

Schizophrenia and its association with dangerous behavior

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Background

The mental illness known as Schizophrenia has been around for a long time. References appear in classical writings and the bible regarding the people who are insane. The history of such a mental disorder dates back to the Ebers Papyrus of 1550 BC from Egypt. Accounts of incidents of insanity, including hearing voices, seeing visions, and unpredictable and disorderly behavior, started to be seen in the works from the 17th century. The notable thing is that even at that time, madness wasn't taken as control of some evil spirits but was viewed as a medical issue, although they were deprived of the current medications that we have nowadays.

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The most common and persistent fable regarding schizophrenia is that all the sufferers of this disorder are vicious. In public view, violence is most often accompanied by schizophrenia as compared to any other sort of disorderly behavior (National Institute of Mental Health, n.d.).

This is due to the ill-informed and resentful media reporting of the topic. The current affairs programs and articles that emphasize violence in this illness while disregarding all of the other features of this complicated disorder, predominantly the increased suicide ratio and informing us very little regarding the disorder overall, are miserably all too common.

Many people involved in caring occupations do not feel comfortable debating about this subject, which is sad, too. A hazardous attitude is very frequently viewed as a failure on the part of the doctors but not recognized as society's weakness that devalues people with mental diseases and under-funds mental health services.

It is not founded in the evidence that all schizophrenics are violent. Thankfully, it is relatively unusual. However, due to the effect of the visions and delusions on their thinking, some do become fierce when they are going through the critical indications of psychosis. Tragically, many schizophrenics succeed in killing themselves.

People at risk

In a case when a person with schizophrenia becomes vicious, family members or someone taking care of the patient are mainly at risk. Attacks against strangers are very occasional. A female attacker has the chance of attacking her children.

Schizophrenia and sex

Sexually disinhibited behavior is another kind of threatening attitude associated with these patients. They have the probability of coming into contact with the criminal justice system where, given the nature of the offense, they are doubtful of getting any considerate dealing.

Other forms of violent a, attitude

Dangerous behavior may assume other forms as well, such as schizophrenics jumping off a high building as they become convinced that they can fly. Their intention might not be to kill themselves, but such an action will undoubtedly result in serious injury or even death. Crossing the street without looking can also be taken as an example of such disorderly behavior because of the belief that they are indestructible as they are being secured by angels.

Things that can be done

Prediction of dangerous behavior in schizophrenia has three risk factors. The first is an earlier history of dangerous behavior or extortions of such attitude. If one has tried suicide before, then there is a high probability that it will occur again ("Schizophrenia and Dangerous Behaviour," 2018).

A history of drug or alcohol abuse is the second factor. Being drunk puts one in danger of violent behavior, whether one is mentally ill or not.

Adherence to the medication regime is the third risk factor. Whenever we hear of some tragic death, we are informed that the patient declined after they stopped taking their medication.

It is very important for the professionals who take care of people with schizophrenia to take all of the warning signs seriously. These elements are important and should be at the forefront of the recovery policy for schizophrenics.

In recent times, a significant amount of work has been performed on filtering our method to risk valuation. Currently, there are a lot of risk assessment implements accessible to psychiatrists, who use features such as abuse of alcohol and drugs, preceding history of seriousness, the person's degree of awareness of their state, and their level of employment. Wavering extents of success have

been achieved, and the probability of forecasting dangerous behavior has been increased with the help of these tools.

Mental health workers, especially those working in the voluntary sector, should give people with schizophrenia clear messages about the want for obedience with medication and abstinence from substance abuse. We also need to use advanced therapeutic tools and better diagnostics to assist in controlling dangerous behavior. However, a slight change will occur until the mental health service has the assets it requires to sufficiently administer those at threat, and to achieve that goal, there must be a drastic transformation in our society's approaches to resourcing mental illness in general and schizophrenia, specifically (Mental Health America, 2017).

References

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