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Two Sides of Schizophrenia

Interview with Robert Francis, author of *The Essential Schizophrenia Companion*

JGC: Has being a therapist helped you better manage your symptoms of schizophrenia? Are there any mistakes the average therapist makes when treating patients with schizophrenia that you're less likely to make because you have firsthand experience with it?

RF: Yes, being a therapist has given me a deeper understanding of my schizophrenia and its syndrome... As far as mistakes that the average therapist might make, I think the discernment and understanding of [anosognosia](#) may not be fully appreciated by all therapists and I discuss this in the book.

JGC: Speaking of anosognosia, in the book, you suggest that the "most crucial" determinant of whether schizophrenia will be manageable or unmanageable is whether the afflicted individual has [anosognosia](#). Can you explain what anosognosia is, and why it complicates the progress and treatment of schizophrenia?

RF: I am happy you bring up anosognosia, John. It is a vitally important consideration. Anosognosia is a [psychiatric](#) term swiped from neurology and is now amply applied to schizophrenia. For some, anosognosia is a symptom of schizophrenia. Anosognosia is defined as a "lack of insight." Please know, anosognosia is no value judgment. Just as you would not chide someone for, let's say, being blind or deaf, we do not cast judgment on anosognosia. It is not a personal qualitative lacking. But I maintain, anosognosia is the single

most important discernment pertaining to schizophrenia that can and must be made. Treatment protocols directly follow from its discernment.