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Public Perceptions of Marriage Among Individuals with Bipolar Disorder Versus Schizophrenia: A Comparative Analysis

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Introduction: Marriage is widely regarded as an important part of social life, providing emotional support and stability. However, public perceptions of marriages involving individuals with psychiatric conditions like schizophrenia and bipolar disorder are not well understood. Stigma likely plays a crucial role in shaping these perceptions and affects societal attitudes toward such unions.

Objectives: This study aimed to explore and compare public perceptions of marriage in individuals with schizophrenia and in individuals with bipolar disorder, and to examine how these views affect their marital prospects.

Methods: A cross-sectional survey was conducted using an online form to gather data from the general population. It covered socio-demographic and clinical variables, as well as detailed descriptions of schizophrenia and bipolar disorder symptoms and outcomes. The survey also included questions on public attitudes toward marriage involving individuals with schizophrenia and bipolar disorder. Participants answered 13 questions about the right of individuals with these conditions to marry, their capacity to maintain a stable relationship, and whether they would personally consider or recommend marrying someone with these disorders. This study was inspired by the article of Kumar et al., (2019).

Results: The study involved 304 participants, mostly young adults, with 246 being women. Around 35.6% had a family history of psychiatric illness, and 23.35% lived with someone with a psychiatric disorder. The findings revealed significant differences in public perceptions of marriage for individuals with schizophrenia versus bipolar disorder. Participants were more strongly opposed to marriage as a cure, especially for schizophrenia ($p < 10^{-3}$), and more had never considered finding a partner for someone with schizophrenia compared to bipolar disorder ($p < 10^{-3}$). Reluctance to marry someone with schizophrenia was also significantly higher, even if compatibility was present ($p < 10^{-3}$).

Regarding bipolar disorder, concerns about marriage exacerbating symptoms were more prevalent compared to schizophrenia ($p = 0.001$). Despite these concerns, the stigma around marriage with individuals affected by bipolar disorder appeared less severe, as indicated by participants' greater openness toward the possibility of such a union in individuals with schizophrenia ($p < 10^{-3}$).

Conclusions: Results emphasize the need for targeted awareness and educational initiatives to address misunderstandings and support the marriage goals of individuals with mental health conditions. Future studies should examine the factors shaping these perceptions and develop approaches to promote a more inclusive perspective on marriage and mental health, tackling stigma and challenging widespread stereotypes.

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General population's perceptions regarding marriage in patients with schizophrenia

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Introduction: Public perceptions of mental illness, particularly in the context of marriage, are shaped by a myriad of factors, including cultural beliefs, media representations, and personal experiences. These perceptions often involve misconceptions and negative stereotypes leading to social stigma and discrimination. For individuals with schizophrenia, stigma can result in significant challenges in forming and maintaining marital relationships.

Objectives: To explore these perceptions we performed a qualitative analysis of public attitudes toward marriage in individuals with schizophrenia. By examining these perceptions, we aimed to identify common themes, misconceptions, and areas where public education might be most effective.

Methods: A cross-sectional study was conducted among general population. A survey was proposed via social networks. It included, additionally to socio-demographic and clinical variables, a detailed description of clinical symptoms and outcomes of schizophrenia along with open-ended questions assessing the perceptions of potential benefits and disbenefits of being an intimate partner of an individual with schizophrenia. Answers were arranged and the commonly reported themes in public opinion were identified.

Results: A total of 304 participants majoritively aged between 20 and 30 years old were included, 80.9% among them were women. The most of them were graduated from university. Family psychiatric history was reported by 35.6% of the participants and 23.35% of them stated that they were living with a person with a psychiatric disorder. About 87% of the participants admitted that they had seen a psychiatrist at least once in their lives. Responses regarding potential disbenefits of being married to a patient with schizophrenia included 8 themes, the most representative ones were 1) the fear of dealing with the exacerbations (16.4%); 2) the risk of being attacked physically (10.9%); 3) the impossibility of maintaining a stable relationship (10.9%); 4) the lack of communication (6.6%); and 5) the risk of separation (5.6%). Other themes included concerns about 6) dealing with an irresponsible partner (4.6%); 7) the risk of suicide and 8) the possibility of transmitting the pathology to descendants (2.3%).

About 23% of the participants stated that they were willing to get married with a schizophrenic patient in order to help him survive his illness.

Conclusions: This study has shed light on the complex and multifaceted perceptions held by the general population regarding marriage with a schizophrenic person. However, the study also revealed a glimmer of hope in the form of empathy and a growing recognition of the need for accurate information and support. As public awareness of mental health issues continues to rise, there is potential to challenge and change these negative perceptions.

Disclosure of Interest: None Declared