

PSYSSA DECOLONISING PSYCHOLOGY DIVISION MENTAL HEALTH STATEMENT

Schizophrenia Awareness Day 2026

Today we invite reflection, on how we as both a society and professional community understand, speak about and respond to those affected by both psychosis and schizophrenia. Schizophrenia is a serious mental health condition that affects how a person may experience reality, think, feel, and relate to others. It can include experiences such as hearing voices, unusual beliefs, changes in perception, difficulties with motivation, concentration, or emotional expression. Experiences vary widely from person to person, and many people living with schizophrenia lead meaningful lives with appropriate support and care.

Globally, schizophrenia affects an estimated 24 million people. This translates roughly to 1 in 300 people worldwide. Approximately 1% of South Africa's population is estimated to be affected by schizophrenia, which is thought to be consistent global averages. Considering its relatively low prevalence, the condition places significant burden on the country's public healthcare system which struggles with the resourcing to adequately address and support diagnoses.

A decolonial perspective within psychology not only encourages us to, but rather places a responsibility to hold complexity. As such, we remain attentive and attuned to the lived experience of those living with this diagnosis, while also holding in mind the social, cultural and historical contexts which shape the structural understanding of the disorder. By doing so, we attempt to understand community meaning making, the use of language, inequality and possible exclusion experienced, as a result of this disorder. We are also acutely aware of the diverse pathways travelled in order to obtain diagnosis, treatment and recovery.

Our language use as both professionals and the public matter. Contemporary psychological and psychiatric guidance increasingly calls for the use of person-first language. What this means is that we refer to a person affected by the disorder, as opposed to them being defined by it, or it being a central aspect of their identity. However, disappointingly so, in my professional practice this call remains frequently unheard.

To segway into stigma. This remains a huge challenge with regards to wellbeing and possible community reintegration where possible. It is important to acknowledge the possible role which we as healthcare workers, academics and professionals can play in



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division

reproducing or dismantling this stigma. There is of course value to diagnostic language and informed prognosis. However, it is important that these are justified and appropriately used as opposed to being mere extensions of the social worlds to which we not only serve but also belong to.

Awareness is not only about increasing knowledge—it is also about reducing stigma, creating spaces of dignity and listening, and supporting access to care that is culturally responsive, relational, and humane.

There is no mental health justice without epistemic justice.