Schizophrenia: a reflection on the past stigma and today’s hope

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Schizophrenia is a group of disorders characterized by severely impaired cognitive processes, personality disintegration, affective disturbances and social withdrawal. Individuals with schizophrenia develop positive symptoms such as delusions, hallucinations, thought disorder, and bizarre behavior. In addition, negative symptoms also emerge such as *avolition* (inability to take goal-oriented action), *allogia* (a lack of meaningful speech), *flat affect* (little or no emotion in situations in which strong reactions are expected). Schizophrenia can be caused by several factors such as genes, childhood trauma, depression and low self-esteem, exposure to abuse, dysfunctional family interactions, and living in poorer residential areas at birth. However, cross-cultural perspective is strongly influence this etiology. In Indonesia, for example, supernatural and mystical beliefs are determining people’s way to identify and diagnose individuals with schizophrenia. A therapist can treat them by medical and psychological approaches. Antipsychotic medication can be used to reduce the symptoms levels of hallucinations, delusions, bizarre speech, and thought disorder. In addition, psychological treatment such as psychosocial therapy, cognitive-behavioral therapy can help them to develop more positive communication and interaction skills with others, reducing the level and frequency of associated distress, coping and managing the both positive and negative symptoms (Seligman & Reichenberg, 2007; Sue, Sue, & Sue, 2010).

The term of schizophrenia is unfamiliar for common people in Indonesia. Based on the survey of Indonesian Social Ministry in 2008, there were 650,000 people with schizophrenia in Indonesia. Around 80% of the schizophrenic individuals have not been treated and 30,000 were locked their legs between two pieces of wood because of their aggressiveness and to avoid family’s disgrace (Anna, 2011). When I was a kid, I was told that a person who was naked at the...
street, has long and dirty hair, collect things without clear purpose, laugh and nag without a clear reason was a “crazy” person. The numbers of people with such behaviors are in several spots in my hometown. I felt sorry with their conditions and I tried to figure out how they could survive without sickness. I never obtain satisfying answers from people around me including my parents.

Talking about schizophrenia, I have a friend who was once diagnosed with schizophrenia and now he has been struggling with the treatment for about 20 years. He is now 46 years old, twice divorced, has two sons, and is working on his Master’s Degree. I met him in Alden library and we have been friends since then. In addition to his academic work, he usually help other graduate students on paper writings. Although he has such psychological disorder and sometimes considered weird, he has well enough in communicating with others and also in writing skills. Therefore, many students come to his study carrel spot to ask help in proofreading papers. Previously I did not believe in his condition with this diagnosis since he did not show any symptoms indicating schizophrenia clearly. His way of thinking usually jumps from one topic to another with no clear relations and sometimes I saw him blaming others with sarcastic sentences but actually he did the mistake. He believes in others are going to attack and take advantage of him and sometimes he concludes and expresses it although the other person has no thought about it at all. He was hallucinating in the past but now he never talks about it anymore.

After I had a deep conversation with him I became more aware that schizophrenia cannot always be related to naked on the street, laughing with no clear reasons, and other symptoms that I saw in my hometown. Otherwise, I found a hope in their live to improve their potentials and opportunity to have acceptable way of live. I believe that society in my country need to be more aware of the “crazy” people’s condition so that they can be more accepted and better treated especially in terms of intervention, potentials, and rights to have better education and live.
References

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