

National evaluation of schizophrenia care and support

2022

Psych Rehab/Outpatients



Schizophrenia is a matter of concern for health care as well as social services. Prompt psychosocial interventions benefit patients, their families and society. More patients need such support. For this reason, health services and municipalities must improve their ability to provide coordinated support. This emerges from the National Board of Health and Welfare's evaluation of care and support for schizophrenia and schizophrenia-like conditions.

What is schizophrenia?

Schizophrenia is a psychotic illness that involves an altered perception of reality and impaired functioning in one or more areas, such as work, relationships or the ability to take care of oneself. Schizophrenia-like conditions include schizophreniform disorder, schizoaffective disorder, chronic delusional disorder, brief and transient psychotic syndromes, and unspecified non-organic psychosis.

In Sweden, 30,000–40,000 people have been diagnosed with schizophrenia and a large proportion of patients in inpatient psychiatric care have the illness.

The mortality rate is higher among people with schizophrenia than among others. Among people under 50, the mortality rate is eight times higher than among those who do not have the illness.

What does the evaluation show?

The National Board of Health and Welfare's evaluation of schizophrenia care and support highlights the extent to which the regions and municipalities work according to the recommendations of the National Board of Health and Welfare's 2018 guidelines for care and support for schizophrenia and schizophrenia-like conditions.

The evaluation shows that some of the recommendations in the guidelines have been implemented by the organisations. One example is annual somatic health screening together with healthy lifestyle counselling.

But several areas must be improved if patients are to receive good care.

Improved coordination of interventions by health and social services

Many people with schizophrenia or schizophrenia-like conditions need continued care and support in a variety of ways and, in many cases, from a variety of providers. Improved coordination of interventions by health and social services is therefore needed. Providing coordinated interventions will require regions and municipalities to make major structural changes to enable cooperation between health and social services.

More people need to be offered psychosocial interventions

There are shortcomings regarding the extent to which people with schizophrenia and schizophrenia-like conditions are offered psychosocial interventions such as case management, residential support, personalised work support, psycho-educational treatment programmes and cognitive behavioural therapy. The findings also show significant regional differences in terms of the interventions offered.

Prompt, intensive and coordinated interventions can help a person suffering from psychosis for the first time to return quickly to an active life. Key treatment components for first-time psychosis patients are low-dose antipsychotic drug treatment, education about psychotic illness and its treatment, psychological treatment, social skills training and support for study or work. To prevent serious consequences of psychotic illness, it is also important to involve family or friends which may also increase the chances of patients remaining in treatment.

More areas for improvement

- continue implementation of the Shared Decision Making approach
- increase access to assistive technology to compensate for cognitive impairment

- increase access to computer-based cognitive training
- increase access to mobile crisis intervention
- develop a structure to integrate mental illness care and measures with addiction care and measures
- increase the prescription of aripiprazole, risperidone and paliperidone for psychosis symptoms
- increase the prescription of clozapine for difficult-to-treat schizophrenia
- increase the prescription of antipsychotic drugs in depot form.

What are national guidelines and evaluations?

National guidelines and evaluations consist of recommendations, evaluation, target levels and indicators.

The recommendations cover diagnosis and investigation, pharmacological treatment, nursing and rehabilitation, and symptom assessment and follow-up. They are primarily aimed at policy makers and managers, but can also be useful for professionals, patient associations and the media.

In 2018, the National Board of Health and Welfare revised the national guidelines for care and support in schizophrenia and schizophrenia-like conditions.

Visit our website for more information

➔ More information about the evaluation is available at the National Board of Health and Welfare's website: www.socialstyrelsen.se.