring the status of self-consistency and congruence and its relations to other factors. However, there is limited evidence about the effects of group therapeutic activities on persons diagnosed with schizophrenia in China, especially those studies exploring and assessing self-harmony on such patients through psychotherapeutic activities. The aim of this study was to evaluate the effectiveness of a 12-session group therapy intervention program in improving self-consistency and congruence among inpatient adolescents diagnosed with schizophrenia.

In the current study, the structured group therapy intervention program including various sessions and types of activities were measured with two scales (described in detail later) for the symptoms and self-consistency of the adolescents. Hence, the research question was that in comparison with the control group, would the group therapy intervention program lead to a lower level of schizophrenic symptoms and better self-consistency and congruence?

2. Materials and methods

2.1. Design and procedures

The design was a randomized controlled trial. Ethical approval was obtained from the Ethics Committee of Wuhan University HOPE School of Nursing and the Wuhan Mental Health Center.

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