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STIGMA, INSIGHT AND SOCIAL FUNCTIONING IN PSYCHOTIC DISORDERS. A SAMPLE TO BEGIN THE INVESTIGATION.

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Introduction

The internalized stigma of mental illness leads to negative outcomes (low self-esteem, demoralization, lower compliance to the treatment, unemployment). Previous studies have shown that the prevalence in psychotic patients is about 64%; furthermore, patients with non-psychotic disorders exhibit high prevalence, as well.

Aim

Our aim is to study internalized stigma, insight and social functioning in psychotic patients.

Objective

Through the investigation of low insight patients, we sought to verify the insight paradox theory and the impact stigma has on social functioning. We also investigated ISMI subscales (alienation, discrimination, stigma resistance, stereotype endorsement, social withdrawal) and the correlation between those elements.

Methods

Our sample included 19 psychotic patients: 11 with bipolar disorder; 3 with schizoaffective disorder; 5 with NOS psychosis. Patients were assessed with the following tests: SAI to evaluate insight; PANSS for clinical and psychopathological evaluation; GAF for social functioning; ISMI for the assessment of internalized stigma.

Results

13 patients with mild or complete lack of insight reported low stigma, confirming the Insight Paradox theory. There is a positive correlation, measured with the Pearson correlation analysis, between insight and social functioning (R=0,752*) and between stigma and insight (R=0,024) while stigma and social functioning correlate negatively (R= -0,491*).

Conclusions

Results showed that lower levels of insight are related to higher stigma resistance and higher stigma leads to poorer functioning in social contexts. Higher sample numbers are necessary for further investigations on the subject.