remember that some people have more trouble managing their symptoms. Families who are educated about schizophrenia can offer strong support to their loved one and help reduce the likelihood of relapse. Caring for a loved one with schizophrenia can be challenging, and families benefit from education and supportive programs.

A Positive Outlook
Led primarily by real people living with schizophrenia, there is a changing assumption on what is possible for those living with the illness. Long viewed as an incurable illness, new data suggests that as many as 50 percent of people diagnosed with schizophrenia have positive outcomes when they receive appropriate treatment. With new research and expanding knowledge for the causes of schizophrenia, the outlook for those living with schizophrenia continues to improve.

Recovery
Recovery does not mean that the illness has gone into complete remission. Over time, and after what for many can be a long and difficult process, individuals can come to terms with their illness by first learning to accept it and then moving beyond it. This includes learning coping mechanisms, believing in themselves as individuals by learning their strengths as well as their limitations, and coming to realize that they do have the capacity to find purpose and enjoyment in their lives in spite of their illness. RECOVERY IS POSSIBLE!

How to Get Help
No insurance? Call the NAMI Southern Arizona office to help guide you to access mental health services.

If you have Schizophrenia:
- Seek medical care through a psychiatrist and/or your primary care physician.
- Find the right combination of treatment that works for you which may include medication, therapy, support groups, etc. *Sometimes people must try several different treatments or combinations of treatment before they find the one that works for them.
- Take NAMI’s Peer-to-Peer course and/or join the NAMI Connection support group.
- LEARN about your illness. The more you know, the more you are able to help yourself. Start with NAMI today!

If you are a family member with a loved one who has mental illness:
- Take care of yourself.
- Take NAMI’s Family-to-Family course, join a Family & Friends Support Group and/or take NAMI Basics if you have a loved one who is a child or adolescent.
- Family, friends and partners of military service members and veterans can take NAMI’s Homefront course.
- Learn about your loved one’s illness.

Show You Care.
Wear a Silver Ribbon.

Mental illness affects 1 in 5 people. We provide resources and support to all those affected by mental illness.

NAMI Southern Arizona Depends on You.
There are Many Ways to Help.
Become a Member, Volunteer or Donate.

NAMI Southern Arizona
6122 E. 22nd St.
Tucson, AZ 85711
520-622-5582
NAMIsa@NAMIsa.org

Community-Wide Crisis Line:
520-622-6000 or 1-866-495-6735

NAMIsa.org

Educational information and local support provided by:
What is schizophrenia?
Schizophrenia is a serious mental illness that affects 2.4 million American adults over the age of 18. Although it affects men and women with equal frequency, schizophrenia most often appears in men in their late teens or early twenties, while it appears in women in their late twenties or early thirties. Finding the causes for schizophrenia proves to be difficult as the cause and course of the illness is unique for each person. Interfering with a person’s ability to think clearly, manage emotions, make decisions and relate to others, schizophrenia impairs a person’s ability to function to their potential when it is not treated. Unfortunately, no single, simple course of treatment exists. Research has linked schizophrenia to a multitude of possible causes, including aspects of brain chemistry and structure, as well as environmental causes.

Discovering the Truth about Schizophrenia
Because the illness may cause unusual, inappropriate and sometimes unpredictable and disorganized behavior, people who are not effectively treated are often shunned and misunderstood. The apparent erratic behavior is often caused by the delusions and hallucinations that are symptoms of schizophrenia. Along with medication, psychosocial rehabilitation and other community-based support can help those with schizophrenia go on to lead meaningful and satisfying lives. A lack of appropriate services devoted to individuals living with schizophrenia has left many improperly placed in jails and prisons without the help they need.

Schizophrenia is often mischaracterized as an untreatable disease associated with violent behavior, and many untrue and unfortunate stereotypes have developed. Most individuals living with schizophrenia are not violent; risk of violence is associated primarily with factors such as psychotic symptoms or substance abuse. Even then, violent behavior is generally uncommon and the overall contribution of schizophrenia to violence in a community is small. When an individual is engaged in treatment, schizophrenia is a manageable disease. However, the varying nature of each case means that recovery for every individual is different.

Like any other illness, schizophrenia can often have a profoundly negative effect on a person’s life, on their families and on their communities if not addressed. Suicide is a serious risk for those with schizophrenia, occurring at a much higher rate than the general population. However, the risk of suicide can be greatly reduced through the use of medication.

How is schizophrenia diagnosed?
There is no single laboratory or brain imaging test for schizophrenia. Treatment professionals must rule out multiple factors such as brain tumors, possible medical conditions and other psychiatric diagnoses, such as bipolar disorder.

Individuals with schizophrenia have two or more of the following symptoms occurring persistently. However, delusions or hallucinations alone can often be enough to lead to a diagnosis of schizophrenia.

Positive symptoms are also known as “psychotic” symptoms because the person has lost touch with reality in certain ways.

- Delusions- belief in things not real or true.
- Hallucinations- hearing or seeing things that are not real.
- Disorganized speech- inability to generate a logical sequence of ideas.
- Disorganized or catatonic behavior- dramatic reduction or increase in movement.

Negative symptoms refer to a reduction of a capacity, such as motivation.

- Emotional flatness or lack of expressiveness.
- Inability to start and follow through with activities.
- Lack of pleasure or interest in life.

Cognitive symptoms pertain to thinking processes.

- Trouble with prioritizing tasks, memory and organizing thoughts.
- Anosognosia (“lack of insight”) or being unaware of having an illness.

What causes schizophrenia?
Research strongly suggests that schizophrenia involves problems with brain chemistry and structure and is thought to be caused by a combination of genetic and environmental factors, as are many other medical illnesses. One in every 100 people will develop schizophrenia. About 75 percent of people with schizophrenia develop the disorder between the ages of 16 to 40; women typically have a later onset. It is uncommon to be diagnosed before 12 years of age or after the age of 40.

What treatments are available?
The treatment of schizophrenia requires an all-encompassing approach that includes medication, therapy and psychosocial rehabilitation.

Medication is an important aspect of symptom management. Antipsychotic or neuroleptic medications help to relieve the hallucinations, delusions and, to a lesser extent, the thinking problems people can experience. Therapy has been shown to be an effective part of a treatment plan. In particular, cognitive behavioral therapy (CBT), which engages the person living with schizophrenia in developing proactive coping strategies for persistent symptoms, is particularly effective.

Psychosocial rehabilitation helps with the achievement of life goals often involving relationships, work and living. Most often delivered through community mental health services, it employs strategies that help people successfully live in independent housing, pursue education, find jobs and improve social interaction.

Will people with schizophrenia get better?
Long-term research demonstrates that, over time, individuals living with schizophrenia often do better in terms of coping with their symptoms, maximizing their functioning while minimizing their relapses. Recovery is possible for most, though it is important to