



The Impact and Role of Learning-Compatible with Brain and Self-Confidence in Creating Productive Environments and Changes in 25 Years Old Male and Female Schizophrenics – A Global Perspective Research

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ABSTRACT

Since nerve compatibility - can be - the result of two cases of confrontation with a variety of random actuators or, stimuli and, facing the sources of sensory data and, schizophrenics, when faced with these conditions they are unable to understand and, interpret this conditions true basically; and this creates a vicious circle without learning exterior experiences and low self-esteem for them; that its result is low or, lack of self-confidence; then, learning-compatible with brain as a tool to understand the intrinsic actions of the brain with motivation is very effective and, useful for their understanding and, interpretation modification. The method used in this research is a library analysis; therefore, after collecting information and data from the sources, using the library method, according to the subject and the problem of the present study, after the critique, the information and, data have been analyzed in order to explain the research problem. By using and, application of exact awareness and, knowledge on “enriched” environments besides knowing “why” these environments are enrichment give us “Practical Components” for ((intrinsic motivate brain operations)) in neurological adjustment. For reaching to this point; it is necessary that neurological adjustment occurs in cellular base and, by doing this, (mental processes) will be done and, cognitive interpretations, attitudes and, other related process will have modified and, the result (s) of these cases are modification in behavior.

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Introduction

Learning is, in fact, the behavior (behaviour) [1] that a living being or, organism shows it in the form of a reaction or a set of reactions, in response to one or more intrinsic and extrinsic stimuli.

In the creation world, man has a different work with other beings. Of course, other living beings are also based on their instinct and evolution [2]. Based on individual differences between human beings, a similar stimulus may lead to similar or different behaviors in different living organisms; that naturally, these behaviors are in the form of the human being knowledge, skills, values, or preferences and so on [3]. In general, there are two very important factors in the appearance of behaviors, genes and learning from experience or experiences or, “learning through reflection (s) on doing” [4].

It goes without saying that doing all these things are based on brain compatibility [5]. The more important issue is that this adaptation should be happen at the cellular level in the brain [6]. Because, in Schizophrenia, hypotheses such as genes and chemistry and different brain structures are pose; so by considering these hypotheses must do programming learn to adapt to the brain in these people [7]. Regarding the previous cases, the quality of brain intracellular processes of schizophrenic patients affects their cognitive capacities; So that they’re capable to affect as an important factor in being interested or avoiding specific activities [8]. Awareness of cognitive capacities, will planning for environmental enrichment and beyond, Changes in schizophrenic patients [9].

Looking to the foregoing, creating positive self-confidence is very important in the attitude and behavior of

these people Positive self-confidence, with proper guidance, will create a productive or, enrichment environment; and this productive or, enrichment environment will strengthen this positive self-confidence. It should be noted that in this regard, factors such as age, sex, academic achievement or level, stereotype threats based on social identity, culture, and other different factors must be considered [10].

Deep attention to The impact and role of learning-compatible with brain and self-confidence in creating productive environments and changes and its implications in 25 years old male and female schizophrenics, are important points that their vacancy is seen in researches. In any research from the point of view of the experts, deep analysis has not been done in these cases.

Concepts

Learning-Compatible with Brain

Simply, it describes how the brain learns at a cellular level [11], [12], [13] and, [14]. In the past decade, new brain-imaging techniques have allowed us to observe the brain while it is learning. The field of neuroscience has produced a body of empirical data that provides a new understanding of how organisms learn. This body of data has implications in education, although the direct study of these implications is in its infancy. In this research, this concept has been attempted to interact with other concepts.

Self-Confidence

This is likely the most used term for these related concepts outside of psychology research, but there is still some confusion about what exactly self-confidence is. One of the most cited sources about self-confidence refers to it as simply believing in oneself [15]. Another popular article defines self-confidence as an individual's expectations of performance and self-evaluations of abilities and prior performance [16].

Finally, Psychology Dictionary Online defines self-confidence as an individual's trust in his or her own abilities, capacities, and judgments, or belief that he or she can successfully face day to day challenges and demands [17].

Productive Environments

Since the brain experiences the real life in a different way stores from dummy stories and, very efficient and adaptive – or consistent – that is, based on selective acceptance and nerve adaptation, matches itself exactly with the particular way of existence life and, omits unusable cells and surplus links automatically; therefore, it can create completely new connections in itself. Communications created from this type will have two features:

1. Sustainability;
2. Influence, efficiency and visibility in all areas.

Of these two important features, it can be used to the brain-based learning for people with schizophrenia [18].

Although (almost) there is no cure (as of 2007) for schizophrenia; the treatment success rate with antipsychotic medications and psycho-social therapies (almost) can be high [19] and, [20] – and (almost) this is done in the best conditions according to the previous described three concepts.

25 Years Old Male And Female Schizophrenics

Schizophrenia is a serious disorder of the mind and brain that it typically begins in early adulthood; between the ages of 15 and 25. Men tend to get develop schizophrenia slightly earlier than women; whereas most males become ill between 16 and 25 years old, most females develop symptoms several years later, and the incidence in women is noticeably higher in women after age 30. The average age of onset is 18 in men and 25 in women. Schizophrenia onset is quite rare for people under 10 years of age, or over 40 years of age [21].

While men and women have similar prevalence of Schizophrenia, most of studies demonstrated that female onset is typically 3–5 years later than males. It is now accepted that men have a single peak age for onset which is between 21 and 25 years old and women have two peaks age of onset, one between 25 and 30 years old and another one is after 45 years old [22] and, [23].

It seems that the best comorbidity cut-off point for intervening to treat of schizophrenia, is 25 years old – whether at initial stage “based on the patients’ sex” or, chronicity “maturation” of it in the patients.

Research Questions

1. What is the impact and role of learning-compatible with brain and self-confidence as one psycho-medico-social view of the point beside on antipsychotic medications or, medical therapies in creating productive environments and changes in 25 years old male and female schizophrenics?
2. What is the most relevant content for educating these people and their family members?
3. And, what is/are the best way (s) or, method (s) of feedback from the impact of teaching and learning?

Research Method (Methodology)

Research method is scientific-library-analytical; in this method, after collecting information and data from sources, by using the scientific-library method, considering the subject and issue of the present research, after the critique, the data, texts and scientific opinions have been analyzed in order to explain the research subject. therefore, the explanation and analysis of data and resources, have been done in terms of quality content analysis.

Research Findings

In this section, the results of studying research questions are described in details. It should be noted that to examine the impact and role of learning – compatible with brain and, self – confidence first, you need to explain how this learning is; then, pay attention to other aspects.

The brain collection is an organism that refers to itself. Learning – especially, art – to prepare the nerves and build more and more strong links in the brain; also, a part of the brain's maturity continues to age 25 [24]. According to the previous materials, the answer to the first question will be addressed.

1. What is the impact and role of learning-compatible with brain and self-confidence as one psycho-medico-social view of the point beside on antipsychotic medications or, medical therapies in creating productive environments and changes in 25 years old male and female schizophrenics?

One of the most important goals of learning-compatible with brain in schizophrenic people is the familiarity of them with their positive abilities and their growth or, development or, in other words, "self-(positive) knowledge". Since with respect to individual interpersonal differences each human brain when it comes to much attention has its specialty sensitivities inherently; and also, given that stimulation of this sensitivities occur on the basis of preparation; so, in a way, you have to give “positive meaning” to this much attention specialized sensitivities stimulant from the point of view of the person with schizophrenia, so that he or, she will percept "true" the context which located on it. Certainly, this should be do based on specified prepared text, pre-programmed plan and practice and, repetition. Undoubtedly, it is clear that doing this “true” perception will give him or her, positive feedback.

It should be noted that in order to make these things “positive” understandable; it is better to use the evaluation method of the four main processes of the Progress in

International Reading Literacy Study or, P.I.R.L.S in preparation of text – concentration or retrieval of information, direct inference and conclusion, interpretation and integration of ideas and, evaluation [25].

Since the latent attention system of the brain, in a specialized way, responds to the location, more than color, shape and movement; so, strategies and meta-cognitive processes allow individuals to explore their perceptions and, correct their approaches [26]. Of course, previous knowledge and experiences with people are also very important and effective.

If all of these are carried out on a sound and rigorous basis; they will lead to self-positive assurance or, self-positive confidence – by the positive feedbacks – and, will create a rich and productive environment for the individual [27].

2. What is the most relevant content for educating these people and their family members?

In response to this question, you should consider the following:

Familiarizing with life skills through familiarity with learning methods [28]; in this regard, you have to do this learning in such a way that strengthens the brain's effect on the physiological basis on learning. It seems that the realization of this act is based on stimulation 8 to 12 minutes' attention [29]. According to the prior notes, the most important things that they should be considered in compiling the educational content of these patients are:

Basic needs; the quality of self-aware in compare with attitude, acting-out after it and, reaction to situation or condition; family education for confrontation with schizophrenic patients' needs and, reactions; focus on better relations between family members and, schizophrenic patient; reinforcement of positive behaviors of schizophrenic patient; teaching of aggressive behaviors control by the patient; creation of safe and, without threat environment for schizophrenic patient; recognition of fears and, misunderstanding situation interpretation; invitation for participation in family internal discussions and, respect of the schizophrenic view of the point in these cases in three stages: onset, continuation and, finishing or, end of the session – it must be noted that we do not approve all the patients' view of the point and, the session times also, must be limit; and so on. All of these mentioned cases have their feedbacks.

3. And, what is/are the best way (s) or, method (s) of feedback from the impact of teaching and learning?

In response to this question, we must state that it seems to be the application of concepts and process skills based on the biological roots of learning behavior while helping to understand some of the cognitive aspects of situations, to reduce the attitude and emotional response of schizophrenic person towards them [30] and, [31].

Because the forehead or, frontal lobe deals with targeted activities such as judging, creativity, problem solving, and planning it seems to be the best feedback method or methods for teaching and learning is/are assessing the schizophrenic person interpretation of the position and giving feedback from it to him or, her; so that by stimulating this region in both hemispheres, neo dentate nucleus is also stimulated in the cerebellum and creates conditions for better and, more prominence thinking in the schizophrenic person [32].

Conclusion

In this research the impact and role of learning-compatible with brain and self-confidence in creating productive environments and changes in 25 years old male and female schizophrenics as a global perspective research has been addressed. What is certain is that in psychology and

psychiatry are often believed to be schizophrenia has no treatment. If we accept this, we cannot take away some of the positive aspects of these patients. By reinforcing these positive aspects and giving them feedback; to a great extent assist and, help to these people's cognitive attitudes. Unfortunately, from this point of view, the problems of these patients have been considered very little. Therefore, the vacancy of this research is completely felt in how these people are learning in brain-based view. Doing such research using modern technology – P.E.T, E.E.G, Dig. M.R.I, M.E.G and, so on – beside other studies such as genetics, it causes find a deeper physiological knowledge and, understanding of brain-based learning events during this disease

Here are some suggestions for research on the subject of research

1. Study of schizophrenic learning disorder from the onset of diagnosis.
2. A careful review of the role of healthy nutrition in resolving the predisposal factors in this disease.
3. And, goal education and direction teaching to the values and goals of these patients and their relatives.

Some executive or, applied and functional suggestions also include

1. Compiling pamphlets or instruction booklets – e.g. How to deal with schizophrenic patients? – for coaches, educators, family and friends.
2. Study of the specific and general needs of schizophrenic patients and their priority.
3. Planning for weekly meetings Reporting by family and surrounding people.
4. And, Utilize the latest findings from other sciences such as homeopathic and traditional medicines to improve the condition of these patients.

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