Friendships of Adolescents and Young Adults in Early Psychosis

Jude Leung, PhD
March 8, 2012
Why focus on friends?

What do we know about friendships in early psychosis?

How can we support our young people in living well socially?
Why focus on friends?

Highest risk period for onset of psychosis
Social networks over time: Before the illness

No Psychosis

Grandma  Dad  Mom  Sis  Uncle

Bill  Mark  Maria  Jess  Dylan

Psychosis

Grandma  Dad  Mom  Sis  Uncle

Mark  Kim  Josh  Dylan

References: Ballon, Kaur, Marks, & Cadenhead, 2007; Dworkin, Lewis, Cornblatt, & Erlenmeyer-Kimling, 1994; Isele, Merz, Malzacher, & Angst, 1985; Roff & Fultz, 2003
Social networks over time: First episode

No Psychosis

Grandma
Dad
Mom
Sis
Uncle
Bill
Mark
Kim
Alex
Dylan
Maria
Jess
Josh

Psychosis

Grandma
Dad
Mom
Sis
Uncle
Mark
Mom
Sis
Daryl
Dylan
Maria
Josh

References: Addington & Addington, 2005; Addington, Young & Addington, 2003; Macdonald, Hayes, & Baglioni, 2000
Social networks over time: First episode

No Psychosis

Grandma  Dad  Mom  Sis  Uncle

Bill  Mark  Maria  Jess  Josh  Dylan

Psychosis

Grandma  Dad  Mark  Therapist  Dylan

Mom  Sis  Uncle

References: Macdonald, Hayes, & Baglioni, 2000; Tolsdorf, 1976
Social networks over time: Multiple episodes

**No Psychosis**

- Kids
- Dad
- Mom
- Sis
- Uncle
- Spouse
- Bill
- Mark
- Alex
- Kim
- Josh
- Dylan

**Psychosis**

- Grandma
- Dad
- Mom
- Sis
- Uncle
- Therapist
- Mark
- Dylan

References: Semple, Cole, Fischer, & Katz, 1981; Pattison, Llamas, & Hurd; 1979; Semple et al., 1997
Relation of social networks with mental health

References: Becker et al., 1997; Bengtsson-Tops & Hansson, 2001; Clinton et al., 1998; Cohen & Sokolovsky, 1978; Dozier et al., 1987; Erickson et al., 1998; Erickson et al., 1989; Evert et al., 2002; Gaite et al., 2002; Hamilton et al., 1989; Hannson et al., 1999; Howard et al., 2000; Mattsson et al., 2007; Mattsson et al., 2008; Randolph & Escobar, 1985; Salkongas, 1997; Sorgaard et al., 2001; Thorup et al., 2006
Peer networks in first-episode psychosis

Mackrell and Lavender (2004)

↑ isolation
- relationships

“Since I went to hospital and got help they always said, like, if I walk inside a pub and they just say ‘oh madman’ so I don’t keep them as my friends”
Peer networks in first-episode psychosis


- valuing social activities
- being perceived as different
- losing contact with old friends
- desiring new relationships
- valuing family and service providers

“Like with a lot of my friends that I used to hang around with, half of them they don’t know what happened. I think a few know, I don’t like to go and see them no more… I feel lost a bit… Maybe later on when I get my confidence back maybe I will approach them. But you know at this time I don’t think I feel the need to.”
Role and Social Functioning Over Time

**Role functioning (n=23)**

**Social functioning (n=21)**

**p ≤ .01**
Why type 1 diabetes as a comparison group?

- **Psychosis**: primarily psychological, relative deterioration of social networks
- **Type 1 diabetes**: primarily physiological, relative preservation of social networks

- Genetics + environment
- Serious & persistent
- Ongoing treatment
- No cure

Jacobson et al., 1996; Pacaud et al., 2007
Study sample

<table>
<thead>
<tr>
<th>Disease</th>
<th>Sample Size</th>
<th>Race</th>
<th>Mean Age (SD)</th>
<th>Mean Duration (SD)</th>
<th>Male Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychosis</td>
<td>n = 26</td>
<td>54% W</td>
<td>21.7 (2.9)</td>
<td>2.8 (1.9)</td>
<td>66%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>38% B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>8% A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>15% H/L</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Whole Sample</td>
<td>n = 35</td>
<td>89% W</td>
<td>21.7 (2.9)</td>
<td>2.8 (1.9)</td>
<td>66%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>11% M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type 1 Diabetes</td>
<td>n = 9</td>
<td>89% W</td>
<td>21.7 (2.9)</td>
<td>2.8 (1.9)</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>11% M</td>
<td></td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0% H/L</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. On most days, how many people do you see whom you know just a little, to smile or wave to, or to say good morning to? People you do not know well—you may not know their names—but you greet each other when you pass by.

   None ...........................................  1
   1-2 ...........................................  2
   3-5 ...........................................  3
   6-10 ..........................................  4
   11-15 .........................................  5
   More than 15 .................................  6

4. Is this about right for you, or do you wish you saw more or fewer such people?

   Less ...........................................  1
   About right ...................................  2
   More ...........................................  3
## Interview Schedule for Social Interaction (ISSI)

21. Among your family and friends, how many people are there who are immediately available to you whom you can talk with frankly, without having to watch what you say?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>None (Go to Q.21D)</td>
<td>1</td>
</tr>
<tr>
<td>1-2</td>
<td>2</td>
</tr>
<tr>
<td>3-5</td>
<td>3</td>
</tr>
<tr>
<td>6-10</td>
<td>4</td>
</tr>
<tr>
<td>11-15</td>
<td>5</td>
</tr>
<tr>
<td>More than 15</td>
<td>6</td>
</tr>
</tbody>
</table>

A. Would you like to have more or less people like this or is it about right for you?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less</td>
<td>1</td>
</tr>
<tr>
<td>About right</td>
<td>2</td>
</tr>
<tr>
<td>Depends on the situation</td>
<td>3</td>
</tr>
<tr>
<td>More</td>
<td>4</td>
</tr>
<tr>
<td>Not applicable</td>
<td>9</td>
</tr>
</tbody>
</table>

B. With the one (those) you have, would you like to feel more free to be frank or is it about right?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>About right</td>
<td>1</td>
</tr>
<tr>
<td>Depends on the situation</td>
<td>2</td>
</tr>
<tr>
<td>More free</td>
<td>3</td>
</tr>
<tr>
<td>Not applicable</td>
<td>9</td>
</tr>
</tbody>
</table>
Network Orientation Scale (NOS)

- Items indicating a negative network orientation
  - Even if I need something, I would hesitate to borrow it from someone.
  - I can never trust people to keep a secret.

- Items indicating a positive network orientation
  - Friends often have good advice to give.
  - It’s okay to ask favors of people.
With whom do adolescents and young adults experiencing first-episode psychosis form the closest bonds?

- Friend: 35%
- Parent: 20%
- Sibling: 19%
- Significant other: 4%
- Ex-significant other: 6%
- Therapist: 2%
- Aunt/Uncle: 4%
- Cousin: 3%
- Grandparent: 3%
- Other relative: 3%
- Other: 3%
- Ex-significant other: 6%
Social networks in diabetes versus psychosis

Similar overall network size
Social networks in diabetes versus psychosis

Fewer close friends: $t(32) = -3.16, p = .003$
Social networks in diabetes versus psychosis

Fewer community ties: \( t(32) = -3.02, p = .005 \)
Social networks in diabetes versus psychosis

More family bonds: $t(26) = 3.15, p = .004$
Social networks in diabetes versus psychosis

Similar frequency of contact
Social networks in diabetes versus psychosis

**Diabetes**

- C
- F
- F
- P

**Psychosis**

- C
- F
- P

**Similar network orientation**
Social networks in diabetes versus psychosis

Less satisfied with friendships: \( t(26) = -3.10, p = .005 \)
Relation of social networks with functioning

 Availability of community ties & close friends
 Network orientation

 Functioning

 Satisfaction with friendships

 $r = .36^*$

 $r = .42^*$

 $r = .54^{**}$

 $p \leq .05$; $^{**}p \leq .01$
Relation of peer networks with quality of life

Psychosis participants only

Availability of friends → Quality of life
Satisfaction w/ friendships → Quality of life
Network orientation → Quality of life

$R^2 = .50, p = .009$

* $p \leq .05$
Relation of peer networks with dysphoric mood

Psychosis participants only

- Availability of friends: 0.04
- Satisfaction w/ friendships: 0.14
- Network orientation: 0.23*

$R^2 = .39, p = .004$

* $p \leq .05$
Differential impact in diabetes versus psychosis

Moderating effect of diagnosis on the association between availability of family attachments and global assessment of functioning, $F(1,30) = 3.73, p = .06$
Differential impact in diabetes versus psychosis

Moderating effect of diagnosis on the association between availability of family attachments and quality of life, $F(1,30) = 3.18, p = .08$
To living well socially

Improved family-based treatments

New peer-based treatments

Compeer®

Making friends, Changing lives.
A big thank you to...

Deborah

Research participants

PREP clients

PREP staff

Family

Friends

Larry

Michael

Clara Mayo Fellowship

David

Leslie
Jude Leung, PhD

jude.leung@state.ma.us
617-516-5121

PREP program
76 Amory St
Roxbury, MA 02119