

Perspectives

People with a diagnosis of schizophrenia should be encouraged to aim high in life, and not accept low expectations that others may put on them, says Richard Shrubbs



Figures routinely suggest that people with schizophrenia fall into three outcomes. Some will never recover enough to make progress in this world, others will have a partner and sometimes hold down a job, and the remainder will leave the system after one short and go on to live a life. The figures have not changed despite advances in treatment. Perhaps this is because of those who treat us, as much as wider society?

As I was nearing completion of my master's degree in 2005, I got a call from my community mental health team to tell me that my community psychiatric nurse had been off sick for six months and they thought they ought to check in on me to see how I was doing. "Fine, thanks - I'm debating whether to do a PhD in the theory of Islamic extremism or taking a job at a major international news organisation," I replied.

The woman responded worriedly: "We'd better send someone round Richard..." I fully understand her predicament - people with schizophrenia who say this are usually losing the plot. But in this case, I was telling the truth.

The reason she was worried is something symptomatic of the mental health system; people with schizophrenia are stigmatised even by those who treat us. We are given low expectations and prognoses because we have the 'dustbin diagnosis' - not for any other reason.

On January 25, a professor of law at the University of Southern California published an article in the *New York Times*. He too has schizophrenia and remembers: "Following my last psychiatric hospitalisation at the age of 28, I was encouraged by a doctor to work as a cashier making change. If I could handle that, I was told, we would reassess my ability to hold a more demanding position, perhaps even something full-time." Elyn R Saks chose not to choose life as presented by his psychiatric team. He followed his interests and abilities and climbed to the top of the tree in academia.

Telling a new psychiatrist that I am an international freelance journalist, specialising in psychedelics, social affairs and sailing could well be a red rag to a bull. Given my experience of some psychiatrists there's a high chance I'd be patted on the head and asked if I need to increase my medication.

That said, I have been fortunate in my time, with only a few practitioners who need to wake up and smell

the coffee. From the start I was told I would have a short acute phase and go on to do well. Being told that gives a timescale to the living death some people imagine schizophrenia to be.

This is not to take the Aros philosophy of 'get off thy deathbed and work'. There is no cure for schizophrenia and we have to manage our issues daily, even hourly, to get ahead in life. I am disabled - I have schizophrenia. We need to forge our own way in society in our own time, which I know doesn't fit in with Government policy. But why give someone low expectations from the start?

People with my diagnosis have enough problems in society without professionals giving us low expectations. Half the setbacks in my career have been down to the stigma attached to schizophrenia. For example, I should have spent this Christmas covering a yacht race from South Africa to the tropical island of St Helena. Initially, the clients couldn't get enough of me, throwing new freelance ventures at me so I'd have made a killing from my month in the tropics.

Then I made the mistake of asking for reasonable adjustments. They convened an emergency meeting of the Race Committee, and decided I couldn't take the pressure.

This knocked my confidence for six. It has taken me several months to recover from that one, and I still have

doubts as to how I will achieve my goals in life. In such a situation you start questioning things you shouldn't. Am I just another schizo writing to fill my time? Am I good enough? Should I do a work capability assessment and give up as a journalist?

Thankfully, I have a portfolio of clients who will always listen when I call. The health editor of a Sunday newspaper laughed out loud when I told her the Race Committee's beliefs - her paper has put me under fissile levels of pressure that wouldn't have been matched in a few hours on a press boat.

They say you have 30 seconds to make your first impression on someone. I have learned from my time in the system that firstly, you should judge someone on the first few days of acquaintance, and then you have to accept they will change. Recovering from the dustbin diagnosis requires the heart of a lion. Why then are some of the toughest people of all - those who have crossed a hurdle few others could - told we should stack shelves and accept our place in society? ■



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Perspectives aligns with the Network's ethos from the National Suicide Line Network. It provides an individual service user view of the world.