

APPENDIX

Attitudes to schizophrenia

Demographic questions

1. Age:yrs
2. Gender Male Female
3. Which year of medical school are you in? 1st 2nd 3rd 4th 5th 6th
4. Ethnic origin: Asian Caribbean African White Chinese Other

Describe if other.....

Do you personally know anyone who has had schizophrenia? Yes No

Do you think you understand Schizophrenia? Yes No

Have you attended any psychiatry lectures or have been placed on a psychiatric ward so far? Yes No

Do you plan to choose Psychiatry as a future career option? Yes No

If not, why not?

Does the fear of Schizophrenia drive your decision? Yes No

This study is being carried out to assess attitudes by different groups of people to persons with schizophrenia. Eight different aspects are being assessed to help provide an overall picture of these attitudes. The participant is asked to mark with a tick or a cross which end of each spectrum would most closely represent their own views.

For instance, if you believe that a patient with schizophrenia is dangerous to others, you would mark at a point a or b. if you thought the patient was not dangerous to others you

would mark points d or e. If you were not sure or thought both were an equally likely possibility, you would mark point c.

	Think of a person with schizophrenia, would you consider them to be:	a	b	c	d	e	
1	Dangerous to others						Not dangerous to others
2	Unpredictable						Predictable
3	Hard to talk to						Easy to talk to
4	Have only themselves to blame						Are not to blame for their condition
5	Would improve if given treatment						Would not improve if given treatment
6	Feel the way we all do at times						Feel different from the way we all feel at times
7	Will eventually recover fully						Will never recover fully
8	Could pull themselves together if they wanted to						Can't do anything to improve how they feel

Subgroups based on initial experience of illness

On the basis of patients' initial experiences of illness, four subgroups of schizophrenia have been differentiated into sensitivity, drug-related, traumatic and anxiety psychoses - as described below. Eight different aspects of each of these four subgroups are being assessed to help provide an overall picture of attitudes toward individuals with them. The participant is asked to mark with a tick or a cross which end of the spectrum would most closely represent their own views.

For instance, if you believe that a patient with sensitivity psychosis is dangerous to others, you would mark at a point a or b. If you thought the patient was not dangerous to others you would mark points d or e. If you were not sure or thought both were an equally likely possibility, you would mark point c.

Sensitivity psychosis

The person would typically describe their experience in the following way:

‘My problems began over a period of a few months or even a year or two. I became quite sensitive to stress which gradually led to interference with what I was doing. This led to increasing confusion and worry and eventually I received treatment. It was or has been difficult to get going again properly – however hard I try.’

	Think of a person with sensitivity psychosis, would you consider them to be:	a	b	c	d	e	
1	Dangerous to others						Not dangerous to others
2	Unpredictable						Predictable
3	Hard to talk to						Easy to talk to
4	Have only themselves to blame						Are not to blame for their condition
5	Would improve if given treatment						Would not improve if given treatment
6	Feel the way we all do at times						Feel different from the way we all feel at times
7	Will eventually recover fully						Will never recover fully
8	Could pull themselves together if they wanted to						Can't do anything to improve how they feel

Drug – related psychosis

The person would typically describe their experience in the following way:

‘My problems started after I had taken speed (amphetamines), LSD, cocaine or a lot of cannabis. After that I started to get some problems and received treatment. The problems continued or came back after settling after the first time this happened. Eventually these problems were happening even when I did not take drugs.’

	Think of a person with drug-related psychosis, would you consider them to be:	a	b	c	d	e	
1	Dangerous to others						Not dangerous to others
2	Unpredictable						Predictable
3	Hard to talk to						Easy to talk to
4	Have only themselves to blame						Are not to blame for their condition
5	Would improve if given treatment						Would not improve if given treatment
6	Feel the way we all do at times						Feel different from the way we all feel at times
7	Will eventually recover fully						Will never recover fully
8	Could pull themselves together if they wanted to						Can't do anything to improve how they feel

Anxiety psychosis

The person would typically describe their experience in the following way:

‘When I first received treatment for my problems, I had been having some hassle, stress, and so on, but had become convinced that there was a particular reason behind it all. Unfortunately, other people did not agree with me.’

	Think of a person with anxiety psychosis, would you consider them to be:	a	b	c	d	e	
1	Dangerous to others						Not dangerous to others
2	Unpredictable						Predictable
3	Hard to talk to						Easy to talk to
4	Have only themselves to blame						Are not to blame for their condition
5	Would improve if given treatment						Would not improve if given treatment
6	Feel the way we all do at times						Feel different from the way we all feel at times
7	Will eventually recover fully						Will never recover fully
8	Could pull themselves together if they wanted to						Can't do anything to improve how they feel

Traumatic psychosis

The person would typically describe their experience in the following way:

‘My problems go back quite a way – maybe even as far as my childhood or soon after – and seem to have something to do with some very unpleasant experiences that I had. Now I seem to get unpleasant voices and maybe also visions – sometimes to do with these experiences.’

	Think of a person with traumatic psychosis, would you consider them to be:	a	b	c	d	e	
1	Dangerous to others						Not dangerous to others
2	Unpredictable						Predictable
3	Hard to talk to						Easy to talk to
4	Have only themselves to blame						Are not to blame for their condition
5	Would improve if given treatment						Would not improve if given treatment
6	Feel the way we all do at times						Feel different from the way we all feel at times
7	Will eventually recover fully						Will never recover fully
8	Could pull themselves together if they wanted to						Can't do anything to improve how they feel