

# Psychosis and Resilience

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**March 02, 2022, 11:00am-12:30pm ET**



Central East (HHS Region 3)

**MHTTC**

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

# MHTTC Network

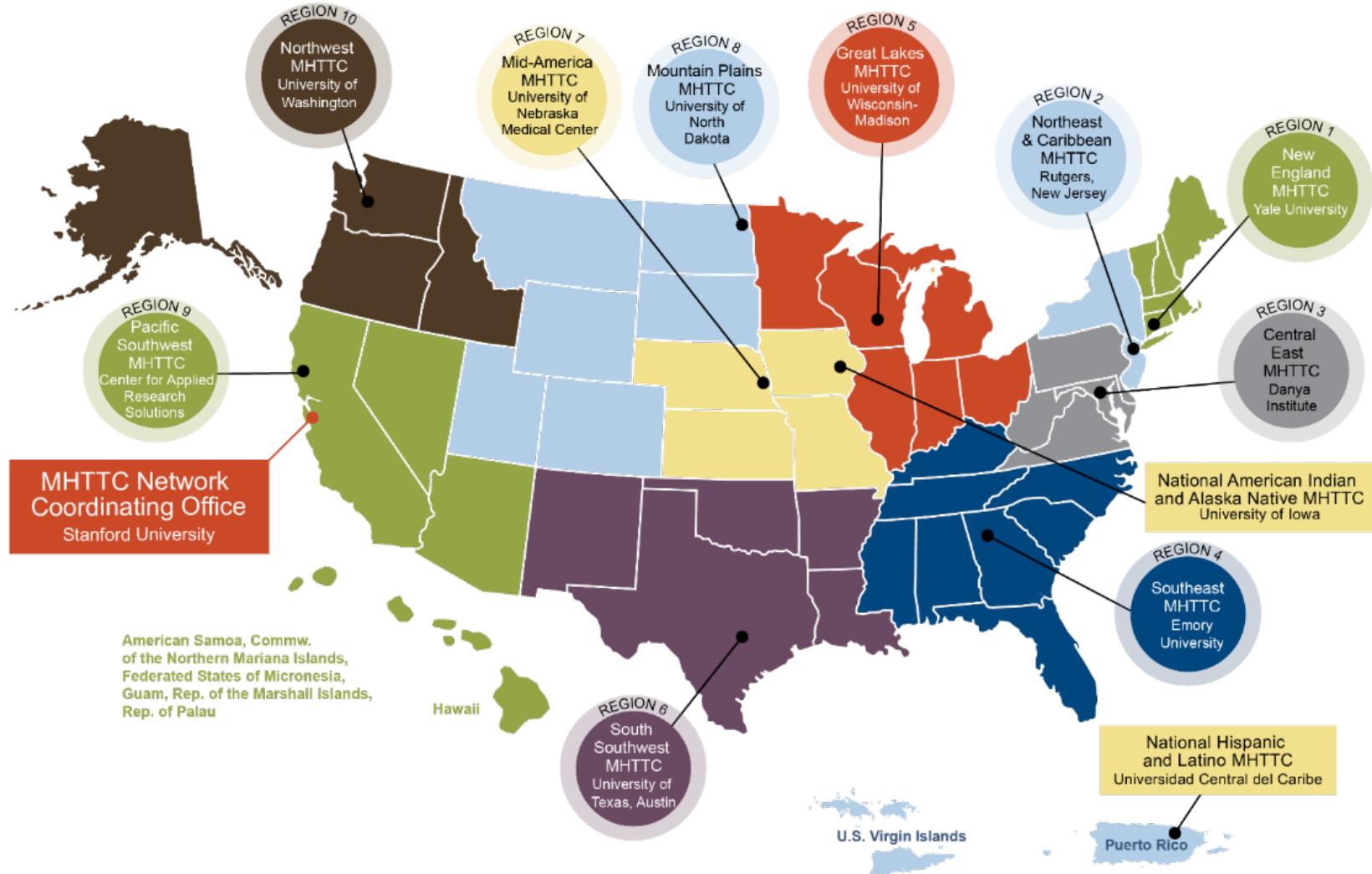


MHTTC

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MHTTC Network



# MHTTC Purpose

The MHTTC Network vision is to unify science, education and service to transform lives through evidence-based and promising treatment and recovery practices in a recovery-oriented system of care.

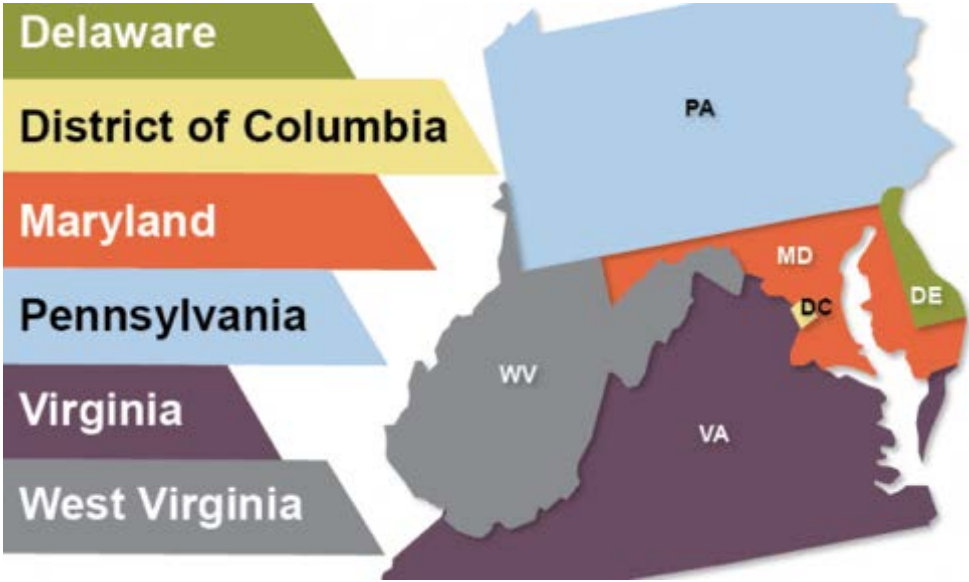


# Central East MHTTC Goals

## Funded by SAMHSA to:

- **Accelerate** the adoption and implementation of mental health related evidence-based practices
- **Heighten** the awareness, knowledge, and skills of the behavioral health workforce
- **Foster** alliances among culturally diverse practitioners, researchers, policy makers, family members, and consumers
- **Ensure** the availability and delivery of publicly available, free of charge, training and technical assistance

# Central East Region 3



Central East (HHS Region 3)

**MHTTC**

Mental Health Technology Transfer Center Network  
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At the time of this presentation, Miriam Delphin-Rittmon served as Assistant Secretary for Mental Health and Substance Use and Administrator of SAMHSA. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by SAMHSA/HHS, or the U.S. Government.

# Evaluation Information

As part of receiving funding through SAMHSA to provide this training, the Central East MHTTC is required to submit data related to the quality of this event. At the end of today's presentation, please take a moment to complete a brief survey about today's training.



# Background



- Licensed clinical psychologist who specializes in psychosis, particularly the early signs of illness.
- Passionate about mental health education (especially around psychosis), stigma reduction, and equitable, culturally responsive, evidence-based care.
- Draw on patients' and families' strengths to promote resiliency.



# Agenda

1. Describe the psychosis spectrum
2. Define resilience
3. Apply and critique the concept of resilience
4. Summary
5. Q&A

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# Psychosis: Big picture

- Approximately 1%-3% develop a psychotic disorder in their lifetime.
- 100,000 adolescents and young adults develop a first episode of psychosis each year in the US.
- ~20% of youth clinical samples may be at “psychosis risk.”
- Many people endorse broader psychotic-like experiences (PLEs).
  
- Psychotic disorders:
  - Estimated economic burden of \$156 billion in the US.
  - Significant individual impact (earlier mortality, lower QoL).
  
- Although there are negative outcomes associated with psychosis, it is important to note that many individuals who experience psychosis can and do lead full and successful lives.
  
- **Targeting and harnessing resilience can improve outcomes.**



# Psychosis



- Not a diagnosis
- Diverse set of experiences, including loss of touch from reality (hallucinations, delusions)
- Commonly associated with schizophrenia-spectrum disorders, but may be present in mood disorders, trauma, substance use, etc.

# Psychotic symptoms

- Two types of psychotic symptoms (DSM-5 'Criterion A')

1

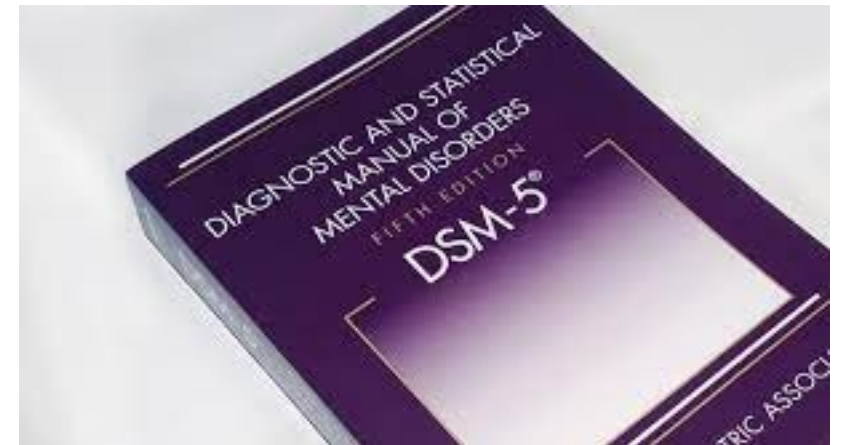
**Positive symptoms**  
(Behavioral excess)



- Hallucinations
- Delusions
- Disorganized speech
- Disorganized/catatonic behavior

2

**Negative symptoms**  
(Behavioral deficits)



# We view psychosis on a spectrum

## Hallucinations: Perceptual/Sensory Abnormalities



e.g., seeing indistinct shadows out of the corner of your eye

e.g., seeing a person hovering on top of your house

*Psychological Medicine* (2018), 48, 229–244. © Cambridge University Press 2017  
doi:10.1017/S0033291717001775

REVIEW ARTICLE

### **The slow death of the concept of schizophrenia and the painful birth of the psychosis spectrum**

S. Guloksuz<sup>1,2</sup> and J. van Os<sup>1,3,4\*</sup>



Other recent studies of psychotic experiences or “psychotic-like experiences” (PLE) in the general public:

- **6-27%** of individuals report at least one type of PLE in their lifetime (Bourgin et al., 2020; Isaksson, Vadlin, Olofsdotter, Åslund, & Nilsson, 2020; Kelleher et al., 2012a, 2012b; McGrath et al., 2015; van Os et al., 2009)
- **Most transitory and non-distressing** (van Os et al., 2009)
- **Some persist, can be distressing,** and are associated with: depression, low self-esteem, and other psychiatric disorders and service use (e.g., Dolphin et al., 2015; Rimvall et al., 2020) – particularly when influenced by environmental risk factors (van Os et al., 2009)

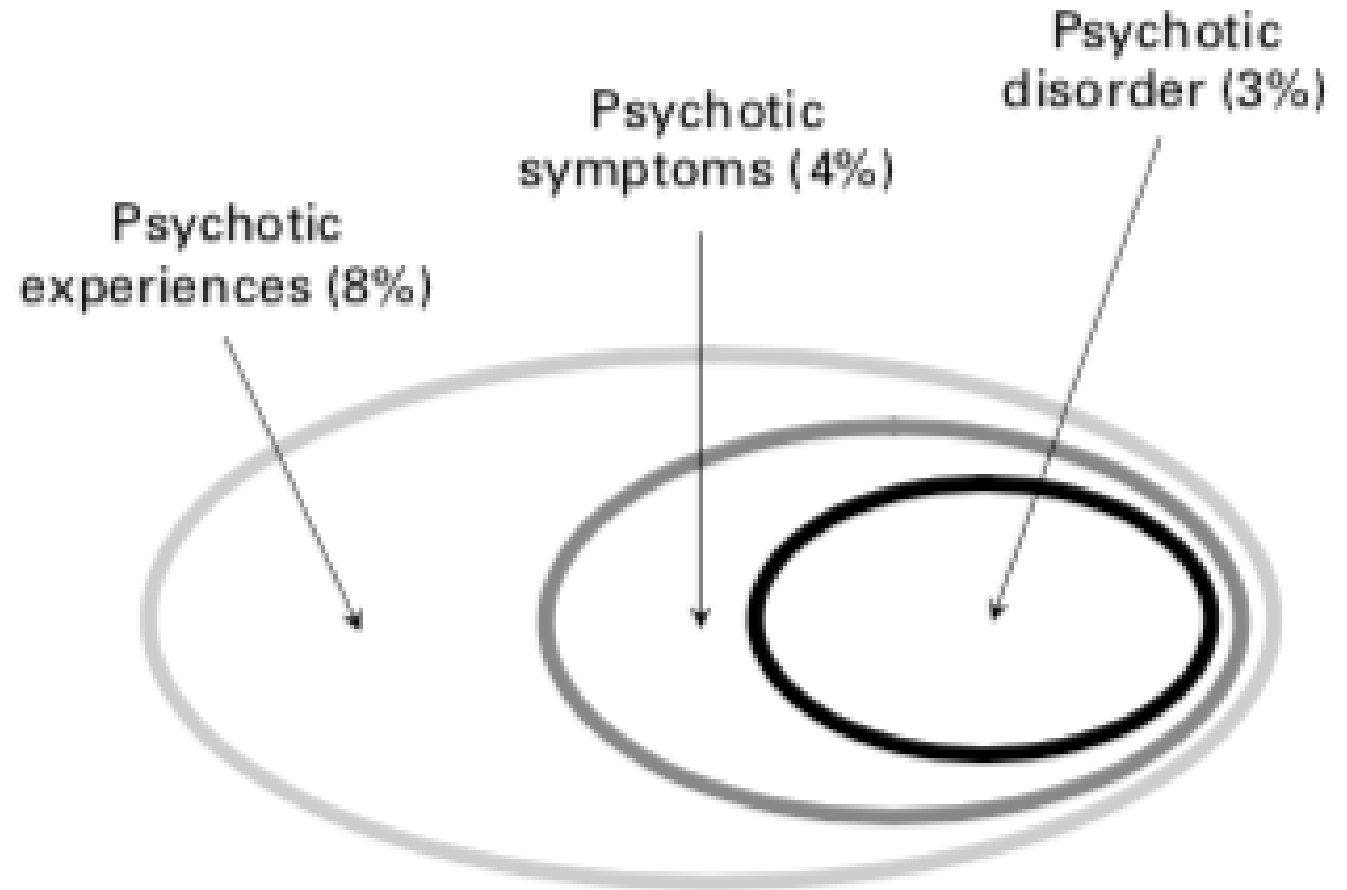


Fig. 4. Psychosis: variation along a continuum.

van Os et al., 2009

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**2. Define resilience**

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# Resilience

- Many definitions!....
- Multidimensional, dynamic!....
- One common definition: *“the human ability to adapt in the face of tragedy, trauma, adversity, hardship, and ongoing significant life stressors”* (American Psychological Association, 2005)



# Resilience (cont.d)

- Another definition: *“an outcome pattern following a PTE [potentially traumatic event] characterized by a stable trajectory of healthy psychological and physical functioning”* (Bonanno et al., 2011)



## Resilience definitions, theory, and challenges: interdisciplinary perspectives

\*bold added by me

Steven M. Southwick<sup>1,2\*</sup>, George A. Bonanno<sup>3</sup>, Ann S. Masten<sup>4</sup>,  
Catherine Panter-Brick<sup>5</sup> and Rachel Yehuda<sup>6</sup>

- “Determinants of resilience include a host of biological, psychological, social and cultural factors **that interact...**”
- “...it is important to specify whether resilience is being viewed as a **trait, a process, or an outcome**, and it is often tempting to take a binary approach in considering whether resilience is present or absent... in reality, **resilience more likely exists on a continuum** that may be **present to differing degrees across multiple domains of life.**”
- “...the recognition that resilience may be enhanced on numerous **levels (e.g., individual, family, community, culture).**”

# People can acquire resilience

## Road to resilience: a systematic review and meta-analysis of resilience training programmes and interventions

Sadhbh Joyce<sup>1</sup>, Fiona Shand<sup>2</sup>, Joseph Tighe<sup>2</sup>, Steven J Laurent<sup>3</sup>, Richard A Bryant<sup>4</sup>,  
Samuel B Harvey<sup>1 2</sup>



# Resilience (cont.d & summarized)

- A capacity in all of us (Rosenberg, 2020)
- Can involve utilization of external and internal resources, and can be further defined as “the occurrence of a more positive outcome than might be expected” (Stainton et al., 2019)
  - Factors can be further broken into economic resources, social resources, personality, etc. ...
- Many associated factors, including self-efficacy, self-esteem, self-compassion, optimism, etc. (Wambua et al., 2020)

# Why the focus on psychosis?

## From Womb to Neighborhood: A Racial Analysis of Social Determinants of Psychosis in the United States

Deidre M. Anglin [✉](#), Ph.D., Sabrina Ereshefsky, Ph.D., Mallory J. Klaunig, Ph.D., Miranda A. Bridgwater, B.S., Tara A. Niendam, Ph.D., Lauren M. Ellman, Ph.D., Jordan DeVylder, Ph.D., Griffin Thayer, M.A., Khalima Bolden, Ph.D., Christie W. Musket, M.S., Rebecca E. Grattan, Ph.D., Sarah Hope Lincoln, Ph.D., Jason Schiffman, ... **See all authors** [▼](#)

## Social Adversity in the Etiology of Psychosis: A Review of the Evidence

ELEANOR LONGDEN, Ph.D.\*  
JOHN READ, Ph.D.#

## A systematic review and meta-analysis of the psychosis continuum: evidence for a psychosis proneness–persistence–impairment model of psychotic disorder

Published online by Cambridge University Press: 08 July 2008

[J. van Os](#), [R. J. Linscott](#), [I. Myin-Germeys](#), [P. Delespaul](#) and [L. Krabbendam](#)

[Show author details](#) [▼](#)

## Structural Disadvantage and Culture, Race, and Ethnicity in Early Psychosis Services: International Provider Survey

Nev Jones [✉](#), Ph.D., Sarah Kamens, Ph.D., Oladunni Oluwoye, Ph.D., Franco Mascayano, M.P.H., Chris Perry, L.F.M.T., Marc Manseau, M.D., M.P.H., Michael T. Compton, M.D., M.P.H.

# Societal, environmental, and cultural factors

- Political dissent
  - “sluggish schizophrenia” in USSR + Eastern Europe (Merskey & Safran, 1986)
  - civil rights movement in the US (Metzl, 2010)
- High-income v. low-income countries (Padma, 2014)
  - cultural explanations?
  - urbanicity (DeVylder et al., 2018)
- Pollution (Newbury et al., 2019)
- Police victimization (DeVylder et al., 2017)
- Neighborhood crime (Wilson et al., 2016)
- Acculturative stress (DeVylder et al., 2013)
- Stress sensitivity (Gibson et al., 2014)
- Stigma (Evans-Lacko et al., 2012; Pescosolido et al., 2019)
- Ongoing pandemic...



# Resilience and psychosis: some recent work

## Resilience research in schizophrenia: a review of recent developments

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*Yuya Mizuno<sup>a</sup>, Fabienne Wartelsteiner<sup>b</sup>, and Beatrice Frajo-Apor<sup>b</sup>*

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Review article

The association between resilience and psychosocial functioning in schizophrenia: A systematic review and meta-analysis

G Nduku Wambua<sup>a,\*</sup>, Sanja Kilian<sup>b</sup>, Vuyokazi Ntlantsana<sup>a</sup>, Bonginkosi Chiliza<sup>a</sup>

# Resilience and psychosis: some recent work (cont.d)

**Resilience and its inter-relationship with symptomatology, illness course, psychosocial functioning, and mediational roles in schizophrenia: A systematic review**

Jerry Jay Yeo MBBS Candidate<sup>1</sup> | Qian Hui Chew B.Soc.Sci (Hons)<sup>2</sup>  |

Kang Sim MBBS, MMed (Psychiatry), Grad Dip Psychotherapy (Distinction), MS-HPEd, FAMS<sup>2</sup> 

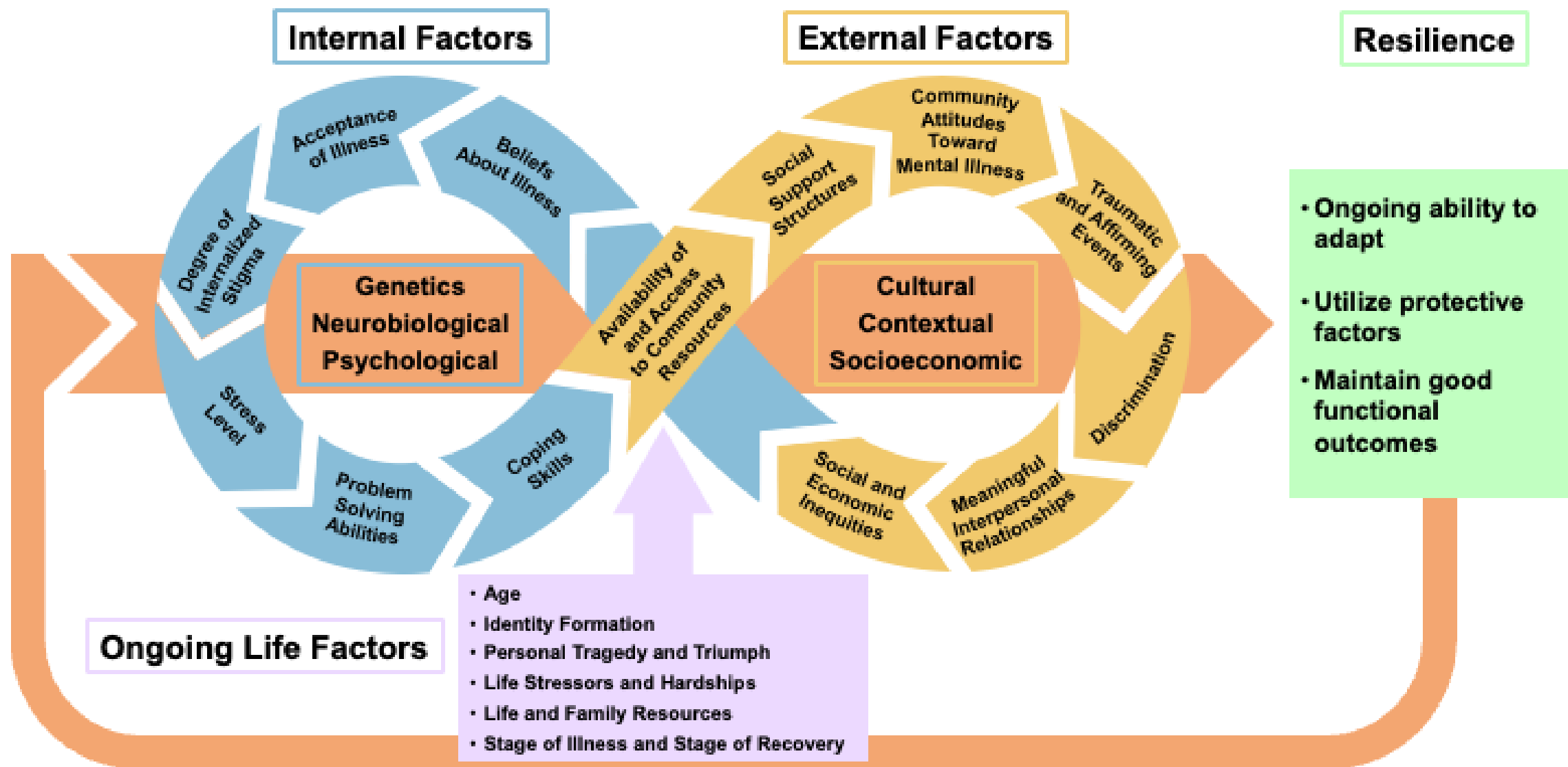
# Resilience and psychosis: some recent work (cont.d)

## Psychosis-Like Experiences and Resilience: A Systematic and Critical Review of the Literature

Joseph S. DeLuca<sup>1</sup>, Pamela Rakhshan Rouhakhtar<sup>2, 3</sup>, Mallory J. Klaunig<sup>3</sup>, LeeAnn Akouri-Shan<sup>3</sup>,  
Samantha Y. Jay<sup>3</sup>, Therese L. Todd<sup>1</sup>, Cansu Sarac<sup>1</sup>, Nicole D. Andorko<sup>3</sup>, Shaynna N. Herrera<sup>1</sup>,  
Matthew F. Dobbs<sup>1, 4</sup>, Zarina R. Bilgrami<sup>1</sup>, Emily Kline<sup>5</sup>, Anne Brodsky<sup>3</sup>, Rachel Jespersen<sup>1, 4</sup>,  
Yulia Landa<sup>1, 4</sup>, Cheryl Corcoran<sup>1, 4</sup>, and Jason Schiffman<sup>3, 6</sup>




# The Dynamic, Multifaceted Process of Resilience in the Context of Mental Health



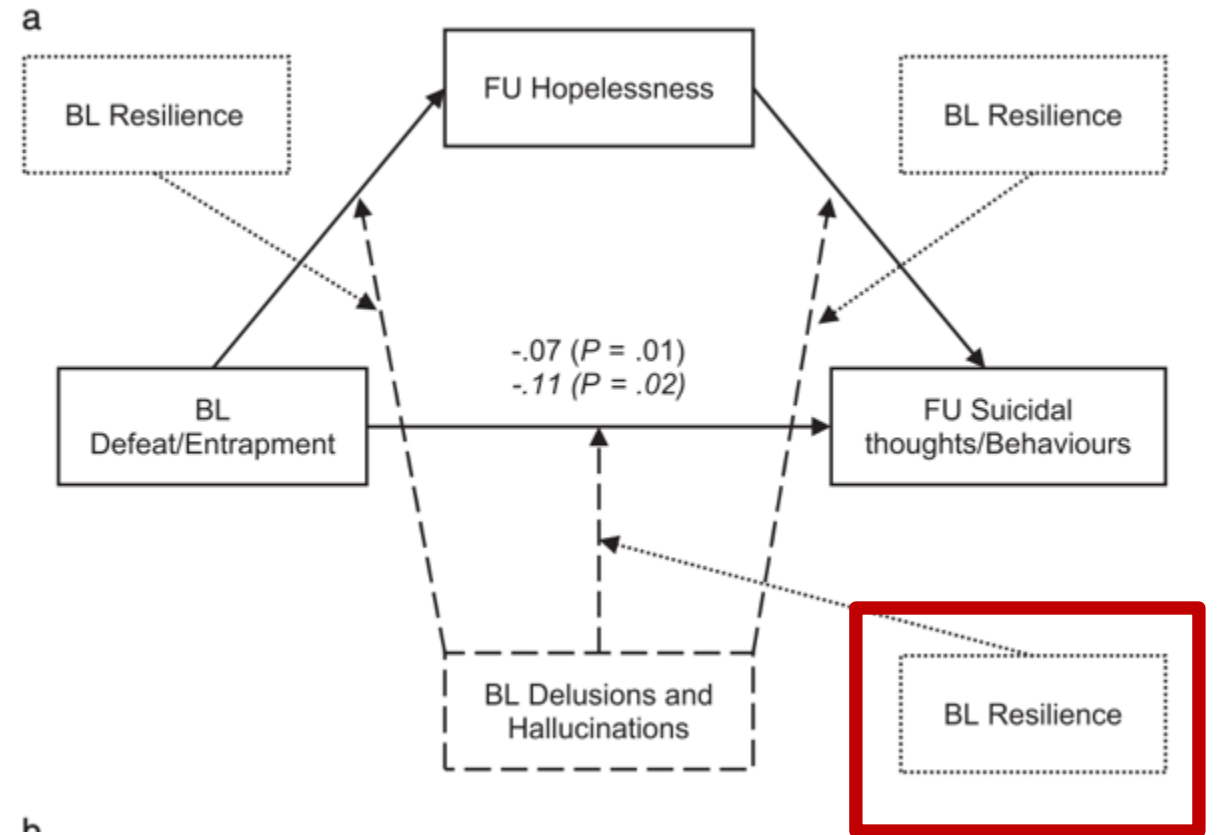
# Resilience and psychosis: some recent work

## Psychological resilience to suicidal thoughts and behaviours in people with schizophrenia diagnoses : A systematic literature review

Kamelia Harris<sup>1,2\*</sup> , Gillian Haddock<sup>1,2,3</sup>, Sarah Peters<sup>1,2,4</sup> and Patricia Gooding<sup>1,2</sup>

## The Long-Term Relationship Between Psychological Resilience, Psychosis, Distress, and Suicidal Thoughts and Behaviors

Kamelia Harris , Gillian Haddock, Sarah Peters, Patricia Gooding



# Resilience and psychosis: some recent work

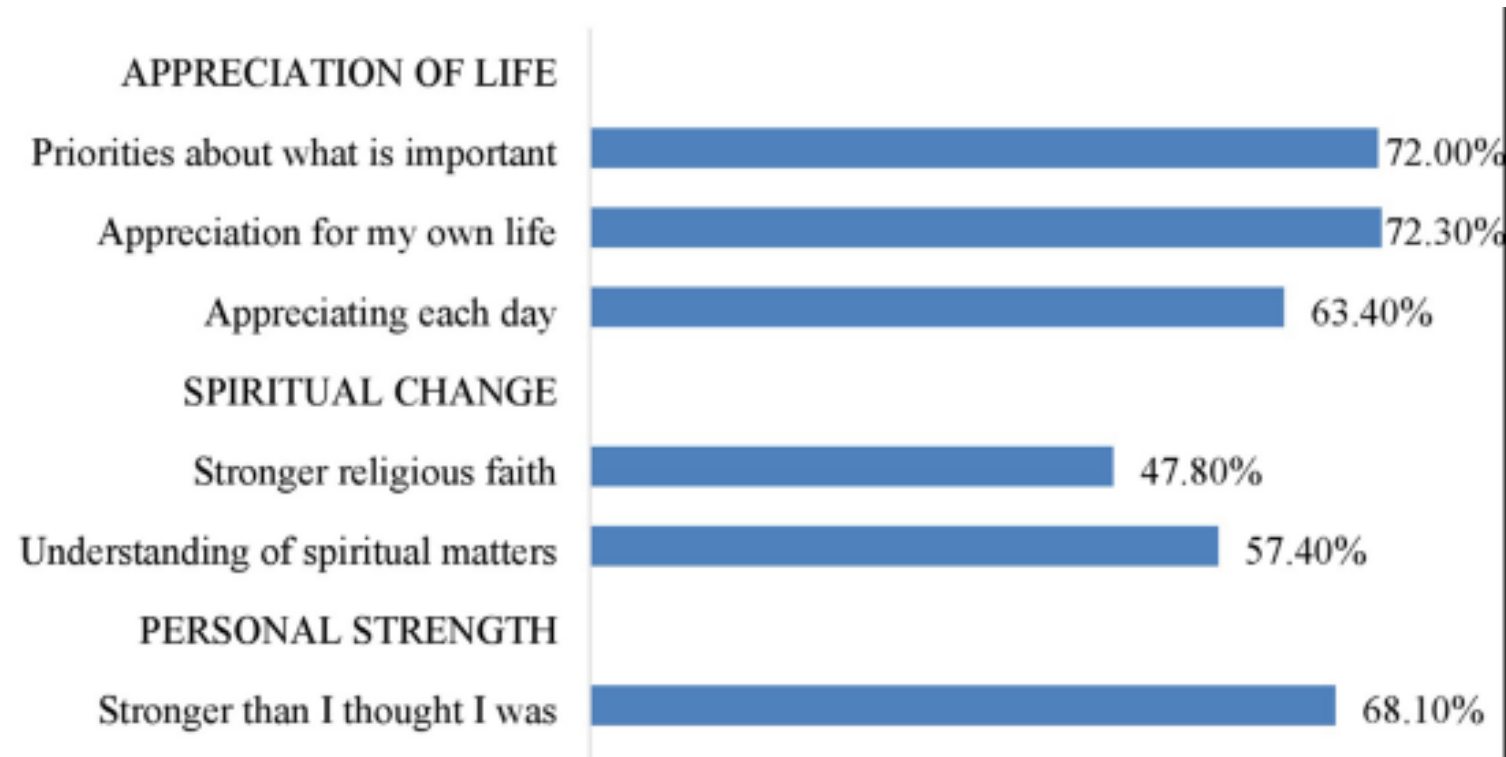
## Review Article

### Post-traumatic growth following a first episode of psychosis: a scoping review

Gerald Jordan,<sup>1,2,3</sup> Megan Pope,<sup>1,2,3</sup> Angella Lambrou,<sup>2</sup> Ashok Malla<sup>1,2,3,4</sup> and Srividya Iyer<sup>1,2,3,4</sup>

### “It’s Brought Me a Lot Closer to Who I Am”: A Mixed Methods Study of Posttraumatic Growth and Positive Change Following a First Episode of Psychosis

Gerald Jordan<sup>1,2,3</sup>, Ashok Malla<sup>1,2</sup> and Srividya N. Iyer<sup>1,2\*</sup>



# Resilience and psychosis: related work

**Family strengths: a potential determinant of the duration of untreated psychosis among hospitalized African-American first-episode patients**

Sandra M. Goulding, Amy S. Leiner, Nancy J. Thompson, Paul S. Weiss, Nadine J. Kaslow, Michael T. Compton 


The relationship between family resiliency factors and caregiver-perceived duration of untreated psychosis in persons with first-episode psychosis

Hadi Mo'tamedi <sup>a</sup>, Peyman Rezaemaram <sup>b</sup>  , Maria E. Aguilar-Vafaie <sup>b</sup>, Abaas Tavallaie <sup>c</sup>, Mojtaba Azimian <sup>a</sup>, Hashem Shemshadi <sup>d</sup>

**Self-reported coping strategies in families of patients in early stages of psychotic disorder: an exploratory study**

Ruth Gerson, Celine Wong, Larry Davidson, Dolores Malaspina, Thomas McGlashan, Cheryl Corcoran 

**Stigma and coping experiences in Latinx individuals at clinical high-risk for psychosis**

Bernalyn Ruiz , Christopher J. Ceccolini, Binoy B. Shah, Francesca Crump, Ragy R. Girgis, Gary Brucato, Lawrence H. Yang, Cheryl M. Corcoran

**A case report and first-person account of an individual at risk for psychosis who improved during the COVID-19 pandemic**

Shayna N. Herrera  , Cansu Sarac, Zarina R. Bilgrami, Matthew F. Dobbs, Rachel Jespersen, Shalaila S. Haas,

# Summary of psychosis & resilience research

- Lower resilience scores associated with a host of negative psychosocial and psychological outcomes
- Lower resilience scores found among clinical groups (v. non-psychiatric controls)
- Complicated relationships (e.g., may be a mediator, moderator, cause, outcome, etc.) and interactions with other variables like stigma and duration of illness
- **Evidence for aspects of resilience (e.g., posttraumatic growth) and multiple strengths among clinical groups with the potential to enhance resilience and related factors through services**

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## Tweet



**L. Silvertongue IS NOT DAREDEVIL**

@PinkRangerLB



“You’re so resilient!” Thanks! My options were that or dead

5:31 AM · Dec 20, 2021 · Twitter for iPhone

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**48.2K** Retweets   **1,679** Quote Tweets   **242.2K** Likes

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# Clinical applications: IRT

- One example: *Individual Resiliency Training* (IRT; Meyer-Kalos et al., 2015) for individuals in the early stages of psychosis

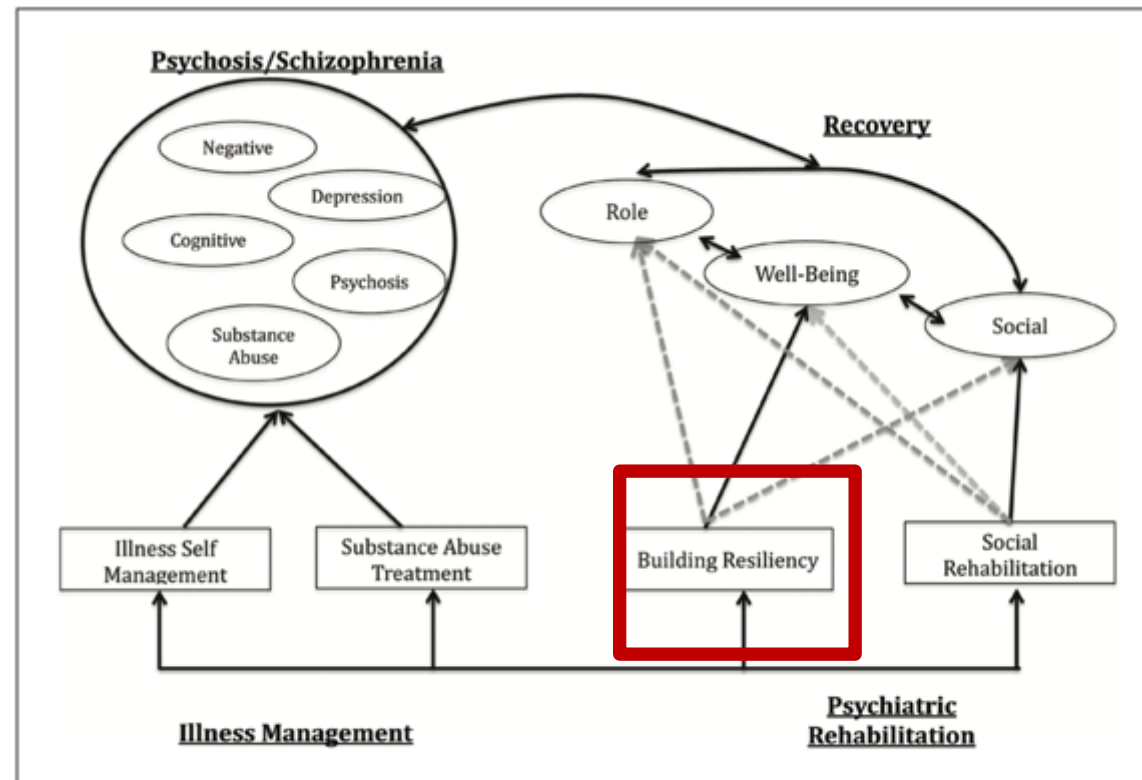


Figure 1. Individual Resiliency Training treatment targets.



# IRT (Meyer-Kalos et al., 2015)

- ***Standard modules:*** orientation, assessment and goal setting (including strengths), psychoeducation, relapse prevention, processing the episode
- ***Resiliency part 1:*** building a bridge to goals
- ***Resiliency part 2:*** learning specific skills “to increase positive emotions, build resources, increase support systems, and enrich well-being” (e.g., behavioral activation, gratitude, savoring, enhancing positive relationships, increasing kindness, improving well-being)

# IRT

- [IRT Manual](#)

## Brief Strengths Test

© 2005 Christopher Peterson

Think about how you have acted in the actual situations described below **during the past month (four weeks)**. Please answer only in terms of what **YOU** actually did.

Please read each statement carefully. Write a number between 0 and 10 next to each statement according to how often you acted in the way described.

0-----1-----2-----3-----4-----5-----6-----7-----8-----9-----10

Never

Always

1. Think of actual situations in which you had the opportunity to do something that was novel or innovative. How often did you use **CREATIVITY** or **INGENUITY** in these situations?

List your top 5 character strengths below:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

# Character strengths of individuals with first episode psychosis in Individual Resiliency Training



Julia Browne <sup>a,\*</sup>, Sue E. Estroff <sup>b</sup>, Kelsey Ludwig <sup>a</sup>, Carrington Merritt <sup>a</sup>, Piper Meyer-Kalos <sup>c</sup>, Kim T. Mueser <sup>d</sup>, Jennifer D. Gottlieb <sup>d</sup>, David L. Penn <sup>a,e</sup>

## **Humanity**

Kindness and generosity  
Capacity to love or be loved  
Social intelligence

## **Justice**

Fairness, equity, and justice  
Leadership  
Citizenship, teamwork, and loyalty

## **Transcendence**

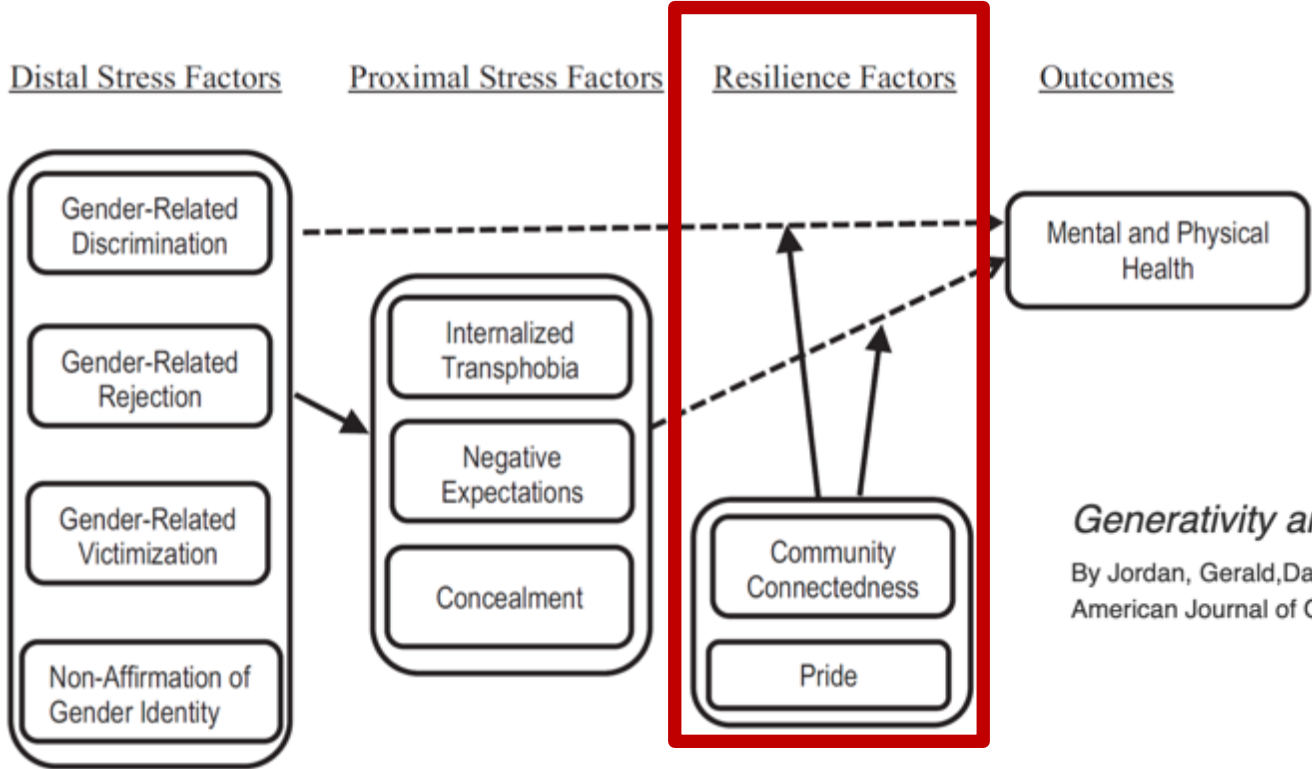
Appreciation of beauty and excellence  
Gratitude  
Hope, optimism, and future-mindedness  
Humor and playfulness  
Spirituality, sense of purpose, and faith

# Patient example

# Stigma-based clinical interventions

- *Over 40% of individuals with psychosis may endorse elevated internalized stigma (Brohan et al., 2010)*
- *NECT (Yanos et al.)*: introduction, psychoeducation, cognitive restructuring, narrative enhancement
- *ESS (Lucksted et al.)*: CBT strategies, strengthening positive aspects of the self, increasing belonging in community and with family and friends, and responding to stigma
- ***Cultural/Intersectional considerations***: race-based stress; stigma due to other marginalized identities; etc.

# Other thoughts: clinical interventions



*Generativity among people with lived experience of mental illness and distress.*

By Jordan, Gerald, Davidson, Larry, Bellamy, Chyrell  
 American Journal of Orthopsychiatry, Feb 03, 2022, No Pagination Specified

Figure 1. Minority stress and resilience factors in transgender and gender non-conforming people. Dashed line indicates inverse relationships.

# Clinical measures

- ***Stressors e.g.,***
  - Internalized Stigma of Mental Illness Scale (Ritsher et al., 2003)
  - Race-Based Traumatic Stress Symptom Scale (Carter et al., 2013)
- ***Resilience\* e.g., (see Joyce et al., 2021)***
  - Connor-Davidson Resilience Scale
  - Response to Stressful Experiences Scale
  - The Resilience Scale

**TABLE 2: Content of the Connor-Davidson Resilience Scale**

Item no.	Description
1	Able to adapt to change
2	Close and secure relationships
3	Sometimes fate or God can help
4	Can deal with whatever comes
5	Past success gives confidence for new challenge
6	See the humorous side of things



# Community and structural interventions

FIGURE 1. Hypothesized model of systemic racism and psychosis in the United States

## From Womb to Neighborhood: A Racial Analysis of Social Determinants of Psychosis in the United States

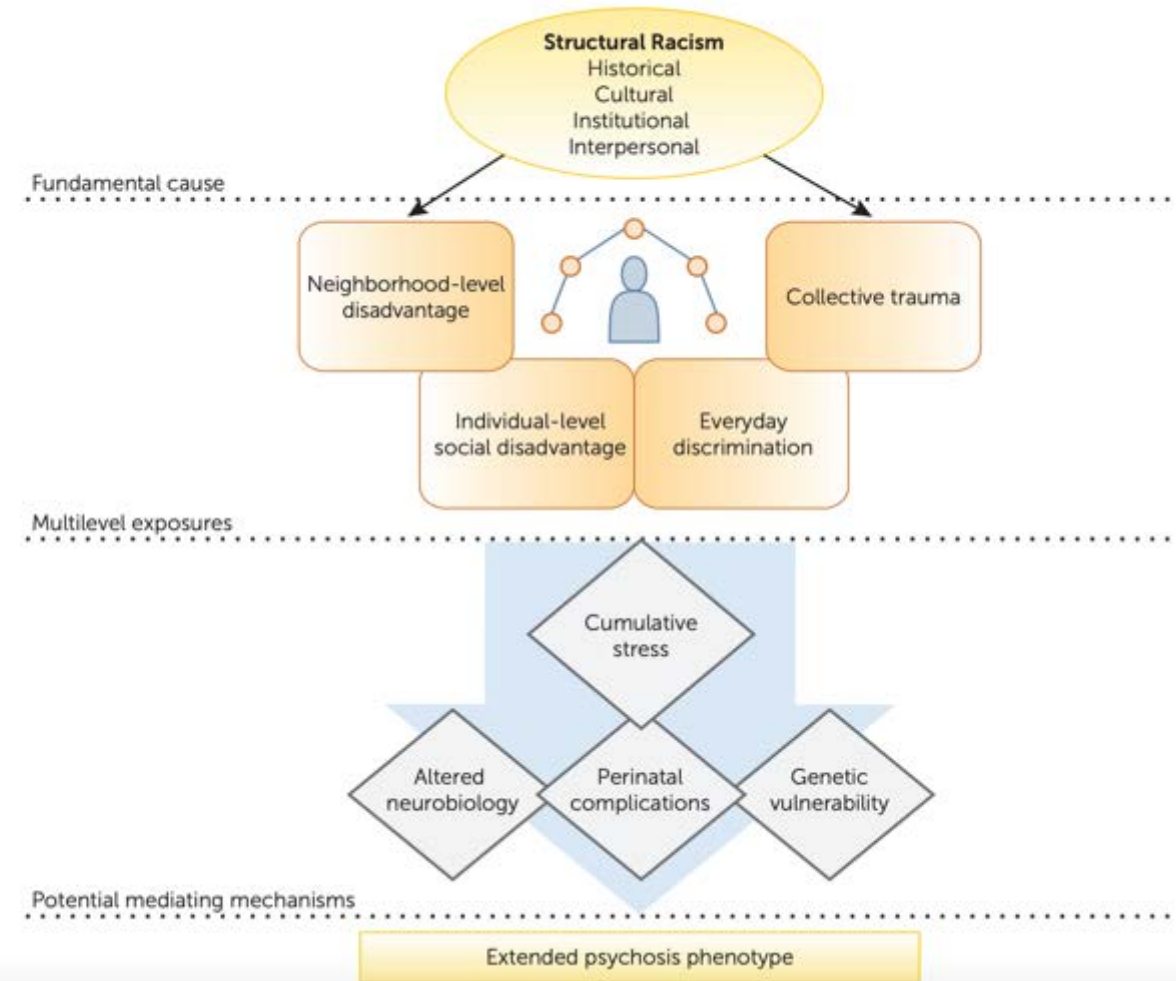
Deidre M. Anglin<sup>1</sup>, Ph.D., Sabrina Ereshesky, Ph.D., Mallory J. Klaurig, Ph.D., Miranda A. Bridgwater, B.S., Tara A. Niendam, Ph.D., Lauren M. Eilman, Ph.D., Jordan DeVyder, Ph.D., Griffin Thayer, M.A., Khalima Bolden, Ph.D., Christie W. Musket, M.S., Rebecca E. Grattan, Ph.D., Sarah Hope Lincoln, Ph.D., Jason Schiffman, ... [See all authors](#)

### Viewpoint

April 1, 2020

## Going Upstream to Advance Psychosis Prevention and Improve Public Health

Deidre M. Anglin, PhD<sup>1</sup>; Sandro Galea, MD, MPH, DrPH<sup>2</sup>; Peter Bachman, PhD<sup>3</sup>



# Community and structural interventions (cont.d)

## **Structural Disadvantage and Culture, Race, and Ethnicity in Early Psychosis Services: International Provider Survey**

Nev Jones  Ph.D., Sarah Kamens, Ph.D., Oladunni Oluwoye, Ph.D., Franco Mascayano, M.P.H., Chris Perry, L.F.M.T., Marc Manseau, M.D., M.P.H., Michael T. Compton, M.D., M.P.H.

# Community and structural interventions (cont.d)

*Cross-sectional and prospective correlates of associative stigma among mental health service providers.*

By Yanos, Philip T., DeLuca, Joseph S., Salyers, Michelle P., Fischer, Melanie W., Song, Jennifer, Caro, Juliana  
Psychiatric Rehabilitation Journal, Vol 43(2), Jun 2020, 85-90

# Summary

- Psychosis is a diverse set of experiences and exists on a spectrum
- Resilience is a multidimensional and dynamic concept that may have protective benefits for individuals who have psychosis experiences
- Despite many strengths among individuals with psychosis experiences, social inequities and environmental stressors pose significant threats to this resilience
  - *“resilience of what, to what, and for whom?”*
- Evidence suggests that resilience can be enhanced on multiple levels (individual, community, structural)
- Cultural and intersectional considerations are imperative

**THANK YOU!**

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# Acknowledgments

I am grateful to the youth, families, staff, and mentors in the psychosis risk clinics I have worked in, including Zucker Hillside Hospital's RAP program, the University of Maryland's Strive for Wellness and EIP programs, and Mount Sinai's CUE and ProSPECT programs.

# Questions



# Evaluation

## [Evaluation Link](#)

Once you complete the evaluation, you will be directed to the resource page and certificate request form.





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