



# Cognitive Behaviour Leading to Low-self Esteem: Therapy of Schizophrenia

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## Authors' contributions

*This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.*

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## ABSTRACT

Schizophrenia is one of the most debilitating disorders worldwide.

**Objective:** To identify the effects of therapies on Schizophrenia patients.

**Methodology:** This is a review paper where different studies and views of various authors are observed for getting information and stats, many websites like PubMed, Google Scholars, Research Gate etc. and journals by the various authors have been referred.

**Focus:** Low self-esteem is an individual's assessment of personal originating from an individual's assessment or from outside the individual obtained by analyzing behavior with an ideal self, in the

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form of negative feelings towards the ability of the individual itself, in order to overcome the problem cognitive therapy can be given to patients with low self-esteem. Schizophrenia is a mental disorder characterized by impaired thought processes and weak emotional responses.

**Results:** This situation is generally a chaotic way of speaking and thinking and is accompanied by significant social and work dysfunction. Early symptoms usually appear during young adulthood. One of the negative symptoms of schizophrenia is low self-esteem. Here an effort is done to find out how cognitive behavior therapy heals the patients. In most cases therapies are given known as Acceptance and Commitment Therapy (ACT). This review article is an effort to focus on the effect of cognitive therapy and changes in behavior on individuals with schizophrenia.

**Keywords:** Cognitive therapy; self-esteem; schizophrenia; mental disorders.

## 1. INTRODUCTION

“Schizophrenia is a condition that exists in all cultures and in all socioeconomic groups” [1]. “The prevalence of schizophrenia is estimated at about 1 % of the total population” [2]. “The prevalence of mental emotional disorders with symptoms of depression and anxiety at the age of 15 reaching 14 million people” [3]. “This figure is equivalent to 6% of Indonesia’s population. Meanwhile, the prevalence of severe mental disorders such as schizophrenia reaches 400 thousand. 6 to 7 out of 100 households experience schizophrenia or psychosis disorders in Indonesia” [4]. “Schizophrenia has positive symptoms and negative symptoms. Negative symptoms include low self-esteem” [1,5,6].

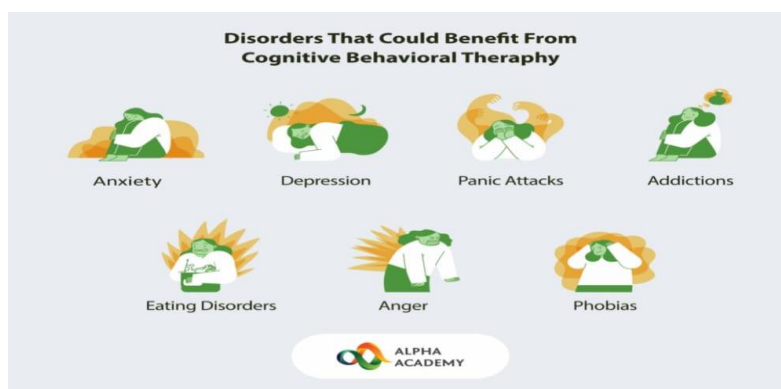


**Fig. 1. Signs for therapy**

According to [7] “low self-esteem can be a consequence of mental health disorders (such as depression, anxiety and panic) or it can be a vulnerability factor for the development of such problems. Nursing therapy is given to schizophrenic patients with low self-esteem problems, one of which is acceptance and commitment therapy. This therapy has been proven to overcome various diseases. The problem of nursing low self-esteem has been researched by several people but with different therapies”. Research conducted by [8] shows that “cognitive abilities increased by

29.31% as well as behavioral abilities increased by 22.4% in schizophrenic patients using CBT”. Another study conducted by [9] shows that “with CBT and REBT can reduce symptoms of low self-esteem and improve patient ability”.

“High self-esteem is described from the nature of the individual, who has a feeling of unconditional self-acceptance, even though wrong, defeated and failed, as a valuable and important trait for himself. Individuals who have feelings of worthlessness, insignificance and prolonged low self-esteem due to negative evaluations of themselves and their own abilities are a picture of someone who has low self-esteem. Low self-esteem is a pervasive psychological dysfunction - regardless of their specific problems, almost all patients state that they want to have better self-esteem. If we only reduce low self-esteem, many psychological problems will be substantially reduced or disappear completely” [10]. According to [11] “Self-esteem is an important component of psychological health. Much previous research indicates that lowered self-esteem frequently accompanies the psychiatric disorder”. “Lowered self-esteem has been consistently found to occur in several psychiatric disorders. Schizophrenia has positive symptoms and negative symptoms. Negative symptoms include low self-esteem. low self-esteem can be a consequence of mental health disorders (such as depression, anxiety, and panic) or it can be a vulnerability factor for the development of such problems” [12]. According to [13] found “24% of the people with schizophrenia scored below the mid-score (reflecting low score and low self-esteem)”. “Schizophrenia patients have significantly low self-esteem in comparison to other psychiatric conditions and they are expected to have a compromised quality of life and poor psychosocial functioning” [14].



**Fig. 2. Various disorder and cognitive behavioral therapy**

“With low self-esteem disorders can cause an individual to have negative moods and memories so that the individual is more prone to face depression when faced with stress because the mindset he has towards himself is not good, the purpose of life is unclear, has a more future pessimistic, the lower the self-esteem and the more risky personality disorder. Low self-esteem that is not handled will cause disruption of social interaction: withdrawal, changes in appearance, hopelessness, and emergence of violent behavior that risks injuring oneself, others, and the environment” [15]. “Negative thoughts that exist in individuals who experience low self-esteem will be able to trigger mental stress on patients so that it can cause anxiety in patients, depression, or even trigger the desire to commit suicide in patients with mental disorders” [16]. Some of the results of previous studies have examined the low self-esteem. Research results by [17] Of “the total of 87 participants who experience low self-esteem 20 (23.0%) had attempted suicide. Low self-esteem appears to represent a psychological dimension that is closely related to suicide risk”. “Therefore, clinical attention should be paid to the evaluation and enhancement of low self-esteem in schizophrenia patients with suicidal thoughts. A longitudinal prospective study is required to ascertain whether low self-esteem leads suicide attempts” [18]. Chronic low self-esteem is one of the nursing diagnoses that are often found in psychiatric hospitals and Percentages of patients with chronic low self-esteem has reached 90.4% [19] found 30 schizophrenic patients made respondents because of experiencing chronic low self-esteem problems.

“Schizophrenia is one of the most debilitating disorders worldwide” [20]. “Relapse is

associated with high costs for hospital admissions and unemployment and loss of productivity. Additionally, relationships are often jeopardised and there is a risk of suicide” [21]. “This situation has an impact in terms of burden for patients, families and society. Antipsychotics are effective for the prevention of relapse”, [22] but “they are associated with considerable side-effects, and according to a Cochrane review, 24% of patients relapse within 1 year despite drug treatment” [23]. “Various psychosocial and psychological interventions have been developed for people with schizophrenia. Such non-pharmacological interventions might play an important role in the prevention of psychotic episodes” [24]. Reasoning based approaches have been used since time immemorial in attempts to change people’s unusual beliefs and attitudes.

Schizophrenia is a chronic and severe psychiatric disorder that is seen in approximately 1% of the population and which causes significant functional loss [25]. Antipsychotic drugs are elective for the acute treatment and relapse prevention of the disorder [23], but are associated with burdensome side effects which are likely to contribute to excess mortality associated with the disorder [26]. There have been attempts to provide psychotherapy with cognitive behavioral therapy (CBT) to participants that were not receiving antipsychotic medication [27]. These studies could be an opportunity to determine the role of psychotherapy alone in improving the symptoms of schizophrenia.

## **2. OBJECTIVE**

To identify the effects of therapies on Schizophrenia patients.

### 3. METHODOLOGY

In this review article around 50-60 articles were reviewed out of which 35 were appropriate, and were about the cognitive behavior and how the attitude of individuals behavior change gradually. Different studies and views of various authors are observed for getting information and stats, many websites like PubMed, Google Scholars, Research Gate etc. and journals by the various authors'.

### 3. RESULTS

Respondents' Self-Esteem after Being Given Cognitive Therapy.

"The results showed that the majority of respondents' self-esteem after undergoing cognitive therapy experienced an increase in which as many as 19 respondents (86.4%) with high self-esteem and 3 respondents (13.6%) did not experience changes in self-esteem. Based on the research results obtained indicate that there is a change in the respondent's self-esteem after cognitive therapy can be seen from each response value of the respondent. This value is obtained from the results of a questionnaire that researchers distributed to respondents after cognitive therapy. Most respondents said they would try to get other people to talk, not be alone anymore, and said that they were sure they could be relied on by others in a job, they were able to overcome the problem and would recover soon and help the family again. From these statements, it can be concluded that respondents can overcome the negative thoughts that arise in him independently after cognitive therapy" [28]. The same research results that support this study do not yet exist, but research conducted by [28] that examines the effect of cognitive therapy on the ability to interact with schizophrenia patients with social isolation with the results, from 20 respondents 3 people (15%) on high level, 10 people (50%) at the moderate level and 7 people (35%) who are at the low level. The results obtained are different levels of ability to interact after this cognitive therapy [29].

### 4. DISCUSSION

Schizophrenia is a complicated mental condition characterized by hallucinations, delusions, disorganized thinking, and social disengagement. While medicine is essential for symptom management, psychological therapies such as

Cognitive Behavioral Therapy (CBT) have gained popularity as a supportive therapy approach. CBT for schizophrenia focuses on the disorder's cognitive and behavioral elements, assisting individuals in coping with distressing symptoms and improving their overall quality of life.

**Cognitive Distortions:** Identifying and addressing cognitive distortions - erroneous thought processes that contribute to negative emotions and behaviors - is a major component of CBT. These distortions are common in people with schizophrenia, and they can exacerbate symptoms and hamper functioning. Individuals learn to recognize distorted thoughts and replace them with more balanced and rational thinking through CBT. Someone who believes they are continually being watched, for example, may learn to question that view and consider more evidence-based alternatives. CBT also targets hallucinations and delusions, both of which are common in schizophrenia. While CBT does not seek to completely erase these symptoms, it does assist patients in managing their emotional responses to them. A person having auditory hallucinations, for example, may develop strategies to challenge the perceived authority of the voices and lessen the distress they cause.

CBT for schizophrenia frequently includes skills training to improve social and problem-solving abilities, which are critical for navigating daily challenges, maintaining relationships, and achieving personal goals. By improving these skills, individuals with schizophrenia can gain more independence and resilience in managing their condition. **Involvement of Family Members:** Family members have an important part in the treatment of schizophrenia. CBT can include family psycho education, in which loved ones learn about the disorder, how to handle it, and how to communicate effectively. This can result in a more supportive atmosphere, less family stress, and an improved prognosis for the individual. **Integration with Medication:** It is crucial to note that CBT is generally used in conjunction with antipsychotic medication, as the combination of both techniques frequently produces the best results. Medication focuses on the medical aspects of schizophrenia, whereas CBT focuses on the psychosocial and behavioral aspects.

Schizophrenia is a complicated mental condition characterized by hallucinations, delusions, dis

organized thinking, and social disengagement. While medicine is essential for symptom management, psychological therapies such as Cognitive Behavioral Therapy (CBT) have gained popularity as a supportive therapy approach. CBT for schizophrenia is concerned with treating. CBT for schizophrenia is not without its difficulties. Due to cognitive deficiencies or paranoia, some people with severe symptoms may find it difficult to engage in therapy. Flexibility in approach, as well as therapist expertise is critical in tailoring therapy to the individual's requirements and capabilities.

## 5. CONCLUSION

In this review article after reviewing various articles it can be conclude that Schizophrenia leads to different self-esteem issues it may be low or high, that are not noticeable at the early stage but gradually its leads to chronic health issues. If diagnosed and accepted at the early stage it can be easily treated through therapies and the results are excellent in management. Multiple authors revealed that cognitive behavior therapy is best among all whereas Rational Emotive Behavior Therapy. To summarize, Cognitive Behavioral Therapy can be an effective adjunct to schizophrenia treatment. CBT enables people with schizophrenia to live more fulfilled lives by treating cognitive distortions, controlling symptoms, boosting behavioral activation, and improving social skills. While CBT is not a cure-all, when paired with medication and a comprehensive treatment plan, it can considerably improve the overall well-being of those living with schizophrenia.

## COMPETING INTERESTS

Authors have declared that no competing interests exist.

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