

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**PROVIDING INFORMATION TO RELATIVES ABOUT EXPRESSED**  
**EMOTION AND SCHIZOPHRENIA**

A thesis presented in partial fulfilment  
of the requirements for the degree of  
Master of Arts in Psychology  
at Massey University

Alicia Maree Moxon

1999

## **Abstract**

Studies have shown that long term psychoeducational programmes aimed at lowering the Expressed Emotion (EE) in family environments can improve communications between the family members and the client, reduce EE, and lower expectations. The present study aimed to enhance family members knowledge about schizophrenia and expressed emotion, as well as awareness of their current coping strategies by conducting a brief educational intervention designed to overcome methodological shortcomings of similar studies. It was hypothesised that providing information to families (excluding clients) about schizophrenia, expressed emotion and ways in which each member can help, would alter the views and attributions that relatives make about the causality of the client's behaviour compared to a randomly assigned wait-list control condition. These changes would then be reflected in reduced criticism, hostility, and emotional overinvolvement and increases in the amount of accurate information concerning schizophrenia. People with schizophrenia were recruited into a controlled trial of a brief educational intervention with family members. Relatives and clients were randomly allocated to one of two groups: a treatment group or a wait-list control group. They received a brief educational intervention designed to give clients and relatives individualised information about schizophrenia, expressed emotion, and how to manage individually in the home and in their relationships. Analyses of the results showed that relatives knowledge increased significantly after the education, and was maintained at the three month follow-up. The control condition reflected no changes in knowledge. Other results showed that relatives' and clients' EE ratings significantly decreased from pre- to post-test. All gains were maintained at the three month follow-up. At nine months after education only 1/19 clients had relapsed. The analyses suggested that although knowledge increased as a result of education, the decreases in EE were not due to education alone. The discussion considers these findings in some detail.

## **Acknowledgements**

I would like to take this opportunity to thank the following people who have helped make the completion of this thesis possible.

Ian Falloon , Nicholas Tarrier and Christine Vaughn for their kind encouragement and generosity with the use of their research.

My supportive friend Erina, whose sympathetic ear helped to lighten the load.

Duncan Hedderley for his statistical assistance and for being kind, patient and understanding at the time when I most needed it.

The Ladies at Manawatu SF - Christine, Elizabeth and Pauline - whose support, encouragement and guidance was so steadfast that I truly do not have the words to express my gratitude.

My parents who put up with me and my thesis, I believe they came to know it as well as I did. Without their support, tolerance, love and ability to make me laugh at myself in times of great stress, this thesis would never have been completed.

The participants who made this research possible.

Kathryn Platz who despite difficulties gave her valuable assistance and time.

June Read who believed in me and in doing so gave me the courage to believe in myself.

Finally, I wish to thank my supervisor Kevin Ronan for his knowledge, understanding and genuine desire to help others which helped turn a vague but enthusiastic idea into a workable reality, and for his constant faith in my ability to 'fight the good fight'.

## **Table of Contents**

	PAGE
ABSTRACT.....	ii
ACKNOWLEDGEMENTS.....	iii
LIST OF TABLES.....	vi
LIST OF APPENDICES.....	vii
 CHAPTER 1 : INTRODUCTION.....	1
 CHAPTER 2 : LITERATURE REVIEW	
2.1 The History of Schizophrenia.....	4
2.2 The Symptoms and Characteristics of Schizophrenia.....	6
2.21 Positive, Negative, and Other Symptoms.....	7
2.22 Typology.....	9
2.3 Aetiology.....	11
2.31 The Genetic Component.....	11
2.32 Biochemical.....	12
2.33 The Brain and Schizophrenia.....	12
2.34 The Family and Schizophrenia.....	13
2.35 The Current Stance.....	14
2.4 Expressed Emotion.....	15
2.41 The Attributional Model.....	18
2.5 Treatment.....	21
2.51 Historical Overview.....	21
2.52 Current Treatment Models.....	21
2.53 Family Interventions.....	25
2.54 Family Education Programmes.....	28
2.6 The Present Research.....	31
2.7 This Education Programme.....	31

## CHAPTER 3 : METHOD

3.1 Participants.....	33
3.2 Design.....	36
3.3 Assessment.....	36
3.31 Patient and Family History Interview.....	36
3.32 The KASI.....	36
3.33 The LEE.....	37
3.4 Procedure.....	38
3.41 Assessments and the Education Programme.....	39

## CHAPTER 4 : RESULTS

4.1 Reliability.....	46
4.2 Group Comparability.....	46
4.3 Treatment Integrity.....	46
4.4 Treatment Outcome.....	47
4.41 Knowledge About Schizophrenia Interview.....	48
4.42 Information Acquired.....	49
4.43 Information Acquired and the Expressed Emotion Dimension.....	50
4.42 The LEE Scale.....	52
4.43 Expressed Emotion.....	52
4.5 Follow-up.....	57

## CHAPTER 5 : DISCUSSION..... 59

5.1 Discussion of Main Aims and Major Findings.....	59
5.11 Relatives Knowledge.....	60
5.12 Participants Expressed Emotion.....	62
5.13 Further Investigations and Implications.....	64
5.14 Limitations of the Study.....	68
5.15 Conclusions.....	69

## APPENDICES..... 71

## REFERENCES..... 127

**List of Tables**

	PAGE
1. Demographic Information of Participants.....	34
2. Composition of family households.....	35
3. Flowchart of the Education Programme.....	45
4. Means and Standard Deviations for the KASI.....	48
5. Low and High-EE Means and Standard Deviations of the KASI.....	51
6. Means and Standard Deviations for the LEE Scale - Relatives Version.....	53
7. Means and Standard Deviations for the LEE Scale - Clients Version.....	54
8. Low and High-EE Means and Standard Deviations of the LEE Scale.....	57
9. Change in EE Status Following Treatment.....	58

**List of Appendices**

	PAGE
A. Information Sheet.....	71
B. Consent Form A.....	73
C. Consent Form B.....	74
D. Patient and Family History Interview.....	75
E. Knowledge About Schizophrenia Interview (KASI).....	76
F. Level of Expressed Emotion Scale (LEE) - Client version.....	82
G. Level of Expressed Emotion Scale (LEE) - Relative version.....	86
H. Treatment Manual.....	90