

Research Paper

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Payal Tripathi¹, Nand Kumar Singh^{2*}

ABSTRACT

Introduction: Schizophrenia is one of the serious mental disorders characterized by disruptions in thought processes, perceptions, emotional responsiveness, cognition, behavior and social interactions. High levels of EE within a family may in part be a reflection of the overall caregiver's burden and the manifestations of symptoms in the patients. However, high-EE families of schizophrenia patients show a number of maladaptive behaviours. These include the frequent internalization of criticisms and/or inadequate expression of emotions and thoughts in response to criticisms from both patient and caregiver, which can increase the risk for relapse. **Aim:** The aim of the study to measure the impact of expressed emotion on illness severity in patients diagnosed with schizophrenia. **Methodology:** The study was conducted among randomly chosen 60 patients with schizophrenia and their family members. Sample had collected after informed about the nature and purpose of the study. **Tools:** PANSS were administered and their family members were administered with GHQ and Attitude Questionnaire for EE. **Result:** Result showing that there was a statistically significant correlation (r) between EE and severity of illness in schizophrenia. **Conclusion:** High Express Emotion (EE) is significant family stressors resulting for relationship problems among the caregivers and patients with mental illnesses and which is also a strong predictor of schizophrenic course. High EE may worsen the severity of illness in schizophrenia disease.

Keywords: *Expressed Emotion, Illness Severity, Schizophrenia*

Schizophrenia is one of the serious mental disorders characterized by disruptions in thought processes, perceptions, emotional responsiveness, cognition, behavior and social interactions. The effect of the illness is always severe and is usually long lasting and the courses, clinical presentations; treatment response varies among individuals. Schizophrenia is a chronic, severe, and disabling brain disease. Approximately affecting 1% of the population develops schizophrenia during their lifetime. Schizophrenia affects men and women with equal frequency, the disorder often appears earlier in men, than in women (Vyas JN, 2016). Schizophrenia is a serious mental illness that affects how a person thinks, feels, and behaves. People with schizophrenia may seem like they have lost touch with reality, which causes significant distress for the individual, their family members, and friends.

¹Psychiatric Social Worker, ANKUR Rehab Centre, Indore, M.P. (India).

²Head of the Department (Psychiatric Social Work), Gwalior Mansik Arogyashala, Gwalior M.P. (India).

*Corresponding Author

Received: November 18, 2025; Revision Received: March 27, 2026; Accepted: March 31, 2026

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Severity impacts expectations in the fulfilment of role function and disability status. The functional impact of symptom-defined disorders depends on factors extrinsic to those disorders, such as self-efficacy, resilience, coping ability, social support, cultural and social expectations, as well as the responsibilities related to one's primary role function and the availability of others to assume those responsibilities, we argue that the severity of such disorders should be defined independently from functional impairment.

Expressed emotion (EE) refers to care giver's attitude towards a person with a mental disorder as reflected by comments about the patient made to an interviewer. It is a significant characteristic of the family milieu that has been found to predict symptom relapse in a wide range of mental disorders. EE behaviours are not pathological or unique to families of mental disorders, but they can cause relapse of psychiatric symptoms among people with a vulnerability to stress. It has been sufficiently established that high EE attitudes are reflected in actual interactions within the families of mental illness. High levels of EE within a family may in part be a reflection of the overall caregiver's burden and the manifestations of symptoms in the patients. However, high-EE families of schizophrenia patients show a number of maladaptive behaviours. These include the frequent internalization of criticisms and/or inadequate expression of emotions and thoughts in response to criticisms from both patient and caregiver, which can increase the risk for relapse. Expressed Emotion (EE) has substantial scientific support as a predictor relapse of positive symptoms. Expressed Emotion (EE) refers to a representing of interaction patterns and nature of family relationships among the family caregivers and patients of schizophrenia and other psychiatric disorders. **Expressed Emotion:** Vaughn and Leff describe very important tool that is expressed emotion. The attitude of the family towards an affected individual can lead to further relapses and a poorer prognosis. There are five categories of EE are: -

- Hostility
- Criticism
- Over-involvement
- Positive regards
- Warmth

REVIEW OF LITERATURES

A study done by Giuseppe Carrà et al. (2012) "The association between expressed emotion, illness severity and subjective burden of care in relatives of patients with schizophrenia. Findings from an Italian population." The aim of this study was to test the hypothesis that relatives designated as high EE would report higher subjective burden of care, and would be associated with objective variables that indicate greater illness severity. We performed secondary analyses of baseline data from a randomized controlled trial conducted in Italy. Finding of the study is High-EE relatives reported more subjective burden of care in disturbed behaviours and adverse effects areas, but did not perceive more deficits in social role performances. As regards illness severity characteristics, neither the number of previous hospital admissions nor the duration of illness was associated with high-EE. However, patients' previous psychosocial functioning, as measured by educational attainments, seems to protect the relative from high-EE status.

Arshad et al. (2011), conducted a study "Impact of Caregivers' Expressed Emotions on their Mental Health and Relapse Symptoms Severity among Schizophrenics." This study explored the association of caregivers Expressed Emotions (EE) and Relapse Symptoms Severity (RSS) in adult schizophrenics (N=100). It also examined the association of caregivers' common mental disorders (CMD) with their EE level and patients' RSS. Brief Psychiatric

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Rating Scale (Overall & Gorham, 1962), Family Attitude Scale (Kavanagh et al., 1997), and Self Report Questionnaire-20 (Harding et al., 1980) were used to assess the symptoms severity level of patients, expressed emotions, and common mental disorders cases, respectively. Finding of the study indicate that high EE significantly predicted patients' RSS and CMDs of caregivers. Furthermore, RSS explained a unique variance in caregivers' CMDs after controlling for caregivers expressed emotions. Significant gender differences were found in EE and RSS and caregivers with education of middle or below scored highest on EE, RSS, and CMDs.

Need of the Study

There are many studies related to relapse in schizophrenic patient but there are few studies on severity of illness due to Expressed Emotion of schizophrenic patients. So, this is the need of the present study is to know the impact of expressed emotions on the severity of illness with schizophrenic patients, to identify the better ways to proper treatment and rehabilitation of schizophrenic patients.

METHODOLOGY

Aim:

The aim of the study to measure the impact of expressed emotion on illness severity in patients diagnosed with schizophrenia.

Objectives:

- To study the relationship between impact of expressed emotion and the severity of illness in patient diagnosed with schizophrenia.
- To measure the relationship between the socio-demographic variables and expressed emotion of patients diagnosed with schizophrenia.

Hypothesis:

- There will be no significant relationship between the socio-demographic variables and expressed emotion of patients diagnosed with schizophrenia.
- There will be no significant relationship between impact of expressed emotion and the severity of illness in patient diagnosed with schizophrenia.

Sample

The present study was a cross-sectional, hospital-based study, using purposive sampling. Sample collected from the Outpatient Departments of Gwalior Mansik Arogyashala Gwalior, Madhya Pradesh as per the inclusion & exclusion criteria. The study was conducted among randomly chosen 60 patients with schizophrenia and their family members. Sample had collected after informed about the nature and purpose of the study.

Inclusion criteria for patients diagnosed with schizophrenia

- Patients diagnosed with schizophrenia as per ICD-10.
- Patients who have been diagnosed with the illness for 1-6 years.
- Patient of both genders.
- Age between 21-50 years.

Exclusion criteria for patients diagnosed with schizophrenia

- History of any major Physical disorders/Neurological disorders/Mental Retardation etc.

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

- Those who are diagnosed with any co-morbid psychiatric illness.
- Patients having any substance or drug abuse except nicotine abuse.
- Family history of mental illness.
- Uncooperative patients.

Inclusion criteria for informants of patients diagnosed with schizophrenia

- Key relatives having a close relationship with the patient and living with the patient at least one year.
- Age between 20-60 years.
- Caregiver, who gave their informed consent.
- Informants of both genders.
- Those who are having at least primary education.

Exclusion criteria for informants of patients diagnosed with schizophrenia

- Informant having any substance or drug abuse except nicotine abuse.
- Informant, who screened positive for any psychiatric distress in GHQ-12 screening test.

Tools

- **Socio-demographic and clinical datasheet for the patient:** It is a self-administered tool prepared by the investigator and used to measure the socio-demographic and clinical profile of the patients. It consists of eleven items which are age, sex, education, marital status, residence, religion, family type, current work situation, socioeconomic status, duration of mental illness and onset of mental illness. The total administration time for this tool was approximately 3–5 min.
- **Socio-demographic datasheet for the informant:** A specifically designed Performa to obtain the socio-demographic details of the informants. It included demographic details like age, sex, education, marital status, residence, religion, family type, socio economic class etc.
- **General Health Questionnaire-12 (GHQ-12) (Goldberg & William, 1978):** General Health Questionnaire is used to screen any psychiatric morbidity in a healthy person. It is the short version of the original General Health Questionnaire containing 60 items The Internal consistency was observed to be 0.79 in the population study. Test-retest correlation coefficients for the 12 items score were highly significant. It was widely used to screen for the presence of psychiatric distress with the cut-off score ≤ 3 .
- **Attitude Questionnaire for Expressed Emotion:** The Expressed Emotions of family members towards patient of schizophrenia were measured by using the Attitude Questionnaire derived by Sethi et al. (1985). The attitude questionnaire is based on the methodological background as taken by Brown et al. (1962-1972) in his studies. This scale composed of five domains:

	Domains	Question no, applicable	Score range
1	Critical comment	1, 6, 11, 15, 19,	(5-10)
2	Hostility	3, 7, 12, 23, 27, 29,	(6-12)
3	Dissatisfaction	5, 9,13, 16, 20, 24,	(6-12)
4	Emotional over involvement	4, 10, 18, 22, 26, 28, 30	(7-14)
5	Warmth	2, 8, 14, 17, 21, 25,	(6-12)

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

- Critical Comments domain is comprised of five questions, Hostility, Dissatisfaction, Warmth, domains is comprised of six questions and Emotional over Involvement domain is comprised of seven questions, responses are given on each question as 'Yes' 'No' and 'Indefinite' and they are rated as 2,1 and 0 respectively.
- **The Positive and Negative Syndrome Scale (PANSS) (Kay et al. 1987):** The Positive and Negative Syndrome Scale (PANSS) is used for measuring symptom severity of patients with schizophrenia. It is a 30 items scale spread along with three domains, namely, Positive symptoms, Negative symptoms, and General psychopathology to assess the clinical symptoms in Schizophrenia. 7 items measure positive symptoms (e.g., delusions and hallucination) and negative symptoms (e.g., social withdrawal and flattened or blunted affect) each and 16 items are dedicated to the measurement of general psychopathology (e.g., anxiety). Each item is scored on 7 points Likert scale from 1 indicating Absent, 2 indicating Minimal, 3 indicating Mild, 4 indicating Moderate, 5 indicating Moderate Severe, 6 indicating Severe and 7 indicating Extreme. The ratings can be completed in 30-40 minutes. The reliability and validity of the scale are very well established (Kay et. al, 1987).

Procedure

The initial phase includes the ethical committee approval, preparation of socio-demographic and clinical datasheet, and obtaining permission to use tools. A file review of patients diagnosed with schizophrenia was performed. A total of 60 patients with schizophrenia and their family members were obtained after the application of the aforesaid criteria. The socio demographic-cum-clinical details of the patient were collected. Then in next phase the selected patients (Baseline assessment) PANSS were administered and their family members were administered with GHQ and Attitude Questionnaire for EE.

Statistical Analysis

The data analysis was performed using Statistical Package for the Social Sciences (SPSS) Statistics for Windows, Version 22.0. Descriptive statistics (frequency, percentage, mean, standard deviation) were used in the analysis. Chi-square test or likelihood ratio was applied to compare the socio demographic and clinical variables on the Expressed Emotion. Pearson(r) correlation was used for analysing the correlation between variables.

Ethical Considerations

All procedures were under the ethical standards of the institutional ethics committee. The purpose of the study was clearly explained to the participants. Participation in the study was voluntary and informed consent was obtained from the participants before participation. The participants were free to withdraw from the study, without repercussions, if they feel uncomfortable at any point in time of the research. The confidentiality of the information obtained was maintained throughout the study. The data collected from the participants were used for research purposes only.

RESULTS

The aim of the study to measure the impact of expressed emotion on illness severity in patients diagnosed with schizophrenia. Data were collected from 60 patients diagnosed with schizophrenia and their family members from the OPD of Gwalior Mansik Arogyashala Gwalior through purposive sampling.

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Table 1: The relationship between the socio-demographic & clinical variables and Expressed Emotion of patients diagnosed with schizophrenia.

Variables	f	%	X²	p	df
Age of the patients					
21-30	25	41.6%	4.311	.366	4
31-40	21	35%			
41-50	14	23.4%			
Gender					
Male	35	58.4	.754	.686	2
Female	25	41.6			
Marital status					
Married	41	68.3%	.685	.953	4
Unmarried	18	30.0%			
Divorced/Widow/Separate	01	1.7%			
Education					
Illiterate	15	25.0%	8.785	.186	6
Up to middle	17	28.3%			
Up to high school	12	20.0%			
Above high school	16	26.7%			
Residence					
Rural	39	65.0%	10.418**	.005	2
Urban	21	35.0%			
Religion					
Hindu	58	96.7%	.414	.813	2
Muslim	2	3.3%			
Others	0	0%			
Family type					
Nuclear	29	48.3%	5.860	.053	2
Joint	31	51.7%			
Occupation					
Employed part time	12	20.0%	4.220	.377	4
Employed full time	08	13.3%			
Unemployed	40	66.7%			
Socioeconomic class					
Lower	31	51.7%	7.061*	.029	2
Middle	29	48.3%			
High	0	0%			
Duration of mental illness					
1-2 years	18	30%	1.986	.738	4
2-3 years	14	23.33%			
3-4 years	28	46.66%			
Onset of mental illness					
Up to 20 years	05	8.3%	1.166	.884	4
21-35 years	35	58.3%			
36-50 years	20	33.3%			

f = frequency, % = Percentage, X² = Chi Square, df = Degree of freedom

*p < .05 level, ** p < .01 level, *** p < .001 level

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Table 1 shows that the relationship between the socio-demographic variables and expressed emotion of patients diagnosed with schizophrenia. There were inconsistent association between the expressed emotion and most of the socio demographic variables these are age, gender, marital status, religion, onset of illness etc. The above findings fail to support the research hypothesis so the investigator accepted the null hypothesis. There were a significant association between expressed emotion and two socio demographic variables these are residence ($p>.01$) and socio-economic class ($p>.05$)

Table 2: Socio-demographic variables of caregivers(N=60)

Variables	F	%
Age of the patients		
20-35	27	45%
36-50	18	30%
51-60	15	25%
Gender		
Male	45	75%
Female	15	25%
Marital status		
Married	48	80%
Unmarried	12	20%
Divorced/Widow/Separate	0	0%
Education		
Illiterate	12	20.0%
Up to middle	12	20.0%
Up to high school	10	16.7%
Above high school	26	43.3%
Residence		
Rural	39	65.0%
Urban	21	35.0%
Religion		
Hindu	58	96.7%
Muslim	2	3.3%
Others	0	0%
Family type		
Nuclear	29	48.3%
Joint	31	51.7%
Occupation		
Employed part time	00	00.0%
Employed full time	46	76.7%
Unemployed	14	23.3%
Socioeconomic class		
Lower	31	51.7%
Middle	29	48.3%
High	00	0%

Note: f = frequency, % = Percentage, N = Total Number Major

The socio-demographic details of 60 patient's informants are presented in Table-2. Majority of the patient's informant (45%) were aged between 20 to 35 years, 45 (75%) were female, 48(80%) were married, 26 (43.3%) had above high school, 39 (65%) were from rural area,

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

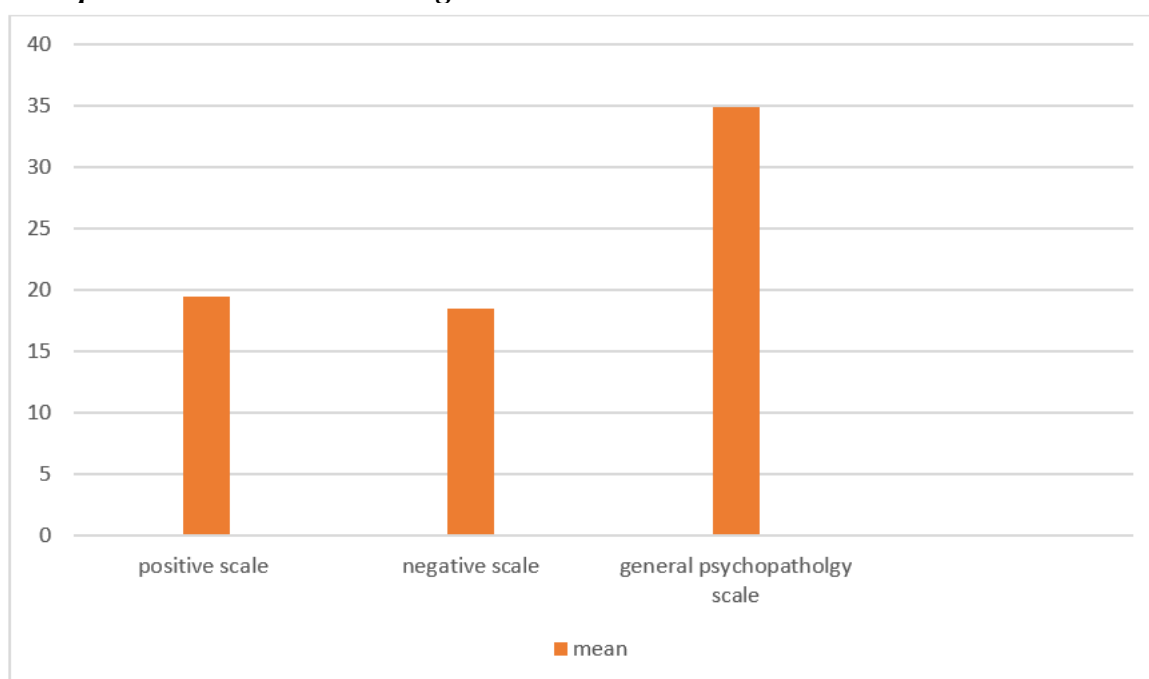
31 (51.7%) were from joint family, 58 (96.7%) were Hindu, 46(76.7%) were unemployed and 31 (51.7%) were from lower socioeconomic statuses.

Table 3: The severity of illness of patients diagnosed with schizophrenia as measured through PANSS

Domens	Range	Mean	SD
Positive	7-30	19.43	5.981
Negative	8-33	18.32	5.583
General Psychopathology	21-52	34.78	6.126
Total (PANSS)	40-99	72.72	12.620

PANSS- Positive and Negative Syndrome Scale, SD= Standard Deviation

Figure 1: The graphical representation of the mean score of the patients diagnosed with schizophrenia as measured through PANSS



Mean score obtained by the patients diagnosed with schizophrenia across the three subscales of PANSS are given in Table 3 and the graphical representation of the same is given in Figure 1. It can be seen that the mean score of the patients in PANSS was 73, positive scale was 19.50 and negative scale was 18.43. The patients had a mean score of 34.88 in the general psychopathology scales.

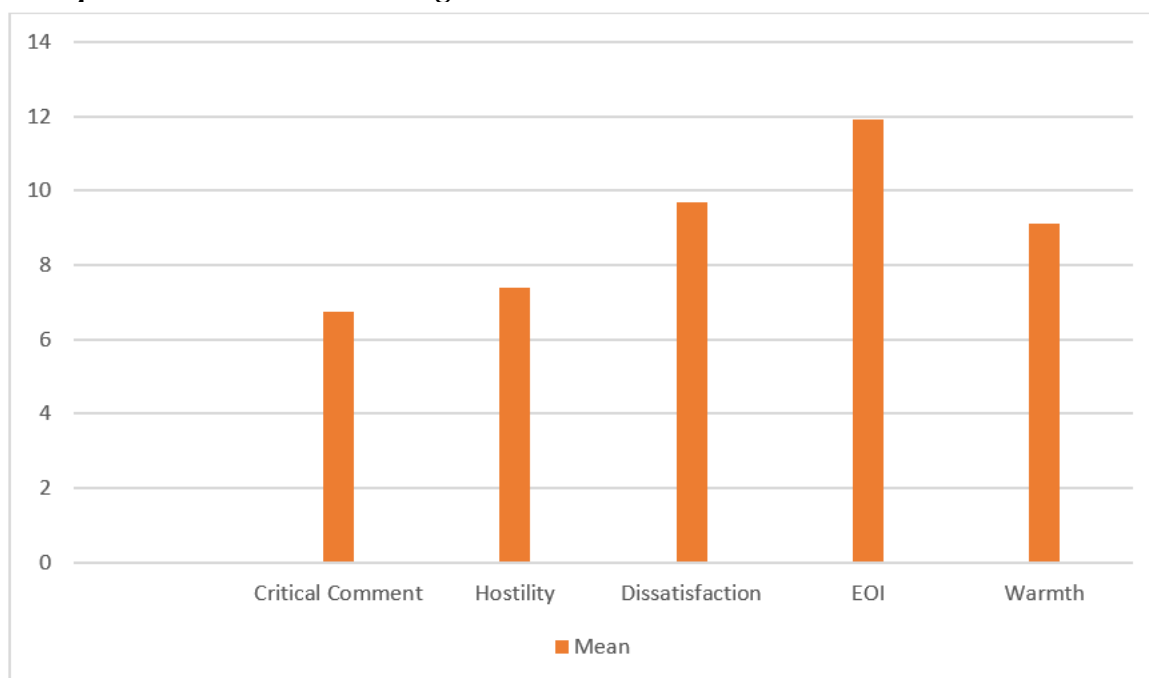
Table 4: The mean score of the patients diagnosed with schizophrenia as measured through Attitude Scale for Expressed Emotion

Domens	Range	Mean	SD
Critical Comment	4-10	6.75	1.297
Hostility	4-11	7.40	1.392
Dissatisfaction	6-12	9.68	1.334
EOI	7-14	11.90	1.704
Warmth	6-11	9.13	1.282
Total (Attitude Scale)	30-53	44.87	4.052

SD= standard deviation, EOI = Expressed over involvement

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Figure 2: The graphical representation of the mean score of the patients diagnosed with schizophrenia as measured through attitude scale



Mean score obtained by the patients diagnosed with schizophrenia across the five subscales of attitude scale are given in Table 4 and the graphical representation of the same is given in Figure 2. It can be seen that the mean score of the patients in attitude scale was 44.87. The highest mean score of attitude scale was found on “expressed over involvement” was 11.90 and the lowest mean score of attitude scale was found on “critical comment” was 6.75.

Table 6: The relationship between impact of Expressed Emotion and the severity of illness in patient diagnosed with schizophrenia.

Attitude scale Variables	PANSS							
	Positive		Negative		General psychopathology		Total PANSS	
	R	p	r	p	r	p	r	P
C.C	0.187	0.153	0.184	0.159	0.115	0.383	0.186	0.154
Hostility	0.131	0.317	0.040	0.761	0.036	0.784	0.093	0.478
Dissatisfaction	0.238	0.067	-0.096	0.468	-0.027	0.837	-0.020	0.882
EOI	0.192	0.141	-0.093	0.481	-0.101	0.442	-0.087	0.508
Warmth	-0.240	0.065	-0.058	0.659	-0.216	0.097	-0.363**	0.004
Total A.S	0.188	0.149	-0.016	0.903	-0.071	0.591	-0.066	0.614

Note. *r* = Pearson Correlation, PANSS = positive and negative syndrome scale, AS = Attitude Scale, EOI = Expressed over Involvement **p* < .05 level, ***p* < .01 level, ****p* < .001 level

The relationship between expressed emotion and the severity of illness in patient diagnosed with schizophrenia were studied is shown in Table 8. The results showed that there was significantly negative correlation between the total score of PANSS and warmth domain of attitude scale *p* < .01. The results showed that the total score of attitude scale was very weak correlation to the positive scale of PANSS *r* = 0.188, *p* = 0.149. Similarly, it can be seen that the score of attitude scale was very weak negative correlation to the negative scale of PANSS *r* = -0.016, *p* = 0.903.

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Similarly, It can be seen that the total score of attitude scale was negatively correlated with the general psychopathology scale of PANSS, $r = -0.071$, $p = .591$. Some domains of the attitude scale were negatively correlated and some domains of the attitude scale were positively correlated but the value of correlation score is very weak with the subdomain of PANSS.

DISCUSSION

The present study aimed to measure the impact of expressed emotion on illness severity in patients diagnosed with schizophrenia. The study used a cross-sectional descriptive study design and data were collected from a total of 60 patients and their family members from the OPD of Gwalior Mansik Arogyashala through purposive sampling. The family environment and expressed emotion with the severity of illness were studied. To examine the sufficiency of the sample, previous related studies were reviewed. Data were analysed using appropriate statistical measures by IBM SPSS version 22.0. Results were compiled and are discussed here.

Socio-demographic and clinical Characteristics

Result of the present study shows that 76.7% of the patients diagnosed with schizophrenia were aged between 21 to 40 years. In the similar finding by Sadock, B. J., & Sadock, & Ruiz, 2015, it had been shows that 90% of all the patients under the treatment of schizophrenia are between 15 to 55 years and Schizophrenic patients is equally prevalent in men and women. According to epidemiological studies no gender differences have been found in prevalence of schizophrenia. But in the present study shows that 58.35% of patients diagnosed with schizophrenia were males and 41.7% of patients diagnosed with schizophrenia were females, in the similar finding by Dewangan et al. 2018 Role of perceived family environment in the pathogenesis of schizophrenia has also similar result that 56% of patients diagnosed with schizophrenia were males and 44% of patients diagnosed with schizophrenia were females. That means higher risk of schizophrenia among men compared to women. Absence of the association in our study and Dewangan et al. could be explained by the possibility that women schizophrenia patients might have limited access to psychiatric care or might be underdiagnosed than men in the study population.

In the present study showed that most of the patient 68.3% were married and 30% patient diagnosed with schizophrenia were unmarried. Other study shows that only 36% patient diagnosed with schizophrenia were married and 64% patient diagnosed with schizophrenia were unmarried. The reason of higher marriage rate in schizophrenia can be explained in the context of Indian cultural perception that marriage can treat mental illness. Majority of patients 75% diagnosed with schizophrenia was educated up to middle to above high school and 25% patients diagnosed with schizophrenia was illiterate. In the similar finding by Maheshwari et al., 2020 shows that the majority 79.8% diagnosed with schizophrenia was educated up to middle to above high school and 20.2% patients diagnosed with schizophrenia was illiterate.

The finding of the current study found a large difference in religion. 96.7% patient belonged to the Hindu religion and only 3.3% patient belonged to the Muslim religion. Our findings was supported by Solanki et al. who found 91.5% patient belonged to the Hindu religion. The reason of this in the present finding most of the sample size belongs to Hindu community and in India Hinduism continues to be the predominant religion. Other studies finding that unemployment in people with schizophrenia were 70-85% and this study find that 66.7% of the patients diagnosed with schizophrenia was unemployed. The reason of this

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

unemployment is Schizophrenia is a serious mental illness that interferes with a person's ability to think clearly, manage emotions, make decisions and relate to others. It is a complex, long-term mental illness.

In terms of domicile variable Majority 65% of the patients diagnosed with schizophrenia were rural background and only 35% of the patient diagnosed with schizophrenia were urban background. In the similar finding several previous study results showed that there were most of the patients diagnosed with schizophrenia were rural background. There are lots of stigma and faith on magico-religious healers in both rural and urban background. The reason of this people with urban background rejection of mental illness by patients due to fear of societal stigma, faith on magico-religious healers and Lack of awareness and knowledge in mental health leads to delay in care-seeking. (Jena et al. 2020). In the current study majority 51.7% of the patients diagnosed with schizophrenia were hailing from joint families and 51.7% of patients with schizophrenia belong to lower socio-economic status and 48.3% of patients diagnosed with schizophrenia belong to middle socio-economic status. But other studies showed that majority of the patients diagnosed with schizophrenia were hailing from nuclear families and 45% of the patient diagnosed with schizophrenia have lower-middle socio-economic status. The reason for this that most of the people in the present study were from rural background and most of the people from rural background lives in joint families.

Measure the relationship between the socio-demographic variables and expressed emotion of patients diagnosed with schizophrenia.

In result Table 7 shows that the relationship between the socio-demographic variables and expressed emotion of patients diagnosed with schizophrenia. There were a statically significantly association between various components of the expressed emotion and some socio demographic variables like residence and socio-economic status. The residence significant at the level of $p > .01$ and socio-economic status significant at the level of $p > .05$. In the present study rural background of the patient sample was higher and lower and middle socio-economic status was also high so expressed emotion is strongly connected to the socio demographic variables.

Several studies did not find any relationship between EE levels and demographic or clinical characteristics of patients. (Sczufca M et al., McCreddie R et al. And Smith J et al., Miklowitz D et al., Heikkilä J et al.). Another study found that, the educational status of the patient was the only demographic characteristic of patients which was statistically associated. (Giuseppe Carrà et al.). Yet other studies found that patients' age, duration of untreated psychosis, family income, family members' age and marital status (being married), type of family, unemployment and urban residence were associated with EE in psychosis/schizophrenia. (Sadath A et al., Gogoi K., Hazra S et al., and Parija S et al.) Ana Carolina GuidorizziZanetti et al. 2018 showed that factors such as patients' occupation status and patients' age, were related to emotional over involvement and critical comments levels. Another study found that the EOI component of EE was significantly associated with early stress and the phase of stress symptoms.

The relationship between expressed emotion and the severity of illness in patient diagnosed with schizophrenia.

The results of the present study showed that there was significantly negative correlation between the total score of PANSS and warmth domain of attitude scale $p < .01$. This correlation analysis reported that warmth domain of Attitude Scale is related to reduced

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

severity of illness because warmth is the positive aspect of expressed emotion. There was weak positive correlation found between total of attitude scale and positive scale of PANSS. A higher level of warmth score reduces the patient's positive symptoms and a level of dissatisfaction score positively increases the patient's positive symptoms. However, contrary to expectations, the constructs of critical comment, hostility, expressed over involvement, variable of the attitude scale were not significantly associated with positive, negative and general psychopathology scale of PANSS. Butzlaff RL et al. shows that the EE is a significant and robust predictor of relapse in schizophrenia. Additional analyses demonstrated that the EE-relapse relationship was strongest for patients with more chronic schizophrenic illness. Another study shows that the simple measures of Expressed Emotions (EE), Perceived Criticism (PC) and Emotional Involvement (EI) score is high among the caregivers of patients with mental illness. There is complex circular relationship between Expressed Emotions (EE) and relapse, with the patient's behaviour leading to changes in the relative's Expressed Emotions (EE) and the relatives' EE in turn affecting the course of the patient's illness like many other environmental stressors. Similarly, in the present study EOI (Expressed over Involvement) score is high.

Vaughn C et al.1992 demonstrated that the significant association between EE and relapse held only for: patients not on medication, males, and those patients in high contact with their relatives. A discriminant function analysis found that decline in occupational status and the number of critical comments expressed by the relative were the strongest predictors of relapse.

O'Brien MP et al. 2006 evaluated Positive remarks at baseline were associated with improvement in negative and disorganized symptoms, and warmth expressed by caregivers was associated with improved social functioning. Although family members' critical comments were not related to patients' symptoms, the majority of critical remarks were focused on patients' negative symptoms and irritability/aggression. In the present study there were weak negative correlation between warmth and general psychopathology that means warmth specified by family members was associated with improved severity of illness. The relationship between family factors and symptom development during the prodromal and suggest that positive family environment predicts decreased symptoms and enhanced social functioning.

Limitations

The participants of the study were chosen through purposive sampling along with the small sample size limits the generalizability of the results. Current study, based exclusively on hospital-based outpatient sample and therefore, is may not be their presentative sample of patients in community. It was time bound study. Thus, future studies should be planned and carried out keeping the view in methodological limitations mentioned above.

CONCLUSION

Thus, it can be concluded that the present research work suggested that a pathological family environment have negative effects on mental health. High Express Emotion (EE) is significant family stressors resulting for relationship problems among the caregivers and patients with mental illnesses and which is also a strong predictor of schizophrenic course. High EE may worsen the severity of illness in schizophrenia disease.

REFERENCES

- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders. [https://doi.org/10.1176/appi.books.American Psychiatric Publishing](https://doi.org/10.1176/appi.books.American_Psychiatric_Publishing), American Psychiatric Association.
- Arshad, S., Qaider, F., & Adil, A. (2011). Impact of caregivers' expressed emotions on their mental health and relapse symptoms severity among schizophrenics. *Journal of Behavioural Sciences*, 21(2), 17–18.
- Dewangan, R., Singh, P., Mahapatra, T., & Mahapatra, S. (2018). Role of perceived family environment in the pathogenesis of schizophrenia. *Indian Journal of Social Psychiatry*, 34(1), 69-78. <https://doi.org/10.4103/ijsp.ijsp.2917>
- Gogoi, K. (2017). Assessment of expressed emotion in family members of patients with schizophrenia in a selected Medical College Hospital, Assam. *Open J Psychiatry Allied Science*, 8, 62-70.
- Goldberg, D.P., & William. P. (1978). A user's guide to the General Health Questionnaire. NFER-Nelson.
- Hazra, S., Chakrabarti, S., Sahu, K. K., Pillai, R. R., Khess, C. R. J. (2010). Attitude towards Mental illness and expressed emotion of key relatives of persons with schizophrenia nuclear vs. joint family. *Indian J Soc Psychiatry*, 26, 52-58.
- Heikkilä, J., Karlsson, H., Taiminen, T., Lauerma, H., Ilonen, T., Leinonen, K., Wallenius, E., et al. (2002). Expressed emotion is not associated with disorder severity in first-episode mental disorder. *Psychiatry Res*, 111: 155-165. [10.1016/S0165-1781\(02\)00134-8](https://doi.org/10.1016/S0165-1781(02)00134-8).
- Kay S, Opler L, Lindenmayer JP (1987) The positive and negative scale (PANSS) for schizophrenia. *Schizophr Bull* 13:261–275
- Kopelowicz Alex, López Steven R, Zarate Roberto, Mary 'Brien O, Gordon Jamie, Chang Christina, Gonzalez-Smith Veronica. Expressed emotion and family interactions in Mexican Americans with schizophrenia. *J NervMent Dis*. 2006;194(5):330-4. <https://doi.org/10.1097/01.nmd.0000217880.36581.6b>.
- McCreadie, R., Robinson, D. (1987). The Nithsdale Schizophrenia Survey. VI. Relatives' expressed emotion: prevalence, patterns, and clinical assessment. *Br J Psychiatry*, 150, 640-644. doi: 10.1192/bjp.150.5.640.
- Miklowitz, D., Goldstein, M., Falloon, I. (1983). Premorbid and symptomatic characteristics of schizophrenics from families with high and low levels of expressed emotion. *J AbnormPsychol*, 92: 359-367.
- O'Brien MP, Gordon JL, Bearden CE, López SR, Kopelowicz A, Cannon TD. Positive Family Environment Predicts Improvement in Symptoms and Social Functioning Among Adolescents at Imminent Risk for Onset of Psychosis. *Schizophrenia Research*. 2006;81:269–275.
- Sadath, A., Muralidhar, D., Varambally, S., Gangadhar, B., Jose, J. P. (2017). Do stress and support matter for caring? The role of perceived stress and social support on expressed emotion of carers of persons with first episode psychosis. *Asian J Psychiatry*, 25, 163-168.
- Scazufca, M., Kuipers, E. (1996). Links between expressed emotion and burden of care in relatives of patients with schizophrenia. *Br J Psychiatry*, 168, 580-587. doi: 10.1192/bjp.168.5.580
- Sethi, B.B., Chaturvedi, P.K., Saxena, N.K., & Trivedi, J.K. (1985) Attitude of family and outcome in schizophrenia, *Indian Journal of Social Psychiatry*, 1, 186-193.
- Smith, J., Birchwood, M., Cochrane, R., George, S. (1993). The needs of high and low expressed emotion families: a normative approach. *Soc Psychiatry PsychiatrEpidemiol*, 28: 11-16. doi: 10.1007/BF00797827.

Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia

Vaughn C, Doyle M, McConaghy N, Blaszczyński A, Fox A, Tarrier N: The relationship between relative's expressed emotion and schizophrenic relapse: an Australian replication. *Soc Psychiatry Psychiatr Epidemiol.* 1992, 27: 10-15. 10.1007/BF00788950.

Vyas J N, Ahuja Neeraj, Textbook of postgraduate psychiatry 2nd edition, vol. 1, 1999, World Health Organization). (2019). Schizophrenia Key Facts. Retrieved April 14, 2020, from <https://www.who.int/news-room/fact-sheets/detail/schizophrenia>

World Health Organization. (2007). The ICD-10 Classification of Mental and Behavioural Disorders. AITBS

Acknowledgment

The author(s) appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Tripathi, P. & Singh, N.K. (2026). Impact of Expressed Emotion on Illness Severity in Patient Diagnosed with Schizophrenia. *International Journal of Indian Psychology*, 14(1), 2351-2364. DIP:18.01.234.20261401, DOI:10.25215/1401.234