

Insight Levels in Schizophrenia Patients on Follow-Up Online Therapy: A Comparative Study of Two Groups

KM Parul, PhD Scholar, Amity University, Gurgaon, Haryana

(Email: Parul.choudhary94@gmail.com)

Prof.(Dr.) Kamini Tanwar Director,AICP, Amity University, Gurgaon

Abstract

This study explores the relationship between the level of insight in schizophrenia patients and their engagement with follow-up online therapy sessions. A total of 100 schizophrenia patients were divided into two groups: Group A (moderate to high insight) and Group B (low or no insight). The study aims to assess the impact of insight on therapy participation, with the hypothesis that higher levels of insight will correlate with better adherence and engagement in online therapy. Results revealed that patients in Group A demonstrated significantly higher session attendance and engagement compared to those in Group B, with implications for tailored interventions to improve insight in low-insight patients.

Keywords: schizophrenia, insight, online therapy, patient engagement, therapy adherence, follow-up therapy.

Introduction

Schizophrenia is a severe psychiatric disorder characterized by profound disruptions in cognition, emotion, and behavior. Patients with schizophrenia often experience a lack of insight into their condition, which can negatively impact treatment adherence and overall outcomes (Fervaha et al., 2018). Insight, in the context of schizophrenia, refers to the patient's awareness of their illness and the need for treatment. Research suggests that the level of insight plays a critical role in treatment outcomes (Lysaker et al., 2017).

With the rise of digital health interventions, online therapy has become a widely used tool for managing mental health conditions, including schizophrenia. However, the relationship between insight and the efficacy of online therapy remains underexplored. This study investigates whether patients' levels of insight influence their participation in online therapy sessions and their overall therapeutic experience.

Objectives

The primary aim of this study is to examine the relationship between insight levels and online therapy adherence in patients with schizophrenia. Specifically, this research seeks to:

- Explore if patients with greater insight are more likely to engage in online therapy.
- Compare the engagement levels between two groups: one with moderate to high insight and another with low insight.

Method

Participants

A total of 100 patients diagnosed with schizophrenia according to ICD-11 criteria participated in this study. The participants were randomly assigned to one of two groups:

- **Group A:** Patients with moderate to high levels of insight (n = 50).
- **Group B:** Patients with low or no insight (n = 50).

Participants were aged between 18 and 65, with a mean age of 36 (SD = 9.2). All participants consented to participate and were capable of using an online platform for therapy sessions.

Inclusion and Exclusion Criteria

Inclusion Criteria:

- Adults aged 18 to 65.
- Diagnosis of schizophrenia as per ICD11.
- Ability to engage in online therapy (e.g., access to a computer or smartphone, ability to communicate verbally or via text).

Exclusion Criteria:

- Severe cognitive impairment.
- Active substance abuse.
- Severe medical comorbidities preventing participation in therapy.

Assessment Tools

- **Insight Assessment:** The Insight and Treatment Attitude Questionnaire (ITAQ) was used to measure participants' level of insight. This instrument evaluates awareness of illness, the perceived need for treatment, and attitudes toward medication.
- **Therapy Engagement:** Data regarding participation were collected through session attendance logs, session duration, and post-session surveys. These metrics assessed patient engagement, satisfaction, and perceived therapeutic benefit.

Procedure

Participants were assigned to weekly online therapy sessions for a duration of 12 weeks. The sessions were delivered via a secure video platform and included psychoeducation, cognitive-behavioral therapy (CBT) techniques, and motivational interviewing. At the baseline and after 3 months, patients completed the ITAQ to assess changes in their insight levels.

Data Collection

- The primary data collected included:
- Data Collected from IHBAS
- Number of therapy sessions attended.
- Duration of each session.
- Patient-reported satisfaction via post-session surveys.
- Changes in insight scores over the 3-month period.

Results

Table

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Statistical Analysis of Therapy Engagement and Insight Outcomes

| Analysis | Statistic | p-value | Interpretation |
|--------------------------------------|------------------------------------|---------|--|
| Chi-square test (session attendance) | $\chi^2 = 15.4$ | < .01 | Group A significantly more likely to attend sessions |
| t-test (session duration) | $t(df \text{ not reported}) = 3.2$ | < .05 | Group A had significantly longer session duration |
| Insight improvement (Group A) | ITAQ: 4.3 → 4.7 | < .01 | Significant improvement in insight for Group A |
| Insight improvement (Group B) | ITAQ: 1.5 → 1.7 | > .05 | No significant improvement in insight for Group B |

Note. ITAQ = Insight and Treatment Attitudes Questionnaire.

Demographic Information

The demographic characteristics of the two groups were similar. Group A (moderate to high insight) had a mean ITAQ score of 4.3 at baseline, while Group B (low or no insight) had a baseline score of 1.5. The groups were matched in terms of age, gender, and duration of illness.

Insight and Therapy Engagement

- **Group A (Moderate to High Insight):** Patients in Group A attended an average of 90% of the scheduled therapy sessions, with an average session duration of 45 minutes. Post-session satisfaction surveys indicated a high level of engagement (mean = 4.5/5), and these patients also reported greater participation in discussions and completion of therapy-related homework.
- **Group B (Low Insight):** Patients in Group B attended an average of 65% of the scheduled sessions, with an average session duration of 35 minutes. Post-session satisfaction was lower (mean = 3.2/5), and many patients showed limited participation in the sessions. The dropout rate was notably higher in this group.

Insight and Treatment Adherence

At the end of the 3-month therapy period, patients in **Group A** showed significant improvements in insight, with an average post-intervention ITAQ score of 4.7 ($p < 0.01$). In contrast, **Group B** showed minimal change in their insight levels, with a post-intervention score of 1.7 ($p > 0.05$).

Statistical Analysis

A chi-square test revealed that patients in **Group A** were significantly more likely to attend the majority of therapy sessions compared to those in **Group B** ($\chi^2 = 15.4, p < 0.01$). A t-test showed that the difference in session duration between the two groups was statistically significant ($t = 3.2, p < 0.05$).

Discussion

Role of Insight in Online Therapy

The results of this study support the hypothesis that higher levels of insight in schizophrenia patients lead to better participation in and adherence to online therapy. Patients in **Group A** (with moderate to high insight) showed significantly better engagement in therapy, suggesting that insight can enhance the therapeutic experience by fostering motivation and understanding of treatment benefits.

Conversely, **Group B** (low insight) demonstrated reduced engagement, which is consistent with prior research indicating that lack of insight is associated with non-adherence to treatment (McGurk et al., 2020). This suggests that low-insight patients face unique challenges in engaging with therapy, which may limit the effectiveness of online therapy interventions for this population.

Barriers for Low Insight Patients

The lower engagement and higher dropout rates observed in **Group B** highlight the need for interventions that specifically target insight in patients with schizophrenia. It is possible that enhancing insight through psychoeducational modules or therapist-led motivational interviewing could improve adherence and engagement in online therapy (Overall et al., 2019).

Implications for Online Therapy

This study underscores the importance of considering patients' insight levels when planning and delivering online therapy. While online therapy is an effective tool for many patients with schizophrenia, those with low insight may benefit from additional support and tailored interventions designed to improve their awareness and understanding of their illness.

Conclusion

This study provides evidence that patients with higher levels of insight are more likely to engage in and benefit from online therapy. Enhancing insight may be crucial in improving the therapeutic experience and outcomes for schizophrenia patients, particularly those who are less aware of their illness. Future research should explore specific interventions that can enhance insight and promote better engagement with digital mental health tools.

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