BACKGROUND:

- Internalized stigma is associated with ↑ likelihood of suicidality, transition to full psychosis, and treatment disengagement amongst individuals at clinical high risk for psychosis (CHR-P)
- Communication of psychosis risk is associated with both increased and decreased stigma, depending on method
- Standardization of risk status delivery may reduce levels of internalized stigma at the initiation of treatment.

AIMS:

• Develop a psychoeducational resource to communicate risk status to newly enrolled patients that is acceptable to clients and utilizable by clinicians

METHODS

- Conducted interviews to develop and evaluate a brief bibliographic intervention
- Data gathering interviews included lived experience stakeholders, INTERCEPT clinicians, and subject matter experts
- Focus groups included 5 INTERCEPT patients and 3 INTERCEPT clinicians
- Interview data was analyzed through Rapid Qualitative Analysis





A Preliminary Qualitative Study Evaluating the Effectiveness of a Novel and Brief **Psychoeducational Informatic to Communicate Psychosis Risk Status**

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RESULTS:

- Preliminary thematic analysis suggested that **patients** found the informatic accessible, motivating, and clarified their symptoms
- **Clinicians** found the informatic usable and easily applicable to their intake process and clinical style. Valued focus on recovery and functioning in addition to symptom management
- Primary concerns related to accessibility of metaphor to younger patients and character representation (older characters versus younger characters)
- Conflicting responses regarding psychosis specific language, psychoeducation about psychotic illness

DISCUSSION:

- Preliminary qualitative data suggests that a brief infographic intervention is acceptable to patients and usable by providers
- Metaphor was perceived to be a useful vehicle for communicating complex and sensitive clinical ideas
- Future research should evaluate whether standardization of SIPS feedback session influences patient attitudes towards treatment and psychosis risk status

