

Lecture 3: Abnormal Psychology & Models of Psychopathology



THE PHRENOLOGIST .

Key Terms

- Abnormal behaviour/abnormality
- Psychopathology
- Mental illness
- Distress

What is Psychopathology?

- Deviation from the statistical norm
- Deviation from social and cultural norms
- Maladaptive and dysfunctional (harmful) behaviours

Deviance from the norm

- Distorted psychological processes

Distress

- Causes or is the result of distress

Dysfunctional

- An out of the ordinary dysfunctional response

Dangerous

- May place themselves in danger

The Four D's

Culture & Mental Health

“The discourse on ‘culture’ that is applicable to mental health mainly concerns the culture of the individual because of the emphasis on the individual in the (western) interpretation of ‘mental health’...But even here it is recognized that individual culture rests on a bed of traditional family culture, the culture of the community they are part of, the wider body of people they felt attached to, the regions(s) they live in and even perhaps the ‘imagined communities’ they are connected to. These ramifications of culture determine to a large extent people’s behaviour, and more generally, their social systems, religious systems and beliefs, worldviews and, most important of all...their concept of the human condition, the meaning of life itself” (Fernando, 2014, p. 13).



Culture & Mental Health – What's the relationship?

- *Culture* influences definitions of mental illness.
- Cultural beliefs guide our reasoning regarding how we should address mental health problems.
- *Culture* accounts for variation in how service users communicate their symptoms and which one they report.
- *Culture* influences expectation between the clinician and service users (e.g. different assumptions about what a clinician is supposed to do, how a service user should act and what treatments are available).

Culture & Mental Health – What's the relationship?

- *Culture* influences what type of coping styles and social supports people have.
- *Culture* dictates how much stigma is attached to an illness.
- *Culture* relates to how people cope with everyday problems and types of adversity.
- Some aspects of *culture* also underlie culture-bound syndromes.

Medical Approaches (Somatogenic)

- Psychopathology as “an illness” which needs to be physically treated
- Psychopathology results from biological disorders of the brain
- Psychopathology treated primarily through pharmacological treatments



Psychogenic Approaches

- Psychopathology results from psychological causes:
 - Mesmer (1770's), Charcot & Freud
 - Rogers & Humanism
 - Behaviourism & Cognitive Behavioural Therapy (Eysenck, Beck, Meichenbaum)
- Different psychological/psychotherapeutic models based on these different approaches (e.g. behaviourism, psychodynamic theory, humanistic theory).

Dimensional Approaches

- Rejects all-or-nothing approach of diagnostic classification system
- Rejects assumption that the mental states of people with mental health problems are qualitatively different from the “normal population”
- People with mental health problems better considered at extreme end of a normal distribution.

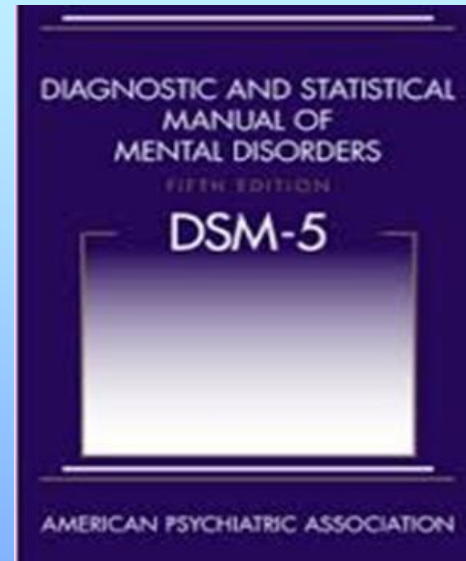
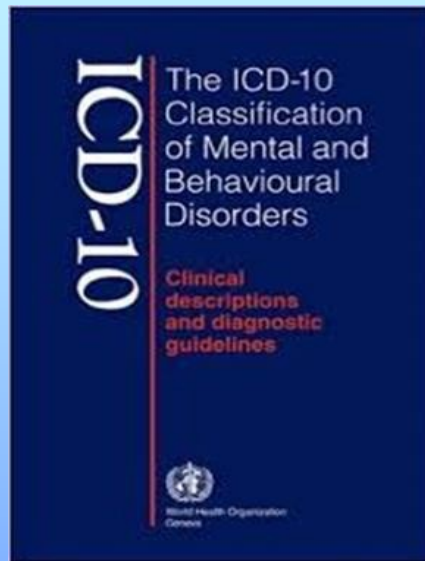
Classification of Psychopathology

- Diagnostic Classification Systems
 - Kraepelin (1880s) – described a number of syndromes with specific symptoms
 - Formed basis of WHO's International Classification of Diseases (ICD:WHO 1992)
 - Currently in its 10th revision
 - Diagnostic and Statistical Manual
 - Developed by American Psychiatric Association
 - Most commonly used system for diagnosing mental health problems.

Diagnosis and Classification

- Defining and diagnosing psychopathology – why?
- What are the differences between diagnosis in psychiatry and general medicine?
- Problems with diagnosis and the consequences for service users

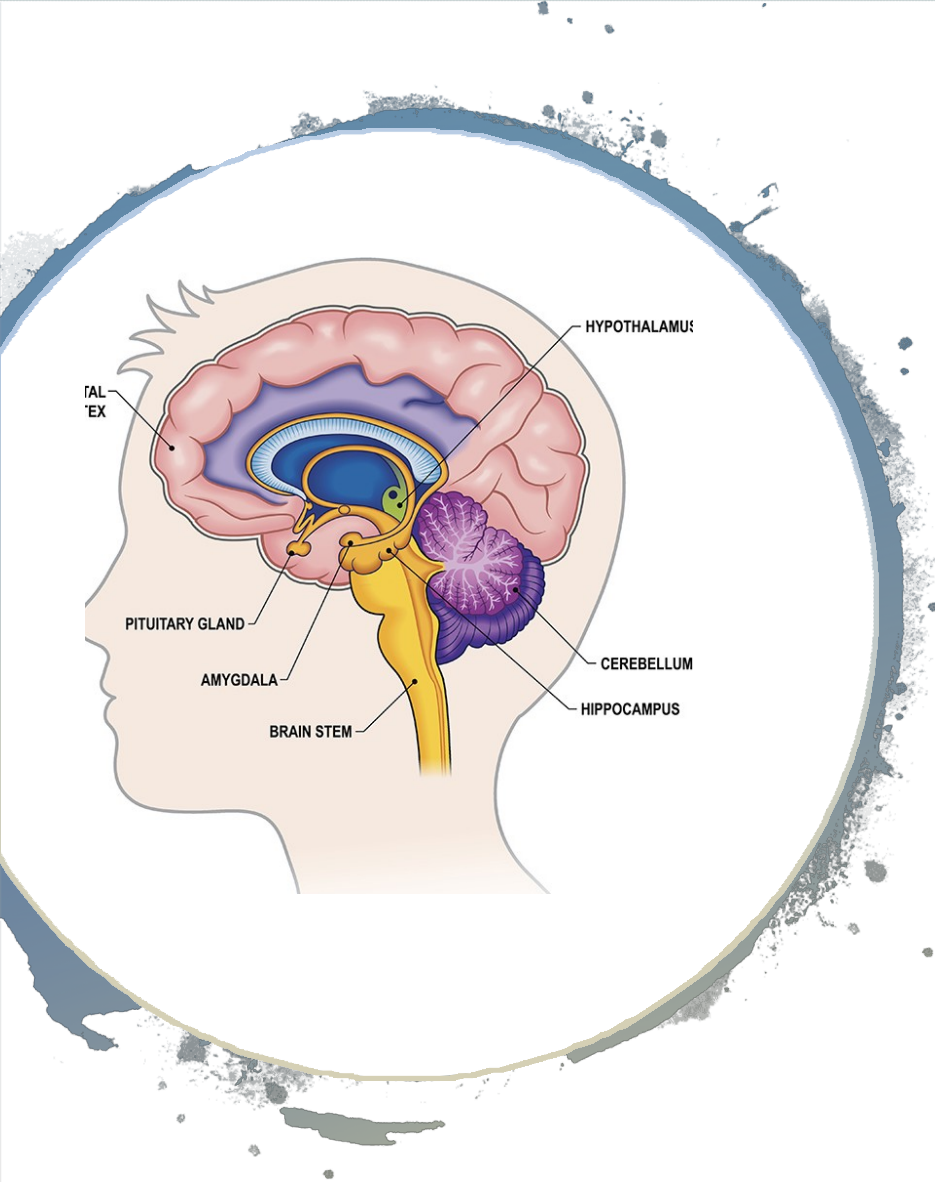
Diagnosis and Classification



Biological Models

- Genetic factors now being implicated in a number of mental health conditions (e.g. behavioural genetics)
- Family or twin studies
- Diathesis-stress model
- Heritability (molecular genetics)
- Lack of **absolute determinism**

Biological Models



- Propose biological explanations of mental health problems based around brain systems (e.g. limbic system) and neurotransmitters (e.g. dopamine, serotonin).
- Disruption to neurotransmitters results in inappropriate mental processes
- Hormones also involved in some disorders such as seasonal affective disorder (melatonin).

Biological Models - Critique

- Mental health problems cannot always be reduced to biological explanations.
- Biological systems are continuously open to social and relational influences.
- “Biology...always plays a part in our experience - but it is never separate, in principle or practice, from other influences.” (Cromby, Harper, & Reavey, 2013, p. 100).

Psychological Models

- Focus on internal mental processes that influence mood and behaviours
- No a single explanatory paradigm:
 - Freud & Psychoanalysis (1900s)
 - Behaviour Therapy (1950's/1960s)
 - Humanistic Therapy (1960's)
 - Cognitive Behavioural Therapy (1970's)

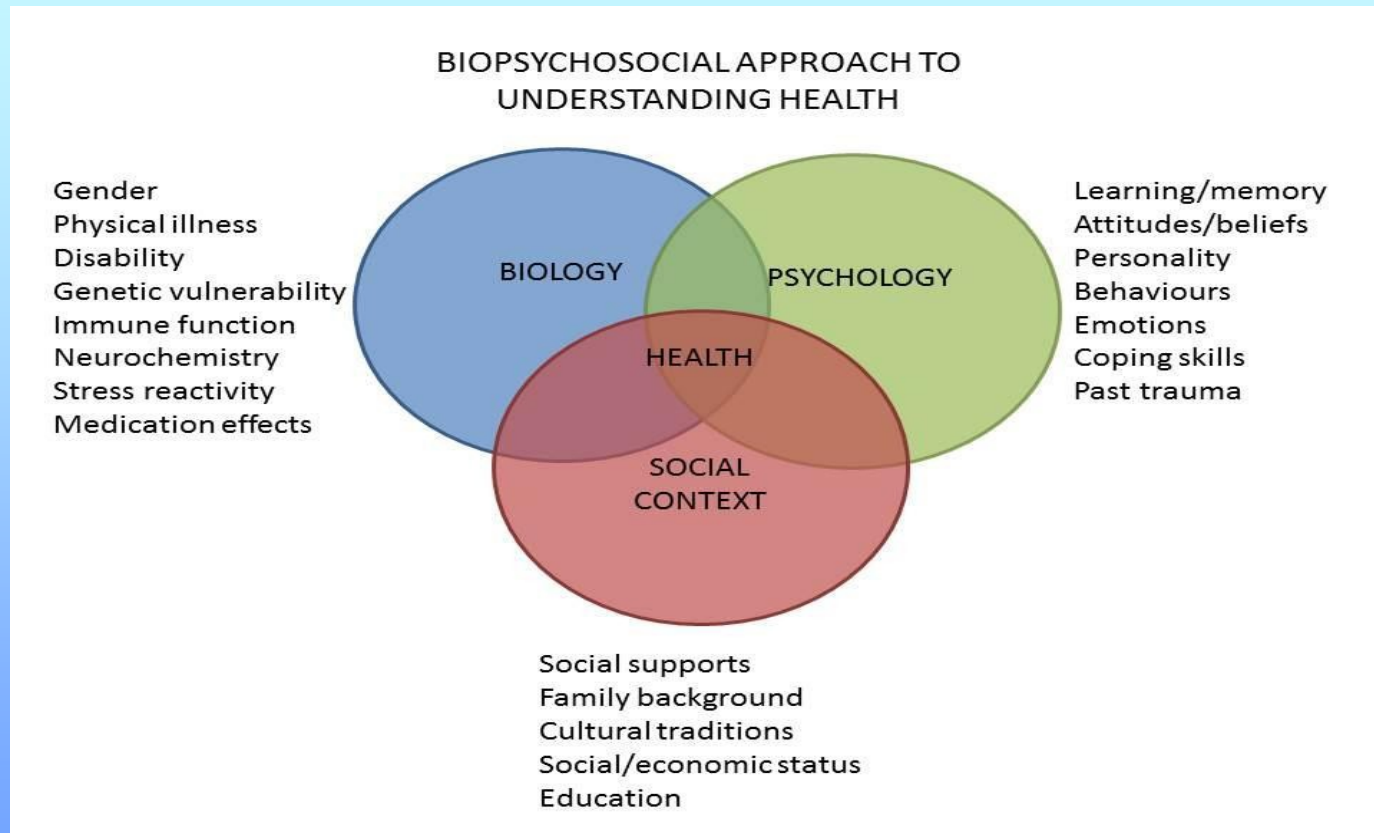
Socio-cultural Models (Sociogenic)

- Jenkins et al. (1998) British Psychiatric Morbidity Survey
 - Many different social and cultural variables associated with mental health problems
- Socio-economic status differences
 - Social drift, social stress, lack of resources
- Gender differences
 - Willingness to express distress
 - Role strain
- Minority status
 - Prejudice, culture transitions, confound with social class

Systemic Models

- Family systems theorists see mental health problems as stemming from the inadequate family systems
 - Individuals within a family form an interacting system, each of which has a reciprocal influence on each other
- Role of negative expressed emotion implicated in development of schizophrenia
- Development of anorexia in young women often linked to dysfunctional family systems

Biopsychosocial Model



Biopsychosocial Model

- George L. Engel - *The Need for a New Medical Model: A Challenge for Biomedicine* (1977)
- Critique of the biomedical model of disease:
 - “The dominant model of disease today is biomedical, and it leaves no room within its framework for the social, psychological, and behavioural dimensions of illness. A biopsychosocial model proposed that provides a blueprint for research, a framework for teaching, and a design for action in the real world of health care” (p. 135)

Biopsychosocial Model - Critique

- In practice, research within the model typically assumes that biology, psychology and the social are separate and distinct.
- There's little consideration of the relationships between the three dimensions.
- General trend to treat biology as more foundational.
- <https://thepsychologist.bps.org.uk/volume-18/edition-10/bio-bio-bio-model-madness>
- <http://bjp.rcpsych.org/content/195/1/3>

Influences on Childhood

- Genetic inheritance
- Developing emotional regulation skills (e.g. attachment)
- Parental and family context
- Socio-economic factors
- Peer influences
- Risk behaviours

Influences on Adolescence

- Psychological effects of puberty
- Self and identity development
- Family environment
- Health-related behaviours
- Sexual development
- Peer group
- Risk and coping

Influences on Adulthood

- Socio-economic status
- Gender
- Minority status, including ethnicity
- Family dynamics
- Ageing and adjustments to life changes