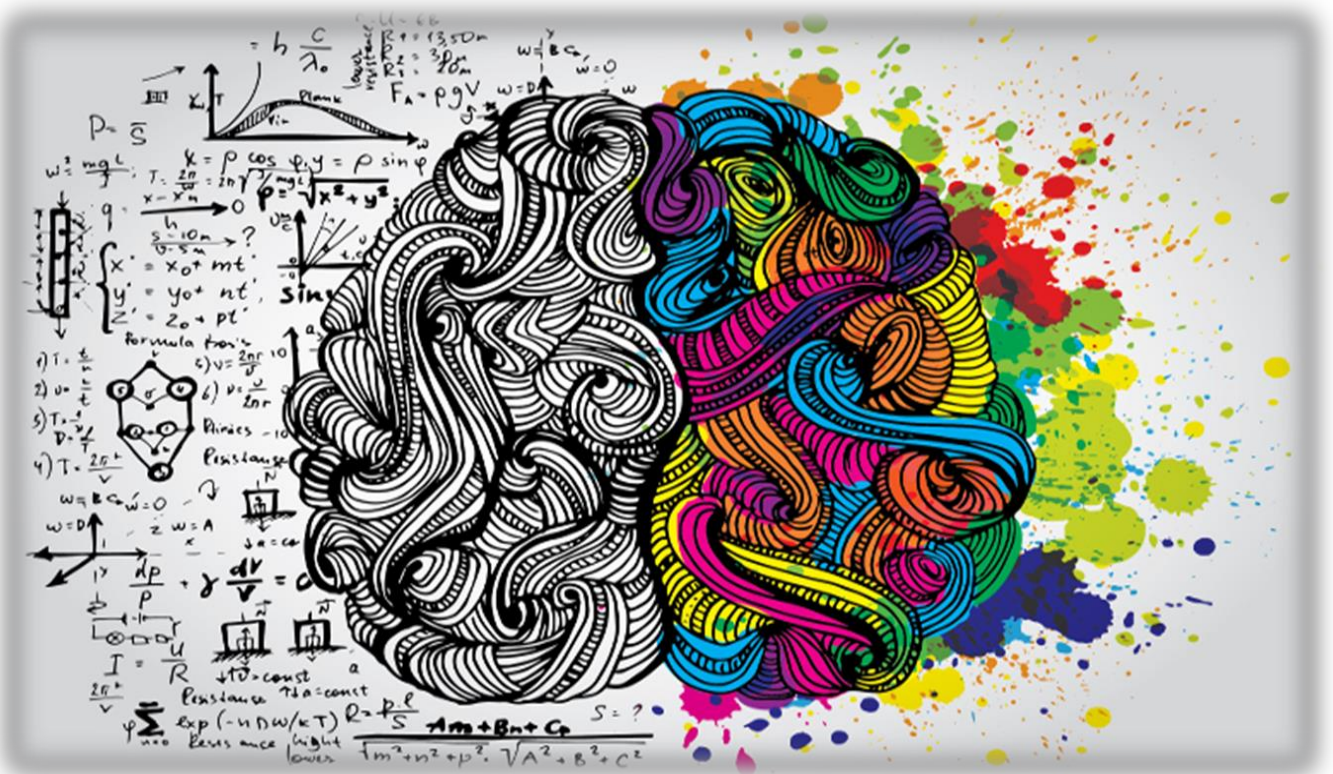


# GCSE Psychology

## PSYCHOLOGICAL PROBLEMS



NAME: \_\_\_\_\_

In this unit I am going to aim for \_\_\_\_\_ level.

To really push myself out of my comfort zone I am going to complete several tasks at \_\_\_\_\_ level or complete \_\_\_\_\_ Research Tasks.



# How to use this booklet

This booklet will contain all the key notes that you will need for this unit. You will use these notes to write extended responses, to complete group projects and to revise for your assessment and final exam.

We will have a series of master classes in lessons and then during your workshop time you will use the booklet to guide your independent tasks. During the workshops you will be given specific pages and tasks to focus on.

Each component of this topic unit is broken down into steps. There are 20 steps in total. Within each step, the tasks are marked with one or more of the bronze, silver, gold, platinum medals. Use these symbols to ensure that you have completed all tasks at your chosen level. Record your progress in the **self-reflection chart** on the following page.



Use the guidance below to help you to fully use the different types of pages in this booklet.

**It is your responsibility to complete any sections in your own time that you don't complete in class. If you lose this booklet, you will need to reprint it and complete all sections that were lost again.**

## TITLE PAGE FOR EACH STEP

This page gives you a clear idea of what you are learning and also sets learning targets for that step. Take note of your learning target/s so you can reflect on whether you have met each target.

## RESEARCH TASKS

These are tasks specifically designed for students who have chosen the platinum level. However, anyone who is interested in expanding their knowledge in a particular area of psychology can challenge herself/himself with these tasks. You will need a device for these tasks.

## CHECK YOUR UNDERSTANDING TASKS

These tasks are designed for you to check if you have met your learning target for that step. When you have finished the tasks in your level, you should be able to answer the questions by writing them down or being able to explain them to a classmate.

## PSYCHOLOGICAL PROBLEMS CHECKLIST

This checklist (at the end of the booklet) can be used at the end of the unit to revise for the assessment task and then later when you are revising for your GCSE exams.

## KEY WORDS GLOSSARY





This is a great revision task to check that you know the key words in this unit.

## THE KEY!





When you see a key, this is a hint about the key words and terms that you may wish to add to your flashcards.



# What level psychologist are you aiming for in this topic?

<b>Novice Psychologist</b>	Explain visually & verbally how different parts of the brain function
<b>BRONZE</b> 	Explain verbally in full sentences key terms in psychology
	Represent key concepts in psychology in different ways
	Use guidance to collect and interpret data in own research
	Apply concepts in psychology to own life/experiences
	Understand & apply measures of central tendency (mean, mode, median)
<b>Apprentice Psychologist</b>	Apply psychology knowledge to specific scenarios about human behaviour
<b>SLIVER</b> 	Describe theories in psychology using most/all the 'expert key terms'
	Create representations of theories & studies that support recall
	Draw & interpret graphs
	Interpret & use quantitative & qualitative data
<b>Independent Psychologist</b>	Design & conduct research
<b>GOLD</b> 	Evaluate the limitations of research
	Use concepts in psychology to discuss real life scenarios/dilemmas
	Evaluate theories & studies using a PEE structure
	Understand & apply percentage increase & decrease
<b>Expert Psychologist</b>	Make supported judgments on debates in psychology
<b>PLATINUM</b> 	Write an extended response based on an argument
	Synthesise evidence from different theories into a clear argument
	Engage skilfully in verbal debates about psychology
	Create specific resources to support young people in understanding their brains in order to enhance their own mental health

## YOUR LEARNING JOURNEY IN THIS UNIT: PSYCHOLOGICAL PROBLEMS

STEPS	Page reference	Your learning targets				
Step 1	pp. 4-11	Define mental health, including the mental health continuum				
Step 2	pp. 12-16	Understand key mental health statistics and incidence rates in different groups				
Step 3	pp. 17-20	Describe changes in the incidence of mental health problems				
Step 4	pp. 21-26	Define stigma and discrimination & effects of mental health problems				
Step 5	pp. 27-32	Describe and identify the clinical characteristics of schizophrenia & statistics concerning it				
Step 6	pp. 33-35	Describe the Psychological Explanation of Schizophrenia – The Social Drift Hypothesis				
Step 7	pp. 36-38	Discuss criticisms of the Psychological Explanation of Schizophrenia – The Social Drift Hypothesis				
Step 8	pp. 39-43	Describe the Biological Explanation of Schizophrenia – The Dopamine Hypothesis and Brain Dysfunction				
Step 9	pp. 44-46	Discuss Criticisms of The Biological Theory of Schizophrenia -Dopamine Hypothesis and Brain Dysfunction				
Step 10	pp. 47-51	Describe & evaluate Daniel et al.'s research into the effect of amphetamines on schizophrenia				
Step 11	pp. 52-57	Describe and identify the clinical characteristics of clinical depression & statistics concerning it				
Step 12	pp. 58-61	Describe the Psychological Explanation of Depression – The ABC Model				
Step 13	pp. 62-66	Discuss criticisms of the Psychological Explanation of Clinical Depression – The ABC Model				
Step 14	pp. 67-70	Describe the Biological Explanation of Depression – The Social Rank Theory				
Step 15	pp. 71-74	Discuss criticisms of the Biological Explanation of Clinical Depression – The Social Rank Theory				
Step 16	pp. 75-81	Describe & evaluate Tandoc et al.'s research into the effects of FaceBook use on depression				
Step 17	pp. 82-87	Describe how anti-depressants are used to treat depression & anti-psychotics to treat schizophrenia				
Step 18	pp. 88-90	Describe how psychotherapy is used to treat depression and schizophrenia				
Step 19	pp. 91-94	Outline neuropsychological tests & brain imaging techniques & explain how they are used for studying mental health				
Step 20	pp. 95-100	Use the checklist at the front of your booklet to revise for your assessment. Make flashcards and complete the <i>Key Terms Glossary</i> & <i>Check Your Understanding</i> questions throughout the booklet				





## Mental Health Myths- True or False?

**There are lots of myths about mental health. Knowing a few facts can help us to challenge any negative thoughts and actions.**

Here are some to think about:

**Myth:** Mental health problems are very rare.

**Fact:**

**Myth:** People with mental illness aren't able to work.

**Fact:**

**Myth:** Young people just go through ups and downs as part of puberty, it's nothing.

**Fact:**

**Myth:** People with mental health illnesses are usually violent and unpredictable.

**Fact:**

**Myth:** People with mental health problems don't experience discrimination

**Fact:**

**Myth:** It's easy for young people to talk to friends about their feelings.

**Fact:**

# Graffiti wall



Write what words, positive and negative, come to mind when you hear these terms.

Mental Health

Mental Illness



# Fill the gaps

Mental health problems are very ..... About ..... of people will have a mental health problem severe enough to ask for .....

Everyone experiences mental ..... sometimes. This can happen for many different reasons such as if someone we care about is ill, if we are bullied at school, lose our ..... or if someone we love leaves. But if the distress goes on for a ..... or is ..... with being able to live our lives, it is a ..... and we may even be diagnosed with a mental .....

One of the most common mental health problems is ..... A person living with this feels very low and unhappy and is often unable to do ordinary things like going to ..... or ..... spending time with their ..... and ..... or even getting up out of ..... Many of us will have known someone who has experienced this, or we may have experienced it ourselves.

Most people ..... from even the most ..... mental health problems. But for many people with mental health problems the biggest problem they face is the attitude of .....

Severe	School	Recover	Long time	Problem
Work	Friends	Common	Bed	Other people
Interfering	Job	Family	Depression	Illness
One in four	Distress	Professional help		



# Mental Health v. Mental Illness

1. Young Minds Definition of Mental Health:

2. How does this differ with what you have come up with?

3. Draw similarities to Physical Health.

We all have physical health - some people can become unwell or some people may be very good at looking after their physical health. **Mental Health is exactly the same.**



# Ways of defining mental health



The fact that there are different ways of defining mental health tells us that it is not a straightforward to define. This is partly because mental health can be seen as a very subjective and personal experience that cannot be viewed and judged objectively outside of the person.

1. Define the Deviation from "normal" definition:

What's wrong with this way of defining mental health?

2. Define the Ideal Mental health definition:

What's wrong with this way of defining mental health?



# Mental Health Spectrum

Rather than talking about whether an individual is mentally healthy or not, some psychologists have found it useful to define mental health using a mental health continuum. This relates to the idea that there are degrees of mental health:

Healthy	Reacting	Injured	Ill

Although 'Reacting' is a sign of mental health problems, people are still at a stage where taking care of themselves and using social support networks (friends, family) should be good enough to cope. However, if people move along the continuum towards 'injured' and 'ill' then it is likely that they will need to seek out professional care. They may even get directed towards it if they are particularly ill e.g. referred by a family member or sectioned by a health care worker.

## STUDY HINT

The mental health continuum is the only definition of mental health you have to know specifically, but make sure you know at least one other definition (e.g. Jahoda's) so you can write about different ways of defining mental health.



Using your own words, define what **Mental Health** is:

**Mental Health Continuum:** a way of defining mental health by looking at it on a scale; individuals may feel more or less mentally healthy, rather than being mentally healthy or not, at different times and in different situations.



**Challenge: Look at this definition of mental health:**

'Mental health is defined as a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.'

(Source: World Health Organization, 2014)

Use this definition of mental health to write a description of someone who would be suffering from mental health problems:

# The current Prevalence of mental health problems

**1 in 4 people** are affected by a mental health problem in any year



[time-to-change.org.uk](http://time-to-change.org.uk)

#TimetoTalk

Prevalence: How common something is



## STEP 2 – LEARNING TARGET

- Understand key mental health statistics and incidence rates in different groups.



# How prevalent is mental illness?

1. How many British adults are diagnosed with a mental health disorder (MHD)?

---

2. What are the figures on British children being diagnosed with a MHD?

---

3. How many children does the World Health Organisation estimate has a MHD?

Every seven years the Adult Psychiatric Morbidity Survey (APMS) is carried out to measure the number of adults in England who have different types of mental health problem at that point in time. Fill in the following table with your guess and then the actual figures:

Disorder	My Guess- % of population diagnosed in the last year	Actual % of population diagnosed in the last year
Depression		
Nervous Breakdown		
Obsessive Compulsive Disorder		
Panic Attacks		
Phobias		
Post Traumatic Stress Disorder		
Other Anxiety Disorder		

# Time for some maths



1. Each year, what **percentage** of British children have a clinically diagnosed mental health disorder?

2. Use **standard form** to express the number of people that the WHO estimates to suffer mental health problems across the world.

3. What is the modal value in the data from the 2016 APMS?

4. According to the APMS data, what percentage of the population were diagnosed with panic attacks.  
Give your answer to the nearest whole number.

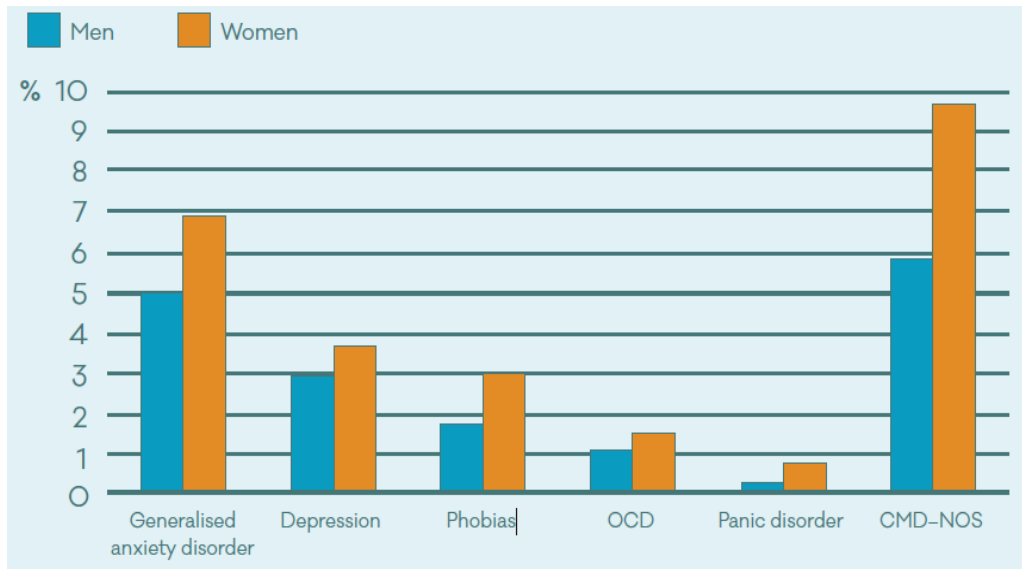
5. An English town has an adult population of approximately 30,000. Estimate how many adults would be diagnosed with an obsessive compulsive disorder over the next year.

The Adult Psychiatric Morbidity Survey also looks at the prevalence of mental health problems by factors such as age and sex.

Look at the graphs and answer the questions:

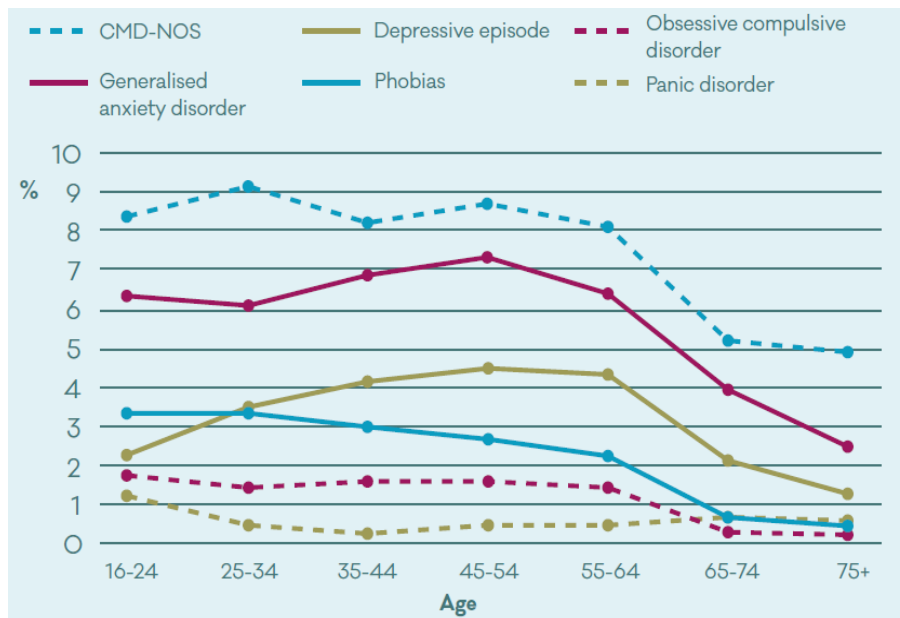


A line graph to show the prevalence of mental health problems by sex:



1. Which sex is more likely to experience mental health problems? \_\_\_\_\_
2. Which is the most common disorder for both men and women? \_\_\_\_\_
3. Which disorder shows the largest difference between men and women? \_\_\_\_\_
4. Which disorder shows the smallest difference between women and men? \_\_\_\_\_

A line graph to show the prevalence of mental health problems by age:



1. Which disorder was the least commonly experienced by people aged 16-24? \_\_\_\_\_
2. Which disorder was the least commonly experienced by people aged 75 or over? \_\_\_\_\_
3. At what age were people most likely to experience a mental health problem in general? \_\_\_\_\_
4. What is the pattern for people's experience of depression over time? \_\_\_\_\_

# Check your understanding

1. Define what is meant by the mental health continuum

2. Explain one other way of defining mental health

3. Which age group is particularly at risk of experiencing mental health problems

4. Which gender is particularly at risk of experiencing mental health problems

5. Which other groups are particularly at risk of experiencing mental health problems and why?



# The incidence of significant mental health problems over time



**Incidence:** measures the number of new cases of mental health problems occurring in a time period e.g. a year



## STEP 3 – LEARNING TARGETS

- Describe changes in the incidence of mental health problems
- Describe key features of the 1959 Mental Health Act
- Outline similarities in attitude towards mental health since 1959



# Incidence of mental health issues

Incidence means the number of new cases of mental health problems occurring in a time period e.g. a year.

It is actually quite difficult to track the incidence of mental health problems over time.

**Discuss:** Why do you think this might be?

Below are some reasons:

1.

2.

3.

# Some facts



Despite these issues, there seems to be a general agreement that the \_\_\_\_\_ of mental health problems is on the rise in the UK

There is an increase in cases every \_\_\_\_\_ especially in anxiety disorders and \_\_\_\_\_

\_\_\_\_\_ the population aged between 16-64 met the criteria for one mental disorder in 1993

This went up to 17.6% per cent in 2007.

It is estimated by 2030 that there will be approximately \_\_\_\_\_ more adults in the UK with mental health problems than in 2013.



## STUDY HINT

You don't need to learn the actual statistics for the prevalence of mental health problems. However it is important to know and understand the general patterns and trends over time.

1. Why do you think mental health problems are on the increase?

2. Are we getting worse at treating mental health problems or are there other explanations?



# How attitudes have changed towards mental health in the UK since the Mental Health Act (1959)

1900's	
1959	
1960's	
1970's	
1980's	
1990's	
2000's	

# The effects of significant mental health problems on the individual and society



## STEP 4 – LEARNING TARGETS

- Define stigma and discrimination.
- Describe the effects of mental health problems on individuals before and after diagnosis.
- Describe the key features of community care and the effects on individuals and society.
- Apply knowledge of the effects of stigma and discrimination.

# How do we talk about someone with a Mental Health Problem?



Acceptable words:

Unacceptable words:

## Stigma and Discrimination



Stigma:



Discrimination:



# The effects of Stigma on individuals before and after diagnosis



**Diagnosis:** The identification of the nature of an illness or other problem by examination of the symptoms.



	Before Diagnosis	After Diagnosis
Effects of <u>Stigma</u> on Individual		

**Self fulfilling prophecy:** when someone behaves in a way an assumption about them expects them to behave.



## STUDY HINT

Note that there is a distinction between stigma and discrimination before and after diagnosis of a mental health problem. Check carefully to see if this distinction is being made in the exam.

# The effects of Discrimination on individuals before and after diagnosis



Working in pairs look at each of the examples on Pages 62-63 of the textbook - Poppy, Dawn, Scott and Faruk. For each one, write down some of the possible effects of discrimination that they experience.

	Before Diagnosis	After Diagnosis
Effects of <u>Discrimination</u> on Individual		

Challenge:

How would the discrimination make them feel?

What might it make them think?

Could it affect how they behave in the future?





# The effects of significant mental health problems on the wider society

Independently use pages 63 to 64 to summarise the effects of mental health problems on wider society under the following headings:

<u>Effects on Public services</u>	
<u>Effects on the Law</u>	
<u>Effects on Society's Attitude</u>	

**Care in the community:** Administering health and social care outside of hospitals and instead treating people in their homes and living in their normal communities.

**Conflict:** A serious disagreement.



# Check your understanding

1. How have attitudes to mental health problems changed over time?

2. What is the difference between stigma and discrimination in relation to mental health problems

3. In what ways might a person with mental health problems be discriminated against

SAMS: Explain one way an individual diagnosed with a mental health problem may experience stigma and discrimination

# Schizophrenia: The clinical characteristics of Schizophrenia



**Schizophrenia:** A psychotic disorder where people lose their sense of self and reality.



## STEP 5 – LEARNING TARGETS

- Describe and identify the clinical characteristics of schizophrenia.
- Demonstrate knowledge of key schizophrenia statistics and prevalence and recovery rates in different groups.



# Myths about Schizophrenia

**Myth 1: People with schizophrenia have a split personality**

**Fact:**

**Myth 2: People with schizophrenia have the same physical health as everyone else**

**Fact:**

**Myth 3: People with schizophrenia can't recover**

**Fact:**

**Myth 4: People with schizophrenia need to be monitored at all times**

**Fact:**

**Myth 5: People with schizophrenia are dangerous**

**Fact:**



# Schizophrenia

1. Why is schizophrenia seen as a significant mental health disorder?

2. What does the word Schizophrenia actually mean?

The International Classification of Diseases (ICD) uses the following criteria for diagnosing schizophrenia:

At least one of the symptoms below:	OR at least two of the symptoms below

Symptoms need to be present for most of the time during an episode of psychotic illness lasting for at least one month

**International Classification of Diseases:** A manual listing hundreds of mental disorders with their associated symptoms used by medical professionals to diagnose mental health problems.





Read the case of Peter, a man diagnosed with schizophrenia.

Peter was diagnosed with schizophrenia at the age of 23. He claimed to hear the voices of secret agents who were plotting to kidnap him. He strongly believed that the agents were able to read his mind and that they were intercepting his thoughts as they left his head. He was convinced that he was in real danger and as a consequence locked himself in his flat for days on end. On one occasion, when his brother broke in and found him, Peter was sitting on a chair but in a contorted, uncomfortable way. His brother described Peter as being a statue-like and completely unresponsive. Peter has spent time on a psychiatric ward. On the ward, Peter became very agitated and spoke almost constantly although there was little substance or meaning to anything that he said. His symptoms subsided after a while and, following drug treatment, he was allowed to go back to his family home. Since being with his parents again, Peter has become very withdrawn and seems to lack any motivation.

Can you identify the examples of the following symptoms of schizophrenia?

Thought disturbances

Delusions

Hallucinations

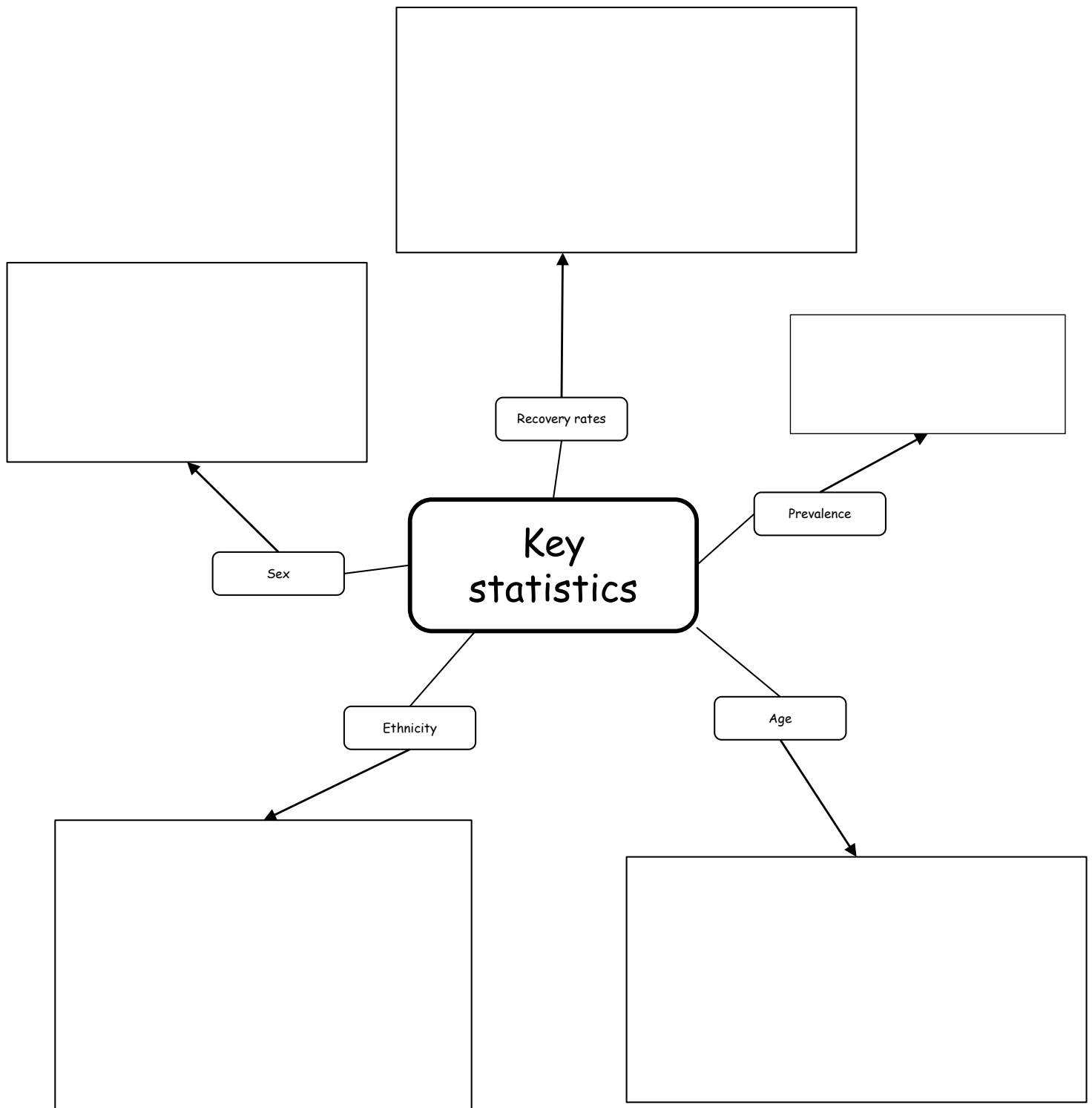
Disorganised speech


Catatonic behaviour

Negative symptoms



# Key statistics of Schizophrenia



**Ethnicity:** Reference to a group of people with a common culture or nationality.   
**Recovery rate:** The number of people that get better after suffering a disorder.

# Check your understanding

1. What are the main clinical characteristics (symptoms) of schizophrenia?

2. What is the prevalence of schizophrenia in the population?

3. Which sex is more likely to be diagnosed with schizophrenia?

4. Which ethnic groups have low rates of diagnosis for schizophrenia?

5. What percentage of people with schizophrenia have fully recovered within ten years?



# Psychological Explanation of Schizophrenia



## STEP 6 – LEARNING TARGETS

- Describe the Psychological Explanation of Schizophrenia - The Social Drift Hypothesis
- Define the key terminology from the Psychological Explanation of Schizophrenia.
- Apply the Psychological Explanation of Schizophrenia.



# The social drift hypothesis

This theory tries to explain why there is a relationship between social class and Schizophrenia.

This is because working class people are five times more likely to be diagnosed with schizophrenia than higher social groups.

Middle and upper class people who develop schizophrenia do not stay in the social class they were born into. By the time they have contact with psychiatric services, patients have often moved into a lower social class.

Why do you think this might be?

Social drift theory:



Disengagement of individuals:



Rejection by society:



# The social drift hypothesis



Take each of the symptoms and decide how they could lead to individuals disengaging and to rejection by society

Symptom	Individuals disengaging from society	Rejection by society
Thought disturbances		
Delusions		
Hallucinations		
Disorganised speech		
Catatonic behaviours		
Negative symptoms		














# Criticisms of Psychological Explanation of Schizophrenia



## STEP 7 – LEARNING TARGETS

- Discuss criticisms of the Psychological Explanation of Schizophrenia - The Social Drift Hypothesis.
- Describe the issue of cause and effect.
- Apply the problems of establishing cause and effect to the Psychological Explanation of Schizophrenia.

# Evaluation of Social Drift Theory

Cannot establish cause and effect		
Physical factors could be the cause		
There may be a bias in diagnosis		  
Too much focus on the role of society		   
Ignores biological factors		   

**STUDY HINT:**

The problem of cause and effect is something you may have to specifically refer to when evaluating. Remember that it is important to find out what actually causes something to happen so that it can be controlled. In this case, we are trying to control schizophrenia either by treating it or stopping it from happening in the first place.

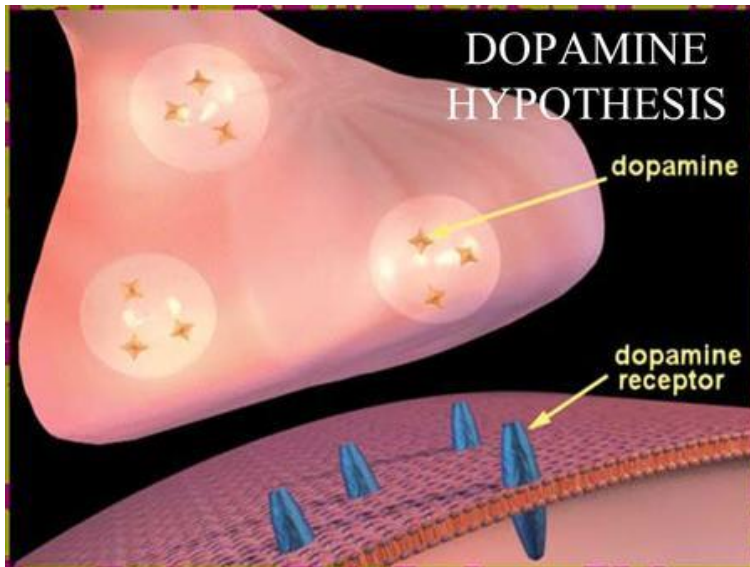
## Check your understanding

1. How does the idea of 'disengagement of the individual' relate to social drift theory?

2. How does the idea of 'rejection by society' relate to social drift theory?

3. In what ways is social drift theory not an effective explanation of schizophrenia?

# Biological Explanation of Schizophrenia



YOU MAKE MY  
DOPAMINE LEVELS  
GO ALL SILLY.

## STEP 8 – LEARNING TARGETS

- Describe the Biological Explanation of Schizophrenia - The Dopamine Hypothesis and Brain Dysfunction.
- Define the key terminology from the Biological Explanation of Schizophrenia.
- Apply the Biological Explanation of Schizophrenia.



# The Biological theory of Schizophrenia

- The biological theory aims to explain schizophrenia by looking at the biological factors behind it.
- Many biological psychologists agree that there is a genetic basis to this particular mental health problem.
- If there is a gene for schizophrenia, then it is possible that it goes on to affect the brains of people who are diagnosed with it.

Challenge: How do you think psychologists may have come to the conclusion that schizophrenia is genetic?

## Dopamine Hypothesis



One idea is that there is too much of a \_\_\_\_\_ called \_\_\_\_\_ in their brains.

All humans produce dopamine and it is linked to behaviours such as movement, perception, \_\_\_\_\_ and mood.

However, when there is \_\_\_\_\_ levels of dopamine, movements may become \_\_\_\_\_, and people may experience \_\_\_\_\_.

Research shows that the messages from \_\_\_\_\_ that transmit dopamine fire too easily or too often, which can lead to many of the symptoms of schizophrenia.

People with schizophrenia seem to have unusually high numbers of \_\_\_\_\_ receptors on certain neurons, resulting in \_\_\_\_\_ dopamine binding and therefore more \_\_\_\_\_ firing across synapses.

This could explain why people with schizophrenia may believe, \_\_\_\_\_ or see something that does not \_\_\_\_\_

**Neurotransmitter:** A chemical that passes messages around the brain from neuron to neuron.

**Dopamine:** A neurotransmitter.





# Dopamine hypothesis



Use the video clip and the diagram on page 69 to draw what happens to the brain when too much dopamine is being transported across synapses:



# Faulty Brain Structures

1. How does the Frontal Cortex and Prefrontal Cortex differ in a schizophrenics brain?



2. What areas of the persons psychological functioning can this then go on to affect?



3. What is different about a schizophrenics Temporal Lobes?

4. What is different about a schizophrenics Hippocampus?

5. Are the effects of the faulty brain structures seen right away? Explain your answer.



Temporal Lobe:

Hippocampus:



# Research Task -Case Study



Watch the 'Living with Schizophrenia' documentary and complete the case study below. Follow the link (<https://www.youtube.com/watch?v=2HSSxTOPSww>) or find the case study on the Schizophrenia Theories page of our website: [www.passmorespyschology.weebly.com](http://www.passmorespyschology.weebly.com)

	Peter	Shauna	Abigail	Simon
<p><b>Symptoms</b> (when / duration) and experiences with the illness</p>				
<p><b>Life events</b> leading to or as a result of the illness</p>				
<p><b>Treatments accessed</b> experiences of these</p>				
<p><b>Psychological management</b> Triggers and coping strategies</p>				
















# Criticisms of the Biological Theory



## STEP 9 – LEARNING TARGETS

- Discuss Criticisms of The Biological Theory of Schizophrenia -Dopamine Hypothesis and Brain Dysfunction.
- Describe the Nature/Nurture Debate.
- Apply the Nature/Nurture Debate to The Biological Theory of Schizophrenia

# Evaluation of the Biological Approach

Nature Vs Nurture		   
Cause and Effect cannot be established		  
Deterministic		   
Reductionist		  
Too broad a label		

**Brain dysfunction:** When the brain is not working as normal.



**Brain function:** The role or activity of the brain.

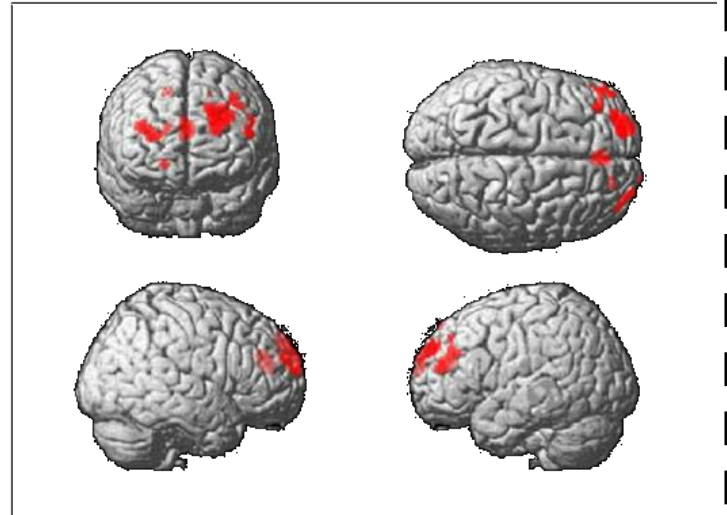
## Check your understanding

1. What is the neurotransmitter associated with schizophrenia, according to biological theory and why?

2. What parts of the brain are associated with schizophrenia and how?

3. What are main limitations of the biological theory as explanations of schizophrenia?

# Key Study: Daniel et al (1991)



## STEP 10 – LEARNING TARGETS

- Outline the Background of Daniel et al.'s research.
- Describe the method, design), sample, materials/apparatus, and procedure of Daniel et al.'s research.
- Describe the results of Daniel et al.'s research.
- Describe the conclusions of Daniel et al.'s research.
- Discuss the criticisms of Daniel et al.'s research.

# Schizophrenia Research Study: Daniel, Weinberger, Jones et al. (1991)



Background:

Hypothesis:

Design:

Method:

Sample:

Materials and Apparatus



# Schizophrenia Research Study: Daniel, Weinberger, Jones et al. (1991)

Procedure:

Main results:

Conclusions:

# Schizophrenia Research Study: Daniel, Weinberger, Jones et al. (1991)



Criticisms:

# Check your understanding

1. What scanning technique was used by Daniel et al?

2. Why were the same participants used in both conditions?

3. Which other controls were used in this study?

4, according to the results, when did amphetamine have an effect?

5. What are some of the criticisms of Daniel et al's study?

# Clinical Depression: The clinical characteristics of Clinical Depression



## STEP 11 – LEARNING TARGETS

- Describe and identify the clinical characteristics of clinical depression.
- Describe and identify key statistics in relation to of clinical depression.



# Clinical Depression

1. At what point will a doctor diagnose a patient with clinical depression?

2. Who can suffer from Depression? Explain your answer.

## The clinical characteristics of Depression:

According to the ICD there are three main grades of depression: mild, moderate and severe.

The ICD defines someone suffering from a depressed mood as having 'loss of interest and enjoyment, and reduced energy leading to increased fatigability and diminished activity. Marked tiredness after only slight effort is common'.

Two of these symptoms, as well as two from the list below, should generally be present for a diagnosis:

- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 
- 

Depending upon the number and severity of the symptoms, a depressive episode may be specified as mild, moderate or severe.

For all three grades (mild, moderate or severe), diagnosis is usually given if symptoms persist for more than two weeks for most of every day, but may be less if the symptoms come on very suddenly and are severe.

**Depression:** A loss of interest and enjoyment in everyday life, with increased tiredness and reduced activity.





Read the case of Ellie, a woman diagnosed with Clinical Depression:

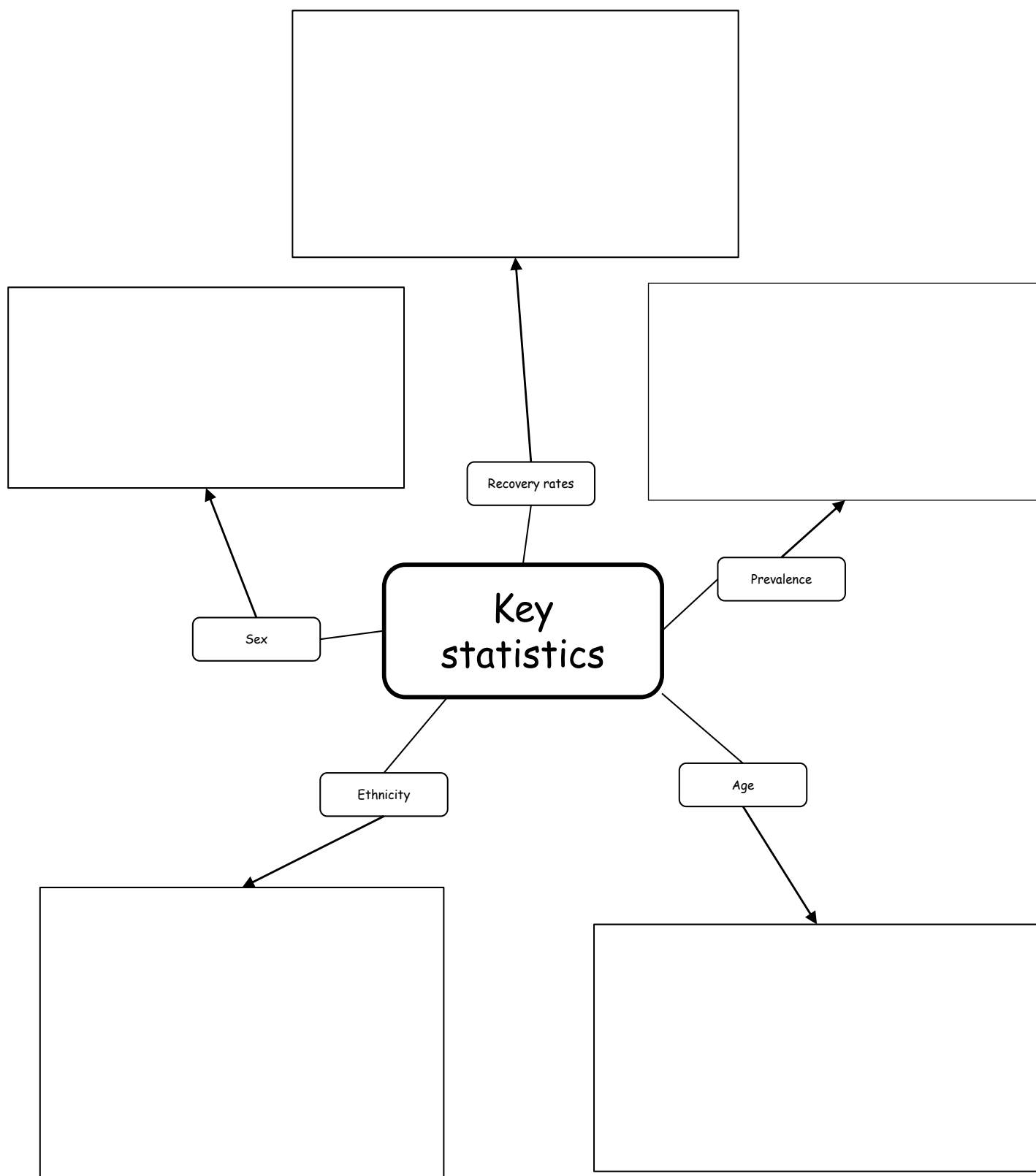
Ellie was diagnosed with depression aged 20. She was at university but had stopped going to her classes. Whenever she saw her roommates she snapped at them and started staying mainly in her own bedroom and sleeping. She didn't really feel like eating much and found that her clothes were getting too loose for her. She was offered a job at the university working as a research assistant for one of her lecturers but she turned it down because she didn't think she would be any good at it. She normally spent at least a couple of hours a day updating her social media pages and posting photos but she stopped doing this and when her friends messaged her to check on her she just ignored them. She tried to continue with her university work but found that she just couldn't be bothered to read the research papers and it was too much effort to focus on it.

Can you identify the symptoms of depression that Ellie is showing?

Make sure you use the correct terminology from the ICD.



# Key statistics of Clinical Depression



**Primary Care Trust (PCT):** A part of the National Health Service in England covering different parts of the country.



# Research task



What are the reasons for the gender difference in prevalence rates?

Use this article on gender differences as a starting point to your research  
<https://www.verywell.com/why-is-depression-more-common-in-women-1067040>

Make notes on your findings under the following headings:

**Sex differences in hormones**

**Gender differences in socialisation**

**Gender differences in coping style**

**Differences in Frequency of and Reaction to Stressful Life Events**

**Social Roles and Cultural Influences**



# Check your understanding

1. What are the main characteristics of clinical depression?

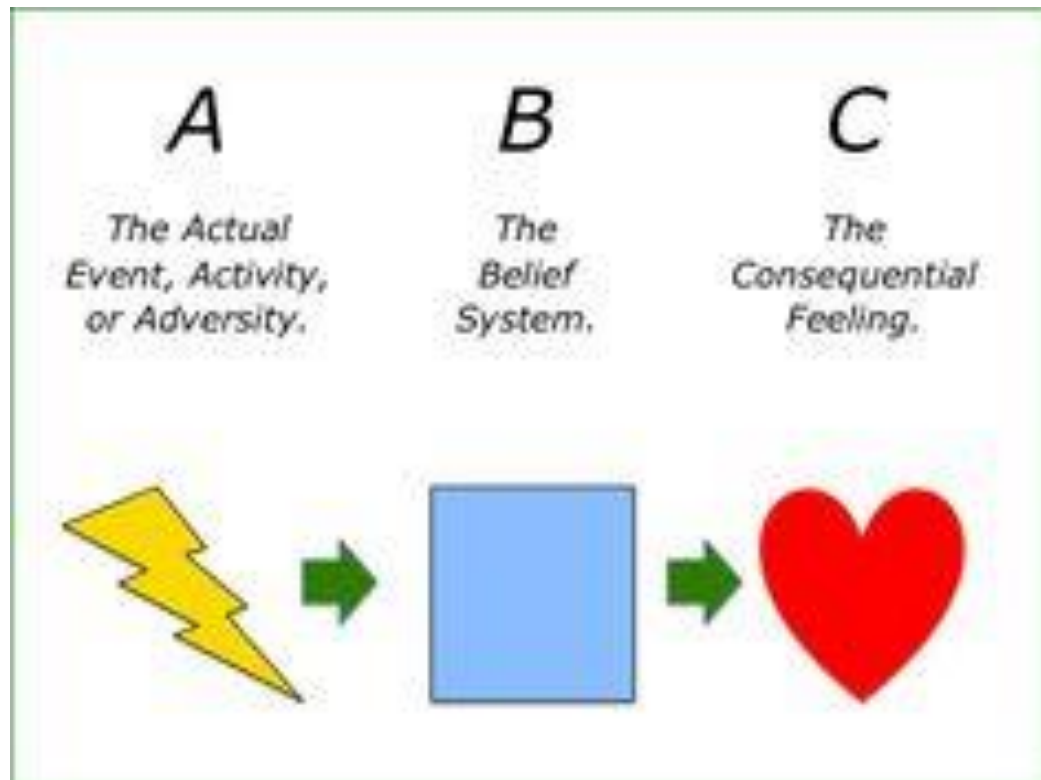
2. Which minority ethnic group reports the highest levels of depression in the UK?

3. Where is someone with severe depression likely to be cared for?

4. Approximately how many children and young people suffer from depression in the UK?

Challenge: Why do you think the number of young people with depression has nearly doubled between the 1980's and 2000's?

# The Psychological Explanation of Clinical Depression



## STEP 12 – LEARNING TARGETS

- Identify the key features of cognitive psychology.
- Describe the Psychological Explanation of Depression - The ABC Model
- Define the key terminology from the ABC Model.
- Apply the ABC Model.



Imagine the following **Activating Events** occurring to you.

Take each of these scenarios and for each write down:

1. What different **Beliefs** could occur
2. What **Consequences** could result from these activating events?

a) Your mate best doesn't reply to your text.

b) you fail a class test that you revised hard for.

c) someone you met at a party doesn't accept your 'friend request'.

d) you fail to get a job you applied for at a fast food restaurant.



# The ABC model of clinical depression

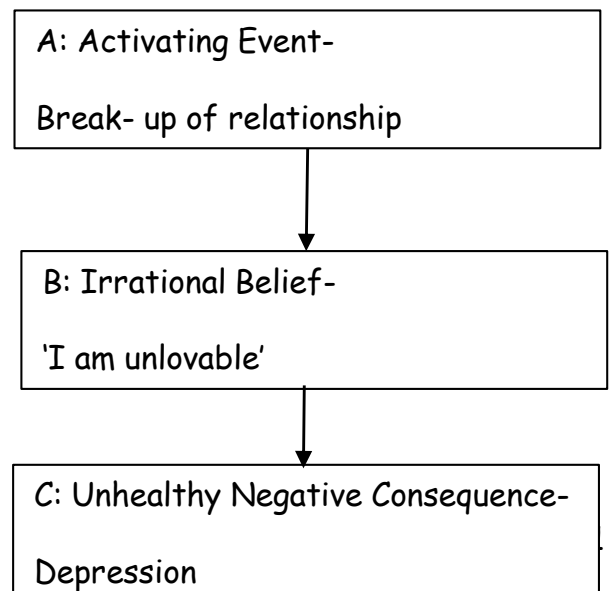
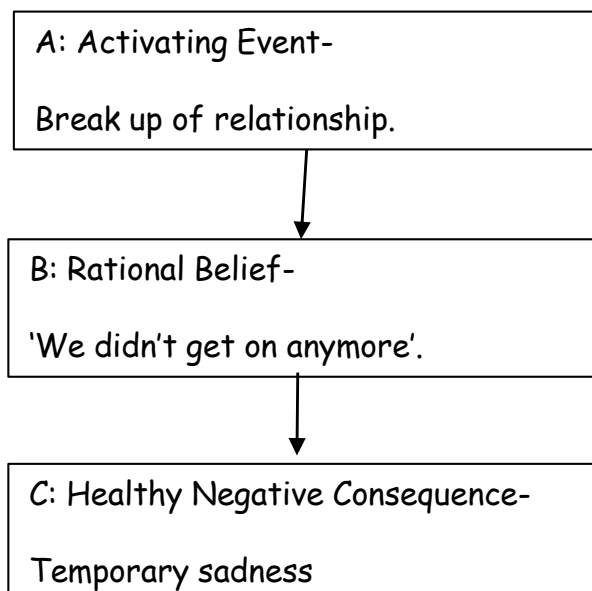
1. According to Ellis, why does depression occur?

2. What is the key feature of us being happy or depressed?

3. Describe the three- stage ABC model below, using the key terms related to this theory:

4. How can irrational thoughts eventually lead to depression?

**This is Ellis' ABC model:**

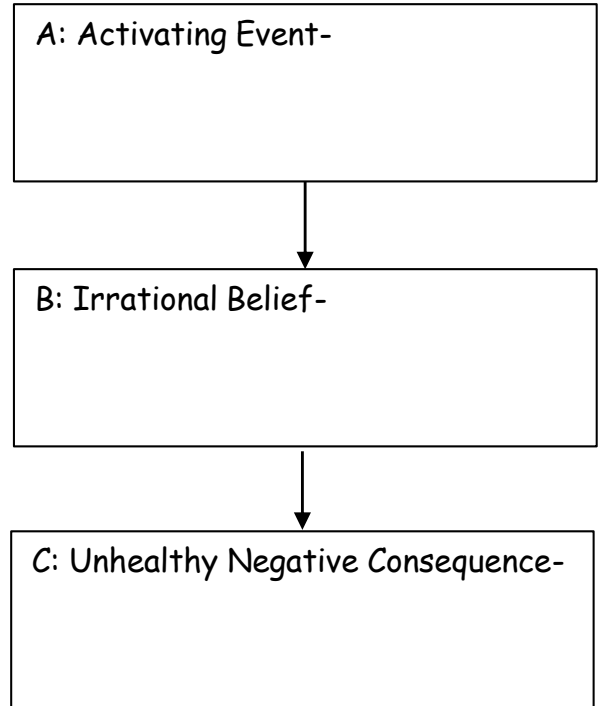
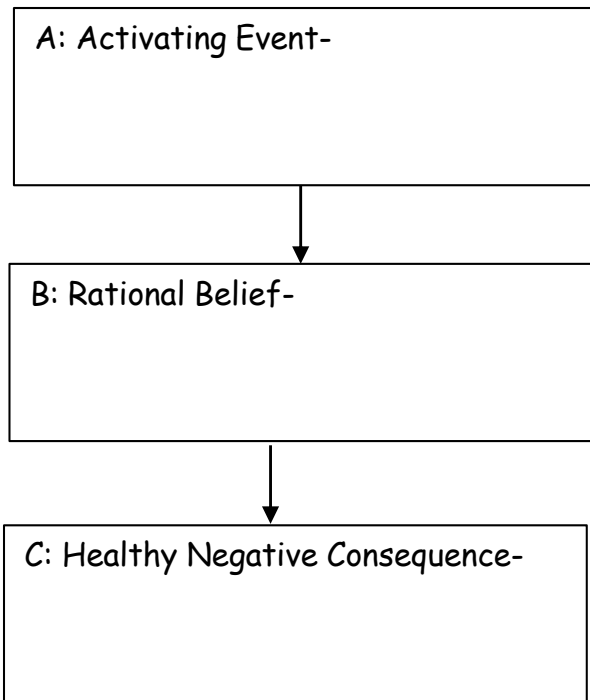




# The ABC model of clinical depression

## 5. Think of your own scenario to explain how the ABC model works:

Explain how someone could view a situation from both a rational and irrational point of view



## 6. What is the name of the therapy based on this model?

### How does this therapy work?

### STUDY HINT

You can be asked to describe a whole theory, or you can expect more specific questions on features of the theory. Like the ABC model, you may just get asked about rational and irrational beliefs or about the role of activating events, beliefs and consequences.















# Criticisms of the Psychological Explanation of Clinical Depression



## STEP 13 – LEARNING TARGETS

- Discuss criticisms of the Psychological Explanation of Clinical Depression - The ABC Model.
- Describe the Freewill/Determinism Debate.
- Apply the Freewill/Determinism Debate to the Psychological Explanation of Depression.

# Criticisms of the ABC model

Blames the individual for their illness		   
Hard to conclude cause and effect		   
Ignores other causes		  
Too reductionist		 
The irrational evaluation may actually be rational		



# The free Will vs Determinism Debate

One of the great debates within psychology is whether humans have free will and are able to make choices about how they think and act or whether their behaviour is determined by factors that are outside of the control of the individual.

Use the table on page 78 to come up with a list of arguments for each side of the debate

Free Will	Determinism





# The Free Will vs Determinism Debate

**Free will:** The idea that we have control over our own destiny and can change our behaviour and ways of thinking.



**Determinism:** The idea that how we think and behaviour is determined by outside forces such as genetics or environmental influences such as our upbringing.

## STUDY HINT

You need to know how the free will/ determinism debate is related to ABC model of depression, as it is named in the specification. However, in the application question, you may also have to apply it to another topic.

**Debate: *Depression is determined by faulty, irrational thinking.***

To what extent do you agree with this statement? Use the ABC Model explanation and criticisms to plan a response to this statement.

Depression is determined by irrational thinking

Criticisms of saying that depression is determined by irrational thinking

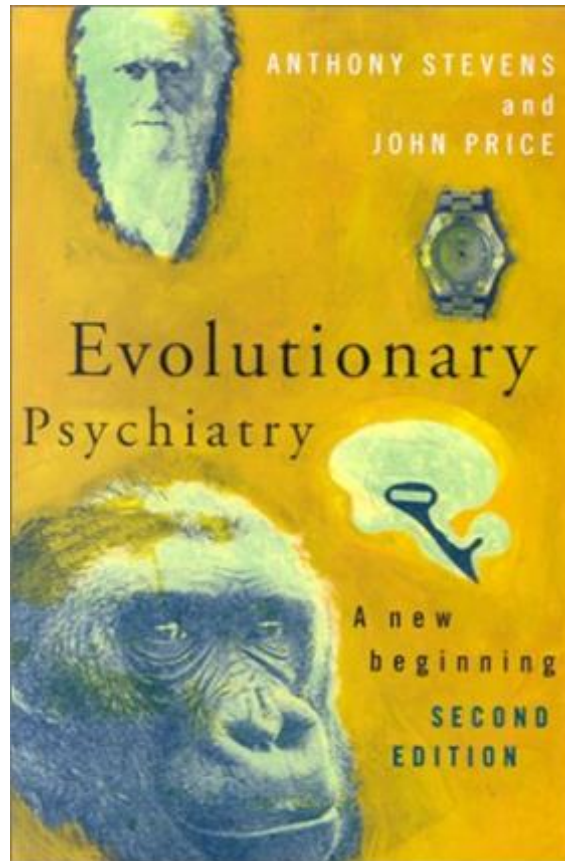
# Check your understanding

1. Name the three parts of the ABC model

2. Explain how an irrational belief could lead to depression

3 What is the name of the therapy that was based on Ellis' model?

# Biological Theory - the Social Rank Theory of Clinical Depression



## STEP 14 – LEARNING TARGETS

- Identify the key features of evolutionary psychology.
- Describe the Biological Explanation of Depression - The Social Rank Theory.
- Define the key terminology from the Social Rank Theory.
- Apply the Social Rank Theory.

# Evolutionary explanation



Research the evolutionary theory using the link below. Choose four key points and add below.

[https://en.wikipedia.org/wiki/Rank\\_theory\\_of\\_depression](https://en.wikipedia.org/wiki/Rank_theory_of_depression)

Use your textbook to complete the explanation of the evolutionary explanation below.



## The Evolutionary Function of Depression

Evolutionary psychologists Anthony Stevens and John Price (2001) suggest that depression has \_\_\_\_\_ to have a specific purpose that helped us \_\_\_\_\_ and \_\_\_\_\_.

If we lose at something, depression is a natural \_\_\_\_\_ which allows us to come to terms with the fact that we have lost and the consequences of this.

It also \_\_\_\_\_ us from aspiring to achieve a higher \_\_\_\_\_ than we currently have and to stop competing.

By accepting a position of lower rank in society, it prevents the person who has won from 'inflicting further injury' on the loser and ensures the loser will not try again to gain a \_\_\_\_\_ rank in society.

This means that \_\_\_\_\_ can happen quickly without too much \_\_\_\_\_

By giving in to the \_\_\_\_\_, the loser maintains their \_\_\_\_\_ position in society.

Millenia ago this would have allowed the loser to have continued \_\_\_\_\_ of the group, which was essential for \_\_\_\_\_

Being \_\_\_\_\_ and losing \_\_\_\_\_ was seen as preferable to being \_\_\_\_\_ from the group entirely.

# Theories of depression



The theories of clinical depression help us understand how and why we get depression.

There are two main theories that you need to know and learn:

## 1. Evolutionary psychologists

## 2. The cognitive approach

Discuss: what is the difference between these two main approaches?

Evolutionary psychology:

Social Rank Theory:





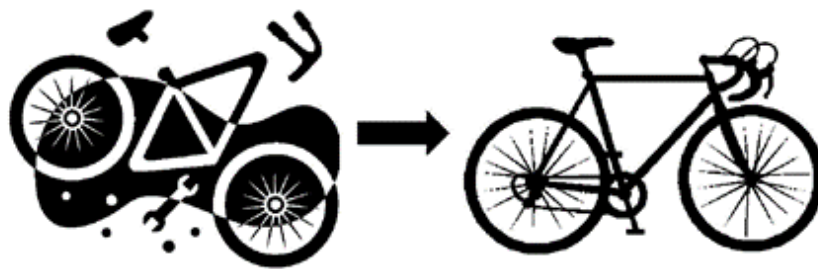
# Evolutionary explanation

Challenge : can you describe the social rank theory in no more than 60 words?

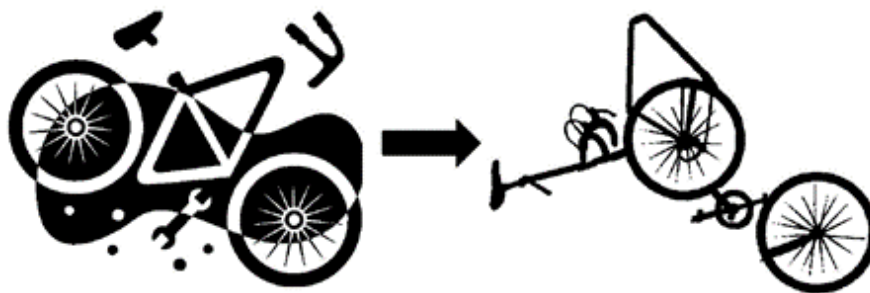
Remember to include all the key points:

Compare your 60 words with the rest of the class. Who gave the best description?

# Criticisms of the Social Rank Theory of Clinical Depression



Sum of the parts equals the whole



Can't reduce the parts and retain the meaning of the whole

## STEP 15 – LEARNING TARGETS

- Discuss criticisms of the Biological Explanation of Clinical Depression - The Social Rank Theory.
- Describe the Reductionism/Holism Debate.
- Apply the Reductionism/Holism Debate to the Biological Explanation of Depression.



It is a reductionist theory because....

It says that only  
"losers" will suffer  
from depression.  
This isn't true  
because...

It ignores other  
causes of  
depression such  
as...

**Criticisms of the  
Social Rank  
theory of  
Depression**

It is reductionist within the biological approach...





# Reductionism V Holism

## STUDY HINT

You need to know about how the **reductionism** and **holism** debate is related to the social rank theory of depression as it is named in the specification.

### Reductionism vs Holism

Using page 34 of your textbooks, draw the difference between the reductionist view and the holistic view below:

Holism:

Reductionism:



Does the evolutionary explanation fit into the Reductionism or Holism side of the debate?

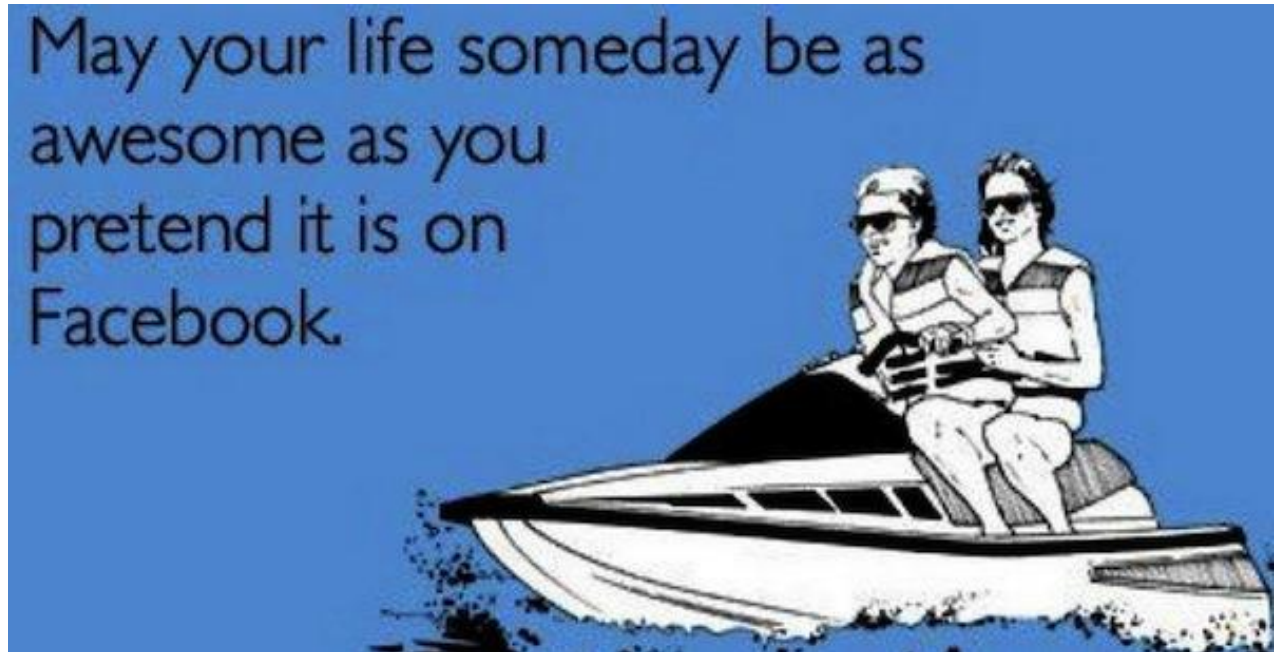
# Check your understanding

1. What is evolutionary psychology?

2. According to the social rank theory of depression, why is depression viewed as beneficial for society?

3. Why would depression have been beneficial to the individual millennia ago?

## Key study: Tandoc et al (2015)



### **STEP 16 – LEARNING TARGETS**

- Outline the Background of Tandoc et al.'s research.
- Describe the method, design), sample, materials/apparatus, and procedure of Tandoc et al.'s research.
- Describe the results of Tandoc et al.'s research.
- Describe the conclusions of Tandoc et al.'s research.
- Discuss the criticisms of Tandoc's research



## Below is Tandoc's Envy Questionnaire. Have a go at completing it:

### Envy

Eight items relating to Facebook envy were generated and participants were asked to rate each item on a 5-point Likert Scale. Participants were asked to rate how much they agreed with the following statements:

(a) I generally feel inferior to others.

Strongly agree / agree / don't know / disagree / strongly disagree

(b) It is so frustrating to see some people always having a good time.

Strongly agree / agree / don't know / disagree / strongly disagree

(c) It somehow doesn't seem fair that some people seem to have all the fun.

Strongly agree / agree / don't know / disagree / strongly disagree

(d) I wish I could travel as much as some of my friends do.

Strongly agree / agree / don't know / disagree / strongly disagree

(e) Many of my friends have a better life than me.

Strongly agree / agree / don't know / disagree / strongly disagree

(f) Many of my friends are happier than me.

Strongly agree / agree / don't know / disagree / strongly disagree

(g) My life is more fun than those of my friends.

Strongly agree / agree / don't know / disagree / strongly disagree

(h) Life is fair.

Strongly agree / agree / don't know / disagree / strongly disagree

What problems can you see with these questions? Would respondents have been truthful?



# Clinical Depression Research Study: Tandoc, Ferrucci, Duffy (2015)

Background:

Aim:

Hypothesis:

Method:

Research Method/ Design:

Sample:



# Clinical Depression Research Study: Tandoc, Ferrucci, Duffy (2015)

## Materials:

Facebook:

Envy:

Depression:

## Procedure:

Main results:

Conclusions:



# Clinical Depression Research Study: Tandoc, Ferrucci, Duffy (2015)

Criticisms:



Write a letter to Tandoc explaining problems with the research and how they can be improved:

Why does Tandoc's study not fully support Social Rank theory of depression?



# Check your understanding

1. What emotion is Subordination most like according to Tandoc et al?

2. How does social rank theory relate to the Tandoc et al's study?

3. How many people actually participated in Tandoc et al's research?

4. Which different questionnaires were used in the survey?

5. What were the main results of the study?

Envy:



# Biological treatments to Depression and Schizophrenia



## STEP 17 – LEARNING TARGETS

- Describe how anti-psychotics are used to treat schizophrenia.
- Describe how anti-depressants are used to treat depression.
- Apply knowledge of the brain and neuropsychology to explain how the drugs work.



# Anti-Psychotics as a treatment to Schizophrenia

Anti-psychotic drugs are a type of medication that is available on \_\_\_\_\_ and is used to treat mental illnesses such as \_\_\_\_\_ and severe depression.

Anti-psychotics can be taken in different ways such as in \_\_\_\_\_ or \_\_\_\_\_ form or sometimes given as a \_\_\_\_\_.

## Recap:

1. According to the biological approach, which neurotransmitter is there high levels of which can cause some symptoms of schizophrenia?

2. What do you think psychologists might attempt to do to this neurotransmitter?

## How anti-psychotic drugs block the dopamine receptors

Watch the video clip about anti-psychotic drugs on the Applications of research – Psychological Problems page on our website: [www.passmorepsychology.weebly.com](http://www.passmorepsychology.weebly.com)

Make notes: What actions are taking place in the brain when antipsychotic drugs are taken by the patient?



# Anti-Psychotics as a treatment to Schizophrenia

One theory is that some symptoms of Schizophrenia are caused by an \_\_\_\_\_ of the neurotransmitter \_\_\_\_\_ within the brain which causes too many messages to be transmitted during a \_\_\_\_\_ episode

Anti-psychotic medication works by \_\_\_\_\_ some of the dopamine \_\_\_\_\_

This helps stop or reduce the psychotic episode by reducing the number of \_\_\_\_\_s that are able to bond with the postsynaptic neuron.

Therefore \_\_\_\_\_ the amount of \_\_\_\_\_ that are able to be sent around the brain.

Look at the image of the neuron on page 84, showing how the antipsychotic drug blocks the dopamine receptors. Draw and label the diagram in the space below:

# Anti-Psychotics as a treatment to Schizophrenia



## Types of Anti Psychotic Drugs

1. Briefly describe Conventional Anti- Psychotics:

2. What are the side effects of Conventional Anti- Psychotics:

3. Which symptoms of Schizophrenia do conventional drugs help with?

4. Briefly describe Atypical Anti- Psychotics:

5. What are the side effects of Atypical Anti- Psychotics:

6. Which symptoms of Schizophrenia do Atypical drugs help with?

**Anti-psychotics:** Medication designed to help people who are experiencing psychotic episodes such as with illnesses like schizophrenia.

**Positive (+) symptoms of schizophrenia:** Thoughts and feelings that the individual does not normally have when they are well, such as delusions and hallucinations. (i.e. they are ADDED+)

**Negative (-) symptoms of schizophrenia:** Thoughts or behaviours that the individual had before being ill and either no longer has or has to a lesser extent, such as feeling lethargic or social withdrawal (i.e. they are REMOVED-)





# Anti-Depressants as a treatment for Depression- Fill the Gaps.

Anti-depressants work by \_\_\_\_\_ the number of \_\_\_\_\_ in the brain such as \_\_\_\_\_ or noradrenaline, which can help people feel less depressed.

Anti-depressant medications such as SRRI'S work by preventing the serotonin being \_\_\_\_\_ into the \_\_\_\_\_ (this is where the serotonin is normally recycled to be used again).

This leads to a build-up of \_\_\_\_\_ in the \_\_\_\_\_ (the gap between the two neurons)

It is thought that the \_\_\_\_\_ serotonin in the synapse helps the neurons \_\_\_\_\_ better, which in turn helps people feel less \_\_\_\_\_.

**Anti-depressants:** Medication that is used to help people who are depressed.





# Anti-Depressants as a treatment for Depression

Watch the clip of the role of anti-depressant medication on the Applications of research – psychological problems page on our website: [www.passmorespsychology.weebly.com](http://www.passmorespsychology.weebly.com)  
Then answer the questions below.

1. What do antidepressants do to levels of serotonin?

2. What is the most commonly used antidepressant?

3. What do they block?

4. What happens to the receiving neurons?

5. Why do they have less side effects?

6. What alternative treatments are there?

# Psychotherapy as treatments to Depression and Schizophrenia



## STEP 18 – LEARNING TARGETS

- Describe how psychotherapy is used to treat depression and schizophrenia.
- Apply knowledge of how it improves mental health.

**Psychotherapy:** 'Talking' therapy designed to help people with their problems using psychology rather than medicine.







# Psychotherapy

Use the clips about psychotherapy and CBT on the Applications of research – Psychological Problems page of our website: [www.passmorespsychology.weebly.com](http://www.passmorespsychology.weebly.com)  
Make some notes below about what psychotherapy and CBT are.

How CBT works:

# Psychotherapy



Application task - how does CBT change thinking and specific symptoms?  
Refer to ICD characteristics.

How has CBT said to be effective in treating depression?

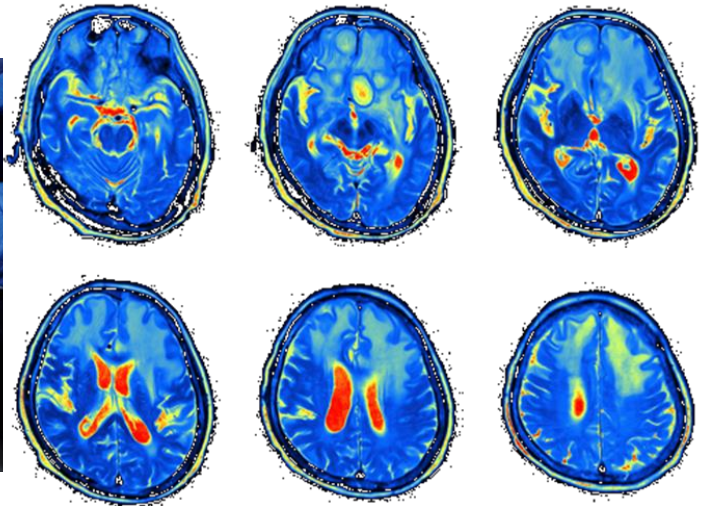
How has CBT said to be effective in treating Schizophrenia?

Online task- Go to the Mind website and search 'cognitive behavioural therapy'. Go to the CBT page and watch the video 'What is CBT?, Making Sense of Cognitive Behavioural Therapy'.

According to the clip, what are two reasons why CBT might not be suitable for everyone?

- 1.
  
- 2.

# The development of neuropsychology for studying schizophrenia and depression.



## STEP 19 – LEARNING TARGETS

- Outline examples of neuropsychological tests and brain imaging techniques.
- Explain how these techniques can be used for studying schizophrenia and clinical depression.

**Neuropsychological tests:** These are tests designed by psychologists to measure how well the brain is functioning. They are often used with people who have experienced some form of brain injury to allow the psychologists to understand what damage has occurred to the patient's cognitive function, i.e. how their thinking/memory has been affected.

**Brain imaging:** Machinery that allows us to scan people's brain to see what activity is occurring or see differences in structure.



# Neuropsychological tests



What is a neuropsychological test?

Briefly describe the Wisconsin Card Sorting Test and how it's used with Schizophrenic patients:

Briefly describe Becks Depression Inventory and how it's used with Depressed patients:

# Brain Imaging Techniques



What is a brain imaging technique?

Briefly describe Functional magnetic resonance imaging (fMRI):

Briefly describe Electroencephalogram (EEG)s:

# Brain Imaging Techniques

Can you identify which Brain Imaging Techniques would be used when studying schizophrenia and depression and how they would be used?



Schizophrenia:

Depression:

# Key terms Glossary

ABC Model (Activating events, Beliefs and Consequences):

Anti- Depressants:

Anti- Psychotics:

Attitudes:

Brain dysfunction:

Brain function:

Brain imaging:

Care in the community:

Clinical Characteristics:

Conflict:

# Key terms Glossary



Depression:

Determinism:

Diagnosis:

Discrimination:

Disengagement of individuals:

Dopamine:

Envy:

Ethnicity:

Evolutionary Psychology:

Free will:



# Key terms Glossary



Hippocampus:

Holism:

International Classification of Diseases:

Mental Health Act (1959):

Mental health continuum:

Negative symptoms of Schizophrenia:

Neuropsychological tests:

Neurotransmitter:

Positive symptoms of Schizophrenia:

Prevalence:

# Key terms Glossary



Primary Care Trust:

Psychotherapy:

Recovery Rate:

Reductionism:

Rejection by society:

Self fulfilling prophecy:

Schizophrenia:

Social Drift Theory:

Social Rank Theory:

Stigma:

# Key terms Glossary



Temporal Lobe:

Additional notes

# STEP 20 – PSYCHOLOGICAL PROBLEMS REVISION CHECKLIST

		What do I need to learn & understand?	Revise for assessment task	How much confidence do I have in each area?			Revise for GCSE exam
			<small>shaded areas could be included</small>				<small>shaded areas could be included</small>
KEY TERMS: Defining mental health & tracking its development over the decades		Outline ways of defining mental health, including the mental health continuum.					
		Outline the the current prevalence of mental health problems, including current statistics and differences between age; gender; and sexual orientation.					
		Outline the the incidence of significant mental health problems over time, including changing classification; similarities and differences					
		Outline how attitudes have changed towards mental health in the UK since the 1959 Mental Health Act					
		Explain the effects of significant mental health problems on the individual and society: • the effects of stigma on individuals before and after diagnosis • <i>the effects of discrimination on individuals before and after diagnosis</i>					
		• the effects of significant mental health problems on the wider society, including care in the community					
THE CLINICAL CHARACTERISTICS OF SCHIZOPHRENIA		Explain clinical schizophrenia					
		Outline the clinical characteristics of schizophrenia as outlined in the International Classification of Diseases (ICD)					
		Outline the key statistics of schizophrenia including reference to prevalence; age; sex; ethnicity; and recovery rates					
THE BIOLOGICAL EXPLANATION OF SCHIZOPHRENIA		Explain the dopamine hypothesis by: • outlining the process of synaptic transmission • outlining the role of dopaminergic neurons and synaptic transmission in an overactive dopamine system causing high dopamine levels in the brain					
		Explain how the structure and functions of the brain relates to cognitions and behaviour by: • outlining brain dysfunction in relation to brain volume and brain activity • outlining the roles of the frontal lobes; hippocampus; and temporal lobes • outlining the impact of neurological damage in schizophrenia					
		Evaluate explanations by explaining criticisms of this theory including the nature/nurture debate					
THE PSYCHOLOGICAL EXPLANATION OF SCHIZOPHRENIA		Explain the social drift theory of schizophrenia: • rejection by society • disengagement of individuals					
		Evaluate the explanation by explaining criticisms of this theory including problems establishing cause and effect.					
SCHIZOPHRENIA RESEARCH STUDY – Daniel, Weinberger, Jones et al. (1991) – The effect of amphetamine on regional cerebral blood flow during cognitive activation in schizophrenia.		Outline the background of Daniel et al.'s research.					
		Describe the method, design, sample, materials/apparatus, and procedure of Daniel et al.'s research.					
		Describe the results of Daniel et al.'s research.					
		Describe the conclusions of Daniel et al.'s research.					
		Discuss the criticisms of Daniel et al.'s research.					
		Apply knowledge of strengths & weaknesses of <b>laboratory experiment</b> to Daniel et al.'s research: (a) the reliability and validity of laboratory experiments. (b) the reliability and validity of natural experiments.					
THE CLINICAL CHARACTERISTICS OF CLINICAL DEPRESSION		Explain clinical depression					
		Outline the clinical characteristics of clinical depression as outlined in the International Classification of Diseases (ICD)					
		Outline the key statistics of clinical depression including reference to prevalence; age; sex; ethnicity; and recovery rates					
THE BIOLOGICAL EXPLANATION OF CLINICAL DEPRESSION		Explain the social rank theory of clinical depression: • the evolutionary function of depression • the role of a lower rank in reducing conflict					
		Evaluate explanations by explaining criticisms of the theory including the reductionism/holism debate.					
THE PSYCHOLOGICAL EXPLANATION OF CLINICAL DEPRESSION		Explain the ABC Model of clinical depression: • rational versus irrational beliefs • the roles of activating events, beliefs and consequences					
		Evaluate explanations by explaining criticisms of the theory including the freewill/determinism debate.					
CLINICAL DEPRESSION RESEARCH STUDY – Tandoc et al. (2015) – Study into Facebook use, envy, and depression among college students: Is Facebooking depressing?		Outline the background of Tandoc et al.'s research.					
		Describe the method, design, sample, materials/apparatus, and procedure of Tandoc et al.'s research.					
		Describe the results of Tandoc et al.'s research.					
		Describe the conclusions of Tandoc et al.'s research.					
		Discuss the criticisms of Tandoc et al.'s research.					
		Apply knowledge of strengths & weaknesses of <b>questionnaires</b> to Tandoc et al.'s research: (a) the reliability and validity of questionnaires.					
APPLICATIONS OF RESEARCH – The development of treatments		Outline the use of anti-psychotics and anti-depressants to treat schizophrenia and clinical depression and how they improve mental health through changing the actions of the brain and interactions between neurons and synapses.					
		Outline the use of psychotherapy for treating schizophrenia and clinical depression and how it improves mental health.					
		Outline the development of neuropsychology for studying schizophrenia and clinical depression, including neuropsychological tests and brain imaging techniques					
NUMERACY in psychology		Read a source (extract) and identify the key information related to the question and the key terms or theories.					
		Draw conclusions from data presented in a line graph.					
		Calculate percentage difference based on data in a graph.					