



# What are the signs and symptoms of schizophrenia?



You may be diagnosed with schizophrenia if you experience:<sup>3</sup>

- Two or more of the following symptoms during a one-month period (or less than one month if successfully treated), and at least one of these symptoms must be delusions, hallucinations, or disorganized speech:
  - **Delusions:** strongly held beliefs that are not based in reality and may seem irrational to others
    - **Hallucinations:** seeing, hearing, smelling, tasting, or feeling things that are not actually there
  - **Disorganized Speech:** switching from one topic to another, answering questions with information that is either loosely related, completely unrelated, or nearly incomprehensible communication
  - **Grossly Disorganized or Catatonic Behavior:** difficulty completing everyday tasks or experiencing a significant decrease in reactivity to the environment
  - **Negative Symptoms:** decreased emotional expression or lack of motivation to start and finish simple tasks
- Deterioration in one or more major area of functioning (e.g., work, relationships, and self-care) that is clearly below that attained before the disorder began
- Continuous symptoms for at least six months

If you are experiencing thoughts of suicide, thoughts of harming yourself, or someone else, see a health care provider. If you need immediate help because you are experiencing thoughts of death or suicide, call or text 988, the Suicide & Crisis Lifeline.

# When to seek behavioral health help?



If you are experiencing symptoms of psychosis or schizophrenia and are unaware of your condition, your friends and family may be the first to recognize the early signs of this disorder.<sup>2</sup> Seek additional help if you notice the following symptoms in yourself or in someone you support:<sup>4</sup>

- A sudden drop in grades or job performance
- New trouble thinking clearly or concentrating
- Suspiciousness, paranoid ideas, or uneasiness with others
- Withdrawing socially; spending more time alone than usual
- Unusual, overly intense new ideas, strange feelings, or no feelings at all
- Decline in self-care or personal hygiene
- Difficulty telling reality from fantasy
- Confused speech or trouble communicating

**Early identification of symptoms of schizophrenia is critical because the timing of intervention may impact the severity and course of the disorder. Early diagnosis and treatment of schizophrenia may reduce suffering by providing care before the disorder has progressed to the point that functioning declines significantly or hospitalization is necessary.<sup>2</sup>**

# How is schizophrenia treated?



## Medication:

- Antipsychotic medication for preventing relapse and hospitalization
- Taking medications as prescribed to manage symptoms and reduce risk of hospitalization is essential

## Psychosocial Interventions:

- Are often used in addition to medication, and may include:
  - Evidence-based psychotherapies
  - Training to improve social skills
  - Supported employment
  - Supported education
  - Illness management

## Family Psychoeducation and Support:

- Education about psychosis
- Support for caregivers

# Support in recovery



- If you are an individual with psychosis or schizophrenia, it is possible to lead a full life, especially when engaged in treatment.<sup>5</sup>
- Mental health services focus on improving your overall quality of life while in recovery from schizophrenia.
- You can learn effective strategies that help you manage symptoms<sup>2</sup>
- You can receive support as you engage in meaningful life activities<sup>2</sup>

# Family interventions and support



Family interventions may reduce symptoms, hospitalizations, and relapse, as well as increase effectiveness of other treatments.

May include:<sup>2</sup>

- Problem-solving-based self-learning
- Education
- Mutual family support

# Supporting the caregiver



- Caregiver-directed psychosocial interventions may be helpful to train, assist, and support you
- Interventions may enhance your capacity to anticipate and solve problems
- Interventions may increase positive family environment, prevent burnout, and strengthen relationships
- Interventions may appear to improve outcomes related to relapse and hospitalization rates<sup>2</sup>

# Resources

## Support and Information



**Military OneSource** provides 24/7 support and information on housing, financial, legal, medical, and psychological services.

- State-side: 800-342-9647
- Overseas: 800-342-9647
- Collect: 484-530-5908

<https://www.militaryonesource.mil>



**988** provides free and confidential support for individuals in crisis. If you or someone you know is struggling or in crisis, call or text 988.

<https://988lifeline.org/>



**Military/Veterans Crisis line** provides free, confidential resource for those in crisis that is available 24/7. Dial 988, then press 1 to talk with a counselor or text 838255 for live chat.

<https://www.veteranscrisisline.net/>

## Treatment Locators



**inTransition** offers specialized coaching and assistance for active-duty service members, National Guard members, reservists, veterans, and retirees to help adapt to transitions between systems of care.

- State-side: 800-424-7877
- Overseas: 800-748-81111 (in Australia, Germany, Italy, Japan, and South Korea only)

<https://www.health.mil/inTransition>



**TRICARE Treatment Locator**

<https://tricare.mil>



**VA Treatment Locator**

<https://www.va.gov/find-locations>



**Community Treatment**

**SAMHSA Behavioral Health Treatment Services Locator**

<https://findtreatment.gov>

**Recent Onset Serious Mental Illness (SMI)**

**SAMHSA Early SMI Treatment Locator**

<https://www.samhsa.gov/esmi-treatment-locator>

## References

- 1 National Institute of Mental Health. (2023, May). *Schizophrenia*. National Institutes of Health. U.S. Department of Health and Human Services. <https://www.nimh.nih.gov/health/topics/schizophrenia>
- 2 Veterans Affairs and Department of Defense. (2023). *VA/DOD clinical practice guideline for the management of first-episode psychosis and schizophrenia*. Version 1.0. <https://www.healthquality.va.gov/guidelines/MH/scz/>
- 3 American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425596>
- 4 National Institute of Mental Health. (2023). *Understanding psychosis*. National Institutes of Health. U.S. Department of Health and Human Services. <https://www.nimh.nih.gov/health/publications/understanding-psychosis>
- 5 U.S. Department of Veterans Affairs. (2022, August 1). *Schizophrenia*. <https://www.mentalhealth.va.gov/schizophrenia/index.asp>

NOTE: This content is derived from the *2023 VA/DOD Clinical Practice Guideline for the Management of First-Episode Psychosis and Schizophrenia*.



Department of Veterans Affairs and Department of Defense health care providers who use this information are responsible for considering all applicable regulations and policies throughout the course of care and patient education. Created July 2023 by the Psychological Health Center of Excellence.