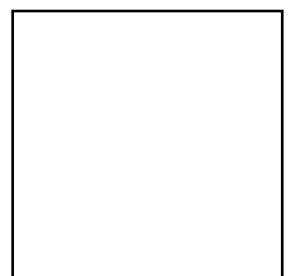
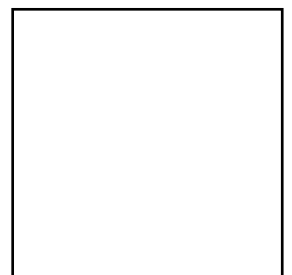
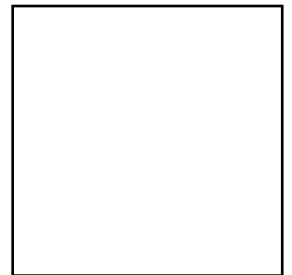


**Nelson Thornes
Distance Learning**

A2 Psychology

Colin Scaiff



Nelson Thornes

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This update published in 2011 by:
Nelson Thornes Distance Learning
Delta Place
27 Bath Road
CHELTENHAM
GL53 7TH
United Kingdom

11 12 13 14 15/10 9 8 7 6 5 4 3 2 1

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Acknowledgements

Blackwell Publishing Ltd for an extract from R Mcilveen, L Higgins, A Wadeley, P Humphreys, *BPS Manual of Psychology Practicals: Experiment, Observation and Correlation* (1992), p.191;
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Key to icons used throughout this pack:



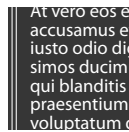
Writing



Hand-in activity (either by post or email)



Discussion



Reading



Internet research or online activity

Introduction



Hello and welcome to A2 Psychology Distance Learning

Over the next year, we shall be studying a number of psychological topics such as eating behaviour, addictive behaviour and schizophrenia. Each week during the video conference, we shall review the unit you have worked on. It is essential that you complete all the activities in preparation for the video conference, and that assignments are completed on time and given to your link teacher to post (or you can email them directly to your tutor).

As you know from completing the AS Psychology via distance learning, distance learning is not a 'soft' option. It is a full-time course, and it is recommended that you allocate at least four hours additional study per week, and you must work, completing activities from the pack in your study periods and at home if you are to get the most from this course.

Over the next year, we shall be focusing on studying four psychological topics, schizophrenia, addiction and research methods and you will sit two examinations which, combined with the AS modules you have already studied, will give you an A Level in Psychology.

In this Introduction, you will learn to:

- understand what topics you will be studying over the next year
- understand the format of the A2 examination
- begin to understand how A2 differs from AS
- understand what sources are available to you to take your studies further
- reflect on what skills and knowledge you gained from last year and highlight any possible targets for this A2 year.

What are the differences between AS and A2?

A2 Level

There are a number of similarities and differences between the AS and A2 course. Like the AS examinations, at A2 there are two examinations that are assessed on two different days. The two unit examinations are called Unit 3 and Unit 4.

Unit 3 examination

Like the AS Units 1 and 2, the Unit 3 examination at A2 is a 1½ hour examination paper. At AS, all the questions are compulsory whereas on the Unit 3 paper there is some degree of choice over which questions you answer. From your research on the previous activity, you will see that there are eight questions on the Unit 3 paper. There is more choice over the questions that you answer at A2 so you are looking to answer three questions from the eight included on the paper. In your A2 course, you will be covering the material that would enable you to answer three questions.

Unit 3 topics

You were introduced to social psychology in the AS course when you looked at conformity and obedience. We continue our look at social psychology by looking at a further social psychology topic at A2—relationships. You were introduced to physiological psychology in the AS course when you looked at stress. We continue our look at physiological psychology by looking at biological rhythms and sleep. The final topic is a new topic and focuses on eating behaviour.

Unit 3 assessment

As with the AS course, you will be asked to complete regular written assignments. For the Unit 3 part of the course, you will be expected to complete an assignment based on each of the four modules completed. These will be AQA examination-style questions. Your assignments at AS were marked out of 24 and tended to be a series of short-answer questions. Your assignments at A2 are pieces of extended writing, marked out of 25. These marks are made up of 9 marks for describing (Skill AO1) and a total of 16 marks for analysis, evaluation and application (Skills AO2 and AO3 combined). This means that you will need to do nearly twice as much evaluating as describing in your answers.

Unit 4 examination

The Unit 4 examination is a 2-hour exam. The paper is split into three sections A, B and C. You should aim to answer one question per section. In order to limit the amount of material you have to learn, the areas you need to focus upon have been pre-selected. You will be looking to answer the question on schizophrenia in Section A, and addictive behaviour in Section B. Section C is on psychological research and scientific method. There are shorter answer questions in this section and you need to answer all questions.

Unit 4 topics

The last area of the AS course looked at individual differences and you were briefly introduced to the disorder schizophrenia. We will be looking at schizophrenia in greater detail and examining biological and psychological explanations in detail. The psychology of addictive behaviour is a new topic. It examines whether some people are vulnerable to addiction and how addictive behaviours can be reduced. You have already encountered research methods during the AS course and we will be revisiting some of the methods already covered and reviewing this area in greater detail.

Unit 4 assessment

The questions on Sections A and B are extended pieces of writing marked out of 25 with 9 marks for describing (Skill AO1) and 16 marks for analysis, evaluation and application (Skills AO2 and AO3 combined). The compulsory part C research method questions are likely to be shorter, parted questions and are marked out

of 35. You will be asked to complete one assignment for both schizophrenia and addictive behaviour. For the assessment of the research methods part of the course, your tutor may ask you to conduct a piece of practical work and write a report.

Activity 2



In your notes, summarise the differences between the AS and the A2 course.

Units of work and the course textbook

Similar to the AS units, the A2 units of work need to be completed by using one textbook. The textbook for the A2 course is

AQA A2 Psychology A Student Book ISBN 978-0-7487-9825-4

The following publication, which you may have used for your AS studies, is still relevant when studying A2 Psychology. Follow the link for Psychology Review www.philipallan.co.uk/psychologyreview/index.htm and encourage your school to order a copy of this for your library.

The following link will take you to an extensive resources list, which provides details of additional books, journals, magazines and websites.

<http://store.aqa.org.uk/qual/gce/pdf/AQA-2180-W-TRB-RL.PDF>

The following link will also take you to the Nelson Thornes learning space. This is an interactive virtual learning platform designed to supplement your course, blend your learning and enhance the distance learning experience.

<http://learningspace.nelsonthornes.com/NT3/common/Login.aspx>

Activity 3



In the AS course, when you looked at individual differences, you were introduced to four approaches in psychology.

Using the internet and pages ix and x in your textbook, outline the key assumptions of each of the four psychological approaches:

■ Biological:

■ Behavioural:

■ Cognitive:

■ Psychodynamic:

What are the key areas for success at A2?

It is important to have a clear sense of what you can do to give yourself the best chance of being successful at A2.

There are certain things you can do to help yourself.

- Make sure that you keep your file in order, keep your notes under the correct headings, group together notes/articles under the appropriate titles, use coloured dividers to help you.
- Look at past exam papers, although this will be limited as this is a new course. However, you can look at the specimen question papers (see the web link in Activity 1) and the questions in your textbook in order to give yourself some sense of the way examiners think and ask questions. To see the type of questions that might be asked in the Unit 3 examination, look at pages 311–313 in your textbook. To see the type of questions that might be asked in the Unit 4 exam, look at pages 550–552.
- Be realistic about the amount of work you need to do, and keep to schedules and deadlines.
- Reflect on what you did last year. Were there areas where you could have improved?

Activity 6

Using the above points to help you, set yourself three targets to cover these areas. Make sure that these are targets you can realistically keep, and that will help you to keep up with the demands of your course. These can then be reviewed at a later date with your tutor.



STUDENT DETAILS

School:

(Photograph)

Name:	
Address:	
Postcode:	D.O.B:
Phone:	Mobile:
E-mail:	

GCSE QUALIFICATIONS		
Subject	Grade	Year

AS & A2 STUDY			
Subject	AS/A2	Grade	Year

GCSE Mean Score and Grade	
Score	Grade

Career Aims

Hobbies/Interests

Things that may be a barrier to learning

Do you have a part-time job? Y/N What is it? _____ How many hours a week? ____.
FURTHER RELEVANT INFORMATION:

Contact numbers

Nelson Thornes Distance Learning

01242 267111 (Fax) 01242 267294

Your tutor may not be immediately available on these numbers, but messages can be left or sent via the fax and will be passed on immediately to your tutor.

Your tutor

Phone/fax

ISDN

Email

Study Calendar



A2 Psychology

Study Week	Start date	Unit no.	Unit Descriptor	Externally Assessed Assignment
1		Introduction	A2 Psychology Introduction	
2			Psychological Investigation 1	
3		1.1	Introducing Psychopathology	
4		1.2	Biological explanations of Schizophrenia	
5		1.3	Psychological explanations of schizophrenia	✓
6		1.4	Therapies for schizophrenia	
7			Psychological Investigation 2	
8		2.1	Models of addictive behaviour	
9		2.2	Factors affecting addictive behaviour	
10		2.3	Reducing addictive behaviour	✓
11			Psychological Investigation 3	
12		3.1	The application of scientific method in psychology	
13		3.2	Designing psychological investigations	
14		3.3	Data analysis and reporting of investigations	✓
15			Psychological Investigation 4	✓
16		4.1	Biological rhythms	
17		4.2	Sleep states	
18		4.3	Disorders of sleep	✓
19		5.1	The formation, maintenance, and breakdown of relationships	
20		5.2	Human reproductive behaviour	
21		5.3	Effects of early experiences and culture on adult relationships	✓
22		6.1	Eating behaviour	
23		6.2	Biological explanations of eating behaviour	
24		6.3	Eating disorders	✓
25		Revision	Revision	

A2 Assignments



Total for this question: 25 marks

- 1 Outline and evaluate **one or more** biological explanations for schizophrenia. In your evaluation you should refer to research evidence. (25 marks)

Total for this question: 25 marks

- 2 “Children who experiment with smoking can very quickly get hooked on nicotine and it only takes a few cigarettes to turn them into regular smokers, a new study has found. Two other studies published today show that smoking by peers and teachers can also independently influence the take up of smoking by young teenagers.” (Action on Smoking and Health, 2002)
- (a) Explain why policy makers would be more inclined to accept the evidence of these “published studies” rather than mere opinion. (5 marks)
- (b) Outline and evaluate the learning model as an explanation of initiation and maintenance of smoking addiction in young people. (4 marks + 6 marks)
- (c) We are all exposed to models of addictive behaviour, yet not everyone becomes addicted. Discuss individual differences in vulnerability to addiction. (5 marks + 5 marks)

Total for this question: 35 marks

- 3 Many children in Scotland now have the opportunity to have all of their lessons in Gaelic from when they begin nursery education right through to the end of their primary school education. A team of researchers wanted to investigate what effects this would have on the children’s learning of English. Using a school that had both nursery and primary classes and provided education in both Gaelic and English, 20 children were randomly selected from each year group, 10 of whom had all of their lessons in Gaelic and 10 of whom had all their lessons in English. Each child was assessed in their English language ability by the use of a recognised developmental scale. Informed consent for the investigation was gained from parents or guardians of the children as well as from the school authorities.

The researchers used a two-tailed hypothesis.

Table 1 summarises the data gained from the investigation.

Table 1 contains mean scores for English language ability through nursery and primary school education.

Age	Score on English language Scale for children taught in Gaelic	Score on English language Scale for children taught in English
3 to 4	3	11
4 to 5	5	12
5 to 6	8	10
6 to 7	10	11
7 to 8	20	10
8 to 9	10	9
9 to 10	20	10
10 to 11	40	12
11 to 12	50	11

- (a) Why was it not possible to gain informed consent from the children themselves? (2 marks)
- (b) Why did the researchers assess children who had their lessons in English as well as the children who had their lessons in Gaelic? (2 marks)
- (c) Write an appropriate two-tailed hypothesis for this investigation. (2 marks)
- (d) What level of significance should the researchers use when analysing the data? Explain why this would be suitable. (3 marks)
- (e) (i) Explain how a random sample could have been selected for each year group. (1 mark)
- (ii) With reference to the above study give **one** limitation of a random sample. (2 marks)
- (f) With reference to the data in **Table 1** outline and discuss the findings of this investigation. (10 marks)
- (g) From nine years of age through to 16 years of age when they left school many of the children who were taught in Gaelic also learnt French. It was noted that their ability in this new language appeared to increase with age more than would normally be expected.

Design a study to investigate the **relationship** between age and the ability of the Gaelic-speaking children in learning French. Sufficient detail should be given to allow replication, for example, details of a hypothesis, variables, design features, procedure and sampling could be given. (12 marks)

-
- 4 Write up a psychological investigation using a traditional report format – see the Psychological Investigation check list at the end of the Assignments section as a guide to writing this report.

Total for this question: 25 marks

- 5 Discuss the role of endogenous pacemakers **and** exogenous zeitgebers in the sleep/waking cycle and at least **one** other biological rhythm. (9 marks + 16 marks)

Total for this question: 25 marks

- 6 (a) Outline **one or more** theories relating to the formation and/or maintenance of relationships. (9 marks)
- (b) Evaluate **one** of the theories outlined in (a) with particular emphasis on the nature of relationships in different cultures. (16 marks)

Total for this question: 25 marks

- 7 (a) Outline factors influencing attitudes to food and eating behaviour. (5 marks)
- (b) Outline and evaluate **one or more** psychological explanations of **one** eating disorder. (4 marks + 16 marks)

Remember to put your name on your assignment before submitting it.

If your tutor has agreed for you to email your assignment, remember to copy in your link tutor.

Psychological Investigation check list

See pages 545-547 of the A2 textbook for more detail.

Title

Abstract

Have you stated:

- the topic area studied?
- the aim/hypothesis?
- brief details of the method used?
- the principal findings?
- the conclusion of your findings?

Introduction

Have you:

- stated the general area of your study?
- referred to relevant background studies?
- clearly stated your aim?
- precisely stated: (a) the alternative/experimental hypothesis?
(b) the null hypothesis?
- reported how the aim/hypothesis was arrived at?
- stated whether the alternative hypothesis is directional (1-tailed) or non-directional (2-tailed)?

Method

Have you:

- divided this section into suitable subsections; design, participants, apparatus/materials, and procedure?

Have you stated:

Design

- the method used?
- the design used?
- the nature of any experimental groups/conditions?
- the nature of any control groups/conditions?
- the IV and DV or the variables correlated?
- the use of control measures?
- stated the minimum level of statistical significance you will accept?

Participants

- your number of participants?
- the population from which participants were drawn?
- how participants were selected/sampled?
- how participants were allocated to experimental groups/conditions?
- relevant characteristics of participants, e.g. age range, sex?

Apparatus/materials

- details of all apparatus and materials used?
- any standardized instructions given to participants?

Procedure

- the procedure followed in such a way that someone else could replicate it precisely using your description?

Results

Have you:

- provided a summary table of results?
- provided titles for all graphs, charts and data tables?
- labeled all axes and columns of your graphs, charts and data tables?
- used appropriate descriptive/inferential statistical techniques?
- stated full reasons why a particular statistical test was selected to analyse your data?
- reported appropriately your observed and critical values?
- reported your level of statistical significance?
- reported the outcome of your study in terms of the hypotheses tested?

Discussion

Have you stated:

- the results that you obtained?
- what your results mean in terms of your aim/hypothesis?
- your findings with reference to the studies quoted in your introduction?
- the limitations of your study?
- how improvements could be made to the study if it were to be done again?
- suggestions for follow-up studies?
- any wider implications of your findings?

References

Have you:

- provided full references for all sources used and quoted by name?
- written references in a conventional style?


Appendices

Have you:

- provided copies of such things as stimulus materials and experimental layouts which are referred to in the text but not included elsewhere?
- provided a table of raw data?
- included specimen statistical calculations?
- provided appropriate titles and labeling for all appendices?

Module 3

Psychopathology, Psychology in Action and Research Methods



Psychological Investigation 1



Wilcoxon

Example practical—an experiment to investigate the effectiveness of imagery and rehearsal as methods of recalling word-pairs

Imagery can be a far more effective way of remembering information than rehearsal. Many memory-improving techniques, such as mnemonics, encourage people to utilise their visual memory, thus enabling them to recall far more information than they would have been able to retain using simple rehearsal.

Procedure

Step 1: Your participant is required to learn the pairs so that later when you give the first word of the pair they will be able to write down the second word.

Step 2: There are two memory techniques that the participant should use; imagery and rehearsal.

Rehearsal: The participant is requested to repeat the two words in a quiet voice four times.

Imagery: The participant is requested to remain silent while forming a mental image or picture in which the two words are associated or interacting in some way (the more vivid or unusual the better). For example, if you gave the word-pair clown-bicycle, the mental picture you form might be of a clown riding a bicycle.

Step 3: Use counterbalancing so that participant 1 receives list 1 and then list 2; participant 2 receives list 2 and then list 1.

Step 4: Allow 30 seconds for the participant to study the first list.

Step 5: After the participant has looked at the first list, ask them to count backwards in threes from a 3-digit number for about 30 seconds.

Step 6: Read out the first words to your participant and ask them to write down the second word on a piece of paper. Repeat the procedure for the second list.

Step 7: Record the correct number of correct words recalled for both lists.

Word list 1

Repeat

Rabbit – house
Boy – rope
Table – skull
Slave – party
Ladder – baby
Teacher – pudding
Kettle – fox
Flower – money
Bear – candle
Clock – moon

Word list 2

Imagery

Shoe – mountain

Doctor – flag

Book – fish

Lamb – bird

Heart – water

Mule – dress

Snake – fire

Tree – queen

Harp – elephant

Horse – potato



Topic 1 Psychopathology

Unit 1 Introducing Psychopathology: Explanations, Diagnosis and Treatment in General

In this unit, you will learn to:

- outline definitions of abnormality
- outline the key concepts, assumptions, methods of study and treatments of the Biological, Behavioural, Cognitive and Psychodynamic models
- outline factors that need to be taken into account when looking at psychological disorders like schizophrenia
- apply the assumptions of the biological approach to biological treatments
- outline issues relating to classification and diagnosis of psychological disorders like schizophrenia
- outline issues relating to the reliability and validity of classification systems such as DSM and ICD.

Key terms:

- | | |
|----------------------------|------------------------|
| ■ Abnormal behaviour | ■ Patient |
| ■ Models/approaches | ■ Symptoms |
| ■ Biological/medical model | ■ Syndromes |
| ■ Behavioural model | ■ Reliability |
| ■ Cognitive model | ■ Validity |
| ■ Psychodynamic model | ■ Descriptive validity |
| ■ Treatment | ■ Predictive validity |
| ■ Therapies | ■ ICD |
| ■ Classification | ■ APA |
| ■ Diagnosis | ■ DSM |

Introduction

You have already studied an element of psychopathology last year and discovered it is the scientific study of **abnormal behaviour**. You also studied the various ways of defining abnormality, including some of the drawbacks of those definitions.

Activity 1

Test your knowledge from last year and list the **three** different possible definitions for abnormality.



As you make your way through this unit, you will encounter the various **models/approaches** (in other words, ways of approaching an idea), adopted by practitioners who work with or investigate mental illness.

Activity 2

Read page 314 of your textbook.

Explain why it is important to establish the particular approach a practitioner is using to approach a mental illness and give an example.



Explanations, diagnosis and treatment in general

In addition to learning about definitions of abnormality, you also learned a little about the theoretical approaches/perspectives. You will have noticed that often there is no one answer to the issues or illnesses encountered. In this section, you will be encountering those approaches in much more detail and hopefully understanding how they compare and contrast.

Activity 3



Read page 317 of your textbook.

What are the **two** main models used to explain mental disorders and how do they each generally view the disorders?



The psychological approach can be further sub-divided into: behavioural, cognitive and psychodynamic. The **biological/medical model** is sometimes just seen as one approach and, at others, as sub-divided into specialisms such as 'genetic' and 'neurochemical'. Either way, it is helpful to see how they compare in terms of general principles.

Activity 4

Read page 318 of your textbook.

Using the table on page 318 of your textbook, fill in the table below on the biological, **behavioural**, **cognitive** and **psychodynamic** models. Try to make the points brief and easy for you to read and understand in the future.

At vero eos e
accusamus et
iusto odio d
simos ducim
qui blanditi
praesentium
voluptatum



Model	Key concepts
Biological (Medical)	
Behavioural	
Cognitive	
Psychodynamic	

As the approaches differ in the way in which they approach psychology generally, so too does their view of normality and abnormality.

Activity 5



Using the same table from your textbook, fill in your own version of this part of the table.

Model	Assumptions: normal behaviour
Biological (Medical)	
Behavioural	
Cognitive	
Psychodynamic	

Model	Assumptions: abnormal behaviour
Biological (Medical)	
Behavioural	
Cognitive	
Psychodynamic	

Model	Methods of study
Biological (Medical)	
Behavioural	
Cognitive	
Psychodynamic	

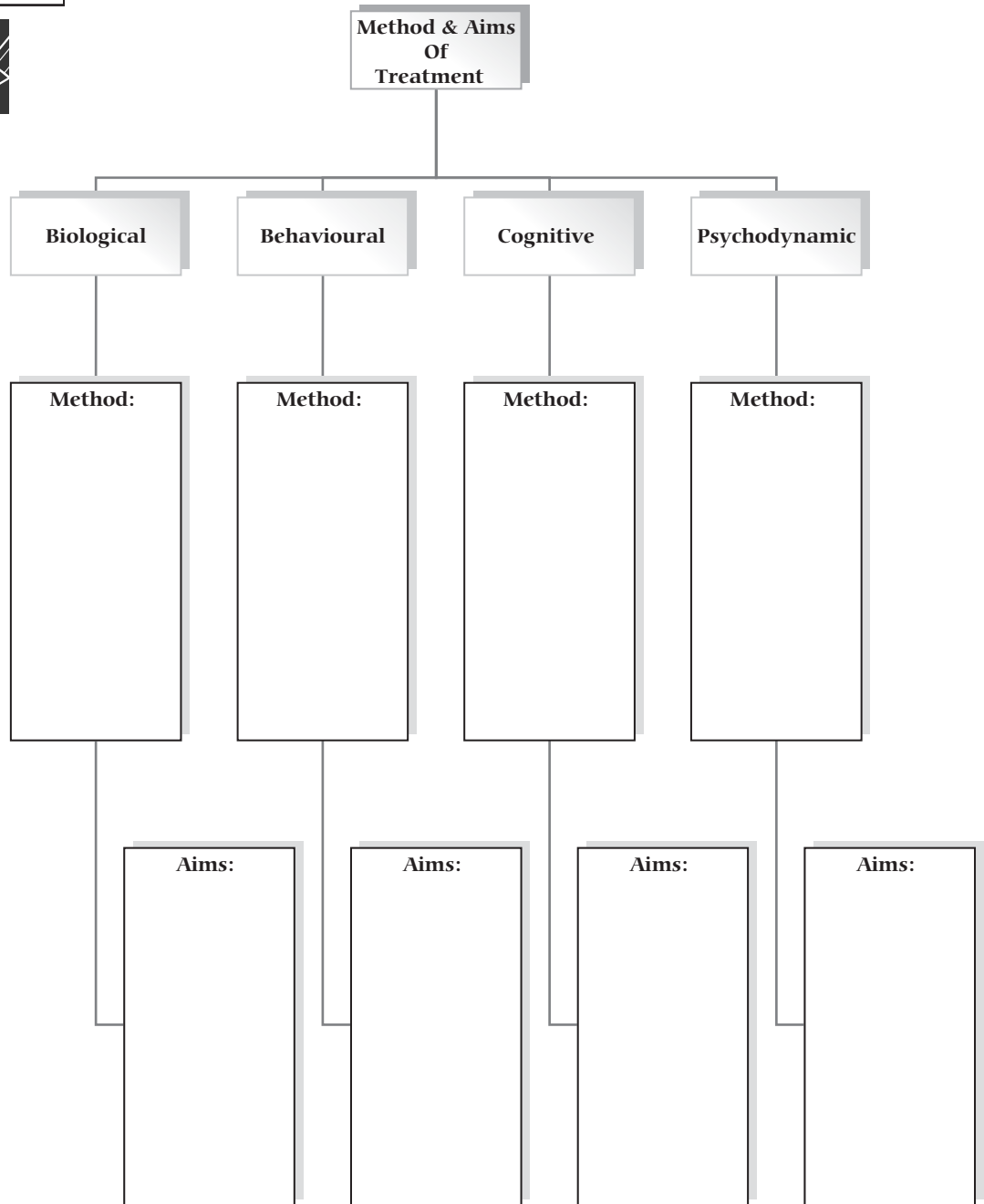


It is logical that if the approaches differ in their views on normality and abnormality, then they will likewise consider different methods of **treatment** appropriate.

Activity 6



Using the same table again from page 318 of your textbook, fill in the blank boxes below:



Evaluating explanations and therapies

The fact that the approaches do differ in their perspectives means that no single stance will be considered perfect by all people. Because of this, it is important that we are aware of the strengths and weaknesses of the approaches when looking at particular disorders.

Activity 7

Read page 317 of your textbook.

Identify **three** factors that you will need to take into account when looking at explanations of the disorders you go on to study this year:



While all the approaches express an opinion on how certain disorders should be treated, practitioners will take care in deciding which to choose. It is evident that some treatments are more appropriate for some disorders than others.

Activity 8

Read pages 319–320.

Under the following titles, summarise the issues experienced by researchers when evaluating the **therapies** they may use.

- 1 Does the research compare like with like?



2 Does the investigator have an effect?

3 Does previous treatment have an effect?

4 Are improvement effects due to the therapy?

5 How do we measure effectiveness?



Classification and diagnosis

The most influential approach in terms of **classification** and **diagnosis** of mental disorders is the biological approach and it is therefore important to understand its assumptions.

Activity 9

At vero eos e
accusamus et
iusto odio digni
simos ducimus
qui blanditis
praesentium
voluptatum



Read page 320 of your textbook.

Then join the boxes on the left with the correct boxes on the right using different-coloured pens—beware, as they are not necessarily worded in the same way as the textbook so you will need to read and understand it first!

Syndromes

is seen as passive and called the '**patient**'

Explanations and treatments can be found

are clusters of signs and **symptoms**

Mental abnormality manifests itself showing

which occur regularly

An individual with a mental disorder

which can be seen separate from one another for each separate disorder.

Syndromes represent distinctive disorders

certain signs and symptoms

Based on the assumptions above, there is also the view that it is entirely possible to both classify and diagnose mental disorders. It stands to reason that, if one believes that disorders can be identified in this way, then a system could be developed to help people diagnose disorders and differentiate between them.

Activity 10



Read page 320 of your textbook.

List the characteristics of an ideal diagnostic system.



As with any system that categorises something, there will be times in which it would be found extremely useful, but not always.

Activity 11

At vero eos e
accusamus e
iusto odio di
simos ducim
qui blanditi
praesentium
voluptatum d

In the text below, shade all the advantages one colour and all the disadvantages another colour. Fill in the key below with the relevant colours to remind yourself which colour represents which view.

It is possible to use a reliable diagnosis to identify an appropriate therapy as treatments are frequently specific to certain disorders.

Sometimes classification can lead to a person becoming stigmatised, as they have been labelled by a classification.

Often, if the diagnosis is accurate it can be helpful with prognosis (planning of treatment and management of a disorder).

Knowing a diagnosis can enable further research into underlying causes of a disorder.

One of the most common issues is with misdiagnosis, in which a person is diagnosed incorrectly and then receives the incorrect therapy or treatment.

Diagnostic systems frequently reflect the culture and time within which they have been developed, and so it must be questioned as to whether they apply to all societies.

Diagnostic systems make it easier for communication between mental health practitioners easier, as it produces a kind of shorthand of the multitude of possible symptoms.

The assumption of classifiable difference between that which is normal and that which is abnormal could be considered too simplistic. As such, diagnostic systems ignore grey areas, which it could be suggested is not true to the reality.

KEY:

Disadvantages

Advantages



Reliability and validity

Validity was an issue with earlier classification systems because, unlike for physical conditions, there are no completely objective tests to enable us to verify abnormal behaviour. Therefore, the closest we can come to a really valid standard is to, at least, come to some sort of agreement about the diagnosis of disorders. This diagnosis comes in the form of classification systems.

Activity 12

Read pages 321–322 of your textbook and answer the following questions.

- 1 What is **descriptive validity**?
- 2 What is **predictive validity**?
- 3 What does **ICD** stand for and what is its function?
- 4 What do the numbers after ICD stand for (i.e. ICD-10)?
- 5 What does **APA** stand for and what work do they do?
- 6 What do the letters **DSM** stand for?

7 How has DSM changed over the years?

8 Finally, list below the ways in which DSM and ICD differ from each other.



**Activity
13**



Log on to Kerboodle and complete the following activity related to this unit.
Student worksheet: Reliability and validity in diagnosis and classification of disorders.



**Activity
14**



Review the learning outcomes below and tick the box if you can answer the following questions:

- 1 outline definitions of abnormality
- 2 outline the key concepts, assumptions, methods of study and treatments of the Biological, Behavioural, Cognitive and Psychodynamic models
- 3 outline factors that need to be taken into account when looking at psychological disorders like schizophrenia
- 4 apply the assumptions of the biological approach to biological treatments

- 5 outline issues relating to classification and diagnosis of psychological disorders like schizophrenia
- 6 outline issues relating to the reliability and validity of classification systems such as DSM and ICD.

If you are unable to tick any of the boxes, review the topic area again before your next tutorial.



Key terms: test yourself

- Abnormal behaviour
- Models/approaches
- Biological/medical model
- Behavioural model
- Cognitive model
- Psychodynamic model
- Treatment
- Therapies
- Classification
- Diagnosis
- Patient
- Symptoms
- Syndromes
- Reliability
- Validity
- Descriptive validity
- Predictive validity
- ICD
- APA
- DSM

Topic 1 Psychopathology

Unit 2 Clinical Characteristics of Schizophrenia and Issues Relating to the Classification of Schizophrenia

Specification content:

Clinical characteristics of schizophrenia.

Issues surrounding the classification and diagnosis of schizophrenia, including reliability and validity.

In this unit, you will learn to:

- outline clinical characteristics of schizophrenia
- outline and evaluate issues surrounding the classification and diagnosis of schizophrenia including reliability and validity.

Key terms:

- | | |
|-------------------------|---|
| ■ Classification system | ■ Undifferentiated schizophrenia |
| ■ Psychotic disorder | ■ Catatonic schizophrenia |
| ■ ICD | ■ Hebephrenic schizophrenia (ICD only) |
| ■ DSM | ■ Disorganised schizophrenia (DSM only) |
| ■ Diagnostic criteria | ■ Residual schizophrenia |
| ■ Neologism | ■ Paranoid schizophrenia |
| ■ Positive symptoms | |
| ■ Negative symptoms | |
| ■ Co-morbidity | |

Introduction: Clinical characteristics of schizophrenia

In order to diagnose an individual with schizophrenia, a practitioner would need to take advice from one of the two major classification systems you identified earlier.

Activity 1

We now want to try to establish what we mean when we use the term 'schizophrenia'.

Read through the section outlining the clinical characteristics of schizophrenia (page 324) and answer the following activities.



- 1 Where did the word 'schizophrenia' originate from and what other condition do we need to take care *not* to muddle it up with?
- 2 Schizophrenia is described as the best known '**psychotic disorder**'—what is a 'psychotic disorder'?
- 3 **ICD** and **DSM** give similar **diagnostic criteria** for schizophrenia, but there is one particularly important difference—what is this difference?

Diagnostic criteria

Regardless of which classification system is used, the aim is for the practitioner to be able to identify certain characteristics that an individual may be displaying as indicating the presence of schizophrenia. In terms of this, how much, how many and how long is important! Read through the section on diagnostic criteria for schizophrenia and work your way through the following activities.

Activity 2



Read page 324 of your textbook.

Outline the diagnostic criteria for schizophrenia:

At least:	
1	2
Excluding:	

It is also helpful to know the basic difference between 'positive' and 'negative' symptoms.

Activity 3

At vero eos e
accusamus e
iusto odio di
simos ducim
qui blanditis
praesentium
voluptatum d



Read page 325 of your textbook.

According to Crow (1980), what is the difference between **positive symptoms** and **negative symptoms**?

Activity 4

At vero eos e
accusamus e
iusto odio de
simos ducim
qui blanditis
praesentium
voluptatum



Read the case study below:

'My daughter started behaving differently when she was 19. We would be having a conversation and she would change the topic mid-sentence. She seemed unaware she had done this, and would carry on with the new topic with equal enthusiasm. At this stage, I put it all down to stress as she had just started a new job with a high workload and seemed constantly tired. I also thought the stress was the reason for her erratic behaviour. She was close to her grandmother, but showed no emotion when she died, but was extremely distressed when I moved the furniture around in the living room. We went on a rare mother and daughter shopping trip, and I noticed she seemed to be flinching whenever a moving vehicle passed by. I asked her what was wrong and she answered that the vehicles were screaming at her to get out of the way.'

Which parts of this story would indicate a diagnosis of schizophrenia? Use the relevant diagnostic criteria to explain your decision:

Although there can be individual differences, it is also possible to identify general patterns in the way the disorder develops. For example, while there are some rare examples of schizophrenia in children, it usually develops in early adulthood.

Activity 5

At vero eos e
accusamus e
iusto odio de
simos ducim
qui blanditis
praesentium
voluptatum



Read page 325 and answer the following questions.

- 1 In terms of the onset of schizophrenia, what is the general difference between men and women?
- 2 Schizophrenia is also described as an 'episodic' illness—explain what this means in terms of this disorder.
- 3 Outline the general periods/phases of the illness.

- 4 What are the opinions of prognosis (likelihood of recovery) for schizophrenia?



Issues surrounding classification and diagnosis

Like many mental disorders, diagnosis of schizophrenia is not without its problems. However, as you will see, there have been attempts to improve it all the time.

Activity 6



Read pages 325–326 and answer the following questions.

- 1 Why did it become necessary to try to bring the various classification systems in line with each other in the 1970s?
- 2 Although DSM and ICD are the two main classification systems, there are others. What might be the advantage and disadvantage of having a variety of classification systems?

At vero eos e
accusamus e
iusto odio di
simos ducim
qui blanditi
praesentium
voluptatum d



Even though there is an attempt to classify schizophrenia, it is accepted that there will be individual differences in the symptoms, development and effectiveness of treatments between patients. Some have suggested that this calls for further definitions to sub-categorise schizophrenia, to cater for these differences. Generally British practitioners prefer to use the general definition and only use sub-categories in special cases.

Activity 7

At vero eos e
accusamus e
iusto odio d
simos ducim
qui blanditi
praesentium
voluptatum

Here are the sub-types of schizophrenia. Match the correct type with its characteristic using coloured pens.

Undifferentiated

Often begins at an early age—characterised by incoherent and disorganised speech, flat and/or inappropriate affect and bizarre behaviour. Hallucinations and delusions but not as structured as in paranoid schizophrenia.

Catatonic

At least one episode of schizophrenia experienced in the past but no longer exhibiting prominent signs of the disorder.

Hebephrenic (ICD) or disorganised (DSM)

Characterised by delusions (particularly of persecution) and hallucinations—symptoms such as disorganised speech and flat affect are usually absent.

Residual

Diagnosed when an individual is clearly showing schizophrenic symptoms that do not fit neatly into one of the other categories. Sometimes is later seen as the early signs of one of the other sub-types.

Paranoid

Characterised by unusual motor activity—either marked agitation or complete immobility often accompanied by extreme negativism and peculiar posturing. Disorder is very rare.

Activity 8



Log on to Kerboodle and complete the following activity related to this unit:
Student worksheet: Reliability and validity in diagnosis and classification of disorders.

Activity 9

Review the learning outcomes below and tick the box if you can answer the following questions:

- 1 outline clinical characteristics of schizophrenia
- 2 outline and evaluate issues surrounding the classification and diagnosis of schizophrenia, including reliability and validity.

If you are unable to tick any of the boxes, review the topic area again before your next tutorial.

Key terms: test yourself

- Classification system
- Psychotic disorder
- ICD
- DSM
- Diagnostic criteria
- Neologism
- Positive symptoms
- Negative symptoms
- Co-morbidity
- Undifferentiated schizophrenia
- Catatonic schizophrenia
- Hebephrenic schizophrenia (ICD only)
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- Residual schizophrenia
- Paranoid schizophrenia