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Quantification of Stigma for Clinical Assessment in Psychiatric Practice' - A paradigm shift in anti-stigma intervention: Using newly developed scale (Stigma Quantification Scale 'SQS').

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Quantification of Stigma for clinical assessment in psychiatric practice – Need for a paradigm shift in anti-stigma intervention: Using newly developed scale (Stigma Quantification scale 'SQS')

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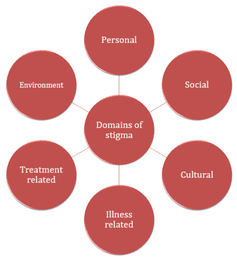
Stigma is a multidimensional construct



Anti-stigma Intervention is required to be done in doctors clinic

Despite advances patients needs are neglected for minimizing their stigma

Purpose to develop a quantification tool for measurement of stigma. For evidence based-intervention in medical settings

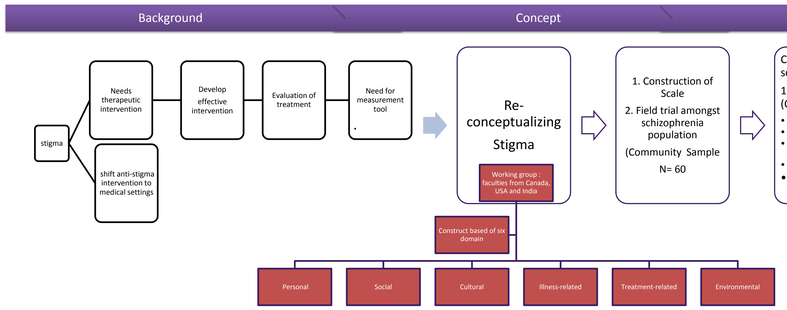
Method: A working group provided guidelines for construction of scale based upon multifactorial concept of origin and burden of stigma

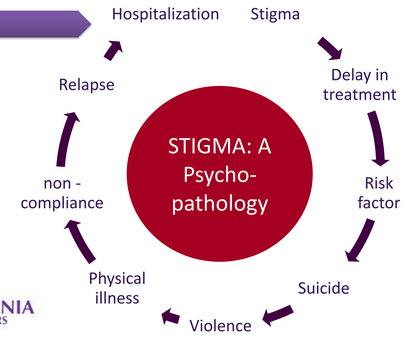
This scale has 49 items representing four domains of stigma: (1) Personal; (2) Family; (3) Social; and (4) Illness . There are three subscales: (a) self-experience; (b) illness related consequences; and (c) coping strategies. The scale measures a) experience and b) their opinion. This is a Multicentric study of stigma in schizophrenia. We present result of a pilot phase of the field trial conducted in Mumbai, India

THE SCALE

Illness-related consequences a. Symptoms worsen due to illness
b. Non-adherence
c. QoL deteriorated due to illness
d. Level of functioning deteriorated due to illness
e. Side effects of medication caused shame
f. Treatment been delayed due to illness
g. Discrimination by health professionals
h. Contemplation of self-harm
i. Discriminated due to abnormal behaviour or violence
j. Shame or guilt interfered with treatment

1. Coping strategies
a. To what extent has your religiosity interfered with your coping?
b. To what extent has your inner strength interfered with your coping?
c. To what extent has your past experiences interfered with your coping?
d. To what extent has your family or friends interfered with your coping?
e. To what extent has your medical treatment interfered with your coping?





SCHIZOPHRENIA OPEN THE DOORS

Stigma: A clinical Risk

A. Psychological Consequences	A. Social Consequences
A. To what extend are you discriminated	A. Social Consequences
B. How much prejudice do people show against you	B. How much prejudice do people show against you
C. How much avoidance is there inn your behavior	C. How much avoidance is there inn your behavior
D. How much dislike have you developed towards people	D. How much dislike have you developed towards people
E. To what extend is your marriage jeopardized	E. To what extend is your marriage jeopardized
F. To what extent have you lost your family support	F. To what extent have you lost your family support
G. To what extent have you been discriminated at your work place	G. To what extent have you been discriminated at your work place
H. To what extent have you been discriminated when applying for a job	H. To what extent have you been discriminated when applying for a job
I. To what extent do your relatives hide your illness	I. To what extent do your relatives hide your illness
J. To what extent are you abused (physical or sexual	J. To what extent are you abused (physical or sexual

Part B Opinion	
I. Do you know that this illness can be disabled?	I. Do you believe people might harm you because you have mental illness?
I. Does this illness cause shame to your relatives or family members?	I. Do you believe that this illness is of 'supernatural' origin?
I. Does this illness cause shame to your your marriage?	I. Do you believe that this illness is of 'supernatural' origin?
I. Do you believe it will adversely affect your work/employment	I. Do you believe your family will fulfill your needs if you cannot?
I. Do you believe it will adversely affect your marriage?	I. Do you believe this illness may reduce your capacity to work and function?
I. Do you believe it will adversely affect your work/employment	I. Do you believe this illness may reduce your capacity to work and function?
I. Have you suffered abuse from your family members due to mental illness?	I. Do you think negative attitudes of people interfere with your recovery?
I. Have you suffered abuse from your family members due to mental illness?	I. Do you think negative attitudes of people interfere with your recovery?
I. Do your relatives neglect you?	I. Do you fear being called 'names' due to your mental illness?
I. Do your relatives neglect you?	I. Do you fear being called 'names' due to your mental illness?
I. Do people call you names?	I. People think I am non achiever
I. Do you believe that people are afraid of you because you may become aggressive?	I. Think I am not productive
I. Do people call you names?	I. People think I am non achiever
I. Do you believe that people are afraid of you because you may become aggressive?	I. Think I am not productive

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SQS is a valid scale for measurement of Burden of stigma in schizophrenia

Descriptive statistics - demography and disease characteristics of patients (Schizophrenia, N= 60)	
Parameter	N (%)
Male	33(55.9%)
Age- mean (sd) Years	35.7 (9,5)
Duration of Illness in Months - mean (sd)	84.3 (54.5)
NO Hospitalization - N (%)	23 (39%)
Current episode in relapse	31 (51.7%)
No Suicide attempt- N (%)	42(70%)
No Violence reported - N (%)	29 (38.3%)
Non-Compliance	24 (40%)
mean BPRS	43.0 (11.3)
Good Outcome (CGIS 1 & 2)	39 (60%)

SQS Score may indicate clinical complications

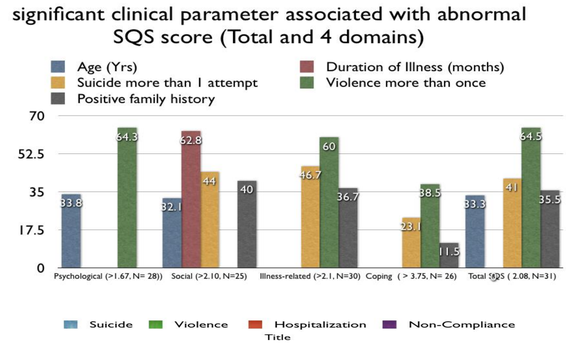
SQS:Validity		
Domains of SQS	Crohnbach's alpha	Validity - Internal Consistency
Psychological	0.925	Good
Social	0.782	Good
Illness-related	0.788	Good
Coping Strategies	0.416	Moderate

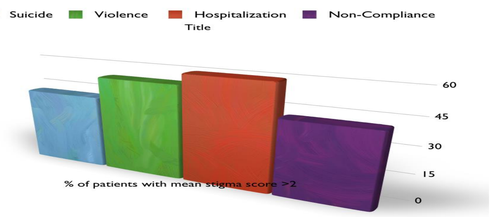
Percentage of patients with clinical risk and severity of stigma

Young age (p .040)
Suicide (p .037)
Violence (p .040)
positive family history (p .053)

> 2 mean SQS

Severe stigma ,ay lead to suicide & Violence





CONCLUSION: SQS is a valid scale for measurement of stigma
High SQS score indicates possibility of Suicide, Violence and non-compliance
SQS can be useful in evaluation of treatments for anti-stigma interventions in clinics

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