THE APPRAISAL OF SENSE OF SELF IN PEOPLE EXPERIENCING PSYCHOSIS

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Experiences of mental illness can be life altering and lead to a loss of identity and self. This is particularly recognized in Schizophrenia Spectrum Disorders:

- Schizophrenia, Schizophreniform disorder, Schizoaffective disorder, Delusional disorder, Brief psychotic disorder, and Unspecified psychotic disorder.
- Abnormalities in: delusions, hallucinations, disorganized thinking (speech), grossly disorganized or abnormal motor behavior (including catatonia), and negative symptoms
- Presentations of a loss of touch with reality, struggle to maintain a clear sense of oneself.
- Minimal understanding of why this occurs

(American Psychiatric Association, 2013, p. 87; Berne et al., 2016; Cicero, Martin, Becker, & Kerns, 2016)
Traditional Model of Self
Stable
Rigid
Unchanging
Content Focus

Contemporary Model of Self
Dynamic
Multidimensional
Individuality
Content and structural organization

Key theory to emerge from contemporary model of self is that of identity construction through memory

(Campbell et al., 1996; Markus & Wurf, 1987; Pilarska & Suchańska, 2015)
Narrative Identity a person’s internalized and evolving life story, integrating the reconstructed past and imagined future to provide life with some degree of unity and purpose

Self Defining Memories
memories that are personally significant and presently relevant, contributing to how one sees them self. Must retain the five essential elements of; emotional intensity, vividness, repeated recall, connection to similar memories and focus on lasting goals or unresolved conflicts

Autobiographic Memory
is comprised of sensory perceptual details, feelings, and thoughts specific to past events, and general autobiographical knowledge about life periods or places

Autobiographic Reasoning is a reflection on connections between experiences and different aspects of self from ones past to present to the future.

Global Coherence;
1. **Thematic coherence** dominant themes creating coherence through repetition of and variation on same theme
2. **Temporal coherence** points a given event has taken place
3. **Cultural concept** conformity to cultural expectations
4. **Causal coherence** how actions and changes in personality are caused and motivated by experiences

(Fivush, 2011; Habermas & Bluck, 2000; Habermas & de Silveira, 2008; Holm, Thomsen, & Bliksted, 2016; McAdams, 2001; McAdams & McLean, 2013)
Self Concept Clarity

"the extent to which the contents of an individual’s self-concept are clearly and confidently defined, internally consistent and temporally stable”

(Campbell et al., 1996, p. 141)

- **High SCC**: ↑ self esteem, ↓ depression, ↓ anxiety, awareness of personal values, strengths, weaknesses
- **Low SCC**: conflicting self beliefs, lack of confidence, ↓ psychological adjustment

(Berna et al., 2016; Cicero et al., 2016; Van Dijk et al., 2014)

Compartmentalization

“the degree to which one organises positive and negative knowledge about the self into separate, distinct, uniformly valance self-aspect categories”

(Showers, 1992, p. 1036)

- **Self aspects** = important areas identified by individual
  - i.e self as a wife, as a home owner, work role
- **Attributes** = positive/negative related to self-aspect
  - i.e. organised, communicative, fussy, personable

(Showers, Ditzfeld, & Zeigler-Hill, 2015; Ditzfeld, & Showers, 2013)
Detritions in self-concept and identity construction are apparent at all stages on the continuum.

Disruptions in content components of autobiographic memory, autobiographic reasoning and elements of coherence.

Disruptions in structural organisation low self concept clarity from very early stages of psychosis.

SCC score ↓ as positive symptoms ↑.

Long term impacts on mental-health, wellbeing and recovery.

(Berna, Potheegadoo, et al., 2016; Bigler, Neimeyer, & Brown, 2001; Campbell, Assanand, & Paula, 2003; Cicero et al., 2016)
Designed to gain insight further into the erosion of self that is present at both a structural and content level at different stages in people experiencing Schizophrenia Spectrum Disorders.

Explore what is contributing to disruptions

i.e. duration of illness, intensity of symptoms, medications, etc.

Identify ways in which disrupted areas may be targeted for intervention therapies in future

Memory and Identity issues can be compensated for if appropriate targeted treatments are received, aiding in recovery.

(Holm et al., 2017; Berna, Göritz, et al., 2016; Holm et al., 2016; Kukla, Salyers, & Lysaker, 2013; Lysaker & Buck, 2008; Roe & Davidson, 2005).
<table>
<thead>
<tr>
<th>Inclusion Criteria</th>
<th>Control 1</th>
<th>Control 2</th>
<th>Dissociative Identity Disorder (DID)</th>
<th>Psychosis (Early episode)</th>
<th>Schizophrenia (Chronic)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 18 – 30</td>
<td>Age 30 – 65</td>
<td></td>
<td>• Able to switch identities to child identity.</td>
<td>• First episode, or early stages of a psychotic disorder</td>
<td>• Chronic experience of a Schizophrenia Spectrum Disorder</td>
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<tr>
<td>Exclusion Criteria</td>
<td>Experiencing Psychosis or DID</td>
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<td>Actively psychotic, actively suicidal Participation deemed inappropriate by professional.</td>
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PARTICIPATION TASKS AND QUESTIONNAIRES

- Introduction & Consent (15 minutes)
  - DDIS, DES-II, SCCS, ISI-5, M.I.N.I

- Card-Sort Task (20 Minutes)

- Narrative Task (15 Minutes)

- Self Defining Memories Task (20 Minutes)

- Questionnaires (10 minutes)
  - TALE, DDS

- Debrief
• Demographics
  i.e. age, gender, ethnicity, education.

Dissociative Experiences Scale II (DES-II)

• The Dissociative Disorders Interview Schedule (DDIS)

• International Neuropsychiatric Interview (M.I.N.I)

• Self Concept Clarity Scale (SCCS)
  \((Campbell\ et\ al.,\ 1996)\)

• Centrality of events scale.

• Identity Style Inventory – 5 (ISI-5)
  \((Berzonsky,\ 1989;\ Jørgensen\ et\ al.,\ 2012)\).

• Scale to Assess Meaning Making (SaMM)
  \((Wood\ &\ Conway,\ 2006)\).

• Memory Characteristics Questionnaire.

• Thinking about life experiences (TALE)
  \((Bluck,\ Alea,\ Habermas,\ &\ Rubin,\ 2005)\).

• Diachronic Disunity Scale (DDS).
“In this part of the study, we are looking at how you describe yourself. The box contains a deck of cards. Your first task is to use the cards in front of you to generate a description of yourself. You have 40 cards and numerous recording papers. Each card contains the name of a trait or characteristic. Your task is to think of different aspects of yourself or your life and then sort the cards into groups where each group describes an aspect of yourself or your life. You may form as many or as few groups of traits as you desire. Continue forming groups until you feel that you have formed the important ones. We want only groups of traits that are currently meaningful to you. Each group may contain as few or as many traits as you wish. Also, each card may be used in more than one group, so you may keep re-using traits in different groups as many times as you like.”

“Please write a label for each group that you create on a different piece of paper, and then place the traits associated with them below. Remember, think of different aspects of yourself or your life and use whatever groups best describe the way you think about yourself and the different aspects of your life. You will have 15 minutes to complete this task. These are your recording papers—You may begin”.

(Showers, 1992)
“First I’d like to ask you to think about the **seven** most important events that have happened in your life. These may be events that have just happened, or they may have happened a long time ago. The memories also need to be from events experienced in your own life that are remembered clearly and feel currently important. These memories should also help you to understand who you are as an individual and they can be positive, negative or both in how they make you feel at present, although they must involve some strong feelings. You must have thought of the memories many times, and they should be familiar like a picture that has been studied, or a song learnt by heart”.

“Please write your **seven** most important memories on these **seven** cards. Please name only memories of very specific events”
“Next, I’d like you to tell me a story involving your whole life. Please think about all the events that have happened in your life since you were born. Please integrate the seven events into your story. For example, you can tell me about the most important events in your life and the biggest changes. You can tell me things that someone like me, who doesn’t know you, might like to know about you. You can also tell me how what you have experienced is still important to you today and how it has influenced what kind of person you are today. Please take about 15 minutes to tell your story. I will not interrupt you. After 10 min, I will tell you that you still have another 5 min. There are no right or wrong answers”.

“So I know you have understood the task, could you please repeat the instructions back to me”
### PRESENT DAY

<table>
<thead>
<tr>
<th></th>
<th>Control 1</th>
<th>Control 2</th>
<th>Dissociative Identity Disorder</th>
<th>Psychosis (Early episode)</th>
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REFERENCES


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