## EHFG 2013: PEOPLE LIVING WITH SCHIZOPHRENIA SUFFER FROM SOCIAL EXCLUSION

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*Lack of job and finances and discrimination within social and medical care are among the important factors contributing to social exclusion of people affected by schizophrenia, according to a new survey presented at the European Health Forum Gastein. These factors can impact recovery, adding to the direct and indirect societal cost of the condition.*

**Bad Hofgastein, 3 October 2013 –** Social stigma and social exclusion are major contributing factors driving the human and societal burden of schizophrenia, experts said today at the European Health Forum Gastein, discussing the results of a new study commissioned by Hoffmann-LaRoche. The “Societal Inclusion and Schizophrenia” online survey which involved close to 500 persons living with schizophrenia, their representatives and caregivers in 40 countries aimed at evaluating the impact schizophrenia has on every level of society.

“Resilient and Innovative Health Systems for Europe” is the slogan for this year's EHFG. More than 550 participants from some 45 countries are attending Europe's most important health policy conference in Bad Hofgastein to exchange views on key issues affecting European health systems.

“People living with schizophrenia rank lack of a job and finances as the number one area preventing them from being as much a part of the community as they would like,” Kevin Jones, Secretary General, European Federation of Associations of Families of People with Mental Illness (EUFAMI), told the EHFG. 59% of all respondents found the lack of working on a regular basis and financial difficulties to be the largest barrier for people living with schizophrenia, in terms of being able to take part in their community. Lack of work training is seen as the second largest barrier from a third of all respondents. According to the survey, 64% of the respondents believe that schizophrenia negatively affects people living with the condition in their ability to work, earn an income, or have a career.

Against this background it is not surprising that 19% of all respondents selected getting or keeping paid work to be the single change by the government/state organisations which would most help people living with schizophrenia to be socially included. Reality, however, seems to be quite in contrast to this expectation: 47% of all respondents say they receive no help from the government for supported employment and 51% state the same is true for work training.

This lack of public support might be short-sighted in view of the major and multifaceted impact schizophrenia has on society, experts at the EHFG cautioned. According to OECD data, only one fifth of people with schizophrenia who are of working age are employed, compared with 65% in the general population. A major contributing factor driving the cost burden of schizophrenia is social stigma which can deter people from seeking diagnosis and thereby access to appropriate treatments and support. This can create a vicious cycle of discrimination leading to high levels of social exclusion and the rise of indirect societal costs.

“Inclusion in their community is important for many respondents, but schizophrenia can often be a barrier to this inclusion”, Kevin Jones summarised findings from the new survey. “64% of people affected by schizophrenia feel schizophrenia excludes them or somewhat excludes them from their community; this is important when considering that 62% of this group believe that taking part in the community is important.”   
   
Discrimination within medical and social care is an important issue in the social inclusion of people living with schizophrenia. According to the survey, 14% of people living with schizophrenia, 17% of representatives and 20% of caregivers feel that reducing discrimination in medical and social care is the single change by the government/state organisations in the area of care that would most help people living with schizophrenia to be socially included. Of the options around government support for improving social inclusion this was ranked as a first priority for people living with schizophrenia and their representatives. “This message is very clear – governments must do more to overcome discrimination”, Mr Jones said.

Schizophrenia is a severe mental disorder characterised by fundamental disturbances in thinking, perception and emotions. Affecting approximately 1% of the world’s population, it usually starts between the ages of 16 and 25; impacting people in the prime of their lives. The survey is still open for participation for people living with schizophrenia and their caregivers, and can be accessed in several languages: <http://alexwyke.wordpress.com/2013/07/15/study-title-social-inclusion-and-people-living-with-schizophrenia/>.

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