

Symptom Behaviors and Suggested Actions

Symptom Behaviors	Suggested Actions
Anxiety or agitation	<ul style="list-style-type: none"> • Decrease stimuli that might increase agitation • Identify the agitating stimulus and remove it if possible • Remain calm • Ask the person to slow down • Reassure the person that there is plenty of time to sort the situation out • Give the person enough personal space (ask person) • Don't demand answers • Help the person find a safe, quiet space as needed
Low self esteem	<ul style="list-style-type: none"> • Assist the person in pointing out his/her strengths, but if her/she is unable, then point out strengths • Do not discuss past failures or weaknesses unless brought up by the person • Discuss any weakness or failures the person brings up in a tactful manner • Help the person problem solve ways to deal with the perceived weaknesses
Depression, frustration, loneliness, feelings of guilt	<ul style="list-style-type: none"> • Allow the person to vent his/her feelings • Listen and accept his/her feelings • Allow the person to cry • Beware of trying to cheer someone up as the person may perceive this as minimizing the pain • Help in problem solving and making changes in behavior that will have an impact on the feelings
Hallucinations, delusions	<ul style="list-style-type: none"> • Do not dispute the person's reality of experiencing delusions or hallucinations • Accept that this is what the person truly believes or perceives
Disorganized or illogical thinking	<ul style="list-style-type: none"> • Do not encourage the person to express accelerated or illogical thoughts • Encourage the use of a quiet place • Stay calm • Work sentences in simple terms • Ask one question at a time • Be clear, practical and concrete • Allow time for the person to decode your communication and form an answer/response • Act as a buffer between the person and outside stimuli or other people if needed

Symptom Behaviors	Suggested Actions
Slow response time	<ul style="list-style-type: none"> • Be patient • Allow the person time to formulate a response
Loss of contact with reality-based personal boundaries	<ul style="list-style-type: none"> • Support reality based statements • Do not encourage out of touch with reality statements • Be careful with the use of touch
Difficulty with establishing self-initiated goal directed activity	<ul style="list-style-type: none"> • Make expectations clear and realistic • Help the person identify meaningful tasks and break these down into “doable” pieces
Difficulty making decisions	<ul style="list-style-type: none"> • Decrease stimuli • Limit number of decisions to be made if possible • Take a directive stance about issues that relate to the person’s safety
Bizarre behavior	<ul style="list-style-type: none"> • Set firm limits • Identify bizarre or inappropriate behavior specifically
Withdrawn behavior	<ul style="list-style-type: none"> • People with schizophrenia need a quiet place to withdraw and may wish to be alone more often than others • Allow the person some quiet time as a way to cope with chaos • Do not take withdrawal as rejection • Be available at the person’s request
Exaggerated response to stimuli	<ul style="list-style-type: none"> • Reduce exciting stimuli • Assist the person to find a quiet space • Use clear, concise questions or statements
Aggressive behavior	<ul style="list-style-type: none"> • Set limits on behavior • Be aware of threatening statements and take them seriously
Lethargy, loss of interest	<ul style="list-style-type: none"> • Help the person set realistic, doable goals
Sleep disturbances	<ul style="list-style-type: none"> • Encourage adequate physical activities during the day • Encourage reduction of caffeine and other stimulants • Encourage a regular bedtime and wake-up time • Help the person identify a calming pre-sleep routine