SOCIAL SKILLS TRAINING for SCHIZOPHRENIA  
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Description of Schizophrenia  
Schizophrenia is a chronic, severe brain disease. Persons with schizophrenia can show a wide variety of symptoms, including abnormal behavior, speech, thought, and perception. They also have difficulties with attention span and memory, and activities such as planning, initiative and problem-solving. Often they have problems with social functioning, and may have trouble at work or in school. People who develop schizophrenia usually begin to show symptoms in adolescence or early adulthood. The symptoms, severity, and outcome of the disease vary greatly. Some people are very disabled and never experience much improvement, while others either recover or are able to lead fairly normal lives.

Treatment Comparison  
Social skills training for people with schizophrenia is the most effective treatment for improving the problems people they encounter with communication, friendship, and social problem-solving skills. These are problems that make it difficult for persons with schizophrenia to achieve their personal goals in life. When carried out by competent therapists and offered 1-3 times per week for at least six months, social skills training has been shown to be effective in helping schizophrenic persons to learn and use new skills in their daily lives. Well-controlled research studies have shown social skills training to improve schizophrenic persons’ social adjustment more effectively than other treatments, such as psychotherapy, expressive therapies, stress management therapies, customary treatment or antipsychotic medication alone. Controlled studies have also shown varied forms of social skills training to help prevent relapses and rehospitalizations more effectively than antipsychotic medication alone. While social skills training is effective with most types of psychotic symptoms, more gradual and intensive training is required for individuals who have severe thought disorders and trouble focusing their attention.

Treatment Description  
Social skills training begins with the participant and the trainer working together to identify the individual’s personal goals in life. These goals may be related to anything that is important to the participant, or which provides life satisfaction: family, friends, interacting with professionals to manage one’s illness, recreation, intimacy, spirituality, school, and work. With the long-term personal goals selected, the trainer or therapist assists the participant to choose a smaller, more immediate goal to help them work toward one of the bigger goals. Thus, if the participant’s long-term goal is to become employed, one smaller goal that could be discussed in a social skills training session might be contacting friends, relatives and employment agencies for job leads. Goals which are discussed in training sessions should be attainable, useful, specific, and consistent with the rights and responsibilities of the participant and others in the situation. They should also build on the abilities the person already has. Specific situations that are used in training require the trainer and participant to answer the following questions: What do you want to achieve or obtain in the situation? With whom will you need to interact in order to succeed in achieving your goal? When and where
Social skills training can be equally effective when used during group, family or individual therapies. Social skills training can have a standard "lesson plan" for goals that are useful and apply to a wide variety of people. Examples of standard programs for skills training include basic conversation skills, friendship skills, dating skills, safe and satisfying sex, recreation for leisure, community re-entry, workplace basics, involving families in mental health services, management of medication, management of symptoms and survival skills for "street smarts". Standardized programs for training a broad range of such life skills are available in the form of "modules." Each module is then divided into smaller, ordered steps to help the person master the skill. For example, the basic conversation skills module has the following component skill areas: using verbal and non-verbal behaviors, recognizing "go" and "no go" situations, starting a friendly conversation, maintaining a conversation, balancing self-disclosure with the other person, and ending the conversation in a cordial manner. Social skills training can also be provided on an individualized basis, with each participant progressing at his/her own rate toward personally relevant life goals.

Social skills are taught to individuals with schizophrenia based on a wide range of teaching styles in order to help overcome the learning problems some people might have because of the disease. One important method for teaching social skills to people with schizophrenia is modeling. Persons with schizophrenia usually have difficulty with verbal learning and verbal memory. They are able to learn more easily and effectively by watching others demonstrate a skill since this relies on visual learning, which is usually not affected by schizophrenia. Modeling can be introduced in the skills training process through videos or "live" demonstrations of the skills to be learned.

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