

Original Paper

A Journey through Schizophrenia

Anonymous

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Abstract

This account of schizophrenia details the journey we all take from the stress that triggers the illness to how we recover and relapse. There are a number of steps this goes through from beginning to end and it is argued if we are to understand everything that happens with schizophrenia it needs narrating as a linear story of what happens at each stage. This includes detailing the differing problems we go through and what can help during the different phases so we know what can help and hinder in the treatment of schizophrenia.

Keywords

schizophrenia, stages, problems

Introduction

Schizophrenia involved a number of stages so to explain the subject properly we need to start at the beginning and continue on to see how these phases follow one another. Then we can formulate the whole diverse experience of the illness in order to get a full understanding. These phases follow each other and if we are going to fully understand life with schizophrenia they need to be listed and examined in turn.

The illness will be with a trigger some kind of stress or trauma will set it off. Then you can begin to see you are slowly losing touch with reality with being delusional and loss of connection with society through stigma. Eventually the illness becomes acute and there is a need to weigh up whether to admit you problems and go into hospital. This will be more likely as things worsen but should once admitted start to improve things.

On discharge there are still issues in life with a mental illness which need to be taken into account as life needs to begin anew including moving house and area and finding things to do when you are unemployed. The system can help with sheltered housing and day centres. Yet as the years go by life with a mental illness can get very depressing and you need to come with the question what is the point of it all. These questions can be answered.

Finally there is hope for recovery which can be a wonderful experience but curiously can throw up new problems in life that might need to be balanced with the positive aspects of reduced fear and pain that was caused by the illness. The danger here is that life might drive us mad and there are strong possibilities of relapse so the whole journey with the illness must start again.

Methodology

This is a personal account of journey through the differing stages we go through is based on my own experiences and so does not make reference to academic procedure. It details a theory on our journey with schizophrenia and contends we all follow the same path with the illness and if we are to better understand the illness we need to know the problems and solutions at each stage and what can be done about them.

The start of the illness

At the onset of the illness we know that stresses in life can “drive us mad” and although we dare not admit this to ourselves as we are frightened of what that means...but as we watch the progression of our loss of touch with reality means something has to be done about it before things get completely out of hand.

We are going to realise that the stresses in life are at root at the problem and that may be remedied before it is too late. Coping with the original stresses can be done by keeping busy and distracting oneself together with breathing, meditating on our safe place but once the stresses of the illness start to occur stopping the process can be much more difficult. At this point there is a need to get help.

If there is insight it might be possible to recognise what is happening to you so it might be possible to ask for help. Thought stigma might prevent this but there is growing evidence that attitudes are changing so the chances of asking for help are increasing

The unusual behaviour might be noticed by friends and family and it might be possible get help this way though about half of families reject relatives who show signs of being mad. When the illness gradually descends and worsens it might be possible to catch before the acute stages and prevent getting to the point at which it is most stressful.

In my case I was gradually losing contact with society and at the opposite end of the country from friends and family and could have gone missing and had no way of getting help. I would have left being stranded somewhere At this point the outcome could mean the patient ends up not being able to look after themselves and may become homeless.

Patients are going to think the symptoms are real and may not see the need to ask for help though with voices some more insight might be possible here. While we not realise delusions are illusory but with hearing the voices at the same time make more sense though admitting you are hearing voices might be perceived as dangerous and prevent an early contact with the mental health system.

It might put people off seeking help as being attacked by a dangerous and disturbed unstable patient in hospital might prevent getting help. This even with the dangerous stigma outside which can also lead to violence. It might be just as frightening as each other.

Outside the hospital and even putting up with not being able to look after yourself and being frightened with illness might still mean avoiding help. The alternative might seem to be imprisoned in hospital forever which is just as bad as the illness.

This will stop links with family as they might have you sectioned. It might be best to stay clear of loved ones but that can make coping with the illness in the first place. At least if we in hospital you would have family support.

It is also likely family members will see you as dangerous and have you locked up anyway: either that or keep away from you in case you hurt them particularly if there are children at home. At this point going into hospital may mean loss of family support so once again it might be better to stay out.

Much depends on the frequency of the acute phases and in between them the anxiety is a lot easier to disguise so again can avoid the illness being detected. Anyone can have anxiety so it is easier to blame it on something else like work stresses.

This avoidance is not always possible as the anxiety escalates to fear. Also at these points breathing exercises and safe place imagery may help. And again this needs to be picked up on in order to get help.

Sooner or later the acute phase may take place outside of hospital. This is when the illness is at its worse and is much harder to disguise but depends on whether it can be got through and how often it happens. As the illness deteriorates we may begin to realise we need help as we cannot cope on our own.

Acute phase

The key here is that the illness is at its worse when untreated and the risks of suicide are at their greatest but with proper support things can improve with help from the mental health system. It is possible to cope in a crisis and this might stop us getting help but there are pros and cons with this and I think in the end people are going to voluntarily admit they have some kind of problem.

The illness will be at its worst when you are not diagnosed and not on medication. At these times there are strong motivational factors in getting help even if you fear the psychiatric system. During the acute phase if suicide is being contemplated that is going to be more frightening and at this point the fear of being locked up in hospital is going to be overtaken by being a danger to yourself and again you might ask for help.

Once the terror wears off and the anxiety returns these thoughts of getting help will go again and the mind becomes preoccupied with the other delusion symptoms and the hope is the terror will not return. If we have got through it once we may outlast it again so it maybe the thoughts of avoiding the mental health system come back again. What tends to happen is that the crisis episodes increase and the illness

begins to take over your life.

As the symptoms deteriorated another factor here was that if you are not eating or sleeping and as in my case wandering the roads during the winter the thought of warm and shelter in hospital is very appealing. The thought of being locked up in hospital in the end didn't seem so bad as I was already a prisoner in my own house, avoiding the neighbours spying on my. The difference was at least I was being cared for.

Schizophrenia can cause a lot of physical pain and emotional pain and this is reflected back at you in the place you live in and you associate the house with the fear adding to the level of anxiety in between episodes. Hospital if it works can break these associations.

The two types of pain can be added to by wandering the roads which can happen to get away from people spying on you. This exercises the body until it is in pain with that too and not eating en route tires you out even more. If the weather is very cold again this adds to the physical side of things and the thought of freezing to death mirrors the feelings of fear from committing suicide. Again the experience is so overwhelming that hospital again seems to be an anti-dote

All the same some crisis episodes can be sometimes got through and again this avoided the need for getting help and the word mad begins to pray on your mind. This does not automatically mean you will think you might be locked up since as the word mad surfaces in your mind it does have other associations like charities such as MIND and RETHINK and of famous schizophrenics like John Nash. About half of people who develop schizophrenia are not duped by their families and they might be better understood by them than the person with the illness who is going to think the delusions are real. Even though you consequently see no reason for being in hospital might still go along with it to deal with some experiences you are going through like lack of sleep, not eating and wandering the roads.

It needs explaining as things slowly deteriorate that there are no padded cells, straightjackets and violent patients so that the trade-off between the risks of staying out and going in can be resolved and you might do it for your family's peace of mind. If there is any insight into the illness we can once again realise about the idea of mental health and mental hospitals and again this makes getting help a lot easier.

Once you get admitted you begin to realise there is a social side to hospital and you are being cared for. The nurses are there to nurse you and if there is any insight you will realise that the medications together with the psychiatric profession are being and doing research to try to help you. If you can do this before the illness dominates all you thinking and allows you to think it is better to stay than needing to escape avoiding the system again.

Coping in a crisis

With schizophrenia it can cause a subconscious overload which comes back to as a constant state of anxiety but can cause terror if triggered off. In my case flashbacks, dreams, memories and association of place can do this and from time to time that can cause a crisis episode. This raises the question of

whether psychiatric help is desirable and it is best to stay out of hospital as much as you can.

By crisis I mean things can get so frightening you might pass out and this is physically and emotionally very painful while your adrenalin will be racing round at a hundred mile an hour with your heart pounding. Shortness of breath is another stress factor and it is worrying that you could pass out at any time or place where there may be no help available. Hospital can be valuable here as if you did collapse there will be someone to revive you.

Sometimes it may be we have to cope with crisis episodes on our own rather than asking for help. This is easier said than done but if you can keep a lid on things and hang in there you know this are going to pass. Often you can get through the willy nilly and in between you can live life more normally. This however may not last and can be so stressful help will still be sort for.

If you can get through the peaks in terror you can avoid being sectioned and admitted to hospital in between you remain in something like the prodromal stage though the stress of this when you are aware of it can trigger off the delusional terror. It is best to see if you can get through each crisis episode before you go into hospital as the confinement might just make things worse.

It might be thought that at this time you will voluntarily ask for help but if the delusions seem real this will not be so. All the same you can see how it looks to other people and maybe in further danger from the stigma and what can happen to you which might be worse than the delusions themselves. Being persecuted may not be as bad as what can happen to you otherwise through stigma and as Frances Jeffry said "opinions based on prejudice are always sustained with the greatest violence."

At least being in hospital at these times will hide the symptoms from the local community and exposure to a stigmatising world both in the society and media and is all you ever hear about. Realising you are in danger from societies prejudices is one of the stages we go through on our journey with schizophrenia and this might make hospital a bit more secure when having a crisis that other people may notice.

If they are infrequent to the more usual symptoms of anxiety it maybe they will not be picked up here by the mental health system and when only anxious you can look after yourself more normally. This illness may go unnoticed and help may not be provided as other people will not be seeing the worst of the symptoms. The problem here is that over time even the anxiety too can get to be a major problem if it goes on for long enough and again this will give you the impetus to seek help.

In the end you have got to admit to yourself something to be done even if you are going to be locked up as it is the only chance of things getting better you cannot go through life lurching from one crisis to the next even if in between things are more bearable. This realisation will stop you living in fear even if you manage to get through the periodic crisis. Even in spite of the self-stigma of not coping with it you will realise you need help.

For me though during a crisis I would only ask for help of being hospitalised unless I really needed it and would try to stay at home as much as I could. It could done in large measure by taking your tablets

earlier and even on an afternoon might knock you out asleep for a couple of hours and at night time it might be possible to get to sleep some hours earlier. This depends on the power of the sedatives and the clozapine is the most powerful though health though if undiagnosed health food can help here with calming down and getting to sleep.

Other coping strategies like breathing and safe place imagery may take the edge off things until you are able to get to sleep and some alcoholic drinking can help clam you down and cheer you up though this is putting you in danger of stopping the medications being effective and making things even worse. At this point however the worsening symptoms might in turn be helped by the drinking but this needs handling carefully.

The best thing to do in a crisis is to try and get through it and then go to see the doctor about getting the meds since if you are compliant with the system being sectioned and taken to hospital is much less likely. If you try to hide the symptoms and that nothing is wrong the chances are this will be noticed by professionals, family members and friends you will ring services to get help for you and maybe forcefully admitted.

During crisis episodes after discharge you may still be reluctant to go back to hospital if you have had a negative experience of it as when being locked up has made things worse. The thought is that with the coping strategies you can be just as ill in hospital as at home and the answer might be it is less stressful to have a community treatment order than a lengthy admission. Coping strategies like breathing and safe place can help with this but to abuse them by staying out of hospital is serious.

The other problem with having been admitted is that hospital is going to associate itself with being ill from a previous admission and could if confined again result in a more severe relapse so trying to cope at home must be tried first and even when severe that thought will stop getting help. Some of the worst acute phases I have had are not easily forgotten and it is only at times more frightening than this when I would ask for help.

The associations of staying at home if they get to be more frightening would lead me back into being readmitted and that would take a lot but the associations work the other way round and compared to going back to a house in the community hospital might seem safer. The associations of terror when at home mean staying in hospital until the memories begin to fade or there is some adjustment with the medication.

Often though with being in crisis there is not going to be the option of staying at home as you simply cannot cope with the symptoms and even with the self-help measures of staying out of hospital are simply not going to work. You end up grasping at straws and that means taking any medication of medical help that might stop the painful fear and emotional hurt. You can only cope with so much and you will need to get help.

One thing here is that if you live far from home and family it will be easier to hide the crisis episodes but as things progress we may panic and run home. In My case I thought the neighbours were banging

on the wall and I was left to cope with the fear this caused. I stuck it out living there for over a year but eventually ran back home so that the noise couldn't follow me...

Eventually the panic meant trying to move back in with my family and live in a home environment which seemed the safest place to be. The problem with this was the illness became visible and I was whisked off to see the doctor and I knew what was going to happen. At this point the paranoia was uppermost in my mind so the stress of having the label schizophrenia on my did not come to mind.

I was bewildered by the new world of schizophrenia I was living in and once being labelled added to the disorientation I was experiencing and it took a long time for things to settle down. Before that could remedied I was whisked off to hospital making the acute phase even worse. That was serious given the scale of trauma I was going through and could have made me snap.

Diagnosis

Stress can be good for you but takes a number of coping strategies and help from the mental health system before it gets to this point. I think insight will make a hospital stay less confining and it should be possible for a cognitive therapist to be put in place at the earliest opportunity.

Here the sectioning can be stressful but this is temporary as once we get to hospital things might improve though this may take some time as the idea of mental health slowly begins to dawn on you. It is important to get to hospital as soon as you can as there might not be time to explain why you are been admitted.

Once there hospital seem like a prison and be stressful and the thought is that you have been locked up because they the doctors thin you are insane. This is particularly true when fist admitted especially after being sectioned but gradually you get used to the hospital environment and this helps reduce these feelings.

To begin the illness will cause some confusion as you believe the delusions are real so why have you been locked for thinking them. However staying in hospital can help with the other symptoms like anxiety and depression so you get to like the place and feel less confined. Staying in hospital can be more stressful than at home but as we begin to deal with the stress the likelihood of life perpetuating the symptoms can be lessened and the possibility of discharge and recovery are increased...

However if there is any insight into the illness this should be tested first and will make the whole process of being sectioned a lot easier for the patient. We will recognise the delusions as symptoms associated with the illness and so feel like we are not going to be locked up for them. Sectioning can be stressful and avoiding this will reduce the trauma of everything happening at once.

In my case they knew I had to get medical help but the understanding of it as an illness only became clear when they found out it was just a chemical imbalance. They tried to explain it to me but I thought the symptoms were real. All the same it eased the fear of going into hospital as I knew they were not going to be locked up for insanity and I trusted my family who explained what I was experiencing was delusional.

Often when you are at risk from self-harming symptoms like walking through a blizzard this is grounds for being sectioned and being locked up in hospital would have prevented this. Although I felt endangered in other ways when I was out in the community, this particular symptom was also an answer to my great relief so in some ways I began to feel a lot safer and less stressed.

I no longer felt the neighbours were spying on me as being in direct contact with the staff allowed me to develop some insight and again this felt safe. I could see they were not ringing up the CIA about me and as with getting the idea of mental health in my I knew the staff were just thinking I was just being delusional. In effect there were no neighbours in hospital just nurses.

So instead of associating the hospital with fear and emotional pain like my house outside in the community I began to feel secure in my new surroundings and some stresses were lessened. My home began to feel like a torture chamber but even if hospital was a prison this would be better than being at home.

All the same the hospital may feel like an institution and have no therapeutic effect on patients and if it experienced as a prison will just make the stress worse. Nurses maybe too busy to spend time with you and the patients are left to stare into space. The atmosphere of the place needs to be changed so that we are not cut off from the outside world and having a few distractions and activities on offer might not be enough.

We need to change the way we feel about the place to stop it making the illness worse and things that can help include being allowed out on leave and maintaining frequent family contact killed the boredom I was experiencing further and I began to enjoy the pleasurable side of life with the illness more. These feelings led me to think that on discharge that life can be pleasurable and might prevent a relapse.

It literally was an asylum from the big bad world and provided a context which was protecting from the stresses of work and the struggle to look after oneself. If you were not coping with life on the outside hospital could be a well-earned rest. Then nice modern hospital environment began to feel a bit more like a hotel and my period of admission turned into a feeling of getting away from it all as on holiday.

My insight increased these feelings of safety as I realised I had an illness and that made me understand the hospital was just a medical institution and accepted help from the doctors, nurses and medication. A lot of people were being stabilised on medication and I began to realise things were going to get any worse and that was a start to the process of getting further help from the system.

This insight also meant being in hospital meant being free from the dangerous stigma and self-stigma causing stress. Nobody was behaving in a violent or hostile manner when confronted with the unusual behaviour as was the risk out in the community and this became one less thing to worry about.

Distraction can ease the pressure of boredom and give you something to do that has your mind preoccupied by the delusion and more than this it can cause some pleasure which again can be alleviate the stress of the illness and being on the ward.

The other strategy which will be recommended will confrontation can be stressful at first too but if it works will calm things down especially through graded exposure. This facing up to the delusions may require some support but if we can overcome our fears this will help the illness self-perpetuating itself through stress and can work effectively alongside the medication. This approach may depend on how frightening the delusions are.

On getting to hospital I was expecting bedlam but the place was quiet and restful and gave you time and space to reflect on what was causing the illness and it might be possible to rethink your life which should help with feeling less stressed. Life can be stressful but this can be healed and that just leaves the stress associated with schizophrenia. That also needs help if a stress free recovery is going to be possible

And talking it through with other patients also had a calming effect as you realise you are not the only person suffering with the illness so you can start to unwind further...you can only know about schizophrenia if you have had it yourself so sharing experiences might act as a source therapy talking to someone who understands. People with schizophrenia are experts by experience and everyone will know about the fear and emotional pain.

Feeling safe brought my emotions to the fore in that I had killed all those people at 9/11 and in hospital there was always someone to talk through...this gave the place a more family feel which is needed where there is limited family contact through stigma, distance or work commitments. That family appeal may not amount to regarding the hospital as home however but this is possible with discharge.

With the family feel the stigma may result in loss of a partner and we will have to do our crying within the hospital and family contact can help with this. If family help is not available through stigma then the painful separation will be much more painful. Some counselling maybe needed here but is rarely available though an anti-depressant may come in useful

People often complain of boredom when in hospital and that can be a stressful experience so it is important to keep doing the activities on offer up to the point they stop working. You can only concentrate for so long

Being in hospital can be stressful compare to being at home and frightening as we see ourselves becoming institutionalised. This too has an answer as we learn to rely on the nurses for help and the symptoms improve we will gradually be building the strength for living independently. That thought is soothing and we know we are not going to be locked up forever. Hence we may put up with the restrictive environment if it is only temporary.

What started out as forced confinement ended up being a stepping stone and through the process stress reduction I was ready to give living in the world another try. This involves a number of factors as well and it is to this that we shall now turn.

Discharged

On getting the illness the experience can be overwhelming and it seems like the end of the world. Gradually overtime you begin to realise this is not true even though you feel life as you know it will never be the same again. It is best to make this clear that after the acute stage life will alleviate some suffering that the life changes have inflicted

What we have been through is not just the impact of the illness but also our changed social and personal circumstances and it must be made clear after the acute phase that these two things will for some get better so that we are capable of standing on our own two feet knowing the worst is behind us. While it is possible the positive thinking should help us cope once more.

One way of starting again is to live in a new area where there are no ties with the past. Doing this means you can meet new people as at day centres but that experience of renewal is not confined to the mental health system.

Giving up work can cause some pain as this is an important part of life but many people change jobs or become unemployed and again they have to get on with it but the system needs to know that emotional support is required to come through this again.

Being uprooted and relocated from your home can be stressful and moving house is one of the most stressful things you can do. The system needs to be aware of this to support you through it and thankfully being referred to sheltered accommodation can help you with this

Yet being discharged from hospital means there must be continued support to make it safe and emotionally supported and is a stepping stone to being deinstitutionalised and more fully independent. That strength means you have to learn to enjoy life again which can lead to finding your own place in the world.

Putting down roots again is important so we can begin to identify where we live as home again and this can be used as a base for reconnecting with life and making new friends as at day centres. This is very similar to leaving your home area to find work or going to university and this opens the door to finding new attachments..

Having your own home will feel like we are belonging somewhere again and is unlike being in hospital or sheltered accommodation. The place is yours and you are free to do what you want and you will have more personal space. Being your own you can furnish it to your needs and this recreates a sense of self identity.

We also need to work on our self-esteem and achieving what we want can give us this in spite of what the voices criticise us for and in this it is important not to feel like a social failure. We must remind ourselves of our good points and successes. This can be elementarily building on our new formed friendships and continued love from friends and family. They can remind you that you are a good person despite your faults which the voices appear to criticise you for.

Part of the recovery process involves gaining an understanding of the stigma and self-blame. Particular difficulty lies in the fact that the voices will criticise you for being weak and getting schizophrenia in the first place. This may seem like common sense that you just have to get on with stressful things in life and you are to blame for not being like everyone else. Being strong enough to live independently shows the voices you are not as weak as is being supposed.

One factor here is that moving house for example is one of the most stressful things that you can do but most people survive it. That raises the question why did I go mad when other people do not? Moving out of hospital shows the voice and yourself this can be done. The mental health system has an answer to this in that we don't know why some endure it and others snap and the reason for this lies in our brain chemistry rather than our strength of character. We can counterpose this against what the voices are saying.

Another thought here is that although society may criticise for not having a stiff upper lip but the welfare system contradicts this and provides much care for the illness and that again can challenge the voice. One aspect of the nature of stress is that the voices can go on to being critical of someone with schizophrenia for not standing up to the voice and where this is constantly severe some graded exposure might again answer the voice. That thought will get more powerful the more we practice this...

The more we realise we still have value as families and friends within or without the mental health system will make us realise the more we can calm down about ourselves and about the new life we are living after discharge. If we value ourselves this on its own will be a source of therapy and once we calm down about this it is the first step to knowing what to do with our lives outside of the ward environment.

As life begins to return to normal having relationships, money from the welfare system and goals in life we can begin to calm down about life with the illness. Gradually you will begin to feel like old self again and self-actualise as Maslow calls it and all of the factors described here can help with this. If we get to this point it means we can try to achieve our full potential but that failure to reach the higher levels of the Maslow hierarchy doesn't mean we need to give up on life with the illness.

Often the illness is a lifelong problem and we need some form of permanent distraction. Once we are as well as we are going to get save an advancement in medication we need to make some long term plans regarding what we are going to do with our lives. This may include what goals we have in terms of careers or just being able to meet someone and falling in love and there is always hope this can be achieved.

We can ask ourselves where do we want to be in five years' time and the more positive thinking can motivate us to keep busy even when getting symptoms...many other things can also be supportive to this end of striving to achieve your goals. You will need to define your passion and for me this has been education which has been possible despite the illness but there are going to be many alternatives

depending on the individual

We need some inspiration here so that like John Nash in *A Beautiful Mind* we can achieve highly despite the illness and there is growing evidence that stigmatising attitudes are beginning to change. Getting where we want to be and accepting who we are means that personal growth in the mental health system is going to be more possible than ever before.

The other possibility with years of the illness is that we are often going to get sick of the never ending suffering and again raises the danger of self-harm and we need to be aware of what can help with this. Being active might not always be an answer to long term life with the illness so we need to stand back and take stock of everything and this is the next stages in the journey with schizophrenia.

Life with the illness in the long term

Suffering in the long term takes its toll and the longer it goes on the worse it gets so that the plans and goals formulated in the earlier years of the illness may not be as therapeutic as they were originally. Getting through this later stage of the illness requires some thinking through of your life and the experiences you have been through. To begin to do this thinking we need to begin with the fact of the illness itself.

A life time of suffering needs to be come to terms with and we have ask ourselves is our live worth it they way it has turned out. Life does not always turn out the way we want and it is not our fault we have developed the illness. To that extent we just have to get on with things as they cannot be changed. We just have to accept what has happened and like any other physical illness that there may be nothing we can do about it.

We have to be aware that after so long that the illness may never go away and that thoughts can be very difficult as we start of get sick of life. You have had an illness and like any illness you have to accept that this sort of thing can happen to anyone. Sometimes that thought does not help with the suffering but nevertheless you go through a thought process weighing your life up.

The whole thing might seem like a waste as we have been prevented from doing what we want and living a normal life. We may ask what has been the point of our life living with a disease that has taken life away from us and what have we got to show from our lives all those with the schizophrenia. All the potential what we may have been if we did not have the illness has been lost and later in life it becomes too late to do anything about it.

In spite of all the help we have received we may experience a sense of loss and that we have done nothing with our lives but suffer. Anything that might have been fulfilling and meaningful might have been lost including marriage, careers and prosperity. Nothing may have come along to change these feelings and there is less to fall back on in the way of therapy and we develop a sense of being lost.

Without feeling even content we may ask what the point is in life in the void of schizophrenia as it has not led us anywhere and when diagnosed life as we knew and wanted it has stopped. We may have lost friends and family and all the deep attachments that satisfied us in life may have gone. It maybe that

nothing has come along to take their place and that might mean being uprooted and alienated.

Alternatively we can grow with the experience and become real people. The illness may change who we are and how we see things, Anything like losing a loved one or being in a war can be emotionally painful or frightening and as we take responsibility for this we are shown a side to life that we or others may not always have encountered. We are going to know about it from direct experience and will know a side to life which other people will not.

We need to come to terms with what has happened. This can be very difficult given the severity of the symptoms and with some positive reinforcement we may not look on the black side of things so much. This may need talking through with some professional help but even this may not always produce a positive outcome.

One thing is that we have learned a lot about life having suffered over the years. We may learn life is not a bowl of cherries and involved overcoming problems and challenges. Like other people we may get strength of character enduring the fear and pain and gradually we become a stronger person and we can see the suffering and is not always negative. Stress can be good for you if you can cope with it.

We must remind ourselves never to give up or to give in to the illness. We need to keep fighting and we can learn that we need to believe in ourselves to do this. Again this can be a source of strength and may make you into a winner which in turn will help challenging the problems the illness can cause.

This can then be applied to other problems in life such as problems finding jobs and many other things that life can throw at you and may give you strength to deal with other pressures like holding down a job. Confronting and overcoming the suffering can make you feel less depressed.

Yet getting to this point in life with the illness could still be a cause of depression so that we need to think carefully about the good and bad in our lives to try and avoid this. There have been positives still in life and you have to weigh the good and bad and an anti-depressant maybe vital for this stage of the journey.

The value of this is that things might be not always as bad as they seem. We need to believe that there are ways we can heal our lives as others have done. We must remind ourselves there are coping strategies and positives in life and how the measure against the different problems caused for life by the schizophrenia.

You have love from friends and family which can be soothing of the emotional pain from the voices and thinking I had killed all those people at 9/11. In spite of all the suffering we know we are loved by friends and family and this can make life worth it even so. Love is a very powerful healing force and can balance the suffering which can be equally profound.

You need to find some meaning in life to combat the stress and depression and this means trying to calm down as much as possible and enjoy things more. There maybe good periods and bad but at certain times you can breathe more easily and become aware of what life has to offer albeit within the mental health system. These good things in life must be measured against the suffering that has gone on

so long.

Other things that are including in the list of goods and bads is that far as partners go there is the thought we just have never have met the right person and that love and care can be soothing and strengthening. We are also financially empowered and can do many of the things other people do free from stigma and this without having to work for the money.

The thought is that the suffering will not stop and at this point in life there maybe a risk of *suicide*. Often these thoughts will lessen in between episodes an although difficult we can still return to leading relatively normal lives. We need to realise that reflecting on life which hasn't worked out may cause some despair so it is important that there is always hope and not to give up.

Something that can help here is that there are always new drugs being researched which like clozapine might advance things plus powerful alternative treatments including compassion focused therapy. This can mean life will get back to normal even if it has been a waste up until now.

Often these thoughts of self-harm may pass when we remember the positives in life and as with many people in later years even without an illness that your dreams and goals have not worked out so you need to find something else in life to make the best of things. Again living inside and outside the mental health system life has much to offer. There will always be hope for recovery.

Recovery

Recovery is more possible nowadays given new treatments which together can help reduce the stress of the illness and make the symptoms less severe. It may still mean getting help from the mental health system but there are many things that can help this. We need to be aware of how everything in life can combine to produce this outcome even if there is not a complete cure.

For me that has involved trying to induce a peak experience an feeling as healthy as I good so to reach this point in life again but with schizophrenia there are two problems that need addressing and these may not have gone completely even during a recovery phase. This can be very difficult but with the right effort and support the recovery state can be improved upon.

So with schizophrenia there are two main effects which cause the suffering which are fear and emotional pain. It is important to be prescribed the right medication to calm down and cheer up. Being frightened is very difficult and physically painful and a Valium is needed for this though often not prescribed. Now though another drug is used called promethazine which is not addictive. This can significantly aid recovery as fear is one of the most difficult symptoms

The other problem with the illness is the emotional pain it causes can again this can lead to depression so having the right anti-depressant is just as important as finding the right anti-psychotic. Emotional pain will add to the physical effects of the fear when both are experienced at the same time and doubling the risk of crisis episodes ans suicide and the possibility of a relapse which might put you back in hospital.

The two main symptoms of schizophrenia combine depression and emotional pain so taking valerian and ginseng might contribute to calming down and being more active. This can help when recovery has meant the symptoms are reduced to the anxiety level but are not effective at the higher levels of fear. You cannot leave this down to pills and potions and you have to be willing to do something about it help yourself.

Recovery means we will feel better in ourselves and have more energy. We will get more out of life if we are not suffering all the time and we will be motivated to trying new things. With less suffering we are likely to have a more positive outlook on things and there will be more time to experience pleasure and enjoyment of what activities we chose to do. We will get an interest in things and not be so disengaged and withdrawn and again all this is stress reducing.

We will no longer be confined to the house or afraid to watch the television and we will have our freedom back. The hobbies and interests we had before the illness can be pick up on again and we are free to try new things and we may begin to feel apart of the world again. With the symptoms being less visible to other people we can do things free from the stigma like eating out shopping or going on holiday.

We may begin to enjoy life again and this should help improve our mood and with less depression we will feel great relief from being free from the symptoms. There will be a reason to get out of bed in the morning and will start to see the sun again. Every change will both calm us down and cheer us up and being happy with life means we can cope with our problems better as we are not always focused on the negative.

The more we start to feel better the more motivated and the more energy we will have so we will not dependent on medication and health food. If the anti-depressants are ineffective and Valium is not prescribed once your life gets back on track there maybe other solutions achievable for getting some semblance of a normal life back but what is needed is to get rid of the anxieties ordinary life can cause so it doesn't add to the residual anxiety of the psychoses.

Empathising how we normally tackle anxiety can mean we can open up more to the good and positives in life since if we lose these we may be more prone to going back over and the worries will start to keep in again. We need the positive reinforcement that things are getting better and focus on that instead. Other techniques like meditation can help with focusing our attention on this.

Exercise can make you feel better physically and give you more energy and can be built up the more you practice it. Again this affects your whole state of mind and doing sports can lead to being competitive which again is a very good feeling. At first this may be strenuous so some will power will be needed and eventually you can really push yourself and that releases endorphins.

Watching nature makes you realise it is beautiful which is good for the heart...what is needed here is to learn to be mindful of it and develop our appreciation. Going somewhere scenic on holiday is the best way of enjoying this though there are often places on your doorstep just as nice. This needs to be

handled carefully though as going too far from home could cause problems getting help in the case of a relapse.

Being relaxed means you have more ability to concentrate and open the door to education. This can be good for making the brain work which again affects your whole state of mind. We feel better for being more confident and achieving things like passing exams but for me education is of intrinsic value and empowering in that we will know more about the world. Studying life can generate an interest so we might want to become more apart of it.

Religion is also restorative and going to our local cathedral is quite relaxation and you can walk round the river afterwards. Spirituality engenders good feelings and a sense of connectedness with something divine. Atheism might be a problem here but I think a lot of people will get the calling through the suffering it can inflict and going to church means we will meet people who understand this and sympathise.

What we need is a plan for the week so that we are doing something different every day and once we start being active we have enough energy and motivation to get through the rest of the day without giving in and feeling anxious again. Doing this keeps you motivated all day long so can eat and sleep properly and look after the house work which can become a chore with anxiety and low mood.

There are powerful forces for reducing stress here which need to be noted but sometimes they may not all be enough. During a recovery phase we can enjoy life more and benefit from what it has got to offer. Especially though if the fear can be reduced so that it opens up our emotions on the Maslow tree we may form relationships with friends and partner which can soothe the stress at the anxiety levels and act as a source of strength which may prevent a relapse.

It is possible to view the illness as a challenge and overcome it through graded exposure and if this is possible we will be a stronger person for confronting the fear through grades exposure. This allows us to develop belief in ourselves and gain some self-confidence. The suffering need not always be negative and gives us much life experience. We become real people and acquire much knowledge about life. After schizophrenia there is not much in life that presents a less difficult challenge.

We should not spend term searching for those wasted years and realise we are living in the golden years but recovery does mean starting again and where this occurs later in life this does not leave a lot of options as we have outlined them above. It will be too late for a career and for starting a family but it does mean there is more chance of climbing the Maslow tree and being more emotionally engaged.

It will start out being unemployed and loss of disability benefits and this can cause some alienation form the society and may result in a relapse with some depression...again it may mean moving out of supported living and often there is nowhere to go and the stress of moving house was one of things that caused the illness in the first place. Being in a state of recovery form within the system can in itself cause a relapse.

Recovery can mean to the psychiatric profession getting to where we want to be in life despite the illness and that will depend on the person. The problem is that the recovery goals have to be handled carefully as the symptoms can still be a source of stress and anxiety and employment and relationships are the signs of getting better they can be very stressful when combined with the residual symptoms.

Relapse

We tend to assume that life after the illness will be wonderful without the suffering but it opens the door to similar stresses as those which caused the illness in the first place...this in my case occurred because of the loss of our family business and home together with the pressures of research work and life after the illness can be just as stressful for the same reasons. Once the stress of the illness is over other things in life which are just as or nearly as stressful can come to the fore and cause a relapse.

We may still be getting some symptoms with the illness though at a functional level we may be more capable. Those symptoms may mean there is some stigma attached to our behaviour even if we are functional enough to lead our own lives again and the stress of isolation may mean there is little therapy in life to prevent a stressful relapse. The result may be we will be more prone once out of the mental health system to being stressed by life and are left with less to stand up to the pressure.

One particular factor here was that if we have been dumped by friends and family through the initial onset of the illness there is going to be less emotional resilience to life and the stresses that recovery can cause. There will be no one to share the burdens of recovery and if we cannot find a partner we are on our own with the kinds of same kinds of stresses that cause the illness in the first place.

Many people are stabilised on medication and are discharged from hospital but there is always the possibility of a relapse and this can cause added anxiety even when on the right medication. The hope with being stabilised on medication is that this generally won't happen but you cannot rule it out. What is reassuring though is that if you have had a good experience of hospital going back in a second time might help soothe the illness until the medication can be successfully adjusted.

This takes the edge off the fear that the painful symptoms might return as we know we have been through it all before and survived to tell the tale. Like coping in a crisis some self-help is possible combined with what the mental health system has to offer. Emergency medications like Valium can help here until the symptoms wear off again together with the insight that relapses are temporary.

These circumstances can to some extent be dealt with and we must realise we are not the only person in the world who has had to start again with life including finding a new path in terms of employment and social relations. The initial stresses might if we hang in there might be replaced by new attachments and goals and we have to be willing to give this a try. We can meet new people as at night classes and find a course which may be interesting and occupy the mind.

This might be tough at first and any change in our lives might be stressful but this has been a path trod by many people and has led them to finding a new place in the world. Instead of being isolated and alienated by discharge we may find a place where we belong and so life will become less stressful and

may prevent the possibility of a relapse. We may begin to find our feet again and leave the mental health system behind us.

It may be possible to meet new friends and partners through online dating sites and there are a lot of people out there looking for a partner and even if not employed you still have a lot of love to offer someone and this can help cope with the stresses that might tip us over the edge. Falling in love might soothe the loss of family relations as can happen with stigma up to a point and ease the pains caused by unemployment.

Often we may have made friends through the mental health system and this can help when you leave the supportive world of day centres and sheltered accommodation so you are not completely on your own. However even within the system a lot of people are still very lonely and without the staff contact this will get worse and there maybe no one to rely on for emotional help. Contacting the Samaritans can help here during the worst parts.

If you can find a job this maybe quite fulfilling and avoid any stressful depression and you may meet new work colleagues that can provide a social platform as well and improve your finances. The feelings of social exclusion as caused by the stigma maybe lessened here and the disability employment adviser can link you into employers who are sympathetic to schizophrenia. Finding a job can be difficult enough with the added problems of stigma though.

Another thing about finding work is that it can be very stressful and looking for something you can cope with needs considering carefully. It could be distracting and doing nothing can be stressful too. So either ways there are good point and bad that may cause or prevent a relapse so it I best to balance the two but that does not the stresses can be solved as you will still experience them in both situations.

The trick with managing stress is not to do too much at once and build up gradually so you can cope with things better. That might mean solving problems one by one and step by step which can lead to coping with things up until the point that holding down a job is possible. Talking this through with a therapist can help you adjust with the need to lead a better life and some coaching is provided by the system in the form of a work related activity group...

Learning to enjoy life can help with the stressful side and finding a suitable hobby or pastime can help us unwind as can having a night out or as in my case joining an archery club. I found was something to do in my free time that didn't revolve around the pressures of holding a job down and I learned life was not a continuous struggle and there was another side to it.

Another major factor here was being at home with your family. This is like getting into a warm bath as a sociology tutor once described it to me and is relaxing as is sharing your troubles with a partner. This allows you to talk things through and gives you someone and something to rely on even when major life events like losing your job and house and again may prevent a relapse, even when these factors caused the schizophrenia in the first place.

What the problem is that all of this stress which may have triggered the illness occurred originally may mean encountering it all again even with the support is not enough to prevent a relapse, particularly if a divorce means there is a lack of emotional support. However many people come through these sorts of problems without being driven mad by them and just because you reacted that way before doesn't mean you are automatically going relapse again.

The general picture is that life is hard even when you weight up the pros and cons and the process of toughening up can make you snap and if you have already had one breakdown the risk of another is serious. Of course some people as in Tony Blair's cabinet have returned to work but if the risk is snapping again the long term consequences for your mental health could be serious.

There are various aspects to what makes life not a bowl of cherries and from there into what sorts of stresses could drive you mad. Obviously taking one step at a time as to build up resilience as Russel Crowe says in Robin "rise and rise again until lambs become lions" so that "we should never give up." But from the perspective of mental health we "take on too much" and "crack under pressure."

A lot of jobs are high pressure so it is possible that it is best not to start with that even if it is where we want to be and aim to achieve it gradually. All the same once we get there is still much pressure which at this point can cause a nervous breakdown. It maybe we have to give up our dreams to keep our mental health and stay sane so we must be very careful what we decide. Giving up your dreams can be very stressful itself.

Any kind of work can be challenging and even holding down an ordinary job can require a lot of effort and staying power and can be particularly tough if you on your own in life. Without proper emotional support any kind of work can become too much to cope with and we in danger of not measuring up even to the jobs that are less stressful and not too taxing. It can be a source of developing strength of character but without support this is much less likely.

The minimum wage is the place to start but slaving away for a pittance can make life very stressful. It may make us feel oppressed and down trodden and this will cause much emotional pain combined with the pressure of work which can lead to depression and unemployment both of which are stressful. Love and friendship do not always remedy this and there are elements in the realms of popular music for example that express this pain.

The big bad world and its dog eat dog way of life means you must be up for the challenge and find the strength to defend yourself and your job. You have to learn how to fight but the conflict can be very stressful and emotionally painful if you lose. Some people as in the Peter Gabriel song notes "no one wants you if you lose" but the remedy is that "there is a place where we belong." It is to these issues to which we must now turn.

Carol Decker sang "living isn't easy now, loving is the hardest part" and being in love can be very stressful though it is supportive at the same time. Marriage can be stressful and when combined with other stresses in life might tip you over the edge. Instead of being supportive it can also be part of what

is causing the problems in life and marriage like many things does not come easy and you have to work at it.

Clearly she is right and the divorce rate in the UK is forty percent of marriages which puts a lot of people into crisis to the point that some people commit suicide. Many people will get remarried but that means surviving the experience until you meet someone else. This can be lonely and stressful for anyone though if you hang in there time will get you through the worst emotional pain,

This can leave you dependent on work to take your mind off things as they will still have something else in life to focus on instead. The problem here is that work can be stressful combinable with the acute emotional pain of losing a partner and both together can mean the feelings of pain and stress can make you crack up. Here again there might be less family contact to rely on through this.

All the same if you cannot focus on work and do not get remarried the problem of coping with life is going to be much greater and there are significant can lead to much depression and no antidote to stresses which it involves. Many people who are divorced do not get remarried and there are significant social issues here and as Robbie Williams sang “all the best women are married and all the handsome men are...all the lonely hearts in London caught a plane and flew away...I feel deprived.”

The only of depression for all these reasons affects about one in three people some worse than others. The emotional side can cause a breakdown which means we cannot cope with the other pressures and may need to the loss of employment. Without work and proper finances the more likely there is less therapy for coping with the break and with the profound emotional consequences we may not be able to look after ourselves and this slowly causes us to lose our sanity.

We cannot simply rely on our friends for this this may be limited to people we have met in the mental health system but the process of relapse is not as bad as when we are first diagnosed and we are not frightened by stigma or being locked up in hospital. The recognition here is that as when there is still some insight left into the seeing ourselves slowly going mad again we know the mental health system can help us out again.

The unusual behaviour is not going to be as stressful as being subject to a violent stigma and we know many of our basic needs will be looked after and cared for once admitted including being sheltered and fed together will some soothing friendly contact with the nurses. After this the whole process of being discharge and recovered can begin again before the next relapse and the acute stage of the illness that this brings on.

The cycle of the revolving door of schizophrenia might eventually be broken with the use of compassion focused therapy as all the stresses we have outlined in this essay and which occur through the continued symptoms when in remission and recovery can be soothed. Ordinary life outside the system is stressful as we have outlined it but we may build up to coping with it by lightening the load and graded exposure to its challenges.

Conclusion

The illness of schizophrenia also had a medical side which is classified by doctors as the prodromal, acute, recovery and relapse yet using this perspective the different medical phases have aspects to them that affect how the symptoms in each step of life through the illness can be helped or hindered. This should yield a better understanding of what is going on at each stage and what helps and hinders the process of treatment in addition to the medications being prescribed and will allow doctors to better understand the schizophrenic experience from a patients point of view.