## Expressed emotions

### INTRODUCTION -

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

≈Like many other environmental stressors, EE behaviors 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.

The importance of EE depends on research that has consistently established that persons with mental illness, such as schizophrenia, who live with close relatives who have negative attitudes, are significantly more likely to relapse.

## **HISTORY**

work of an English Sociologist George W Brown & his colleagues in 1958 in England.

They were studying prognosis of psychiatric patients discharged from Institute Of



## ASSESSMENT OF EXPRESSED EMOTION

#### <u>Camberwell family interview (CFI):</u>

- The duration  $\rightarrow$ 1 to 2 hours.
- The CFI gives ratings on five scales those are Criticism, Hostility, EOI, Warmth, and Positive Remarks.
- The family is being classified as high and low EE based on the ratings of these three scales.

#### CAMBERWELL FAMILY INTERVIEW

Camberwell family interview: CFI (Rutter & Brown in 1966)

- Naughn & Leff (1976) which consumes only 90mints to complete.
- semi-structured interview that assesses the attitudes and feelings expressed by a key relative about the patient who has had a recent episode of psychosis
- It covers family relationships, arguments, time spent together, symptoms and role functioning.

- Is conducted in the absence of the patient, relative is asked about events in the home in the 3 months preceding a psychiatric hospitalization.
- It also obtains information about the patient's psychiatric history and recent symptoms.

Ratings are based not only on content of speech but also on prosodic variables such as pitch, speed and tone.

Five scales are rated:

- critical comments: content or tone
  simply counted over a period of
  interview(frequency count);
- Mostility: Rated using a three point scale (score of 0, 1 or 2), rating of 1 for generalization, 2 for rejecting remarks, 3 if both are evident.
- **Emotional over involvement:** Rated on five point scale (0-5 scale).

**Warmth:** Rated on five point or six point scale (0-5).

Positive remarks: rated based on overall number of positive remarks (frequency count).

### CRITICAL COMMENTS -

- These are basically counted during the interview.
- communications among patients and caregivers prove that critical caregivers get involved in angry exchanges with the patient whom they seem unable to prevent or to step away from.

- Patients who are unable to get up in the morning, who fail to wash regularly, or who do not participate in household tasks are criticized for being lazy and selfish;
- wunfortunately, in this context, the caregivers fail to understand that these could be potential manifestations of negative symptoms of schizophrenia or any other

### HOSTILITY -

- present during the interview and it is a consequence of unmanageable anger and irritation followed by critical comments and leads to rejection of the patient.
- Mostility is expressed by general criticisms or attitudes that are rejecting of the patient

### EMOTIONAL OVER INVOLVEMENT -

- emotionality, excessive selfsacrifice, over-identification, and extreme overprotective behavior with the patient.
- when George Brown extended his initial research interest from married couples to the parents of schizophrenia patients, he became conscious of the need to develop a scale for assessing EOI.
- Parents of a child, who develops schizophrenia, always feel guilty for the child's illness.

- This chronic guilt leads them to initiate reparative efforts to make things better for the child, and in its extreme form can signify the over protectiveness for the sick person.
- of discouraging the person's skills and self-reliance, so that in the long run, over protectiveness hampers the person's recovery.
- ≥ It also leads to dependence of the patient on their caregiver.

### WARMTH -

- It is assessed based on kindness, concern, and empathy expressed by the caregiver while talking about the patient.
- wIt depends greatly on vocal qualities with smiling being a common accompaniment, which often conveys an empathic attitude by the relative.
- Warmth is a significant

### POSITIVE REGARD -

Positive regard comprises of statements that express appreciation or support for patient's behavior and verbal/nonverbal reinforcement by the caregiver.

By standard criteria, a family is described as high EE even if only one family member makes

wsix or more critical comments,

≈scores three or above on five on EOI or

wdemonstrates hostility towards the patient/relative.

#### Table 1

Expressed emotion scales	Author and year	Tools and methods	Time taken to administer
CFI	Leff and Vaughn, 1985 <sup>[19]</sup>	Speech sample from close relatives, audio- tape recording and coding by trained professionals	1 to 2 hours
FMSS	Magana <i>et al.</i> , 1986 <sup>[20]</sup>	Speech sample from relative; written record or audio-tape record by coded by trained coders	Total 25 min
LEE	Cole and Kazarian, 1988 <sup>[21]</sup>	60-items scale for caregivers and patients	20 min
PC	Hooley and Teasdale, 1989 <sup>[22]</sup>	One question for patient	1 min
FEICS	Shields <i>et al.</i> , 1992 <sup>[23]</sup>	Self reported 14 items Likert type scale	10 min
FAS	Kavanagh <i>et al.</i> , 1997 <sup>[24]</sup>	30-items scale for caregivers	15 min

CFI - Camberwell Family Interview, FMSS - Five-Minute Speech Sample, LEE - Level of expressed emotion, PC - Perceived criticism, FEICS - Family emotional involvement and criticism scale, FAS - Family attitude scale

### FIVE MINUTE SPEECH SAMPLE -

- Similar to the CFI in that family members talk about their patient and their relationship for five uninterrupted minutes and the speech is recorded and later coded for the overall level of EE, criticism, and EOI.
- The FMSS, however, requires less time to administer (5 minutes) and score (20 minutes) compared with the CFI

## LEVEL OF EXPRESSED EMOTION SCALE -

- This is a 60-item, self-report scale that measures the emotional environment in the patient's most important relationships.
- ≈It has 60 items that form the four subscales, namely
  - Intrusiveness,
  - Emotional Response,
  - Attitude toward
  - Illness, and
    - Tolerance and

### PERCEIVED CRITICISM -

- Takes very less time (1 minute) to administer it.
- Interviewer can ask patients to rate how critical they think their relatives are of them using this scale.
- Interviewer can also ask patients how critical they think they are towards their relative using the same scale.

## FAMILY EMOTIONAL INVOLVEMENT & CRITICISM SCALE -

- It is a 14-item scale which assesses two dimensions of EE: EOI and perceived criticism (PC) in the family.
- EOI and criticism when working with families with member who has severe and persistent mental illness.

### PERCEIVED FAMILY BURDEN SCALE

- \_
  - ∞A set of 24 questions are asked.
    - 1) to indicate if behavior is displayed by relative who suffers from illness,
    - 2) indicate the extent to which the behavior bothers the caregiver.
  - \*Rated on a five point scale with a range of 0 to 5.
  - ≥0 = the behavior is not present and does not bother the relative.
  - ≈1 = behavior is present and does not bother the relative.

- ≥2 = behavior is present and bothers relative a little.
- ≥3 = behavior is present and bothers the relative considerably
- ≈4 = behavior is present and bothers the relative a great deal.

### FAMILY ATTITUDE SCALE -

- ≥ It is a useful 30-item, selfreport measure of EE which emphasizes on the criticism and hostility.
- Respondents report how often each statement is true on a scale ranging from "Everyday" (4) to "Never" (0).
- Responses are summed to give a score ranging from 0 to 120, with higher scores indicating higher levels of burden or criticism.

## CAREGIVER FACTORS ASSOCIATED WITH EXPRESSED EMOTION -

≈Hooley and Hiller found that caregivers of schizophrenia patients, with high EE reported reduced satisfaction of their individual activities, reduced optimism about their future, and reduced self-efficacy compared with low EE caregivers.

∞Caregivers of high EE were less

A critical comment of caregiver is dependent less on the degree of the patient's symptoms than on the caregiver's own personality factors.

If a caregiver is easily adjusted to the difficult circumstances and has patience generally, he or she is likely

# <u>EMOTIONS</u> - CONTROLLING <u>BEHAVIORAL FACTORS & EXPRESSED</u>

- A tendency to wish to control the patient's behavior may be another variable that underlies high EE.
- Perhaps, caregivers who want to control a patient may criticize the patient in an attempt to modify his/her behavior.

- It is also feasible that caregivers who want to control a patient may occupy in behaviors characteristic such as overprotective behavior (EOI).
- ™It was said that high-criticism caregivers would report more controlling behavior toward the patient and toward others compared with low-criticism

The caregivers who blame themselves for the progress of the patient's schizophrenia would have lower levels of criticism and higher levels of EOI compared with those who did not make self-blaming attributions.

## <u>EXPRESSED EMOTIONS ACROSS</u> <u>CULTURES –</u>

- World Health Organization's study of first-onset schizophrenia, it was found that relatives commonly express both high criticism and high warmth at the same time.
- ≥00ne-year follow-up suggested that the better outcome in cases of schizophrenia may be related to the high proportion of relatives with low expressed emotion.
- №In a further report, the authors suggest that expression of anger in the

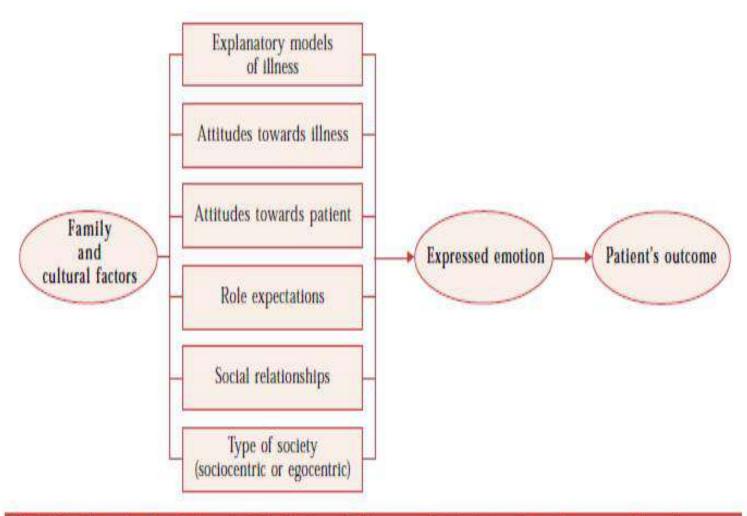


Fig. 1 Family and cultural characteristics that may influence patient outcome through expressed emotion.

## STUDIES ON EXPRESSED EMOTION AND RELAPSE IN SCHIZOPHRENIA

The first study to undertake the EE measure and connect it to the course of schizophrenia was investigated by Brown et al. where the patients were followed up for 9 months after they discharged and sent to their home from hospital.

™Kavanagh reviewed 26 of studies on EE and found that the mean relapse rate was 48% for patients residing with high EE families and 21% for those in low EE families.

∞In a study done in 1996 by M Scazufca, E Kuipers data was collected on 50 patients suffering from schizophrenia or schizophrenic disorder were assessed for positive and negative symptoms and 50 caregivers were assessed who were living or were in close contact with these patients were interviewed for the assessment of EE and burden or care, and to provide information about patients' social role performance and behavior problems

These findings suggest that EE and burden of care are more dependent on relatives appraisal of the patient condition than on patients actual deficits.

### Contd...

≈A comprehensive analysis by Bebbington and Kuipers of data from 1,346 patients established the relationship between family caregiver's EE and relapse, and also the protective factor of reduced face-to-face contact for patients in high EE families.

## Contd...

≥A study carried on an urban population in Belgrade investigating the connections between relapse in schizophrenia and the expressed emotion (EE) status of families where at least one of the patient's parents was a member of the household showed that subtypes may be associated with different attributes of EE

## Low EE vs High EE

#### 1. Intrusiveness

- Willingness to
   respect patients
   desire for social
   distance
- > Tend to prevent intrusive behavior

- Not allow the patient feel a sense of personal space.
- > intrusive,
   repeated attempts
   to establish
   contact, offer
   unsolicited
   advice.

#### 2. Emotional response.

- Cool, controlled &
   concerned. not
   overtly anxious
- Demonstrate ability to cope with crises effectively.
- > Respond with anger, acute distress or both

# 3. Attitude towards illness

> Pt is suffering from a legitimate illness.

- > Doubt that pt is genuinely ill.
- > Pt is blamed or held responsible for his condition.

- 4. Level of tolerance & expectations
- > Generally
  tolerate
  disturbed
  behavior & of
  long term social
  impairments.

- > Intolerant & impatient with low performance.
- Exert
  considerable
  pressure to
  behave normally.

Critical comments,
 emotional over
 involvement,
 hostility

- 5. Expressed emotion
- ➤ Positive remarks

## CRITICISM REGARDING EE -

■ EE is a label blaming the families for schizophrenia.

Social interaction model of schizophrenia sees EE as an undetectable response to the difficulties that schizophrenia poses for family.

Social support is sometimes negatively rated as overprotective aspect of EOI.

The focus on low EE & low contact as positive variables can cause potential problems of disengagement that is low EE can lead to development of emotional indifference to patient's problems.

## CONCLUSION -

- Expressed Emotions is the most significant breakthrough in schizophrenia since the discovery of neuroleptic medication" (Kavanagh 1992)
- The construct of EE has greatly enhanced understanding of the role of families and care-takers in mental illnesses
- ©Out of the five constructs of expressed emotion critical comments, emotional over involvement, hostility, have been shown to predict outcome for patients with schizophrenia.

- These three components are helpful, but that they must be seen in the context of culture and kinship, warmth and positive regard.
- with relapse & negative outcome & as a modifiable variant with better outcome if done so.
- It cannot be conceptualized as a simple construct as multiple factors are contributing in a complex pattern.

™Interventions with families that reduce EE may reduce the risk of relapse.

There is need for greater specification of the essential nature of the construct of EE and it's theoretical basis & there is need for more crosscultural research

Thank you