

Schizotypy in an online sample: Associations with functioning, wellbeing, and stigma toward psychological treatment

Abigail E. Dempsey, Kelsey A. Bonfils, Ruth L. Firmin, and Michelle P. Salyers

Indiana University-Purdue University Indianapolis

Background: Social functioning and positive attitudes toward treatment have been strongly linked with recovery in people with schizophrenia, yet less is known for schizotypy – traits that are associated with risk for schizophrenia. Previous studies of schizotypy have used primarily undergraduate or small community samples. The aim of the current study was to investigate correlates of schizotypy in a large online sample. We hypothesized that people with schizotypy traits would report lower functioning, well-being, and greater stigmatizing attitudes regarding treatment.

Methods: In a sample ($N=856$) recruited using Amazon's Mechanical Turk (MTurk), participants were dichotomized into non-schizotypy or schizotypy groups based on their endorsement of schizotypal traits on the Schizotypal Personality Questionnaire – Brief Revised (SPQ-BR; schizotypy group $n=101$; non-schizotypy group $n=431$). Participants completed a demographic survey and several measures related to functioning, well-being, and stigma, including the Romantic Relationship Functioning Scale (RRFS), the Social Adjustment Scale – Self-Report: Screener (SAS-SR: Screener), the SPQ-BR, the Short Form-12 Health Survey (SF-12), and the Stigma Scale for Receiving Psychological Help (SSRPH). Independent-samples t-tests were conducted to compare schizotypy groups on these variables.

Results: Those who reported high levels of schizotypy reported significantly poorer social functioning, $t(122.74)=-10.66, p<.001$; poorer romantic relationship functioning, $t(129.01)=12.00, p<.001$; poorer mental wellbeing, $t(132.58)=13.42, p=.001$; and greater stigma toward receiving psychological treatment, $t(137.06)=-3.89, p=.037$. There was no significant difference in physical wellbeing.

Discussion: These findings support the use of online samples and suggest schizotypy is associated with poorer functioning and wellbeing and increased stigma toward seeking treatment. Results support the emergence of deficits in key social domains among those at risk for developing greater psychosis symptoms. Given the links between these deficits and attitudes and poorer functioning in clinical samples, these findings suggest social functioning and help-seeking attitudes may be important targets of early intervention services.