

Schizophrenia For patients and families

What it is, what helps, and how families can stay allies.

WHAT IT IS

Schizophrenia is a group of symptoms: hearing or seeing things others don't, fixed beliefs others don't share, disorganized thinking, loss of drive, and trouble with focus and memory. Together they affect how well you can work, study and connect. Treatment aims to restore that, not just quiet voices.

The brain tags ordinary things as important, then builds a story to explain why.

INSIGHT, AND STAYING HOPEFUL

Low insight is part of the illness, not stubbornness. The goal isn't to get anyone to say "I have schizophrenia." Someone who says "I don't have it, but I take my medication every day" does better than someone who accepts the label and stops.

Stay hopeful and realistic. Medication works well, though it isn't fun.

TREATMENT HAS THREE PARTS, AND MOST PEOPLE DO BEST WITH ALL THREE

Medication

It keeps you out of the hospital. Report sleepiness, restlessness or weight gain early.

Body and routine

Steady sleep, a fixed wake-up, regular movement and health checks protect your mind and your heart.

Support

Family education, coping tools like headphones and music, and a notebook of voices and what helped.

Ask whether a long-acting injection could suit you. If other medicines haven't worked well, ask about clozapine.

TAKING MEDICATION EVERY DAY

Staying on medication is the biggest thing within your control.

- Fill a weekly organizer each Sunday, with someone if you can
- Use an alarm or smart dispenser that alerts family to a missed dose
- Ask about a once-daily dose at night
- Ask about a monthly or 6-monthly injection

PROTECT YOUR BODY

Sleep loss and flare-ups travel together. Alcohol and cannabis disrupt sleep, and cannabis and stimulants like methamphetamine can push vulnerable people toward lasting psychosis.

Heart health matters: weigh yourself regularly and check blood pressure. On clozapine, tell your prescriber before you quit smoking.

Daily habits. Check one or two to start with.

- ☐ Take medication at the same time every day
- ☐ Fill a weekly pill organizer each Sunday
- ☐ Wake up at the same time every day
- ☐ Keep the bedroom dark and quiet
- ☐ Weigh yourself regularly

- ☐ Check blood pressure with an upper-arm cuff
- ☐ Walk, even for 2 minutes, 5 days a week
- ☐ Avoid cannabis and stimulants; limit alcohol
- ☐ Post the day's plan on a wall calendar
- ☐ Keep a notebook of voices and what helped

FOR FAMILY AND FRIENDS

- Share one goal: keeping them out of the hospital
- Don't push the diagnosis. Start with common ground: sleep, stress, fear, concentration
- Ask whether a symptom bothers them, not whether you still see it
- Let them stay the main decision-maker

BOOKS AND RESOURCES

Surviving Schizophrenia by E. Fuller Torrey. The one to buy if you buy one thing.

NAMI Family-to-Family: a free 8-session course for families (nami.org).

Allen Carr's Easy Way to Stop Smoking, paired with nicotine replacement and your prescriber.

IF YOU ARE THINKING ABOUT SUICIDE OR HURTING YOURSELF

Call or text **988** (Suicide & Crisis Lifeline) any time, or go to the nearest emergency room. If you are in immediate danger, call **911**.

Source. Adapted from Dr. Malzberg's Schizophrenia Gift Guide and Psychofarm podcast episodes on psychosis.

Educational use only. This sheet is general information, not medical advice, and reading it creates no clinician-patient relationship. Content may be incomplete or out of date and is provided "as is," without warranty. Do not start, stop, or change any treatment based on this sheet; talk to your own clinician. To the fullest extent permitted by law, Psychofarm, Prospect Park Psychiatry, PLLC, and its authors disclaim all liability arising from its use.

© 2026 Psychofarm · Prospect Park Psychiatry, PLLC · all rights reserved

Tools and picks →
psycho.farm/gift-guide-schizophrenia

