Available online at www.sciencedirect.com
ScienceDirect
Psychiatry Research 167 (2009) 231–238
PSYCHIATRY RESEARCH
www.elsevier.com/locate/psychres

Insight into severe mental illness, hope, and quality of life of persons with schizophrenia and schizoaffective disorders

Ilanit Hasson-Ohayon [a,*], Shlomo Kravetz [a], Taly Meir [a], Silvio Rozencwaig [b]

[a] Department of Psychology, Bar-Ilan University, Ramat-Gan, 52900, Israel
[b] Day Care and Rehabilitation Unit, Beer Yackov Mental Health Center, Beer Yackov, Israel

Received 24 January 2008; received in revised form 17 April 2008; accepted 20 April 2008

Abstract

Controversy exists as to the cognitive, emotional and behavioral consequences of lack of insight for persons with schizophrenia. This study tested a mediation model of the relations between insight into mental illness, hope, and the aspects of quality of life of persons with schizophrenia. According to this model, insight into mental illness may impact negatively on the quality of life of persons with schizophrenia by reducing these persons' hope. Sixty persons with schizophrenia or schizoaffective disorder completed questionnaires that assessed their insight, quality of life, and hope. The study's results show that for six of seven aspects of quality of life and for general awareness of illness, the above-hypothesized mediation model was confirmed. These results suggest that increasing the hope of persons with schizophrenia may directly and positively increase both their quality of life and the usefulness of their insight into their illness.
© 2008 Elsevier Ireland Ltd. All rights reserved.

Keywords: Insight; Hope; Quality of life; Schizophrenia

1. Introduction

In the psychiatric literature, persons with a diagnosis of a schizophrenia spectrum disorder who appear to be unaware of their illness are considered to lack insight (David, 1991; Lysaker and Bell, 1998; Amador, 2000). These persons often seem actively to reject their diagnostic label (Amador and Kronengold, 1998). Controversy exists as to the cognitive, emotional and behavioral consequences of this lack of insight for the persons with schizophrenia (McGorry and McConville, 1999; David, 2004). Some care providers and some care consumers strongly insist that insight into a psychiatric disorder is a necessary step toward compliance with treatment, recovery, and rehabilitation for persons with that disability (McEvoy, 2004; Frese, 2000). Other providers and care consumers argue that acquiring insight into a disorder and acknowledging that one has schizophrenia can lower the self-esteem and increase the despair, helplessness, and hopelessness of the person with the psychiatric disorder (Kirmayer and Corin, 1998).

Because it has produced apparently inconsistent findings, empirical research has failed to resolve this

* Corresponding author. Department of Psychology, Bar-Ilan University, Ramat-Gan, 52900, Israel. Tel.: +972 3 5318477; fax: +972 3 7384105.
E-mail address: hasoni@mail.biu.ac.il (I. Hasson-Ohayon).

0165-1781/$ - see front matter © 2008 Elsevier Ireland Ltd. All rights reserved.
doi:10.1016/j.psychres.2008.04.019

controversy. Positive relations have been uncovered between a low frequency of social contacts, low levels of basic social skills, social isolation, and small social networks and lack of insight (Lysaker et al., 1998; Smith et al., 1999; White et al., 2000). However, other research has failed to uncover any relation between insight and measures of psychosocial well-being (Browne et al., 1998; Simon et al., 2004) whereas some investigations have actually found insight to be related positively to such indicators of poor psychosocial adjustment as depression (Amador et al., 1996) and low emotional well-being (Hasson-Ohayon et al., 2006).

Two approaches to resolving this controversy can be found in the literature on insight. In a recent review (Lincoln et al., 2007) of studies of the relation between insight into mental disorder and outcome, both of these approaches are presented as complementary accounts of the source of the controversy. Major assumptions of one of these accounts are that insight is positively related to treatment adherence, on the one hand, and to self- and social stigmatization, on the other hand. Accordingly, because of its link to adherence, insight will produce symptom reduction and improved functioning while lowering self-esteem and increasing depression and helplessness due to its association with self- and social stigmatization. In a second account, Lincoln et al. (2007) coin the term, "usable insight", to denote insight that "separates the symptoms of the disorder from reality and separates the disorder from identity while preserving hope" (p.16). Thus, insight can be usable if it increases compliance with treatment and at the same time decreases the negative impact of stigmatization by separating the illness from one's identity. This kind of insight is also consistent with the concept of recovery (Lincoln et al., 2007). An implication of the latter account is that certain forms of insight may reduce the hope of persons with schizophrenia and, thus, elicit negative responses to the illness. The present study tested the latter account of the inconsistent findings regarding the relation between insight and clinical, personal, and social correlates of schizophrenia by examining the relations between insight into mental illness, hope, and quality of life.

Research has shown that persons with schizophrenia express significantly less hope than the general population (Landeen and Seeman, 2000; Landeen et al., 2000). Furthermore, hope has been found to be a highly variable, although stable, characteristic of persons with schizophrenia (Landeen and Seeman, 2000). Both in the personal narratives of persons who have recovered from severe mental illness and in the theoretical and empirical psychiatric rehabilitation research literature, hope is often mentioned as a factor that contributes significantly to the process of recovery (Deegan, 1988; Anthony, 1993; Hatfield and Lefely, 1993; Jacobson and Greenely, 2001). Using the Schedule for Assessment of Insight to obtain measures of the awareness of having a mental illness, ability to re-label symptoms as pathological, and compliance with treatment in patients with a diagnosis of schizophrenia and a history of serious offending, Carroll et al. (2003) found that awareness of the illness was positively related to hopelessness. Although an investigation of variables that might contribute to the suicidal risk of persons with schizophrenia did not uncover a relation between insight into the illness and hope, it did find a positive relation between lack of hope and suicidal risk (Kim et al., 2003).

Hope is a central component of two recent studies that were motivated by the insight-outcome controversy (Lysaker et al., 2005, 2007). In one of these studies, hope was examined as a possible moderator of the relation between insight and the level of active versus avoidant coping of persons with schizophrenia spectrum disorders (Lysaker et al., 2005).The latter study's main conclusion was that persons who expressed high levels of insight into their illness together with high levels of hope evince the highest preferences for active coping whereas persons who expressed high levels of insight together with low levels of hope evinced the highest preferences for avoidant coping. A second study tested the possibility that internalized stigma moderates the relation between the insight and the hope of persons with schizophrenia. Results of that study indicate that persons with high levels of insight but relatively low levels of internalized stigma reported the highest levels of hope whereas persons with high levels of insight and internalized stigma reported the lowest levels of hope (Lysaker et al., 2007).

The above studies suggest a model for the relation between insight into severe mental illness, hope, and quality of life that might underlie the inconsistent findings with regard to the manner in which insight into severe mental illness may be linked to the personal and social consequences of schizophrenia. According to this model, hope mediates the relation between insight into the illness and the quality of life of persons with schizophrenia. Specifically, the present study applied multidimensional measures of insight and quality of life to test the hypothesis that insight may be negatively related to quality of life because of its negative impact on hope. This mediation model generated the following hypotheses: 1) Insight into the illness should be negatively correlated with the various aspects of quality of life, 2) Hope should be positively correlated with the various

دریافت فوری ← متن کامل مقاله

ISIArticles
مرجع مقالات تخصصی ایران

✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
✓ امکان دانلود نسخه ترجمه شده مقالات
✓ پذیرش سفارش ترجمه تخصصی
✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
✓ دانلود فوری مقاله پس از پرداخت آنلاین
✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات