

**SPEECH ABNORMALITY OF SCHIZOPHRENIA FOUND IN
TREATMENT CONVERSATION ON “THE RECAP RADIO”
YOUTUBE CHANNEL**

THESIS

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**DEPARTMENT OF ENGLISH LITERATURE
FACULTY OF HUMANITIES
UNIVERSITAS ISLAM NEGERI MAULANA MALIK IBRAHIM
MALANG
2022**

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THESIS

Presented to

Universitas Islam Negeri Maulana Malik Ibrahim Malang

in Partial Fulfillment of the Requirements for the Degree of *Sarjana Sastra* (S.S.)

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MALANG**

2022

STATEMENT OF AUTHORSHIP

I state that this thesis entitled "**Speech Abnormality of Schizophrenia Found in Treatment Conversation on *“The Recap Radio”* YouTube channel**" is my original work. I do not include any previously written or published by another person, except those cited as references and written in the bibliography. Hereby, if there is another object or claim, I am the person who will be responsible for that.

Malang, 18 November 2022

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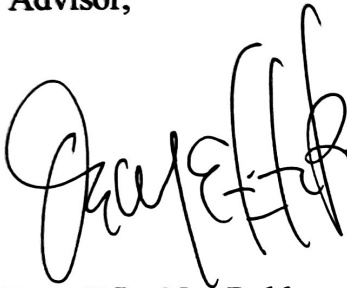
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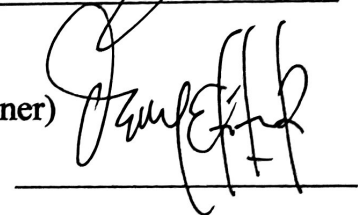
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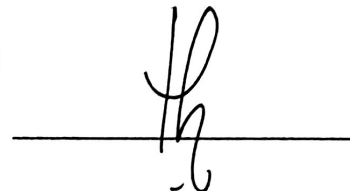
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MOTTO

“To get success, your courage must be greater than your fear.”

“Believe and act as if it were impossible to fail.”

-Charles Kettering-

DEDICATION

This thesis is proudly dedicate to:

My beloved father and mother, Alm. Budijanto and Ibu Suparti, who have provided material support, always pray for my success and to teach me to be a good woman.

My thesis Advisor, Mrs. Deny Efita Nur Rakhmawati, M.pd

My dear Abdi Dwi Prasetyo, who always supports me in any situation.

My beloved family who always hears my complaints.

My lonely friends who always accompany and help me.

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Alhamdulillah, I am grateful to Allah SWT for His blessing that I could complete the preparation of this thesis. The thesis title I propose is *"Speech Abnormality of Schizophrenia Found in Treatment Conversation on the Recap Radio YouTube Channel."* This thesis is submitted to fulfill the graduation requirements for this Bachelor of Literature (S.S) degree. However, I realize that this work will not be finished without my beloved people around me who support and help me. Then, I would thank say to:

1. My thesis Advisor, Mrs. Deny Efita Nur Rakhmawati, M.Pd, has been advised, patient and sincere in guiding and helping me in writing my thesis.
2. My beloved father and mother, Alm. Ayah Budijanto and Ibu Suparti who always pray or me.
3. All my friends SASING'18 UIN MALANG.

I realize that this thesis is not perfect due to my limited knowledge. For this reason, suggestions and constructive criticism will be accepted to improve this thesis. Furthermore, I hope this thesis can be useful for related studies for future research and also for other readers.

Malang, 16 December 2022

The researcher

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ABSTRACT

Ramadhanti, Sukma Dwi (2022) *Speech Abnormality of Schizophrenia Found in Treatment Conversation on The Recap Radio YouTube Channel*. Undergraduate Thesis. Department of English Literature, Faculty of Humanities, Universitas Islam Negeri Maulana Malik Ibrahim Malang. Advisor Deny Efita Nur Rakmawati, M.Pd.

Key word: speech abnormality, hindered information, Recap Radio YouTube Channel

This study aims to identify the types of speech abnormality of schizophrenia found in treatment conversations between psychiatrists and patients in the psychiatric hospital. Schizophrenia is a chronic mental disorder that causes sufferers to experience delusions, hallucinations, and thinking disorders. It affected the sufferer to produce abnormal language. In many cases, schizophrenia will experience a long period. Therefore, this study has two objectives in this study. First, the researcher identified speech abnormalities in schizophrenic patients in the hospital. Second, the researcher described how speech abnormality hindered in conveying information.

The researcher used qualitative descriptive methods in analyzing the data in this study. The object of the research was obtained from documentary videos about schizophrenia on YouTube with the Radio Recap channel. The researcher used the theory by Liddle et al. (2002) to analyze the types of speech abnormality as a language disorder and the theory by Carter (2009) to describe how speech abnormalities hinder conveying information.

The results of the study showed patients showed only seven types of speech abnormality. The highest symptom was peculiar logic, with a total of 22 data and a percentage of 29%. The second dominant symptom was the perseveration of ideas, with a total of 21 and a percentage of 28%. Then, for other symptoms, 12% for the weakening of goal, 11% for the poverty of speech, 8% for peculiar sentences, and 3% for peculiar words. As a result, these types of speech disorders result in schizophrenic patients being hindered in conveying information to the psychiatrist.

ABSTRAK

Ramadhanti, Sukma Dwi (2022) *Kelainan Bicara Skizofrenia Ditemukan dalam Percakapan Pengobatan di Channel YouTube The Recap Radio*. Skripsi. Jurusan Sastra Inggris, Fakultas Humaniora, Universitas Islam Negeri Maulana Malik Ibrahim Malang. Pembimbing Deny Efita Nur Rakmawati, M.Pd.

Kata Kunci: *kelainan bicara, informasi terhambat, Saluran YouTube Radio Recap*

Penelitian ini bertujuan untuk mengidentifikasi tipe-tipe kelaianan bahasa skizofrenia yang di temukan pada percakapan pengobatan antara Psikiater dan pasien di rumah sakit. Skizofrenia adalah gangguan jiwa kronis yang mengakibatkan penderita mengalami delusi, halusinasi, dan gangguan berpikir. Ini mempengaruhi penderita memproduksi bahasa yang tidak normal. Banyak kasus ditemukan bahwa skizofrenia akan mengalami gejala sisa yang terjadi dalam jangka panjang. Oleh karena itu, penelitian ini memiliki dua tujuan dalam penelitian ini. Pertama, peneliti mengidentifikasi jenis-jenis kelainan bicara pasien skizofrenia di rumah sakit. Kedua, peneliti mendeskripsikan bagaimana kelaianan bicara menghambat untuk menyampaikan informasi.

Peneliti menggunakan metode deskriptif kualitatif dalam menganalisis data dalam penelitian ini. Objek penelitian diperoleh dari video tentang skizofrenia di youtube dengan channel Radio Recap. Peneliti menggunakan teori Liddle dkk (2002) untuk menganalisis ciri-ciri kelainan bicara sebagai gangguan bahasa dan teori Carter (2009) untuk mendeskripsikan bagaimana kelainan bicara menghambat penyampaian informasi.

Hasil dari penelitian menunjukkan bahwa ada tujuh gejala yang di tunjukkan oleh pasien dari delapan gejala. Gejala tertinggi adalah logika aneh dengan jumlah 22 data dan memiliki presentase 29%. Gejala dominan kedua adalah ketekunan ide dengan jumlah 21 dan memiliki presentase 28%. Kemudian, untuk gejala lainnya yaitu 12 % untuk gejala melemahnya tujuan, 11% untuk gejala kemiskinan ide, 9% untuk gejala kelonggran, 8% untuk gejala kalimat aneh, dan 3% untuk gejala kata yang aneh. Akibatnya, jenis-jenis kelaianan bicara ini berakibat kepada pasien skizofrenia terhambat dalam menyampaikan informasi kepada Psikiater.

مستخلص البحث

رامادانتى ، سوكما دوي(2022) تم العثور على اضطراب الكلام الفصامي في محادثة الطب على قناة راديو Recap Radio YouTube. فرضية. قسم الأدب الإنجليزي ، كلية العلوم الإنسانية ، جامعة الدولة الإسلامية مولانا مالك إبراهيم مالانج.

المشرف دني إفيتا نور رقمواتي،

الكلمات المفتاحية: اضطرابات الكلام ، المعلومات المعوقة ، خلاصة راديو يوتيوب

تهدف هذه الدراسة إلى تحديد أنواع اضطرابات الكلام الفصامية الموجودة في المحادثات الدوائية بين الأطباء النفسيين والمرضى في المستشفيات العقلية. الفصام هو اضطراب عقلي مزمن يتسبب في إصابة المرضى بالأوهام والهلوسة واضطرابات التفكير. إنه يؤثر على الذين يعانون من إنتاج لغة غير طبيعية. في معظم الحالات ، يكون لمرض انفصام الشخصية فترات طويلة. لذلك ، هذه الدراسة لها هدفان في هذه الدراسة. أولاً ، حدد الباحثون تشوهات النطق لدى مرضى الفصام في المستشفى. ثانيًا ، يصف الباحث كيف يتم إعاقه اضطرابات الكلام في نقل المعلومات.

استخدم الباحثون المنهج الوصفي النوعي في تحليل البيانات في هذه الدراسة. تم الحصول على موضوع البحث من فيديو وثائقي عن مرض انفصام الشخصية على موقع يوتيوب مع قناة Recap Radio. يستخدم الباحثون النظرية من (Liddle et al. 2002) لتحليل أنواع اضطرابات الكلام مثل اضطرابات اللغة ونظرية كارتر (2009) لشرح كيف تمنع اضطرابات الكلام نقل المعلومات.

أظهرت الدراسة أن المرضى أظهروا فقط سبعة أنواع من تشوهات النطق. أعلى عَرَض هو المنطق الفردي ، بإجمالي 22 بيانات ونسبة 29٪. العَرَض الثاني السائد هو استمرار الأفكار ، حيث كان الرقم 21 والنسبة المئوية 28٪. ثم للأعراض الأخرى ، 12٪ لتخفيف الهدف ، 11٪ لفقر الكلام ، 8٪ للجمل الغريبة ، و 3٪ للكلمات الغريبة. ونتيجة لذلك ، يتسبب هذا النوع من اضطراب الكلام في إعاقه مرضى الفصام في نقل المعلومات إلى الطبيب النفسي.

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CHAPTER 1

INTRODUCTION

The chapter of this study contributes an introduction, including background, significance, scope and limitations, and definitions of the key terms.

A. Background of the Study

Schizophrenia has become one of the main problems of mental disorders in every country. It included the major debilitating mental illness with a prevalence rate is around 1.46 - 4.6 per 100 per population worldwide (WHO, 2019). It is a chronic psychotic disorder that affects early brain development. In addition, schizophrenia affects cognition, perception, emotion, and social functioning (Videbeck, 2011). Therefore, it is a thinking disorder affecting a person's language skills.

According to Brown et al. (2014), 25 to 50% of people with schizophrenia still experience residual symptoms despite regular treatment. It makes people diagnosed with schizophrenia experience chronic conditions over a long period. Therefore, it showed that schizophrenia is a type of psychosis that ranks highest among mental disorders.

People who have schizophrenia experience two symptoms. The first is positive symptoms like hallucinations and delusion. The second is negative symptoms, such as apathy, flattening effects, and abnormalities of brain structure symptoms. Nevertheless, positive symptoms are the most dramatic and frequently indicated of schizophrenia. In this case, delusion and hallucination affect schizophrenic sufferers to experience speech abnormalities and changes in normal behavior.

It is due to imbalanced levels of neurotransmitters in the brain. It affects intellectual function in several cognitive domains and impairs language function in people with schizophrenia. In addition, people with schizophrenia have hallucinations symptoms, which they find difficult to distinguish between reality and imagination in mind. Hence, they have problems processing language because they are hard to express their feelings and produce words or sentences. Therefore, language disorders are the core symptoms of people with schizophrenia.

Speech abnormalities are exhibited by the inadequacy to interact in conversation, unable to recognize other people's language, and difficulty expressing an idea and communicating in written or spoken form. People with schizophrenia also have a weak ability to regulate syntax (Poplack in Mania et al., 2019). Moreover, they constantly talk and repeat sentences spoken by subtracting or adding sentences (Indah, 2017).

Unlike previous studies that more focused on daily conversation. However, this study will investigate speech abnormality found in certain conversations, especially in the treatment context between psychiatrists and schizophrenic patients in the psychiatric hospital. Communication between professionals (psychiatrists or doctors) and patients in treatment conversations refer to specific interventions such as cognitive behavioural therapy and psychotherapy. It will show how the dialogue patients are currently undergoing treatment. Besides that, aspects of communication such as language can help and provide effective communication. It is easier for the researcher to identify speech disorders in treatment conversations because the structure of communication patterns will be more effective and specific to patients.

Therefore, this study will provide findings that use other objects more specific to the treatment conversation. The finding and discussion focus more on speech disorders in schizophrenic patients and how speech abnormalities hinder in conveying of information.

Apart from being found in the real world, the phenomenon of schizophrenia is also found on YouTube. YouTube media is an audio-visual-based communication platform with various shows presented, such as news, media for learning, and entertainment. Therefore, people can watch and access the phenomenon of schizophrenia easily. The researcher was chosen the Recap Radio YouTube channel. It was uploaded in 2020. The reason for choosing this channel is that it provides interviews with psychiatrists and patients during the treatment process in the psychiatric hospital, which is rarely found on other channels. Recap Radio shows how people with schizophrenia experience abnormal language and how conversations with people with schizophrenia and the doctors who treat them. In addition, this channel has 21.9 thousand subscribers, 523 thousand viewers, and 1.4 thousand comments which shows a good response from people.

The data of this study were taken from three documentary videos on Radio Recap YouTube. The reason for choosing documentary videos is because the video describes the phenomenon of schizophrenia in the psychiatric hospital that occurs in real and non-fictional. Documentary videos illustrate how schizophrenic patients come to the hospital due to several factors that cause speech abnormality symptoms, such as hallucinations and delusions. In addition, these videos depict how schizophrenic patients are hindered in conveying information to psychiatrists due

to speech abnormalities. In this study, the researcher uses three documentary videos because one video has a short duration of around 20-46 minutes. It aims to get many data and give detailed explanations about the speech disorder of schizophrenia in the treatment conversation. The first video is A True Madness Schizophrenia Documentary Real Patients. The reason for choosing this video is because the types of language disorders are more visible, which is indicated by conversations with chronic schizophrenic patients. Then, two other videos are Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 and Part 2 Any Place But Here Psychiatric Hospital Schizophrenia Documentary. The reason for choosing these two videos is because this video features schizophrenic patients who experience residual symptoms and return to treatment at the psychiatric hospital. The patient produces many messy and unique sentence structures in this video. The link to the video can be accessed below: <https://youtu.be/s0NdkYs5AU>, <https://youtu.be/ywpS682Y6FQ>, & https://youtu.be/_isOUXnfx5k.

This study is significant because it investigates speech abnormality as an unusual language disorder in schizophrenia. It needs to be studied in linguistics because people with schizophrenia fail to understand the real thing because of a thought disorder. In addition, they also had difficulty communicating with others who were different from normal people. The researcher analyzes the data using the theory by Liddle et al. (2002) about speech abnormality and Carter (2009) about languages influenced by the brain to explain how schizophrenic patients hinder in conveying information to psychiatrists. Therefore, it will show that language and the brain have a relationship in the sentence structure in the speech abnormality of

schizophrenic patients. These aspects follow the discussion of the psycholinguistics field (Indah & Abdurrahman, 2008). Furthermore, this study is important to observe the phenomenon of language disorder production and the schizophrenic's behavior during the treatment context in the psychiatric hospital. Indeed, this research needs to be done to identify the relationship between language, thought, and ideas observed in people with schizophrenia.

There have been many studies about schizophrenia. It is important in this study to consider new findings in future research. First, Israwanti et al. (2021) observed the types of speech abnormalities in Jerry Hickfang's character. She also investigated the types of hallucinations using Veague's (2007) theory, but it led to more discussion in psychology rather than linguistics. This study used a qualitative method. The researchers found two findings, namely that there were 3 types of hallucinations (auditory hallucination, visual hallucination, and olfactory hallucination) and language abnormalities (looseness, peculiar words, peculiar logic, perseveration of ideas, and distractibility).

Second, Santiah (2021) observed the causes and types of schizophrenia in the Shutter Island movie that used three theories, namely Kalman's, Kenna's, and Rosen's theory. This study focused on the cause and types of schizophrenia in the Shutter Island movie. The researcher used a descriptive qualitative method. The researcher found 3 data for hebephrenic schizophrenia, 6 data for paranoid schizophrenia, and 3 data for catatonic schizophrenia. Moreover, she also found 2 kinds of treatment for schizophrenia, 3 data for medication and 3 data for psychosurgery.

Third, Irfandina (2021) discussed the speech abnormalities of Ray's character in the fractured movie using the theory by Liddle et al. (2002) and Covington et al. (2005) theory. This study applied a descriptive qualitative method. The study found 55 utterances that showed speech abnormalities, such as poverty of speech, weakening of goal, looseness, peculiar words, peculiar sentences, peculiar logic, perseveration of ideas, and distractibility. This research provides detailed information on the field of psycholinguistics.

Fourth, Hasanah (2018) researched the speech abnormality of the main character in the middle school movie. She also explained that people with schizophrenia had difficulty conveying information. This study used a descriptive qualitative method. The study only found seven types of eight types of speech abnormalities based on the theory by Liddle et al. (2002). In addition, this study also examined how speech abnormality hinders Rafe in conveying information using Carter's theory (2019). In this case, Rafe had difficulty conveying and receiving information well.

Fifth, Arfani and Safitri (2018) analyzed the kinds of schizophrenia and each symptom in the beautiful of mind movie. Their study investigated that the main character suffers from a schizophrenic disease that makes him different from others. The researcher applied the descriptive qualitative method. This study used library research to collect the data. The researcher collected several books from different authors. Therefore, this study explained that the main character had different from other people because he struggles with his mental illness and many problems in his life.

Sixth, Amriani (2017) discussed the kinds of schizophrenia in *The Roommate* movie. The study found four types of schizophrenia, 6 data for simplex schizophrenia, 8 data for hebephrenic schizophrenia, and 4 data for catatonic schizophrenia. She also examined how to heal schizophrenic diseases in the movie by taking meditation and psychosurgery. She used the theory by Kraepelin and Rosen to analyze mental illness. Thus, this study used a psychological approach to analyze the data from the conversation, actions, and schizophrenic's behavior in the movie.

Seventh, Nugroho (2013) investigated the comprehension disorder experienced by a schizophrenic character in *A Beautiful Mind* movie. This study used a descriptive qualitative method. John Nash had a problem with language as a schizophrenic character. It inflicted some disorders of the brain's competence to comprehend, recognize, and mechanism information. The study found nine types of comprehension disorders not revealed in this research based on Ginsberg's theory. The researcher also concludes that John Nash's difficulty communicating is due to schizophrenia disorder.

Eight, Palaniyappan and Ganesan (2022) discussed the Bayesian brain and cooperative communication in schizophrenia. The researcher used a descriptive qualitative method. Based on the finding, formal thought disorder has two brain problems in schizophrenia, such as utility cases that generate theoretical expectations for the known signs of this construct. This study also explained operative communication according to the active interference algorithm. In

addition, this study provided information about two speakers in the discourse, indicating their mental state.

Ninth, Meyer et al. (2021) observed language dysfunction in schizophrenia. The researcher used a qualitative method. This results in impaired speech and language perception understanding for people with schizophrenia. It also discussed how clinical Neuroscientists use neural tracking methodologies to characterize hearing-sense deficiencies and abstract linguistic levels independently. It is used for objective and differential diagnoses of schizophrenia. In addition, the finding showed information on auditory perception and speech, prosody and syntax, semantics, and naturalistic experiments for schizophrenia.

Last, Espinola et al. (2020) researched vocal and acoustic analysis and identification of schizophrenia from machine learning. The researcher applied a descriptive qualitative method. This study used vocal patterns and machine learning techniques to develop intelligent tools to detect people with schizophrenia. The object of this study is 31 volunteers over 18 years old. The study found six types of speech abnormality: poverty of speech, aprosodia, derailment, tangentiality, neologisms, and alogia. This study presents vocal and acoustic abnormalities for identifying and assessing schizophrenia disorder.

B. Research Questions

The formulation of the research problem is based on the background of the research in the previous chapter, as follows:

1. What types of speech abnormality by schizophrenic patients in the treatment conversation?
2. How do speech abnormalities of schizophrenic patients hinder conveying information in the treatment conversation?

C. Significance of the Study

The result of this study provides material about psycholinguistics, especially regarding language disorder, to understand the sentence structure of people with schizophrenia. Furthermore, this study can be used as additional knowledge of psycholinguistics studies to assist a new study in improving and refining speech abnormalities with some limitations or gaps. The author hopes this study contributes to the deep expertise of speech abnormalities of schizophrenic patients on the Recap Radio YouTube channel, particularly for English Literature students in UIN Malang and the general public readers. Besides, this study encourages other researchers to do the same research investigating the speech abnormality of schizophrenia disorder.

D. Scope and Limitation

This study is related to psycholinguistics studies, which analyze speech abnormality produced by patients on the Recap Radio YouTube channel. The researcher focuses on the speech area.

Besides, the researcher limited this study by only taking data on conversations between psychiatrists and patients. It is related to this study that refers to the context of treatment in the psychiatric hospital. The researcher used Liddle et al. (2002) theory about language abnormalities and Carter's (2009) theory about language influenced by the brain.

E. Definition of Key Terms

- 1. Schizophrenia:** A thought disorder that makes the sufferer have a problem with communication.
- 2. Speech abnormality:** A type of speech disorder experienced by people with schizophrenia.
- 3. Brain and language:** A theory that explains how language is processed and conveyed.
- 4. Psycholinguistics:** The study of linguistic and psychological relationships within the scope of language.
- 5. YouTube:** An audio-visual website used for sharing videos online.

CHAPTER II

REVIEW OF RELATED LITERATURE

This chapter discusses the theory and review of the literature. The main theory used in this research is psycholinguistics, which is supported by, schizophrenia, the factors of schizophrenia, speech abnormality, brain and language, and the Recap Radio YouTube channel.

A. Psycholinguistics

Psycholinguistics studies deal with cognitive processes investigating how language is acquired and used. This scientific discipline refers to multiple sources that combine psychology and linguistics (Cutler, 2005). It aims to comprehend the correlation between the human brain and language. Psycholinguistics is known as the examination of psychological elements of language. The function is to use devices in the human brain that process and express language. Besides, psycholinguistics also shows something that happens to the human brain to be studied, understand, produce, remember, or store language (both written and spoken). Moreover, Dressler et al. (1992) define language structure as related to language use.

The discussion in Psycholinguistics is divided into six parts: language processing, lexical storage and retrieval, language acquisition, state, brain and language, acquisition, and application of a second language (Field, 2005).

Language skills such as reading, writing, speaking, and listening are included in the language processing process. However, the researcher does not explore the six language areas. The researcher limits this study to the brain and language because this study is focused on investigating schizophrenia disorder.

B. Schizophrenia

Schizophrenia is a mental illness that causes psychosis and affects behavior, emotions, and communication. It is included in the language disorder caused by a thought disorder. Many aspects of disturbed mental function are influenced by the structure and function of the brain of schizophrenia (Liddle et al., 2002). It caused disturbances in perception, cognition, emotion, and volition. Besides, they had a problem with receptive language. It showed that people with schizophrenia have difficulty understanding words or sentences and processing semantics and syntax.

Besides, schizophrenia had difficulty distinguishing between real and unreal. This condition is like a person dreaming and the incident happening. In addition, people with schizophrenia have an exact view of real life that serves to communicate correctly in everyday life, but sometimes their thinking and speech are disorganized (Hoeksema, 2011)

There are three main symptoms of schizophrenia: positive, negative, and cognitive (NAMI-National Alliance on Mental Illness, 2008).

1. Positive symptoms

The word "*positive*" refers to mental experiences added, which are consequences of the illness. It means that people with schizophrenia add or change

reality incorrectly. It is known as "*psychotic*" because sufferers lose touch with reality significantly. There are two types of positive symptoms:

a. Hallucinations

Hallucinations are sensory misperceptions that cause a person to experience auditory, visual, or other sensory experiences that cannot be observed as stimuli. For instance, people with schizophrenia hear voices talking when no one is around or sees something no one else sees. Oltmanns and Emery (2012) stated that external stimuli do not cause hallucinations.

b. Delusions

It is an internal belief due to a mistake against the perception of the real external environment. Oltmanns and Emery (2012) argued that it was personally experienced and not shared by other families or cultural groups of people with delusional symptoms.

2. Negative symptoms

The word "*negative*" refers to a symptom that takes away the attitude of people with schizophrenia. It is diminished the normal behavior and functioning of schizophrenic patients. There are some negative symptoms of schizophrenia that are:

- a. Anhedonia, people with schizophrenia cannot the simple pleasures of those around them.
- b. Volition, people with schizophrenia lacked initiative, motivation, or desire.
- c. Alogia, people with schizophrenia lacked and decreased in terms of speech.

- d. People with schizophrenia had fewer emotions or feelings with flat or blunt affect.

3. Cognitive symptoms

The cognitive symptom is a symptom that affects and inhibits schizophrenia, the capability to study and remember new things that have been known before and to use skills that have been previously possessed. It is related to the thought process (National Alliance on Mental Illness, 2008).

On the other hand, schizophrenia is a disease that is included in mental illness due to abnormal brain conditions. It affects a person's abilities, including remembering, thinking, speaking, and feeling (Andreasen, 2001). They had difficulty thinking due to hallucinations, thinking disorders, speech disorders, or behavior disorders that looked unusual. This condition tends to be more severe, lasts longer, and significantly impacts ability skills. Indeed, it depicts maintaining the mind's capacity for language processing.

Apart from schizophrenia, there is also a classification of other types of mental illness (Thompson, 2007), such as:

1) Major depression.

Major depression is a systemic disorder that affects mood, thoughts, emotions (feelings about oneself), and physical emotions (Thompson, 2007).

2) Bipolar disorder

Bipolar includes a mental health disorder that causes sufferers to experience abnormal changes in mood, energy, and concentration. Thompson (2007) argued that bipolar disorder begins at a young age in adulthood and continues

into later life. People who have bipolar disorder will experience two opposing phases, namely the mania and depression phases. The characteristics of the mania phase are hyperactivity, talking a lot, wanting to do many things, and rash decision-making. Meanwhile, depression has features such as sufferers feeling lethargic, talking a little, having difficulty doing activities, and losing motivation. Both of these phases can last for days and months.

3) Obsessive-compulsive disorder (OCD)

It is an individual anxiety disorder trying to resist obsessive and compulsive impulses (Thompson, 2007).

C. Kinds of Schizophrenia

Schizophrenia is divided into five types, Kraepelin (in Maramis, 2009). People with schizophrenia are classified into one type according to their main symptoms. However, the boundaries of this type of schizophrenia are unclear, and the symptoms can be alternating, or a sufferer can not be classified into one type.

1. Paranoid schizophrenia

This type of schizophrenia often appears by the age of 30 years. The symptom can be acute or not acute. In paranoid schizophrenia, the sufferer's personality can often be classified as schizoid before the illness. They are irritable, secluded, arrogant, and lack trust in others.

2. Hebephrenic schizophrenia

This type frequently occurs in adolescence or between 15-25 years. The main symptoms are the disturbance of thought processes and the existence of a double personality. Besides, many psychomotor disturbances, including mannerisms, neologisms, childish behavior, delusions, and hallucinations, are often present in hebephrenic schizophrenia.

3. Catatonic schizophrenia

This type appears between the ages of 15 and 30 years. These symptoms are usually acute and often preceded by emotional stress. This results in catatonic agitated rumbling or catatonic stupor. The main symptom is psychomotor symptoms such as mutism, resistance, refusal to eat, grimacing, and catalepsy.

4. Simplex schizophrenia

This type appears during puberty. The simplex type's main feature is the superficial emotional decline of desire. In addition, disturbance of thought processes is commonly rarely to find in simplex schizophrenia. It is shown by patients who rarely experience hallucinations and delusions.

5. Residual schizophrenia

This is a type of chronic schizophrenia with a history of at least one overt psychotic episode. Negative symptoms are prominent in this type. For example, slowness psychomotor, decreased activity, passivity, no initiative, poverty of speech, expression decreased nonverbal, poor self-care, and social functions.

D. The Factors of Schizophrenia

According to Khan et al. (2013), three factors cause schizophrenia disorder:

1. Abnormal brain structures factors

Schizophrenia undergoes structural changes in that they have larger ventricles (fluid-filled cavities in the center of the brain) in some people with schizophrenia.

2. Genetic factors

Schizophrenia has a genetic component with an estimated heritability of approximately 80% (Khan et al., 2013). This factor includes things that have an essential role in the development of the condition of schizophrenia. In this case, people with a family history of schizophrenia will have a greater chance of developing schizophrenia. For instance, people with first-degree relatives such as parents, brothers, and sisters with schizophrenia will have a 13% chance of suffering from schizophrenia. Besides, people with identical twins with schizophrenia have a 44% chance of suffering from schizophrenia.

3. Environmental factors

Environmental stressors in the etiology of illness also influence the cause of schizophrenia (Khan et al., 2013). It refers to sociodemographics such as poverty and lowers social class. Therefore, stressful environmental conditions will increase people experiencing schizophrenia. Moreover, social factors will also suffer schizophrenia disorder, such as mother-infant relationships, family dynamics, abuse of drugs, and neurodevelopmental problems in their environment.

E. Speech Abnormality of Schizophrenic People

The researcher used the theory of the Thought and Language Index (TLI) proposed by Liddle et al. (2002). This is to classify symptoms of schizophrenia disorder like speech abnormalities. In addition, TLI is a new instrument to investigate formal thought disorders in sub-standard conditions. This theory explained several aspects of irregularities in the communication process, including confusing, unclear, incomplete answers and the use of strange words.

Based on the theory of the Thought and Language Index, there are eight symptoms of schizophrenia disorder (Liddle et al., 2002). The two items show speech impoverishment (poverty of speech and weakening of goal). Four items exhibit disorganization phenomena of thought and language (peculiar use of words, peculiar sentence construction, and peculiar logic). Then, two items to nonspecific disorders (perseveration and distractibility).

1. Poverty of Speech

It is a condition of people with schizophrenia to speak briefly, concretely, and uncomplicated. The characteristics of this symptom can be seen from the responses or short answers following the questions and less elaboration (Liddle et al., 2002). In some cases, patients do not answer their questions or respond monosyllabically. The leading cause of this reaction is a decrease in brain function that affects the experience of social interaction. It can be found in the following example (Pridmore, 2013):

The interviewer : “Do you have children?”

The patient : (**Once, for several minutes**)

The interviewer : “Do you have children?”

The patient : “**Yes**” (**mumbling**).

From the example above, the patient's answer indicates the poverty of speech. The patient gave short answers, “yes,” with long pauses. It means that there are no supporting sentences and do not provide any detailed explanation. However, the interviewer needs more information through answers relevant to the question, like mentioning the name, number, age, gender of a child, etc.

2. Weakening of Goal

It is a condition of people with schizophrenia had difficulty conveying a message of information. It indicates a lack of motivation for thinking and manifestation, lacking the usual expanded ideas, the use of non-useful generalizations, and empty statements with insufficient information (Liddle et al., 2002). The characteristics of the language used by patients tend to be unclear, too abstract or concrete, repetitive, and stereotyped. Moreover, people with schizophrenia have spoken a lot but have not provided sufficient information to answer the question. It can be found in the following example, Liddle in Stein and Wilkinson (2007):

The patient: “Reminds me of **som.. um.. em.. sun.. er.. clouds.. and sun (long pause)...**That’s all.”

The example above indicates that the speech is uninformative or the utterance is empty. The patient cannot achieve the purpose of his speech due to a thinking disorder. It is shown from the speech, which was supposed to give information about summer or sunny, but he failed to give the correct information.

Moreover, the sentence structure is strange, there are repeated words, and some words are not grammatical.

3. Looseness

People with schizophrenia lose their ideas in looseness. The characteristics of looseness are losing thoughts and weak statements and replacing other or new ideas that will be delivered suddenly. Hence, the speech pattern had concepts that conveyed conversations away from their original purpose (Liddle et al., 2002). Slipping is a sign of looseness. It is divided into two:

a. Derailment

It occurs when people with schizophrenia have related answers but draws different conclusions during communication. They also did not make any cohesion with the question, so they slipped into another idea. In addition, ideas in derailment are unrelated to the flow of speech. It can be found in the following example, Liddle in Stein and Wilkinson (2007):

The interviewer : “Has there been anything about you on TV?”

The patient : **“There has been the union jack and the hospital fire alarm and plastic surgery.”**

The interviewer : “Did those things have anything to do with you?”

The patient : **“The Boer war.”**

From the utterances above, the patient did not give relevant answers to the questions. Even though the patient gave the correct answer but he explained something else. It can be seen from the patient's response that it is not related to

what is happening on TV. In addition, the answer "*The Boer war*" indicates a word slip that does not follow the previous answer.

b. Tangentiality

It occurs when people with schizophrenia answer questions according to general topics, but the patient's responses do not appropriate to specific questions (Shives, 2008). He or she also gives irrelevant answers and speeches that tend to be spontaneous. It can be found in the following example (Pridmore, 2013):

The interviewer : "How old are you?"

The patient : "**I feel young sometimes.**"

From the example above, tangentiality is evidenced in the slide-off of questions spoken by a schizophrenic patient. The patient should answer something like "*37 years old,*" not "*I feel young sometimes.*" Thus, it shows answers irrelevant to the question and answers that change ideas. Therefore, it makes the interviewer confused to understand what is meant.

4. Peculiar use of words

A peculiar word tends to be a word not found in the dictionary, Liddle et al. (2002) argued that some words are unusual or found to be used in which the word is strange. It is also called neologism because the new word or phrase cannot be understood. It can be found in the following example (Andreasen, 1986):

The patient: "I got so angry I picked up a dish and threw it at the **geshinker**. So, I sort of **bawked** the whole thing up."

From the example above, the bold words are strange words because the patient produces unusual words that are not found in the dictionary.

5. Peculiar sentence

People with schizophrenia produce unusual sentences in the peculiar sentence. The arranged sentence tends to be more complex. As a result, the sentence is difficult to understand (Liddle et al., 2002). In addition, responses such as the appearance of schizophrenia, such as sentence responses with semantic anomalies, were analyzed, and defects were observed at the schizophrenia level of pragmatic or syntactical violations, Kuperberg et al., (2000) in Sommer and Kahn (2009). Besides, Andreasen (1986) argued that the strange logic called coherence in his TLC is rare. It can be found in the following example (Andreasen, 1986):

The interviewer : “Why do you think people believe in God?”

The patient : “Um, because making a do in life. Isn't none of that stuff about evolution guiding, isn't true anymore now. It all happened a long time ago. It happened in eons and eons and stuff. They wouldn't believe in him. The time that Jesus Christ, people believe in their thing people believed in, **Jehovah God that they didn't believe in Jesus Christ that much.**”

This example includes a peculiar sentence because the words spoken are inaccurate as to why people believe in god. It showed that the patient's answer did not match because the patient's response was *"Jehovah God, that they did not believe in Jesus Christ that much."* Therefore, the answer is incoherent.

6. Non-logical reasoning (Peculiar Logic)

It is the intended conclusion according to insufficient evidence or faulty logic. People with schizophrenia make illogical references as the cause of peculiar logic (Liddle et al., 2002). In addition, hallucinations and delusions are the symptoms

that affect this disorder. Therefore, wrong conclusions that have been made will result in illogicality. It can be found in the following example (Pridmore, 2013):

Case: A patient who believes in the existence of aliens living on earth.

The patient: “When the Aliens looked at normal human beings, **the normal human beings immediately burst into flames and died**. I know it because **I am a normal human being- I’m looked at by aliens on at least a dozen occasions.**”

This example shows a peculiar logic symptom because the patient states that the Alien looks like a normal human. In fact, humans would burn and die if they gazed at the aliens, but the patient was still alive. Thus, this shows an illogical belief.

7. Perseveration of ideas

People with schizophrenia persevere and repeat ideas or themes in the perseveration of ideas (Liddle et al., 2002). It is shown when the patient repeatedly uses certain words, phrases, or courses in their speech (Pridmore, 2013). According to Andreasen (1986), people with schizophrenia begin with the subject or use certain words and always repeat and return to certain words in speaking. However, a few words or phrases commonly used to fill in gaps, such as “you know” or “like,” should not be considered persistence. It can be found in the following example (Pridmore, 2013):

The patient: I think I will put on **my hat, my hat, my hat, my hat.**

This utterance showed that the patient repeated the phrase “*my hat,*” which is enough to say once. This phrase is included in the word unnatural, not as a filler

in the pause in the explanation. Therefore, it can be concluded that the patient was doing preservation.

8. Distractibility

Distractibility is an additional intrusion of irrelevant ideas that got stimulation by others (Liddle et al., 2002). In this case, patients experience conditions such as stopping talking in the middle of a sentence and they change the topic of conversation to the nearest stimulus. It can be found in the following example (Black & Andreasen, 2010):

Schizophrenic: “Then **I left San Fransisco and moved to....where did you get that tie?** It looks like it is left over from the ‘50s. I like the warm weather in San Diego. Is that a conch shell on your desk? Have you ever gone scuba diving?”

In the example above, distractibility is described by the patient changing the topic of conversation in the middle of a sentence because of the stimuli obtained by the person with schizophrenia.

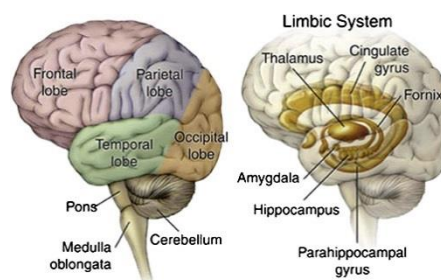
F. Brain and Language

Language and the brain are interconnected to produce a language. The brain is a soft white organ within the cranial cavity (Carter, 2009). It becomes the nerve center as a tool for thinking. Besides, the function of the brain is language processing. It refers to how words like ideas and feelings are used in communication (Carter, 2009). Therefore, language processing also examines how communication is processed and understood.

The Neuroscience of Language on Brain Circuits of Words and Serial Order book explains that the brain has a complex structure (Pulvermuller, 2002). The human brain consists of about 100 billion neurons. It plays a role in the functional elements of the brain and nervous system. Furthermore, neurotransmitters are used to communicate by humans. It is a special electrical signal to transfer electrical messages from neuron to neuron.

The brain controls all human activities in everyday life. (Carter, 2019). For example, the brain controls the human desire to speak or do something. Thus, the brain is one language processor that supervises how language is used and understood easily. Based on the many expert opinions, they approved that language processing is completely done in the mind that is related to the brain directly. The brain structure can be illustrated as follow:

Figure.1 The Brain Anatomy and Limbic System



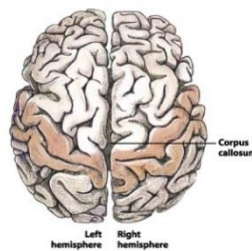
(The American Health Assistance Foundation, 2011)

Moreover, the part of the brain that regulates intellectual and language functions is the cerebral cortex. It consists of two parts, namely hemisphere right and left, which have different roles. The right hemisphere has functions on nonverbal abilities, emotional and communication aspects, and linguistic processes. Meanwhile, the left hemisphere is responsible for main language aspects such as

phonology, syntax, and semantics. Hence, damage to the right or left hemispheres will result in language disorders. Nonetheless, minor damage to the brain can cause difficulty in communication for the speaker and the interlocutor.

The hemisphere brain and the side view can be illustrated as follow:

Figure. 2 Hemispheres and the side view



(Psychology Research, New & Resources, 2013)

Humans who have brain disorders will affect the language production used in the communication process in social life. For example, cortical and subcortical brain structures are found abnormally in schizophrenia. Therefore, it makes schizophrenic patients have a language production disorder such as a speech abnormality. As a result, receptive and expressive language processing is slower than in normal humans. Besides, psychology refers to the language production between the speaker and listener. Therefore, the healthy psychological state of the speaker and listener conveys semantic meaning and can be obtained correctly, influencing the process of conveying the information (Indah, 2017).

People's language skills can affect how they communicate information to others. Normal people can communicate well because they can express their thoughts correctly. They can also solve their problems and have no difficulty in processing speech. It is because they can transfer and convey messages well to others.

Meanwhile, people with schizophrenia have abnormal language that affects how they communicate. They cannot process speech well because of problems such as receptive (difficult to understand language), expressive (difficult to produce language), or both. Each speaker is obliged to understand the intent of the other person. Bhipson in Agustina (2014), communication will be achieved if the speaker and the interlocutor understand each other correctly. Therefore, people with schizophrenia cannot interpret and convey messages properly because they have impaired understanding. In addition, they have difficulty understanding, remembering, and processing messages conveyed through communication. Therefore, speech abnormality disorder experienced by people with schizophrenia shows that the brain regulates the relationship between language and thought (Carter, 2009).

G. Recap Radio Channel

Recap Radio is one of Johnny Dollar's YouTube channels in the United States. This channel was joined on 27 June 2017. This channel provides videos such as old-time Radio programs, the golden age of Radio. Furthermore, this channel contains several videos and interviews on psychiatric disorders such as antisocial personality, bipolar, paranoid personality, schizophrenia, multiple personalities, mental illness, depression, psychopath, etc. The researcher has taken three documentary videos containing a conversation between a psychiatrist and schizophrenic patients at the hospital.

The first video is titled "A True Madness Schizophrenia Documentary Real Patients." It has a duration of 46.05 minutes. This video has been watched by 541 thousand of viewers. Thus, it showed that this video is the most-watched video on the Recap Radio channel. It describes the many schizophrenic patients who come to the hospital to get treatment. This video also showed that there were more male patients than female patients. Many patients have chronic conditions, so many of the symptoms of speech disorders are shown in this video. It also depicts offers the views of researchers about the causes of schizophrenia and the patient's decision to be treated in the hospital. In addition, this video illustrates the nature of schizophrenia through conversations with people with schizophrenia and the doctors who treat them. In this case, the psychiatrist or doctor teaches the patient how to work, do things properly, and administer medication.

The second video is titled "Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode." It has a duration of 21.02 minutes. In addition, This video has 29,700 viewers showing a positive response to this video. It illustrates the phenomenon of schizophrenia which was treated by William Louis Werner, M.D, and Bill as the psychiatrist in the psychiatric hospital. In this video, schizophrenic patients also receive intense treatment and medication. It aims to minimize the symptoms of speech disorders and behavioral abnormalities in schizophrenic patients.

The third video is titled "Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 2 episode." It has a duration of 30.03 minutes. This video has been watched by 16,000 viewers. This video also describes the

phenomenon of schizophrenia. However, many former patients come to the psychiatric hospital because they experience symptoms of schizophrenia. They came back for treatment with doctors and psychiatrists.

CHAPTER III

RESEARCH METHOD

The researcher will define the techniques and procedures utilized in data collection and analysis in this section.

1. Research Design

This study uses a descriptive qualitative method. Individual or group meanings related to social or human problems are investigated using a qualitative method (Creswell, 2014). This study deals with spoken language disorders and their context in people with schizophrenia. Thus, the researcher uses a qualitative method because it is used to investigate the types of speech abnormalities produced by schizophrenic patients in the treatment conversation on the Recap Radio YouTube channel. In this method, the researcher collects data primarily from words (or text), so this method describes data in the form of words, not numbers. Besides, descriptive refers to the researcher who interprets and examines the textual analysis to provide an in-depth understanding. Therefore, descriptive qualitative is used to investigate speech abnormality, which will be presented descriptively and in-depth in this study.

2. Data and Data Source

The data of this study are in the form of phrases, words, and utterances produced by schizophrenic patients on the Recap Radio YouTube channel. Furthermore, the data sources is the transcript from three documentary videos obtained on Recap Radio YouTube Channel. The first video is entitled A True Madness Schizophrenia Documentary Real Patients. It was published on April 22, 2019. It has a duration of 46.05 minutes. The other two videos are titled Any Place but Here Psychiatrist Hospital Schizophrenia Documentary Part 1 and 2. These videos were published on August 19, 2019. Part 1 has a duration of 21.02 minutes, and part 2 has a time of 30.03 minutes.

The videos can be accessed at the link below: <https://youtu.be/s0NdkYs5AU>, <https://youtu.be/ywpS682Y6FQ>, & https://youtu.be/_isOUXnfx5k.

3. Data Collection

The researcher has several procedures performed in collecting data. First, the researcher only chose dialogue criteria as needed in the treatment conversation between the psychiatrist and the patient based on the transcript of the conversation that has been provided. In this study, the patient's conversations with other people are not used as data. Second, the researcher highlighted the patient's words, phrases, and sentences, including the type of speech abnormality. Then, the researcher takes note of all the data. Last, the researcher completes the data column to proceed to data analysis.

4. Data Analysis

After the data has been collected, the researcher will analyze each data, including speech abnormalities in schizophrenic patients. They also had difficulty conveying the information to the psychiatrist. First, the researcher identifies the types of speech abnormalities using a datasheet based on Liddle et al. (2002).

The researcher uses a datasheet to categorize speech abnormality as follows:

No	Utterance	Context	The types of speech abnormality							
			POS	WOG	L	PW	PS	PL	POI	D

Abbreviated:

POS : Poverty of Speech PS : Peculiar Sentence

WOG : Weakening of Goal PL : Peculiar Logic

L : Looseness POI : Perseveration of Ideas

PW : Peculiar Word D : Distractibility

Third, the researcher identifies how speech abnormalities hindered in conveying information based on the theory proposed by Carter (2009) about languages influenced by the brain. It is used to analyze schizophrenic patients hindered in conveying information as follows:

No	Utterances	Context	Speech abnormality	Hinder information

Fourth, the researcher interprets each data context and answers to research questions. Fifth, the researcher report through the textual description. Last, drawing a conclusion.

CHAPTER IV

FINDINGS AND DISCUSSION

This chapter discusses the findings and discussions according to the related literature review that underlies the theories from the previous chapter. The findings were obtained to answer research problems based on the results of data analysis. The researcher analyzed speech abnormalities as language disorders of schizophrenia. The data were taken from utterances by schizophrenic patients on the Recap Radio YouTube channel.

A. Findings

The researcher classified several utterances to get data analysis. The finding focuses on the types of speech abnormality based on the theory by Liddle et al. (2022). There are 8 types: poverty of speech, weakening of goal, looseness, peculiar word, peculiar sentence, peculiar logic, perseveration of ideas, and distractibility. However, the researcher did not find any distractibility symptoms in this study. In addition, this study also analyzes how schizophrenic patients are hindered in conveying information. It is analyzed using Carter's Theory (2009) about language influenced by the brain.

1. Types of speech abnormalities produced by schizophrenic patients

The researcher found 54 utterances data produced by schizophrenic patients in three documentaries on the Recap Radio YouTube channel, which can be seen in the appendix. In addition, the researcher presents some utterances in the research

findings based on chronological scenes with [...] symbols which indicate the sequence number of the three videos on the Recap Radio YouTube channel. Therefore, the types of speech abnormalities can be shown in diagram 1.1 below:

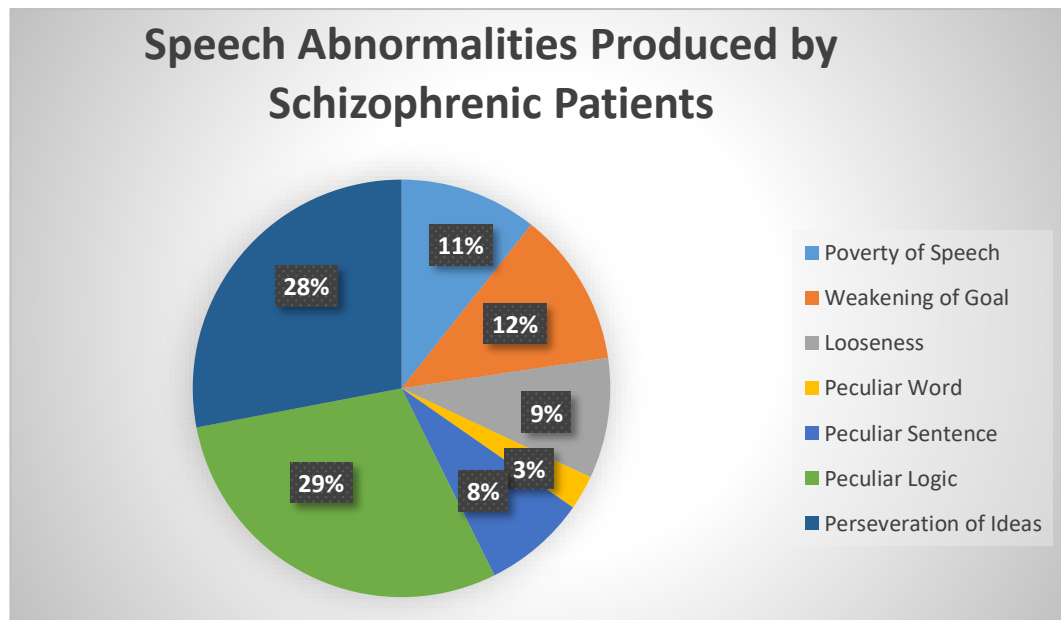


Diagram 1.1 the type of speech abnormalities by schizophrenic patients

The diagram shows that speech abnormality produced by schizophrenic patients occurs in 11% for the poverty of speech, 12% for the weakening of goal, 9% for looseness, 3% for peculiar words, 8% for peculiar sentences, 29% for peculiar logic, and 28% for perseveration of an idea.

a. Poverty of Speech

Datum 14

The Psychiatrist : "The girl Angela remember that they come into to the clinic terribly frightened."

A patient : "Yes."

The Psychiatrist : “Crouching behind auditorally hallucinates. It is quite terrifying and we, you, and I took her into the hospital that evening remember her within about 24 hours. She’d settle down and it was quite.”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. This conversation took place while the male patient was driving with the psychiatrist. In this context, the psychiatrist said that family factors make a patient come to the hospital. The psychiatrist also said that Angela came to the clinic frightened. After that, the patient answered briefly, “yes.” After that, the psychiatrist elaborated on the second statement that Angela was terrified when this family took her to the hospital that night, and Angela would remember in about 24 hours. However, the patient did not answer even though the psychiatrist had encouraged him to be more interactive. Therefore, it is included in the **poverty of speech** symptom. It was characterized by the patient's minimal speech with a monosyllabic “yes” answer to the psychiatrist's statement. It showed no supporting sentence, so he did not provide additional information to the psychiatrist about why Angela came to the clinic frightened.

Datum 40

The Psychiatrist : “Have you had employees about whom there have been complaints, such as these whom you were forced to keep?”

A patient : “**Yes.**”

The Psychiatrist : “Minnie?”

A patient : “**Yes.**”

The data were taken from one patient's utterances in Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode. The conversation between two patients and the psychiatrist in front of a schizophrenic room in a hospital. The psychiatrist asked two patients if they had any employees they complained about or were forced to keep. Then, one of the female patients replied, "yes." The psychiatrist also asked Minnie, and she said, "yes." Therefore, it is classified as a **poverty of speech** symptom. It indicated that the patient's answer was very brief. It showed that the patient replied to questions using monosyllabic "yes." In addition, the patient had a lack of explanation of the idea in their answer. They could not give more opinions about the employees they complained about and were forced to keep them because of decreased fluency of speech. However, the psychiatrist needs more information, like a patient mentioning the number of employees who were forced to be retained, the reasons for keeping the employee, the name of the employee who was forced to be retained, etc. It aims to give a clear and detailed answer to the psychiatrist.

Datum 52

The Psychiatrist : "Do you think you will ever be able to live in a place like this and run out?"

A patient : **"No." (mumbling)**

The Psychiatrist : "Are you gonna give up?"

A patient : **(once, silence for several minutes).**

The data were taken from one of the patient's utterances in part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary episode. Here is a conversation between the psychiatrist and a female patient in the living room. Her name is Elaine. She lived in a privately owned hotel built to house former schizophrenic patients. She also got facilities such as food, room, and medicine. However, she wanted to return to the hospital and could not stay in that hotel. The psychiatrist asked Elaine if she could stay at the hotel for the first question. She answered, "*no*." Then, the psychiatrist asked again in the second question if she would give up, but Elaine did not answer the psychiatrist. In this context, the psychiatrist has encouraged the patient by elaborating on the second question to provide an adequate answer, even though the patient has not responded. As a result, there was no supporting sentence because she did not provide other information about why the patient could not be able at that place. Therefore, the utterance above was classified as **poverty of speech**.

b. Weakening of Goal

Datum 10

A patient : **"You know lab2, you know the way you, you see them they are speaking to you (long pause), you know you be wrong if I speak too long or my tight but what I say differently."**

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It took place in one of the living rooms in the hospital. In this context, the patient explained to the psychiatrist that he had experienced different things in which the feelings do not

appropriate for the situation. The patient also stated his utterance with long pauses. Moreover, the patient could not clearly explain the purpose of "*lab 2*", so he only gave a little information to the psychiatrist. Therefore, the patient could not achieve the purpose of his speech. It is due to the lack of encouragement in thinking. Consequently, the patient could not reach his speech because his speech was not informative. Thus, it included the **weakening of the goal**.

Datum 20

The Psychiatrist : "Tell us what that feels very being cut?"

Chris : "**Well, (silent for several times) Uhm ... Ahm... you cannot concentrate you know and (long pause) Uhm.** I find towing tell people and being kind you know it is a great effort no."

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It took place in one of the living rooms in the hospital. Here, the patient explained and expressed what was in his mind even though the sentences were unclear. The patient produced a speech with long pauses, "*Well, (silent for several times) Uhm ... Ahm ... you cannot concentrate, you know and (long pause) Uhm.*" In addition, the patient's utterances are dominated by the words *Uhm*, and *Ahm*, which these words do not have an identifiable purpose. In addition, the patient's utterances showed that he could not achieve the purpose of the goal in his speech. Therefore, this included the **weakening of the goal**.

Datum 44

Harvey : “Very, very [__] yeah.”

The data were taken from one of the patient's utterances in part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary episode. Harvey said this utterance in the opening of the video. It took place in one of the rooms in the hospital. He has been in and out of hospitals for almost ten years. He said an empty speech, *"Very, very [__]."* This utterance tends to be empty because Harvey had difficulty explaining ideas and making informative statements. Besides, the patient showed that his response to just a few words and unclear. Here, Harvey could not reach the purpose of his speech. He also could not explain and convey the information to the psychiatrist. Thus, the utterance above was classified as **weakening the goal**.

c. Looseness**Datum 8**

The Psychiatrist : “Is a good happy man?”

A patient : **“We are I hope he is long as I keep you down but control nobody gets the better of me control me and we will ride.”**

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It took place in one of the rooms in the hospital. The conversation began with the psychiatrist asking about a good happy man. However, the patient answered with an unrelated answer, *"We hope, the patient makes it down, and there is no control, the patient explains that he is in control of himself, and then we will ride."* The utterance

above was classified as a **looseness**, especially a derailment types. It showed that the patient did not give a relevant answer. It can be seen from the question about a good happy man, but the patient's response was not appropriate. Thus, this statement showed a sentence that was not cohesive and the answer slips that are not following the previous question. In this context, the patient should have to explain about a good happy man instead of the answer.

Datum 17

The Psychiatrist : “What were you afraid of?”

A patient : “**Last quantities too painful.**”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. The conversation took place in one of the rooms in the hospital with several patients. They took turns communicating with one of the psychiatrists, who asked the patient. First, the psychiatrist asked one of the female patients why she was afraid to work. Then, the patient replied that “*Last quantities too painful.*” The utterance above was classified as a **looseness**, especially tangentiality types. The patient's poor listening habits influenced this symptom. As a result, it leads to misunderstandings. Besides, the patient's answer showed the looseness, whereas the answer followed the general topic of fear of work. However, that answer did not appropriate to the specific question and tended to be spontaneous. Therefore, the patient showed that she could not make the correct statement and lost cohesion between ideas. In this case, the patient must answer what reasons are afraid to go to work.

Datum 28

The Psychiatrist: “How do you feel coming back bad?”

A patient : **“Baby pig.”**

The data were taken from one patient's utterances in Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode. It occurred in one room in the hospital. The conversation began with the psychiatrist asking the patient about his bad feelings about returning to the hospital. Then, the patient answered the other idea, *"Baby pig."* This answer identified that the patient had combined things between reality and unreality. In this context, the patient had delusion and hallucination symptoms. Thus, the patient slipped into another idea. However, he did not give a relevant answer to the question. In this case, the patient should explain the feeling that he returned to the hospital in bad condition. Therefore, it is indicated **looseness**, especially in the derailment types.

Datum 51

A patient : “Well people I mean I was frightened of going to work with a lot of people and seeing them. They mixing.”

The Psychiatrist: “Are you get about half truth?”

A patient : **“You got about 15 years.”**

The data were taken from one patient's utterances in Part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary. It happened on the bus as they were going to the hotel. The psychiatrist asked about the half-truth he got. Then, the patient answered with the time needed to get the truth, *"You got*

about 15 years." Thus, it included **looseness**, especially in the tangentiality types. The patient responded according to general topics, but the patient's response was not appropriate to a specific question. It was shown by the psychiatrist's question about whether the patient got half the truth, but the patient answered that the psychiatrist had 15 years for it. Therefore, it showed that the answer was irrelevant to the question, so he slipped into another idea. It made the psychiatrist confused to understand what was meant by the patient's utterance.

d. Peculiar Word

Datum 37

The Psychiatrist: "Do you ever get to the I come here do you ever get?"

A patient : "Yes very **yosik** daddy your f---ing."

The data were taken from one patient's utterances in Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode. The psychiatrist and a male patient walked into a room in the hospital. The conversation started when the psychiatrist asked the patient about coming to see him and what he got. Then, a patient said the word "*yosik*" in his answer resulting from his imagination. It is due to the symptoms of hallucinations and delusions that he experienced. Therefore, it included **peculiar use of the word**. It showed that the patient created an unusual word not found in the dictionary. This word was also included in neologism, a new and incomprehensible word the patient produces.

Datum 54

The Psychiatrist: “Ever since you were a small girl?”

A patient : “Necessary from **pokum** to say seven years.”

The data were taken from one of the patient's utterances in part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary episode. It took place in the hotel's living room (a privately owned hotel built to house former mental patients.) In this context, the psychiatrist and a female patient discussed her since she was a small girl in the hospital. Then, a patient created the word "*pokum*" in her answer. Therefore, the utterance above included the peculiar use of the word. The word "*pokum*," was not found in the dictionary. Therefore, this word was included in neologism because it was a new word that could not be understood.

6. Peculiar Sentence

Datum 16

The Psychiatrist: “When they remember how when Diane lets came to the clinic she would hardly say a thing and every time, she opened her mouth mother or came to the clinic. She would hardly say a thing every time she opened her mouth mother or father would say – and don’t interrupt as if to imply what she had to say which was not important.”

A patient : “**There was no we were protected by the view** from especially as partner with them walk.”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It took place in a car while

the patient was driving. The psychiatrist and a patient went to one of the hotels exclusively for former schizophrenic patients. The conversation started when the psychiatrist told the patient about how Diane was when he first came to the clinic. Then, a patient answered, *"There was no we were protected by the view."* It was classified as a **peculiar sentence** because the patient constructed an unusual form of pattern in the sentence structure. As a result, the patient made a chain of semantic associations in his utterance. Therefore, the patient's utterance was difficult to understand.

Datum 19

The Psychiatrist: "How do you feel inside you sir?"

Chris : "Well, (long pause), **I feel just a little bit cut off you know from speaking to people in hand you.**"

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred in the living room at the hospital. The conversation between the psychiatrist and the patient. The psychiatrist asked about his feelings. Then, the patient replied, *"Well, (long pause), I feel just a little bit cut off you know from speaking to people in hand you."* The patient's utterances indicated **peculiar sentences**. The patient constructed an unusual sentence, which affected its meaning. In addition, the utterance that was conveyed was difficult to understand.

Datum 33

The Psychiatrist : "When you say that come institutionalized what do you mean?"

A patient : **“Become very dependent in the hospital depends on opening doors on making your bid.”**

The data were taken from one patient’s utterances in Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode. It occurred in front of one of the rooms in the hospital. The conversation started when the psychiatrist asked one of the female patients about her intention to come to be institutionalized at the hospital. Then, the patient responded by being encouraged to rely on the hospital, like opening the door to make an offer to the psychiatrist. Therefore, it was classified as a **peculiar sentence**. It is shown that the patient constructed unusual sentence structures, *“Become very dependent in the hospital depends on opening doors on making your bid.”* It was difficult to understand the meaning. Normal people will not be dependent on the door opening in the hospital. This utterance also showed that her speech had semantic anomalies.

e. Peculiar Logic

Datum 1

Case: The patient assumes others realized he was Yoga garland sitting in the chair.

The patient: “They suddenly read **the people in there suddenly realized that I was Yoga garland sitting in the chair** come back from the dead is something you know being able to control people who know what they are saying and everything you know.”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred when the patient told the psychiatrist at the video's opening. The psychiatrist did not ask a question to the patient. However, the patient talked about people realizing that he was a Yoga garland sitting in the chair. The utterance above was classified as **peculiar logic** because the sentence was faulty logic. It is characterized by the patient's speech that people there realized that the patient was Yoga garland sitting in the chair. It means that he has died, but he was still alive and going through the treatment process at the hospital. Thus, it can be concluded that the patient produced unusual ideas due to delusion symptoms.

Datum 2

Case: A patient who believed that all clients were created from the disease of flour.

The patient: "Yeah, I believe yes, and **all the clients were created by disease of flour you see.**"

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred when the patient told the psychiatrist at the video's opening. In this context, the psychiatrist did not ask the patient questions. However, the patient talked about his belief that "*all the clients were created by disease of flour.*" Thus, it was classified as **peculiar logic**. It indicated that the client created the disease of flour. This utterance could not be proven and illogically. It can be concluded that peculiar logic showed when speech had the wrong perspective. The patient did not make

sense because of the instability of the sufferer's mind about all clients created from flour disease. In fact, no human being was created from the disease of flour.

Datum 39

Case: The patient stated that he was a patient in cream.

A patient : “How are they gonna know I'm how how is if I look at it this way how is the people on the outs are gonna know if I'm that **I'm a patient in cream** and then tie a fat ID your left I start acting crazy. I have perfectly normal on the outside.”

The data were taken from one patient's utterances in Any Place But Here Psychiatric Hospital Schizophrenia Documentary Part 1 episode. It occurred in front of the patient room in the hospital. The conversation began with the psychiatrist asking about things that make it difficult. Then, the patient stated, “*I'm a patient in cream.*” This utterance indicated an illogical sentence because he stated that he was a patient in cream, which was a wrong interpretation. In fact, the patient was under treatment for which he was not a cream. Therefore, the sentence was faulty logic because the patient was included in the category of living things, not inanimate objects like cream. Therefore, the utterance above included **peculiar logic**.

Datum 47

Case: A patient stated that she and the staff run the house here.

A patient: “**We run the house here** with it along with the staff.”

The data were taken from one of the patient's utterances in part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary episode. The conversation took place in the hotel when there was a dance. Then, one female patient said she and the staff ran the house. Thus, it included **non-logical reasoning or peculiar logic** symptoms. The patient stated that she and the staff run the house. In fact, the house could not be run. Therefore, it showed that the patient gave an incorrect logical statement.

f. Perseveration of Ideas

Datum 5

The patient: "I will tell you why **I was worried, I was worried** that I was the center of all lies."

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred in the patient's room. The male patient stated to the psychiatrist that the center of his lies was his concern as a schizophrenic patient. It is because the schizophrenic patient experienced delusion and imagined something else. In addition, he also experienced auditory hallucinations where he heard something that there was no auditory stimulus. Thus, a patient repeated the idea, "*I was worried*," two times. The utterance above included **perseveration of the ideas**. It was characterized by the repeated use of certain ideas in the speech of schizophrenic patients. It will be very different from normal people who will not repeat that idea.

Datum 13

The patient: “**We, we, we, we** think our results are highly suggestive of it being, and these sort of compounds, and in fact, and we're almost certain that these compounds are aiming.”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred in the patient room at the hospital. The conversation began with the psychiatrist asking the patient about the underlying substance of paranoia, similar to mescaline and adrenaline stuff. Then, the patient replied that the results were suggestive, and the patient explained that this kind of compound had a purpose. A patient repeated the subject “*we*” continuously in the utterance. Therefore, it included the **perseveration of ideas** because the patient repeated a subject four times. Thus, the patient experienced repeated unnatural words in the process of speaking that was unnecessary and meaningless.

Datum 23

The patient: “Put you **in a hospital** may feel a little bit different now that you're **in a hospital**, and situation changes then.”

The data were taken from one of the patient's utterances in A True Madness Schizophrenia Documentary Real Patients episode. It occurred in the living room of the hospital. Here, there are some schizophrenic patients for whom the psychiatrist asked them questions. In this section, the female patient explained that being put in the hospital would change the situation slightly. A patient repeated a certain phrase in his speech, a prepositional phrase, “*in a*

hospital," two times. This phrase was included in the unnatural word, not as a filler in the gap in the explanation. Thus, the utterance above included the **perseveration of ideas**.

Datum 50

The Psychiatrist: "Where do you live?"

A patient : "**I live, I live, I live** in Britain."

The data were taken from one of the patient's utterances in part 2, Any Place But Here Psychiatric Hospital Schizophrenia Documentary episode. It took place on the train. Three people were: the psychiatrist, Elaine, and one female patient. The conversation started when the psychiatrist asked the female patient where she lived. Then, the patient replied that she lived in Britain. The patient repeated the idea of "*I live*" three times in her speech. This word was included in the unwarranted word, not as a filler in the explanation. Therefore, the utterance above was classified as a **perseveration of ideas**.

2.

a. The patient gave a brief answer or did not answer the question

Datum 14

The psychiatrist : "The girl Angela remember that they come into to the clinic terribly frightened."

A patient : "**Yes.**"

The Psychiatrist : “Crouching behind auditorally hallucinates. It’s quite terrifying and we, you, and I took her into the hospital that evening remember her within about 24 hours. She’d settle down and it was quite.”

In this case, a patient had a very brief answer, “yes,” to convey to the psychiatrist. He did not give more opinions about why Angela was so frightened when she came to the clinic. Moreover, the psychiatrist encouraged the patient to be more interactive in the second statement, but the patient did not respond. In this context, the psychiatrist has maintained the conversation by giving a second statement to make the patient more interactive, even if it fails. In this context, the patient pointed out that he was cut off from the conversation and not giving enough answers. It showed that the patient's answer did not provide clear information. Therefore, it can be concluded that the utterance indicated that poverty of speech affected the patient in hindered conveying information.

Datum 40

The Psychiatrist : “Have you had employees about whom there have been complaints, such as these whom you were forced to keep?”

A patient : “**Yes.**”

The Psychiatrist : “Minnie?”

A patient : “**Yes.**”

A patient gave a short answer. It can be seen in the patient's answer using a monosyllabic “yes.” It showed that they less to elaborate on their answers. It is due to the effect of decreased brain function that affects the patient's social interaction. Two patients did not give more opinions about employees who have

been complained about or who have been forced to maintain. In addition, the patient showed he was stuck with their answer, "yes," and ended the conversation with the psychiatrist. As a result, she did not convey detailed information to the psychiatrist. Therefore, it indicated that the patient was hindered in conveying information in the poverty of speech.

Datum 52

The Psychiatrist: "Do you think you will ever be able to live in a place like this and run out?"

A patient : "No."

The Psychiatrist: "Are you gonna give up?"

A patient : (No answer).

In this case, a patient gave a brief answer to the psychiatrist. She answered the psychiatrist with only one word, "no." It indicated that he did not provide more opinions about why she could not stay in that place. Moreover, in the second question, she did not answer the psychiatrist. Although, the psychiatrist elaborated on the second question to maintain the conversation. It showed that the patient had difficulty conveying information due to weakening thoughts. Furthermore, it affected the information that failed to convey because the patient experienced a decrease in his speech. Besides that, the patient showed that he cut off the conversation with the psychiatrist and was not responding to the second question. Therefore, it can be concluded that the poverty of speech symptom hindered the patient in conveying the information.

b. The patient could not achieve his or her goal of delivering the information

Datum 10

A patient : **“You know lab 2, you know the way you, you see them they're speaking to you (long pause), you know you be wrong if I speak too long or my tight but what I say differently.”**

The patient's utterances tend to be unclear. It indicated that the patient's speech was uninformative, with long pauses. Consequently, the patient was unable to achieve the purpose of his speech. He also could not explain “*lab 2*” clearly. As a result, the patient lacked motivation for thinking and manifestation. He only conveyed little information to the psychiatrist. In this case, the psychiatrist had difficulty understanding the meaning and purpose of the patient's utterance. Thus, the researcher identified that the patient failed to convey information in weakening the goal type.

Datum 20

The Psychiatrist: “Tell us what that feels very being cut?”

Chris : **“Well, (silent for several times) Uhm ... Ahm... you can't concentrate you know and (long pause) Uhm. I find towing tell people and being kind you know it's a great effort no.”**

The patient had empty sentences with long pauses in his utterance. The patient said certain words, *Uhm*, and *Ahm*, which these words could not identify the purpose. It showed that the patient had difficulty achieving his goals in his speech. As a result, he only gave a little information about his inability to concentrate and found a towel. In addition, the patient did not provide enough

information. It made the psychiatrist find it difficult to understand the meaning and purpose. Therefore, the researcher identified that the patient failed to convey information in weakening the goal.

Datum 44

A patient: **“Very, very [____] yeah.”**

The patient had an empty sentence in the utterance above, so the psychiatrist did not understand the meaning and purpose. On the other hand, the patient did not give a complete sentence, only *“Very, very [____] yeah.”* As a result, the patient failed to convey detailed information to the psychiatrist. Therefore, the researcher identified that the patient failed to convey information in weakening the goal symptom.

c. The patient lost the ideas or thoughts and replaced other ideas

Datum 8

The psychiatrist : “Is a good happy man?”

A patient : **“We are I hope he’s long as I keep you down but control nobody gets the better of me control me and we’ll ride”**

In this case, the patient had looseness symptoms, especially in the derailment. It is shown that the patient had an irrelevant answer. The patient's answer was inappropriate to the psychiatrist's question because of the wrong perspective, which makes a different meaning. In this conversation, the psychiatrist asked if a good man is happy. However, the patient misinterpreted the response. As a result, the patient failed to convey the correct information to

the psychiatrist. Therefore, the researcher identified that the patient was hindered in conveying information due to the looseness.

Datum 17

A patient : “Well people I mean I was frightened of going to work with a lot of people and seeing them. They mixing.”

The Psychiatrist : “What were you afraid of?”

A patient : **“Last quantities too painful.”**

Datum 28

The Psychiatrist: “How do you feel coming back bad?”

A patient : **“Baby pig.”**

In this case, the patient experienced looseness, especially derailment types. He answered with an irrelevant answer. Besides, the patient's response was inappropriate to the psychiatrist's question because of the wrong perspective, which made a different meaning. In this conversation, the psychiatrist needed the patient's answer about what he was afraid of, but the patient answered with a sentence that did not appropriate his answer, “*Baby pig.*” In this case, the psychiatrist will interpret this answer in the context of the animal, not in the context of treatment. As a result, the psychiatrist could not understand the purpose of his utterance. Consequently, patient failed to convey the correct information to the psychiatrist. Therefore, the researcher identified that the patient was hindered in conveying information due to the looseness symptom.

Datum 51

The psychiatrist : “Are you get about half truth?”

A patient : “**You got about 15 years.**”

In this case, the patient answered with irrelevant and related answers on general topics, but he drew different conclusions. Besides, the patient's response was inappropriate to the psychiatrist's question because of the wrong perspective, which made a different meaning. In this conversation, the psychiatrist asked about a truth that the patient had obtained. However, the patient slipped his ideas. He stated, *"You got about 15 years."* It showed that the patient's answer was not coherent with the previous question. As a result, the patient failed to convey the correct information because the psychiatrist could not understand the purpose of his utterance. Therefore, the researcher identified that the patient was hindered in conveying information due to the looseness type.

d. The patient created a new word that is not found in the dictionary

Datum 37

The Psychiatrist: “Do you ever get to the I come here do you ever get?”

A patient : “Yes very **yosik** daddy your f---ing.”

The patient had created a new word in his utterance. The word *"yosik"* was not found in the dictionary. In this case, the patient himself can only understand the word that has been created. Meanwhile, other people who hear this word will be confused and find it difficult to understand. As a result, this word caused misunderstanding when the patient said it to others and failed to convey the

correct information. Thus, the researcher identified that the patient was hindered in conveying information due to the peculiar word symptom.

Datum 54

The Psychiatrist: "Ever since you were a small girl?"

A patient : "Necessary from **pokum** to say seven year."

In this case, the patient had created a new word in his utterance. The word "*pokum*" was not found in the dictionary. People who hear this word will be confused and difficult to understand. Furthermore, this word caused misunderstanding. Therefore, the patient failed to convey the correct information. Thus, the researcher identified that the patient was hindered in conveying information due to the peculiar word symptom.

e. The patient constructed an unusual pattern form of sentence

Datum 16

A patient: "**There was no we're protected by the view** from especially as partner with them walk."

In this case, the patient constructed unusual patterns in the sentence, influencing the meaning. The meaning of the patient's speech indicated that no one was protected by the view, especially a partner walking. As a result, the psychiatrist had difficulty understanding the meaning of the patient's speech because the patient produced an unusual sentence structure. Therefore, the patient failed to convey information well due to the peculiar sentence type.

Datum 19

The psychiatrist: “How do you feel inside you, sir?”

Chris : “Well, (long pause), **I feel just a little bit cut off you know from speaking to people in hand you.**”

In this case, the patient produced unusual patterns in the sentence, so it influenced the meaning. The patient produced unusual sentences, *"I feel just a little bit cut off you know from speaking to people in hand you."* It affected his utterance's meaning. It means that the patient did not give adequate information to the psychiatrist. So, the psychiatrist had difficulty identifying the meaning of the utterances. As a result, the patient failed to convey the information. Therefore, the peculiar sentence made the patient hindered in conveying information.

Datum 33

The psychiatrist : “When you say that come institutionalized what do you mean?”

A patient : **“Become very dependent in the hospital depends on opening doors on making your bid.”**

In this case, the patient constructed unusual patterns in the sentence influencing the meaning. The patient produced unusual sentences, *“Become very dependent in the hospital depends on opening doors and making your bid.”* The meaning of this utterance was difficult to understand. As a result, it affected the information that failed to convey well. Thus, the peculiar sentence made the patient hindered in conveying information.

f. The patient produced an illogical statement

Datum 1

The patient: “They suddenly read **the people in there suddenly realized that I was Yoga garland sitting in the chair** come back from the dead is something you know being able to control people who know what they're saying and everything you know.”

In this case, the patient experienced misinterpretation. He also had an illogical sentence in which he stated that other people realized he was Yoga garland sitting in the chair. His imagination caused it. Hence, the psychiatrist will be confused because the patient's utterance is impossible in reality. In fact, the patient is still alive and undergoing treatment at the hospital. It showed that he stated that the patient's statement was not based on evidence. As a result, the patient failed to convey information correctly. Therefore, it can be concluded that a patient was hindered in conveying information due to the peculiar logic type.

Datum 2

The patient: “Yeah, I believe yes, and **all the clients were created by disease of flour you see.**”

In this case, the patient thought all the clients were created by the disease of flour. In fact, no human being was created from flour in the real world. The patient experienced symptoms of visual hallucinations. Therefore, he assumed that the psychiatrist could see what he saw. As a result, he produced illogical sentences because the patient experienced misinterpretation due to the peculiar

logic. Therefore, the patient failed to convey information well to the psychiatrist.

Datum 39

A patient : “How are they gonna know I'm how how is if I look at it this way how is the people on the outs are gonna know if I'm that **I'm a patient in cream** and then tie a fat ID your left I start acting crazy. I have perfectly normal on the outside.”

In this case, the patient was hindered in conveying information because the patient experienced misinterpretation and wrong perspective about a patient in cream. In fact, no human being was created from cream because they were living things, not inanimate objects that humans can make. Besides, the patient produced illogical thinking because of the effect of hallucinatory experienced. As a result, the psychiatrist was confused about what the patient meant. Therefore, he failed to convey information well because of his wrong perspective. Thus, it can be concluded that peculiar logic symptoms hindered conveying information.

Datum 47

The patient: “**We run the house here with it along with the staff**”

In this case, the patient was hindered in conveying information because the patient experienced misinterpretation and wrong perspective about the patient running the house. In fact, the house could not run. In addition, the house was a nomadic building or could not be moved easily. Besides, the patient produced illogical thinking because of the effect of hallucinatory experienced. Therefore,

the psychiatrist was confused about what the patient meant. As a result, he failed to convey information well because of his wrong perspective. Thus, it can be concluded that peculiar logic symptoms hindered conveying information.

g. The patient repeated certain words, phrases and ideas in his or her utterance

Datum 5

The patient: "I'll tell you why **I was worried, I was worried** that I was the center of all lies."

The patient repeated the idea, "*I was worried*," which confused other people. It affected other people who also could not understand the purpose of the repetition of words by the patient. As a result, the information was not conveyed well. Thus, it can be concluded that perseveration of idea symptoms hindered conveying information.

Datum 13

The patient: "**We, we, we, we** think our results are highly suggestive of it being, and these sort of compounds, and in fact, and we're almost certain that these compounds are aiming."

Datum 23

A patient: "Put you **in a hospital** may feel a little bit different now that you're **in a hospital**, and situation changes then."

The patient repeated the prepositional phrase "*in a hospital*," which confused other people. In addition, other people also could not understand the purpose of the repetition of words by the patient. As a result, the information

was not conveyed well. Therefore, it can be concluded that the patient was hindered in conveying information in the perseveration of ideas.

Datum 50

The psychiatrist: “Where do you live?”

A patient : “**I live, I live, I live** in Britain.”

The patient repeated a certain idea like “*I live.*” It made other people confused. In addition, other people also could not understand the purpose of the repetition of words by the patient. As a result, the information is not conveyed well. Therefore, it can be concluded that the patient was hindered in conveying information in the perseveration of ideas.

B. Discussions

The researcher reviews the findings that been found in the previous chapter. After that, the researcher discusses the two research questions more deeply in this discussion section. First, the researcher answers about types of speech abnormalities produced by schizophrenic patients on the Recap Radio YouTube Channel. Second, the researcher also answers the research question about how schizophrenic patients hinder conveying information.

1. Types of speech abnormalities of Schizophrenics patient’s utterances

In this study, schizophrenic patients experienced speech abnormality due to distorted thought processes, delusion and hallucination, perceptual disturbances, and abnormal effects integrated with real situations. Types of speech abnormalities will be analyzed using the theory from Liddle et al. (2002). Based on the findings,

the researcher has found unique words or sentences produced by schizophrenic patients on the Recap Radio YouTube channel. According to Kraepelin (2009), schizophrenia is divided into paranoid schizophrenia, hebephrenic schizophrenia, catatonic schizophrenia, simplex schizophrenia, and residual schizophrenia. The kinds of schizophrenia will affect the type of speech abnormality produced by the patient.

The primary type of speech abnormality experienced by patients was peculiar logic. Peculiar logic is caused by hallucinations and delusion. Hence, schizophrenic patients have difficulty distinguishing between the real world and the imagination. As a result, they produced illogical sentences or ideas that were not based on evidence. This follows the previous study written by Pridmore (2013). He explained that illogicality occurs when people with schizophrenia make wrong conclusions. In this study, there is one factor that affects patients more dominantly produced peculiar logic. The factor is that the patients are classified as having paranoid schizophrenia on the Recap Radio YouTube channel. Paranoid schizophrenia refers to the patient's belief in something unreal (Kraepelin, 2013). Therefore, the patient had stated utterances with faulty logic. Moreover, the researcher also found that the schizophrenic patient classified several types of speech abnormalities in one utterance. It can be found in datum [33], *"Become very dependent in the hospital depending on opening doors on making your bid."* In this context, the patient produced faulty logical sentences because depending on opening doors in the hospital was included in illogical sentences. This utterance could not be proven with evidence. In fact, the patient will depend on the therapy

and medicine given for the treatment, not depend on the door. However, the researcher also identified two other speech abnormalities in this utterance. First, the researcher identified it as *looseness*. It is caused by the patient slipping into another idea. Therefore, the patient replaced other or new ideas that will be delivered suddenly. Second, the researcher also identified *peculiar sentences*. It is shown by the patient constructing an unusual sentence.

The second dominant type of speech abnormality was found in the perseveration of idea types. People with schizophrenia have repeated certain words, ideas, and phrases in the perseveration of ideas. They repeat in the form of words to add weight that occurs regardless of the stimulus. In addition, they can pronounce it correctly, but the repeated word has no meaning. The patient experienced repressed delusions that made the sufferer lose self-control (Liddle et al., 2002). In this study, the patient always repeated his words many times to reassure others when he was having delusions. On the other hand, the researcher found that one of the utterances of perseveration ideas was indicated as another type of speech abnormality. It can be found in the datum [44], "Very, very [___] yeah." Another symptom was the *weakening of the goal*. The patient produced incomplete sentences, so he only gave a little information. Therefore, the patient cannot achieve his goal in his speech.

The third type of speech abnormality experienced by patients was a weakening of goal. The impoverishment of thought and speech of people with schizophrenia affects their thoughts and language in weakening goal symptoms. They lack encouragement to elaborate on the words and produce informative

sentences in their speech. This follows the theory described by Liddle et al. (2002), people with schizophrenia have difficulty processing words to be informative. Furthermore, the researcher found a weakening of goal symptoms when the patient told what happened during the treatment. It can be found in the datum [20], “*Well, (silent for several times) Uhm Ahm you cannot concentrate you know and (long pause) uhm. I find towing tell people and being kind you know it is great effort, no.*” The weakening of the goal indicated that the patient said certain words, *Uhm* and *Ahm*, with no identifiable purpose and long pauses. In addition, the patient could not achieve the goal because of the lack of elaboration on the words in his speech. Moreover, the researcher also classified other speech abnormality types. First, the researcher identified *a peculiar sentence*. It was shown that the patient constructed an unusual sentence that affected the semantic anomalies. Second, the researcher identified *a peculiar logic*. The patient's sentence, “*I find towing tell people,*” is included as an illogical sentence because it could not be proven with evidence.

The fourth type of speech abnormality experienced by patients was the poverty of speech. The phenomenon of short answers in one syllable or not answering questions occurs in poverty of speech. People with schizophrenia had decreased amount of speech or utterances. The poverty of speech is the same as the weakening of goal, both of which lack in explaining and communicating the idea. However, both have differences, in poverty of speech deals with a reduced answer, but a weakening of goal tends to be poor in content. Thus, poverty of speech is more striking in terms of incomplete sentences in irregularities in communication. The

patient in the first video selected in the YouTube channel's Radio Recap is a chronic patient. It is classified under the residual type of schizophrenia. Residual schizophrenia is a type of chronic schizophrenia psychotic history (Kraepelin, 2009). People with schizophrenia experienced tend to be more passive, with decreased activity, and psychomotor slackness. Therefore, the patient had produced a short answer, namely poverty of speech. This is different from other types of speech abnormalities. The researcher did not find other types of speech abnormalities within the types of poverty of speech. It can be proven in the datum [14, 40, and 53].

The fifth type of speech abnormality experienced by patients was looseness. In this symptom, schizophrenic patients could not create correct statements due to losing their idea. They also cannot make cohesion between ideas because they do not follow previous topics or questions. As a result, schizophrenic patients produced irrelevant answers. It interferes with the communication between the speaker and listener. The impact is the occurrence of misunderstanding between them. In this study, patients with paranoid type schizophrenia experience looseness. Hallucination symptoms affect their mind to produce another idea that is unrelated to the question suddenly. The researcher also found another types of speech abnormalities in looseness as well as other types. It is shown in the datum [22], *"It was baiting a waiter to the dance and then it is just stopped."* The researcher identified this utterance in another type of speech abnormality, namely *peculiar logic*. The patient's utterance could not be proven with evidence. In fact, we cannot lure a waiter into dancing and just letting her go.

The sixth type of speech abnormality experienced by patients was a peculiar sentence. Schizophrenic patients constructed sentences tend to be more complex and strange. They produced unusual sentences with semantic anomalies, so people have difficulty understanding the meaning. This follows the previous study written by Agustina (2014). She explained that one of the characteristics of schizophrenics is unusual sentences, but sentences with grammatical inaccuracies caused by poor education cannot be judged as strange sentence. It can be found in *the datum* [16]. The patient said, "*Last quantities too painful.*" In this context, the patient constructed an unusual sentence that influenced its meaning. However, this utterance is also classified as a *looseness*. The patient's answer not following the previous statement given by the psychiatrist.

The seventh type of speech abnormality experienced by patients was a peculiar word. The patient had strange and new words or neologisms. These words are often not found in any dictionaries and do not have a specific meaning. Based on the finding, the researcher found schizophrenic patients created two peculiar words in this study. The researcher found in *datum* [37] "*yosik*" and in *datum* [54] "*pokum*." However, it is the same with the type of poverty of speech. The researcher found no other types of speech abnormalities in this symptom.

The researcher did not find any distractibility in this study. This is different from previous studies. Irfandina (2021) examined the types of speech abnormalities of Ray's character in the fractured film using the theory by Liddle et al. (2002). He found one type of distractibility produced by Ray. Ray, as a schizophrenia sufferer classified with hebephrenic schizophrenia. Disturbances of thought processes and

doubles personality are the main symptom of hebephrenic schizophrenia. Psychomotor disturbances such as mannerisms, neologisms, childish behavior, and many symptoms of delusions and hallucinations are experienced. Therefore, Ray, as the main character, experiences all types of speech abnormality, poverty of speech, weakening of goals, looseness, peculiar words, peculiar sentences, peculiar logic, perseveration of ideas, and distractibility.

2. The way schizophrenic patients hinder in conveying information

The second discussion is about how schizophrenic patients hinder in conveying information to the psychiatrist. It includes attempts to cure schizophrenia. Schizophrenic patients go to the hospital for processing treatments. It is different from normal people who can think well because there are no disturbances in their brains. Therefore, normal people can understand and convey information well. In contrast, schizophrenic patients have problems hindered in conveying information to others. In each symptom, there were specific characteristics that made schizophrenic patients hindered in conveying information. This is analyzed by the theory by Carter (2009) about language influenced by the brain.

The dominant type of speech abnormality that hinders patients in conveying information is peculiar logic. It can be shown in this study that this peculiar logic appears and is often experienced by patients on the Recap Radio YouTube channel. People with schizophrenia tend to the world of imagination. Thus, they have the wrong perspective in their speech. In addition, peculiar logic impacts the failure to convey information properly to others because of logical speech. It affected patients

hindered in conveying information because they had an illogical pattern of speech because of their hallucinations and delusions. In this case, the psychiatrist has provided treatment by giving them activities and speaking stimulatingly so that the patient can think logically, even gradually. The peculiar logic was found in the datum [25]. The patient was hindered in conveying information in *peculiar logic* marked the patient said, "*I would be bought.*" These sentences are included in illogical sentences because he will not be traded as a human. The patient experienced the wrong perspective, which affected the patient to produce an illogical statement in his speech. Therefore, the patient was difficulty conveying information correctly. However, this utterance indicated another symptom, namely *the weakening of goals*. The patient was hindered in conveying information because he talked too much, but he did not achieve the purpose of his speech. Hence, the information failed to convey in detail.

The second dominant type of speech abnormality that hinders patients in conveying information is perseveration of ideas. It was characterized by repeating ideas, words, phrases, and sentences in their speech. The repetition is caused by delusional symptoms. This makes the patient lose control, so they repeat the same words during conversation. Therefore, people with schizophrenia produce repetitive sentences that affects meaning when delivering information, so it often causes misunderstanding among other people during conversation. In this context, it made the patient fail to convey to the psychiatrist because the repetition was difficult to understand. It was shown in the datum [4]. The patient was hindered in conveying information in perseveration ideas because he repeated "*I'm*

conditioned" twice in his speech. Therefore, the psychiatrist could not understand the purpose of the repetition, so the information was not conveyed well. Nonetheless, this datum identified other symptoms, namely, *peculiar logic*. The patient was hindered in conveying information in peculiar logic because the patient said, "*I have to be buried.*" This sentence was illogical because the patient came to the hospital to get medicine, not to be buried. Thus, the patient failed to convey the information correctly.

The third type of speech abnormality that hinders patients in conveying information is weakening of the goal. It was characterized by patients' speech being unable to achieve the goal in their speech. The weakening of goals is characterized by informative sentences of schizophrenia patients. Thus, the weakening of goals implies that the sufferer cannot achieve goals in his speech. This follows the previous study written by Irfandina (2020). She explained that people with schizophrenia answered questions, but no information was conveyed to listeners in weakening goals. Besides, weakening of goal can be found in the datum [44]. The patient said, "*Very, very [___] yeah.*" It was classified as a symptom of *the weakening of goal*. It indicated that the patient produced an empty sentence. Therefore, the patient did not provide detailed information. As a result, the patient was hindered in conveying information. On the other hand, the researcher also analyzed this utterance in another symptom. It was classified as *the perseveration of ideas*. In this case, the patient was hindered in conveying information in perseveration of ideas by repeating the word "*very*" twice, making the listener not understand the purpose of the repetition.

The fourth type of speech abnormality that hinders patients in conveying information is the poverty of speech. It was indicated by the patient only answered with very brief answers. Schizophrenic patients did not provide additional information. In this case, they do not give adequate answers in their speech. Thus, they were hindered in conveying information because the information was not conveyed in detail and completely. It can be found in *the datum* [54]. The patient only answered with one syllable in the first and second questions, namely "yes" and "now." It showed that the patient had a very short answer. Thus, he could not convey the information in detail and completely.

The fifth type of speech abnormality that hinders patients in conveying information is looseness. This was classified into two, derailment and tangentiality. It occurs when patients lose their idea, the weak idea, and new idea interfering in their minds. The effect of looseness is schizophrenic patients do not provide relevant answers. Looseness can be found in the datum [22], "*It was baiting a waiter to the dance, and then it is just stopped.*" In this context, the patient experienced a loss of the idea and slipped into other ideas. Therefore, the answer was not relevant to the psychiatrist's question. It hindered the patient in conveying information because the information provided was inaccurate and difficult to understand. Apart from a looseness symptom, the researcher also found this utterance indicated *peculiar logic symptoms*. The patient's answer was an unlogical statement that could not be proven with evidence. Therefore, the patient failed to convey the information correctly because of the wrong perspective in his mind.

The sixth type of speech abnormality that hinders patients in conveying information is the peculiar sentence. The peculiar sentence make patients to construct unusual forms of sentences. The meaning of peculiar sentence also difficult to understand. It resulted in the psychiatrist being unable to understand the information conveyed, so the information failed to be conveyed. The patient said, *"Well, (long pause). I feel just a little bit cut off, you know from speaking to people in hand you."* The peculiar sentence was shown by the patient constructing unusual sentences. As a result, the patient failed to convey information to the psychiatrist. In addition, another symptom that indicated was *peculiar logic*. It was shown in the sentence, *"I feel just a little bit cut off you know from speaking to people in hand you."* It was an illogical statement that could not be proven. Thus, it showed that the patient was wrong in interpreting. Therefore, the patient was hindered in conveying information.

The seventh type of speech abnormality that hinders patients in conveying information is the peculiar word. Peculiar word is indicated by patients produced new words that were not in the dictionary. In addition, the previous study by Irfandina (2020) explained that a unique word is always arranged as a unique word, which is new. It contains a new word that the patient himself can only understand. Thus, the effect of the peculiar word will make it difficult for the speaker to understand it. It can be concluded that patients on the Recap Radio YouTube channel have difficulty conveying information in peculiar words. The peculiar word can be found in datum [37] *"yosik"* and in datum [56] *"pokum."* In this case, only

the patient can understand the new word that has been produced, but it is difficult for others to understand.

The researcher did not find any distractibility symptoms in this study. Distractibility was shown when people with schizophrenia stopped in the middle of a sentence and changed the topic to a nearby stimulus. In contrast, Hasanah (2020) discussed the speech abnormality of a schizophrenic character in a middle school movie. In this study, the researcher found that Rafe experienced all types of speech abnormalities based on the theory by Liddle et al. (2002). She found distractibility that hindered Rafe in conveying information. Therefore, this phenomenon affects meaning when delivering information, so it often causes misunderstanding among other people during conversation.

In many cases, people with schizophrenia have abnormal cortical and subcortical brain structures, which affect their language production. Thus, people with schizophrenia produce speech abnormality as a language disorder. It affected language processing in receptive and expressive being slower than in normal humans. In addition, people with schizophrenia have difficulty expressing what is to be conveyed, resulting in incorrect communication between sufferers and interlocutors (Indah, 2017). Consequently, schizophrenic patients have difficulty conveying information to others.

CHAPTER V

CONCLUSION AND SUGGESTION

In this chapter, the researcher presents a conclusion and a suggestion section based on the study. The conclusion is based analyzing of two research questions: the speech abnormalities produced by schizophrenic patients and how they are hindered in conveying information. Meanwhile, suggestion deals with discussing suggestions for future research to improve and conduct a similar study.

A. Conclusion

The researcher explained the research results of the analysis based on finding and discussion in the previous chapter. First, the researcher analyzed types of speech abnormalities using Liddle theory (2002) which was classified into eight symptoms: poverty of speech, weakening of goal, looseness, peculiar word, peculiar sentence, peculiar logic, perseveration of ideas, and distractibility. However, the researcher only found seven of the eight symptoms of speech abnormality in this study. The researcher did not find distractibility symptoms. Based on the finding, the highest symptom experienced by schizophrenic patients was peculiar logic. It occurred 22 times and had a percentage of 29%. Peculiar logic happened because of the symptoms of hallucinations and delusions experienced by patients, so they produced illogical sentences inconsistent with the actual evidence. The second high symptom experienced by schizophrenic patients was the perseveration of an idea. It occurred 21 times and had a percentage of 28%.

The third symptom was the weakening of the goal. It occurred 9 times and had a percentage of 12%. The fourth symptom was the poverty of speech. It indicated 7 times with a percentage of 11%. The fifth symptom was looseness. The researcher obtained 6 times with a percentage of 9%. The sixth symptom was peculiar sentences. It found 6 utterances with a percentage of 8%. The seventh symptom was the peculiar word. The researcher found 2 data with a percentage of 3%. Thus, it can be concluded that schizophrenic patients have difficulty remembering, thinking, and speaking due to abnormal brain conditions. Furthermore, it affected schizophrenic patients experiencing language disorders like speech abnormality, so the sentences produced were unusual.

In addition, the researcher also found that speech abnormality in schizophrenic patients hinders in conveying of information. They had a language disorder affecting them when communicating with others. Besides, they also had receptive and expressive problems, so they interfered with interpreting and conveying messages well. It affected the listener's ability to receive the information well because schizophrenic patients failed to process their speech correctly. Furthermore, the language we use and how the process of conveying information is controlled by the brain. In this case, schizophrenic patients on the Recap Radio YouTube channel had difficulty delivering information. They tend to be created illogical and repeated sentences that affect the meaning and purpose of their utterances. As a result, this causes misunderstanding and difficulty in understanding strange words or sentences in schizophrenic patients.

B. Suggestion

The researcher found that schizophrenic patients on the Recap Radio YouTube channel have abnormal language that is different from normal people. In this study, schizophrenic patients experienced seven types of speech disorders with eight symptoms. The most dominant symptom was a peculiar logic. This disorder is included in psychosis, in which the mind cannot accept reality. They had difficulty distinguishing between imagination and the real world in their thoughts. Thus, speech abnormality causes people with schizophrenia to hinder in conveying information.

The results of this study can provide several suggestions:

a. to the Student English Literature

The researcher suggests that students were majoring in linguistics to study psycholinguistics. This study is important to understand the process of processing and producing language in the human brain. So they can learn about language disorders, especially speech abnormality in schizophrenia disorder. This is useful for students majoring in linguistics to respond and interact with people with schizophrenia.

b. to readers

The researcher suggests that readers know about psycholinguistics, which can be used for knowledge about schizophrenia. Therefore, readers will know and accept the condition of people with schizophrenia because they know to understand people with schizophrenia or other mental illnesses.

c. to future researchers

The researcher suggests that future researchers study research related to mental illness, especially schizophrenia, in-depth and in detail using other theories and approaches. This study only discusses the types of speech abnormalities and how these disorders hinder information delivery. Thus, future researchers can explore schizophrenia in depth regarding other topics, which leads to different results from this study.

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CURRICULUM VITAE



Sukma Dwi Ramadhanti was born in Pasuruan on 18 December 1999. She graduated from SMAN 1 Tosari. During her study, she was active in the "Laskar Pencerah" organization and won 1st place for Youth Health Ambassadors in Pasuruan Regency. She has also won 1st place in the quiz contest on the "Health Theme" of Pasuruan Regency. She started her higher education in 2018 at the department of English Literature UIN Maulana Malik Ibrahim Malang and finished in 2022.

APPENDIX

1.Types of Speech Abnormality Produced by Schizophrenic Patients in Recap Radio YouTube Channel

No	Utterance	Context	The types of speech abnormality							
			POS	WOG	L	PW	PS	PL	POI	D
1.	The Psychiatrist: “The girl Angela remember that they came into to the clinic terribly frightened” A patient : “ Yes. ” The Psychiatrist: “Crouching behind auditorally hallucinates. It’s quite terryfying and we, you, and I took her into the hospital that evening remember her eithin about 24 hours. She’d settle down and it was quite.”	A patient to the psychiatrist	√							
2.	The Psychiatrist: “Okay, coming into hospital must have something to do with it, but I think it’s coming away from the family.” A patient : “ Yes. ” The Psychiatrist: “Allowing the person to be free to be them soon”	A patient to the psychiatrist	√							
3.	The Psychiatrist: “Don't if you ever experience feelings about your thoughts which was strange?” Chris : “ Yes. ”	A patient to the psychiatrist	√							
4.	The Psychiatrist : “So, yeah that discourages?” A patient : “ Yeah. ”	A patient to the psychiatrist	√							
5.	The Psychiatrist : “Have you had employees about whom there have been complaints, such as these whom you were forced to keep?” A patient : “ Yes. ” The Psychiatrist : “Minnie?” A patient : “ Yes. ”	A patient to the psychiatrist	√							
6.	The Psychiatrist : “How do you mean so how do they look good?” A patient : (No respond).	A patient to the psychiatrist	√							
7.	The Psychiatrist : “This seems like such a nicer place than the hospitals I've seen. Do you feel better taken care of there?” A patient : “ Yes. ” The Psychiatrist : “But don't you give up some freedom to go back?” A patient : “ Now. ”	A patient to the psychiatrist	√							

8.	The Psychiatrist : “Do you think you will ever be able to live in a place like this and run out?” A patient : “No” The Psychiatrist : “Are you gonna give up?” A patient : (No respond).	A patient to the psychiatrist	√							
9.	A patient : “ <i>I came to hospital just to be buried. I come full week. I thought we were doing this ,and I thought people were much different in came bird in the yard, and the island, but I found them to be something similar, and when I first went to hospital, I was in Kent house, and they shipped me to lime trees, and lime trees have shifted me in to Mitchell ward but it seems no not the three managers could get me buried.</i> ”	A patient to the psychiatrist		√				√		
10.	A patient : “You know lab2, you know the way you, you see them they're speaking to you (long pause), you know you be wrong if I speak too long or my tight but what I say differently.”	A patient to the psychiatrist		√						
11.	The Psychiatrist : “Tell us what that feels very being cut?” Chris : “Well, (silent for several times) uhm ... ahm... you can't concentrate you know and (long pause) uhm. <u>I find towing tell people and being kind you know it's a great effort no.</u> ”	A patient to the psychiatrist		√			√	√		
12.	A patient : “Well, here, ehm. it seemed that I was understood but they understood what was happening and they allowed me to go according to my own desires, but they helped me to understand it, and to grow through it why didn't the sort of deny it, and to push it away, <u>and when I came here I had had the idea myself that I wanted to go back to before I was born again then when I actually got here I was so frightened I forgot that but they helped me to remember it and then to be what I felt which was physically baby.</u> ”	A patient to the psychiatrist		√				√	√	
13.	A patient : “In fact, I've sort of undergone an operation mental, as it were, in the sense that you speak of a physical operation something that is a radical change, and I don't go according to the old sort of record or pattern that and got into which was one of deception because I didn't I'd very early in my life what I really felt and I'd always had to pretend because of this thing that I'd made him myself in response to what I'd been up against when I was first born and Joe seemed to unearth the real me, and though I felt very fragile at times about the house I	A patient to the psychiatrist		√						

	couldn't move if I felt other people were coming near me much money old Joe with people I found who didn't really understand and I would keep quite still then I felt I didn't want them to come in on me and I didn't feel able to speak much with them, but Joe used to explain while I was speaking through my painting and gradually I came more to have words not to feel that I was going away on my words because the process here was all the time and living process this suffering seemed in the sense to be positive because who seemed to be suffering in a growing way.”									
14.	A patient : “Well, in the beginning, I wanted to be naked just used to put a black counterpane around me, and I was able to do this my room, and to wait to the bed as I wanted and it relieved me often in my feeling to learn wet bed, and also it relieved me when I wanted to put my shirts over me, so I was able to do this, and sometimes I go to sleep like it was a relief, and then <u>I would be bought</u> and I would be fed, and marries I was very much to stock them and so I was fed to the bottle I start the bottle, and I got to gradually in her name still in bed, and I seem to almost be in a state of hibernation it's one time like if I was an animal going to sleep in the winter.”	A patient to the psychiatrist		√				√		
15.	A patient : “Why over here we have quiet room it's really close to club a caller quite we have two of them, ehm but is youthful is it. Uhm, if a patient gets violent. I'll say that they took his stare tries to talk in the car mom down and got them with the FASTA condemning needle and lock them up in here till they calm down. <u>Once the steer fields are calm down enough to come out and they open the door and they read him now but they act up again and I just go right back in.</u> ”	A patient to the psychiatrist		√				√		
16.	A patient : “Very, very [__] yeah.”	A patient to the psychiatrist		√					√	
17.	A patient : “You're not gonna use to do all of the outside. We G will start tools in the inside these things I had it tougher. ”	A patient to the psychiatrist		√						
18.	The Psychiatrist : “Is a good happy man?” A patient : “ We are I hope he's long as I keep you down but control nobody gets the better of me control me and we'll ride. ”	A patient to the psychiatrist			√					

29.	A patient : “They sit on the benches pitiful, they come over to for money, they go around looking in the garbage can, they gave them this place here to live and frankly speaking . If go by there and take a look.”	A patient to the psychiatrist					√			
30.	The patient: “ They suddenly read the people in there suddenly realized that I was Yoga garland sitting in the chair come back from the dead is something you know being able to control people who know what they're saying and everything you know.”	A patient to the psychiatrist						√		
31.	A patient : “Yeah, I believe yes, and all the clients were created by disease of flour you see .”	A patient to the psychiatrist						√		
32.	A patient : “ I'm conditioned, and I have to be buried . There's no other way for me to early unless. I get buried see because I am deliberated as I am, and I'm conditioned and were to together I cannot live outside you see.”	A patient to the psychiatrist						√	√	
33.	A patient : “I didn't quite I was all together in one place. I felt that I was almost dissolving, but I couldn't express this in words toward these feelings, but I felt never bad there as if as if I was absolutely stuck , and I seem to be this physically. I seem to get to Estate's own inability almost to move at a time.”	A patient to the psychiatrist						√	√	
34.	A patient : “Well, I did quote not when I don't, and the injection or filthy miserable you know but were very loud I'm you know. I saw something like you normally miss a lot bigger, and if you're not on the tracks, or on the injections you sort of take it drag it I am during the time .”	A patient to the psychiatrist						√		
35.	A patient : “A lot of them haven't really made any difference at all, right. The one I'm on that presence seems to made the most difference to me, a wall I felt better in the last fortnight since I've been having it than I have (long pause) we're listens I can remember.”	A patient to the psychiatrist						√		
36.	A patient : “Oh, wonderful of having a group. I was hoping you would have a go. This is a lovable daughter 7. Is it, is it the cooking boob. They make my breakfast is every morning a group starts about 10. I don't I will say 10:30 a quarter to 11 and then they wash their hand they make the food they could they eat it then they wash up and then they leave to grow. I need where they have the word burp right behind me. I knew the doll love the book, miss McCauley .”	A patient to the psychiatrist						√	√	

37.	A patient : "This is the greatest country that there ever was God created. This country he split the whole world up, and he said here up put in the United States. Here, I'm putting Canada and I need to sleep every once in while I need a siesta so I put Mexico South America take it away."	A patient to the psychiatrist						√		
38.	The Psychiatrist : "What are you doing?" A patient : "Anything I feel like I'm creating something I don't like I like to create I don't like to tear down. What we got, we got to do with, and we got what we got, we got to do with and we got to improvise, and we got a minute we gotta some day we got a knock bolus slums down and kill the rats in the rabbit. It wasn't for the rapids while some human beings alike Roberts auntie they like carrots but sometimes they cook the carrots and that takes all the vitamins out of them you know and admire him an old song he made the night of the bride er wherever he did go at all."	A patient to the psychiatrist						√	√	
39.	The Psychiatrist : "One of the things we hear is that when people I do leave a lot of people mistreat them you know my things make it hard on you?" A patient : "How are they gonna know I'm how how is if I look at it this way how is the people on the outs are gonna know if I'm that I'm a patient in cream and then tie a fat ID your left I start acting crazy. I have perfectly normal on the outside."	A patient to the psychiatrist						√	√	
40.	A patient : "I disagree the way my degree, and the years I've known Jeff you know what she'll did to Geoffrey. She rotted his teeth out. I invited his teaching Lyceum multitudes of candy bags and bags of candies. They come on Sundays with these big bags. They think they never eat they stuff, from stuff from stuff and she can tell you."	A patient to the psychiatrist						√	√	
41.	A patient : "I see number time Jeffrey Shapiro will walk in, and beer to my money don't beat him up real good Leslie for the show can you can you prove it. Oh Luke all you could do is take your son's word Jabba Shapiro goes in the beard through cuts pisses."	A patient to the psychiatrist						√	√	
42.	A patient : "We run the house here with it along with the staff."	A patient to the psychiatrist						√		
43.	A patient : "I'll tell you why I was worried, I was worried that I was the center of all lies,"	A patient to the psychiatrist							√	

	A patient : “Well, maybe, I’ll, I’ll talk to some of the girls. Then, I’ll wait supper smoke my cigarettes take a shower now. Then, wait for medication.”									
54.	A patient : “ Wanna sing, wanna sing mon.”	A patient to the psychiatrist							√	

2.Speech abnormality which schizophrenia patients hinder in conveying information

No	Utterances	Context	Speech Abnormality	Hinder Information
1.	The Psychiatrist: “The girl Angela remember that they came into to the clinic terribly frightened”. A patient : “ Yes. ” The Psychiatrist: “Crouching behind auditorally hallucinates. It’s quite terryfying and we, you, and I took her into the hospital that evening remember her eithin about 24 hours. She’d settle down and it was quite.”	A patient to the psychiatrist	Poverty of speech	√
2.	The Psychiatrist: “Okay, coming into hospital must have something to do with it, but I think it’s coming away from the family”. A patient : “ Yes. ” The Psychiatrist: “Allowing the person to be free to be them soon.”	A patient to the psychiatrist	Poverty of speech	√
3.	The Psychiatrist: “Don't if you ever experience feelings about your thoughts which was strange?” Chris : “ Yes. ”	A patient to the psychiatrist	Poverty of speech	√
4.	The Psychiatrist : “So, yeah that discourages?” A patient : “ Yeah. ”	A patient to the psychiatrist	Poverty of speech	√
5.	The Psychiatrist : “Have you had employees about whom there have been complaints, such as these whom you were forced to keep?” A patient : “ Yes. ” The Psychiatrist : “Minnie?” A patient : “ Yes. ”	A patient to the psychiatrist	Poverty of speech	√
6.	The Psychiatrist : “How do you mean so how do they look good?” A patient : (No respond).	A patient to the psychiatrist	Poverty of speech	√
7.	The Psychiatrist : “This seems like such a nicer place than the hospitals I've seen. Do you feel better taken care of there?” A patient : “ Yes. ”	A patient to the psychiatrist	Poverty of speech	√

	The Psychiatrist : "But don't you give up some freedom to go back?" A patient : "Now."			
8.	The Psychiatrist : "Do you think you will ever be able to live in a place like this and run out?" A patient : "No." The Psychiatrist : "Are you gonna give up?" A patient : (No respond).	A patient to the psychiatrist	Poverty of speech	√
9.	A patient : "I came to hospital just to be buried. I come full week. I thought we were doing this ,and I thought people were much different in came bird in the yard, and the island, but I found them to be something similar, and when I first went to hospital, I was in Kent house, and they shipped me to lime trees, and lime trees have shifted me in to Mitchell ward but it seems no not the three managers could get me buried."	A patient to the psychiatrist	Weakening of goal, Peculiar logic	
10.	A patient : "You know lab2, you know the way you, you see them they're speaking to you (long pause), you know you be wrong if I speak too long or my tight but what I say differently."	A patient to the psychiatrist	Weakening of goal	√
11.	The Psychiatrist : "Tell us what that feels very being cut?" Chris : "Well, (silent for several times) uhm ... ahm... you can't concentrate you know and (long pause) um. <u>I find towing tell people and being kind you know it's a great effort no."</u>	A patient to the psychiatrist	Weakening of goal, peculiar sentence, peculiar logic	√
12.	A patient : "Well, here, ehm, it seemed that I was understood but they understood what was happening and they allowed me to go according to my own desires, but they helped me to understand it, and to grow through it why didn't the sort of deny it, and to push it away, and when I came here I had had the idea myself that I wanted to go back to before I was born again then when I actually got here I was so frightened I forgot that but they helped me to remember it and then to be what I felt which was physically baby."	A patient to the psychiatrist	Weakening of goal, peculiar logic, perseveration of idea	√
13.	A patient : "In fact, I've sort of undergone an operation mental, as it were, in the sense that you speak of a physical operation something that is a radical change, and I don't go according to the old sort of record or pattern that and got into which was one of deception because I didn't I'd very early in my life what I really felt and I'd always had to pretend because of this thing that I'd made him myself in response to what I'd been up against when I was first born and Joe seemed to unearth the real me, and though I felt very fragile at times about the house I couldn't move if I felt other people were coming near me much money old Joe with	A patient to the psychiatrist	Weakening of goal	√

	people I found who didn't really understand and I would keep quite still then I felt I didn't want them to come in on me and I didn't feel able to speak much with them, but Joe used to explain while I was speaking through my painting and gradually I came more to have words not to feel that I was going away on my words because the process here was all the time and living process this suffering seemed in the sense to be positive because who seemed to be suffering in a growing way.”			
14.	A patient : “Well, in the beginning, I wanted to be naked just used to put a black counterpane around me, and I was able to do this my room, and to wait to the bed as I wanted and <u>it relieved me often in my feeling to learn wet bed</u> , and also it relieved me when I wanted to put my shirts over me, so I was able to do this, and sometimes I go to sleep like it was a relief, <u>and then I would be bought</u> and I would be fed, and marries I was very much to stock them and so I was fed to the bottle I start the bottle, and I got to gradually in her name still in bed, and I seem to almost be in a state of hibernation it's one time like if I was an animal going to sleep in the winter.”	A patient to the psychiatrist	Weakening of goal, peculiar logic	√
15.	A patient : “Why over here we have quiet room it's really close to club a caller quite we have two of them, ehm but is youthful is it um if a patient gets violent. I'll say that they took his stare tries to talk in the car mom down and got them with the FASTA condemning needle and lock them up in here till they calm down. <u>Once the steer fields are calm down enough to come out and they open the door and they read him now but they act up again and I just go right back in.</u> ”	A patient to the psychiatrist	Weakening of goal, Peculiar logic	√
16.	A patient : “Very very [__] yeah.”	A patient to the psychiatrist	Weakening of goal, Perservation of idea	√
17.	A patient : “You're not gonna use to do all of the outside. We G will start tools in the inside these things I had it tougher. ”	A patient to the psychiatrist	Weakening of goal	√
18.	The Psychiatrist : “Is a good happy man?” A patient : “ We are I hope he's long as I keep you down but control nobody gets the better of me control me and we'll ride. ”	A patient to the psychiatrist	Looseness	√
19.	The Psychiatrist : “Does it sometimes run away with you?” A patient : “ Well, I think I used to love, sometimes when I had to do I hate you know it was different sort of laughter. ”	A patient to the psychiatrist	Looseness	√
20.	A patient : “Well people I mean I was frightened of going to work with a lot of people and seeing them. They mixing.” The Psychiatrist : “What were you afraid of ?”	A patient to the psychiatrist	Looseness, peculiar sentence	√

	A patient : “Last quantities too painful.”			
21.	The Psychiatrist : “You thought your heart might stop in?” A patient : “It was baiting a waiter to the dance and then it's just stopped.”	A patient to the psychiatrist	Losseness, peculiar logic	√
22.	The Psychiatrist : “How do you feel coming back bad?” A patient : “Baby pig.”	A patient to the psychiatrist	Looseness	√
23.	The Psychiatrist : “When you say that come institutionalized what do you mean?” A patient : “Become very dependent in the hospital depends on opening doors on making your bid.”	A patient to the psychiatrist	Looseness, peculiar sentence, and peculiar logic	√
24.	The Psychiatrist : “Are you get about half truth?” A patient : “You got about 15 years.”	A patient to the psychiatrist	Looseness	√
25.	The Psychiatrist : “Do you ever get to the I come here do you ever get?” A patient : “Yes very yosik daddy your f---ing.”	A patient to the psychiatrist	Peculiar word	√
26.	The Psychiatrist : “Ever since you were a small girl?” A patient : “Necessary from pokum to say seven years.”	A patient to the psychiatrist	Peculiar word	√
27.	The Psychiatrist : “When they remember how Diane lets came to thhe clinic she would hardly saay a thing and every time, she opened her mouth mother or came to the clinic. She would hardly say a thing every time she openend her mouth mother or father would say – and don’t interrupt as if to imply what she had to say whic was not important.” A patient : “There was no we're protected by the view from especially as partner with them walk [_]..”	A patient to the psychiatrist	Peculiar sentence	√
28.	The Psychiatrist : “How do you feel inside you sir?” Chris : “Well, (long pause), I feel just a little bit cut off you know from speaking to people in hand you.”	A patient to the psychiatrist	Peculiar sentence, peculiar logic	√
29.	A patient : “They sit on the benches pitiful, they come over to for money, they go around looking in the garbage cans, they gave them this place here to live and frankly speaking. If go by there and take a look.”	A patient to the psychiatrist	Peculiar sentence	√
30.	The patient: “They suddenly read the people in there suddenly realized that I was Yoga garland sitting in the chair come back from the dead is something you know being able to control people who know what they're saying and everything you know.”	A patient to the psychiatrist	Peculiar logic	√

31.	A patient : “Yeah, I believe yes, and all the clients were created by disease of flour you see. ”	A patient to the psychiatrist	Peculiar logic	√
32.	A patient : “ I’m conditioned , and I have to be buried . There's no other way for me to early unless. I get buried see because I am deliberated as I am, and I’m conditioned and were to together I cannot live outside you see.”	A patient to the psychiatrist	Peculiar logic, perseveration of idea	√
33.	A patient : “I didn't quite I was all together in one place. I felt that I was almost dissolving, but I couldn't express this in words toward these feelings, but I felt never bad there as if as if I was absolutely stuck , and I seem to be this physically. I seem to get to Estate's own inability almost to move at a time.”	A patient to the psychiatrist	Peculiar logic, perseveration of idea	√
34.	A patient : “Well, I did quote not when I don't, and the injection or filthy miserable you know but were very loud I'm you know. I saw something like you normally miss a lot bigger, and if you're not on the tracks, or on the injections you sort of take it drag it I am during the time. ”	A patient to the psychiatrist	Peculiar logic	√
35.	A patient : “A lot of them haven't really made any difference at all, right. The one I'm on that presence seems to made the most difference to me, a wall I felt better in the last fortnight since I've been having it than I have (long pause) we're listens I can remember.”	A patient to the psychiatrist	Peculiar logic	√
36.	A patient : “Oh, wonderful of having a group. I was hoping you would have a go. This is a lovable daughter 7. Is it, is it the cooking boob. They make my breakfast is every morning a group starts about 10. I don't I will say 10:30 a quarter to 11 and then they wash their hand they make the food they could they eat it then they wash up and then they leave to grow. I need where they have the word burp right behind me. I knew the doll love the book, miss McCauley. ”	A patient to the psychiatrist	Peculiar logic, Perseveration of idea	√
37.	A patient : “ This is the greatest country that there ever was God created. This country he split the whole world up, and he said here up put in the United States. Here, I'm putting Canada and I need to sleep every once in while I need a siesta so I put Mexico South America take it away. ”	A patient to the psychiatrist	Peculiar logic	√
38.	The Psychiatrist : “What are you doing?” A patient : “Anything I feel like I'm creating something I don't like I like to create I don't like to tear down. What we got, we got to do with, and we got what we got, we got to do with and we got to improvise, and we got a minute we gotta some day we got a knock bolus slums down and kill the rats in the rabbit. It wasn't for the rapids while some human beings alike Roberts auntie they like carrots but sometimes they cook the carrots and that takes all the	A patient to the psychiatrist	Peculiar logic, Perseveration of idea	√

	vitamins out of them you know and admire him an old song he made the night of the bride er wherever he did go at all."			
39.	The Psychiatrist : "One of the things we hear is that when people I do leave a lot of people mistreat them you know my things make it hard on you?" A patient : " How are they gonna know I'm how how is if I look at it this way how is the people on the outs are gonna know if I'm that I'm a patient in cream and then tie a fat ID your left I start acting crazy. I have perfectly normal on the outside."	A patient to the psychiatrist	Peculiar logic, Perseveration of idea	√
40.	A patient : "I desegree with my degree, and the years I've know Jeff you know what she'll di to Geoffrey. She rotted his teeth out. I invited his taeching Lyceum multitudes of candy bags and bags of candies. They come on Sundays with these big bags. They think they never eat they stuff, from stuff from stuff and she can tell you."	A patient to the psychiatrist	Peculiar logic, Perseveration of idea	√
41.	A patient : "I see number time Jeffrey Shapiro will walk in, and beer to my money don't beat him up real good Leslie for the show can you can you prove it. Oh Luke all you could do is take your son's word Jabba Shapiro goes in the beard through cuts pisses. "	A patient to the psychiatrist	Peculiar logic, Perseveration of idea	√
42.	A patient : " We run the house here with it along with the staff. "	A patient to the psychiatrist	Peculiar logic	√
43.	A patient : "I'll tell you why I was worried, I was worried that I was the center of all lies"	A patient to the psychiatrist	Perseveration of idea	√
44.	A patient : "But that is the truth help me,help me, God"	A patient to the psychiatrist	Perseveration of idea	√
45.	A patient : " We, we, we, we think our results are highly suggestive of it being, and these sort of compounds, and in fact, and we're almost certain that these compounds are aiming"	A patient to the psychiatrist	Perseveration of idea	√
46.	The Psychiatrist: "Probably everything else to feel like man Chris?" Chris : "I found that against series, you know. First of all, you feel fine I'm going to work, or I see anyone, and then you get that little bit better when you get that little bit better by himself game fighting to people. I can't you there"	A patient to the psychiatrist	Perseveration of idea	√
47.	A patient : "Put you in a hospital may feel a little bit different now that you're in a hospital, and situation changes then"	A patient to the psychiatrist	Perseveration of idea	√
48.	The Psychiatrist : "What is this?" A patient : " Is, is the activity side"	A patient to the psychiatrist	Perseveration of idea	√

49.	A patient : “You know the TV it’s on Joey and they have a TV in the male dormitory and the TV in the female – uh. Metawead no females are allowing immense too much work ain’t no men are allowed in the female torso for who in the hell listening to orders.” The psychiatrist : “That’s the same inside and outside.”	A patient to the psychiatrist	Perseveration of idea	√
50.	The Psychiatrist : “Where do you feel you really belong in here or outside?” A patient : “Outside definitely the staff to staff still feels I’m I’m not ready for just try ass another thing that really gets me there cuz I mean I should try to be the first one to know when I’m ready unit leave but I should know how I feel. I feel I’m really I think I feel I’m ready to leave today but the fact is I have no place to go”	A patient to the psychiatrist	Perseveration of idea	√
51.	The Psychiatrist : “You get a sense?” A patient : “Of reason for me to get up in the morning. You know, for me to get up in the morning. You know, just a place to go, and something. I do when I work, and I go home at night. I feel good about myself”	A patient to the psychiatrist	Perseveration of idea	√
52.	The Psychiatrist : “Where do you live?” A patient : “ I live, I live, I live in Britain”	A patient to the psychiatrist	Perseveration of idea	√
53.	The Psychiatrist : “What will you do now that you get back here?” A patient : “Well, maybe, I’ll, I’ll talk to some of the girls. Then, I’ll wait supper smoke my cigarettes take a shower now. Then, wait for medication”	A patient to the psychiatrist	Perseveration of idea	√
54.	A patient : “ Wanna sing, wanna sing mon”	A patient to the psychiatrist	Perseveration of idea	√

Notes:

POS : Poverty of Speech PS : Peculiar Sentence

WOG : Weakeening of Goal PW : Peculiar Word

L : Looseness PL : Peculiar Logic

PW : Peculiar Word D : Distractibility