

Objectives for Friday, 8 September

You should be able to:

- Describe the principles that have been used to define abnormality and apply them to a specific case.
- Explain how the conceptualization of mental disorders changed from antiquity to the 1800s.
- List (at least) two treatments associated with a biological conceptualization of mental disorders and outline the current status of these treatments.

Note: Final syllabus is now available on Canvas. Also find links to my office hours and TA office hours.

Human Subject Pool

What is it?

A chance for you to participate in psychology research and experience how psychology research is conducted.

How can you participate?

It's quick and easy! Visit ubc-psych.sona-systems.com and create a personal profile — do it this week!

And then what?

Check out all available studies, sign-up for them, and earn credits towards your course grade.

Don't wait until the last minute!

Study sign-ups are first-come, first-served and some have restrictions on who is eligible to participate, so sign up as soon as possible!

Earn your first 1/2 credit toward your course grade!

How?

Participate in the UBC Psychology Human Subject Pool
Pre-testing Questionnaire

Where?

Visit ubc-psych.sona-systems.com

When?

As soon as you can!

It helps you become eligible for studies!

HSP Identification Number

Completed during the pre-testing

- First four digits of student ID number
- Two digits of birth month
- Two digits of birth day
- If your student ID is 1234567, and your birthday is August 1, your ID will be:
- $1234+08+01 = 12340801$

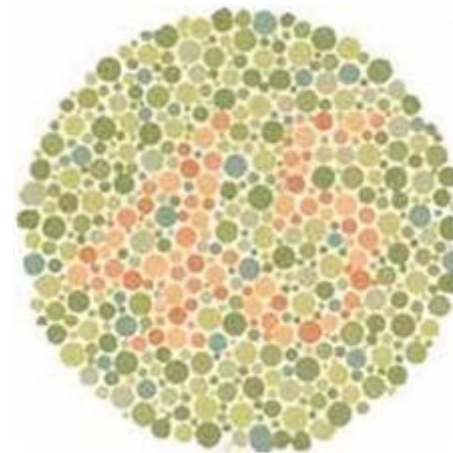
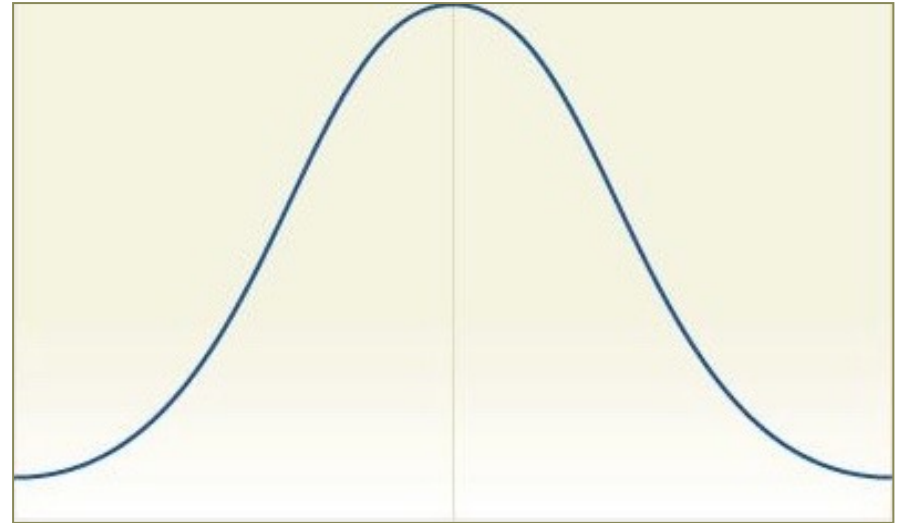
Caution! Show up on time!

No-show policy

- Once you accumulate TWO unexcused no-shows, you may no longer participate in studies
- You may cancel an appointment up to ONE HOUR before a study through the HSP system
 - Do not directly email the researcher
- If you don't cancel the appointment, you get an unexcused no-show

What is Abnormal?

- Statistical infrequency



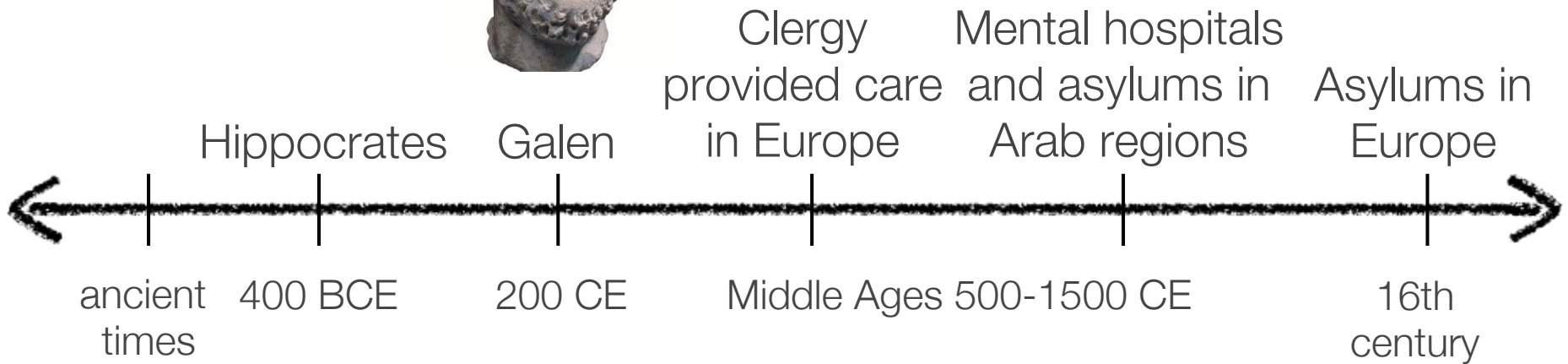
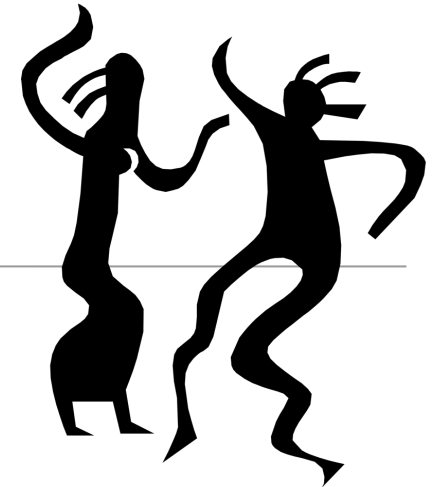
What is Abnormal?

- Statistical infrequency
- Personal distress/suffering
- Personal dysfunction
 - adaptation and social functioning within one's society
- Violation of social norms
 - threatens others or makes them anxious
 - outside prevailing cultural norms
- Unexpected responses to environmental stressors

SOMETIMES
I PRETEND
TO BE
NORMAL.

but it gets
boring.
SO I GO BACK
TO BEING
me.

Historical Views



Gradually, European health care returned to secular control.

Historical Views: The Age of Enlightenment



- Franz Anton Mesmer (1734-1815)
 - magnetic fluids
- Benjamin Rush (1745-1813)
 - excess blood in the brain
- Emil Kraepelin (1883)
 - classification based on biological dysfunction

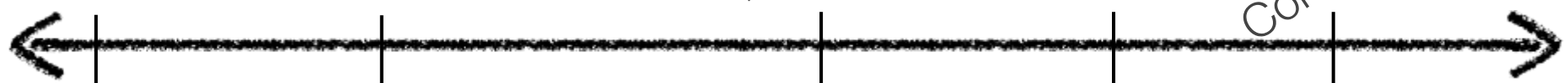
Social Justice and Mental Illness

Humanitarian movement

Deinstitutionalization

Romanow Report

Mental Health
Commission of Canada



Philippe Pinel
(1745-1826)

Dorothea Dix
(1802-1877)

1970s-present

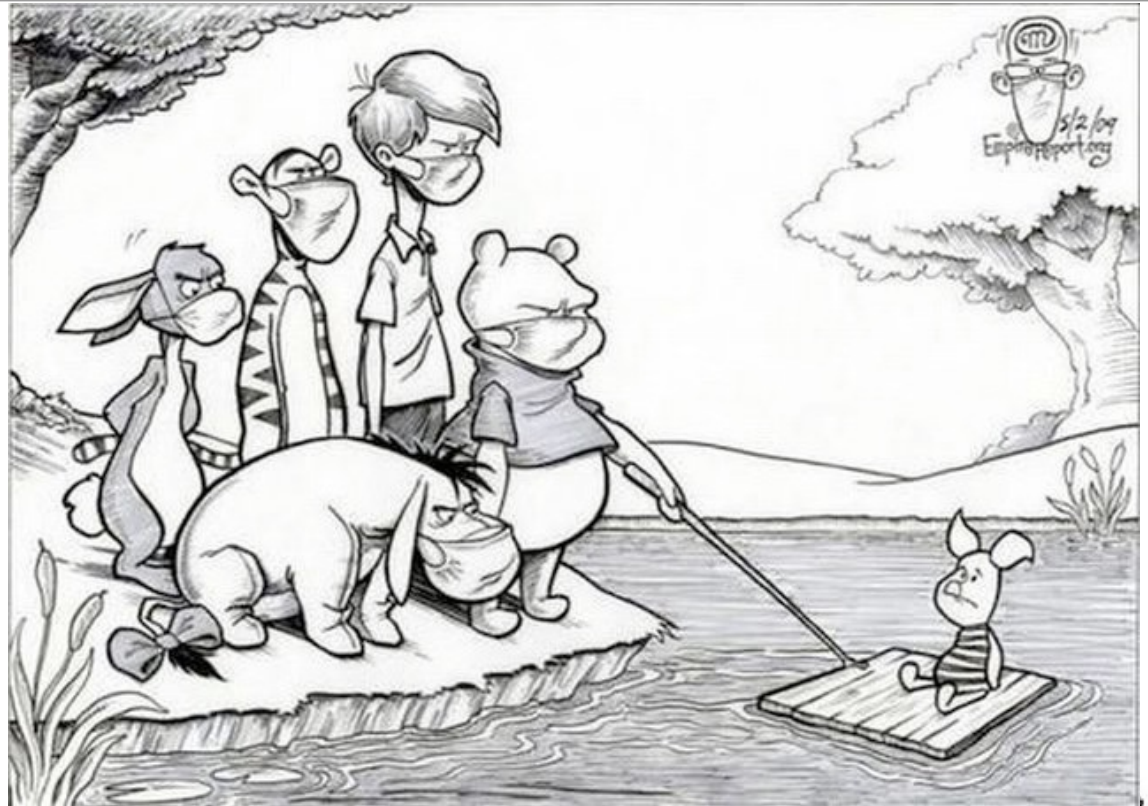
2002

2011



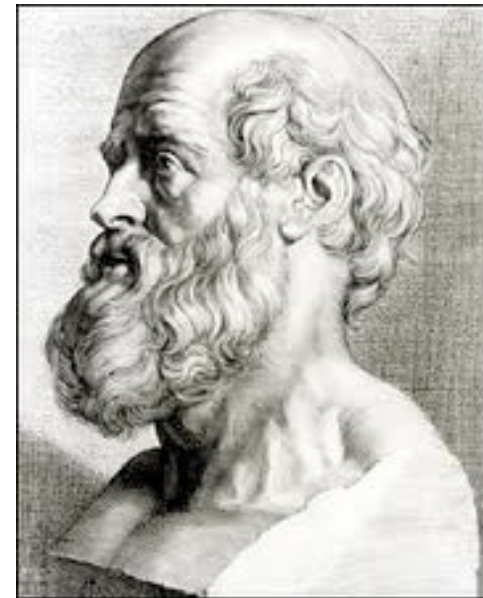
Supernatural Treatments

- Ostracism
- Exorcism
- Trephination?



Biological (Somatogenesis) Theories

- Something physically wrong, disturbs thought and behaviour
- Hippocrates (ca. 460-377 BC)
- General paresis and syphilis
- Examples of contemporary biological theories?



Psychogenesis Theories

- Charcot (1825-1893)
- 20th century ideas
 - Developmental problem (psychosexual)
 - Reinforcement for problematic behaviour
 - Psychosocial context: stress, social support, traumatic life events

What's Coming Next?

1. If you have not finished reading chapter 1, do that soon.
2. Complete quiz #2 by 2:00pm on Monday, Sept 11.

Objectives for Monday, 11 September

You should be able to:

- Discuss the implications of philosophical views of mental illness on how society treats people with psychopathology.
- Give examples of treatments arising from psychological, biological, and supernatural explanations of psychopathology.
- Explain how those treatments reflect a specific theory of how psychopathology develops (if they do).

Explanations of Psychopathology

- Psychological (psychogenic)
- Biological (somatogenic)
- Supernatural



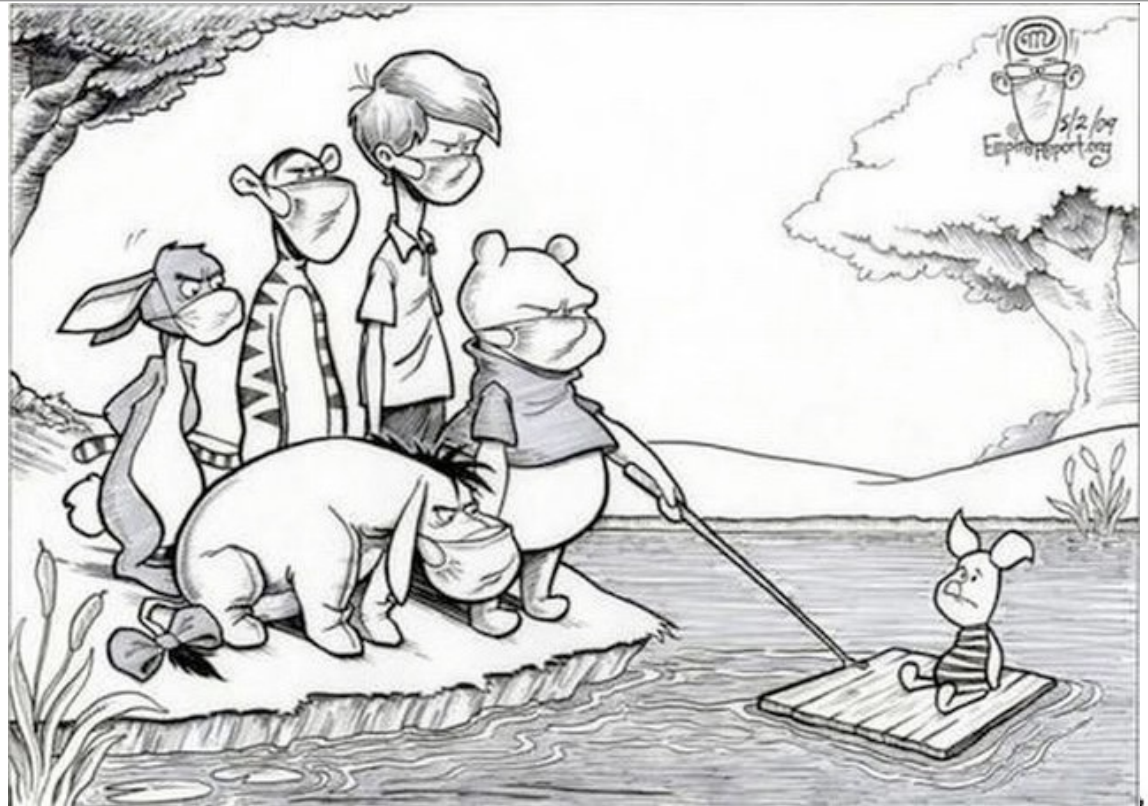
Treatments Arising from Somatogenesis Theories

- Mesmerism
- Medications
- Lobotomy
- Electroconvulsive therapy
- Insulin coma



Supernatural Treatments

- Ostracism
- Exorcism
- Trephination?



Psychogenesis Theories

- Charcot (1825-1893)
 - hypnosis
- 20th century ideas
 - Developmental problem (psychosexual)
 - Reinforcement for problematic behaviour
 - Psychosocial context: stress, social support, traumatic life events

Moral treatment

Token economy

Psychoanalysis

What's Coming Next?

1. Firm deadline to choose an alternative weighting for your learning assessments is tomorrow at 11:59pm.
2. Mental illness stigma will be the topic on Wednesday.
3. Read chapter 3 for Friday.

Objectives for Wednesday, 13 September

You should be able to:

- Define stigma, and give examples of stigma at the level of society, institutions, and the self.
- Explain how stigma affects the everyday experience of someone with psychopathology.
- Debate reasons for barriers to access to mental health care and generate ideas for potential solutions.

What is stigma?

Negative and often unfair beliefs that a society or group of people have about people with a particular characteristic

Everyday stigma





VISIBLE
ATTRIBUTES

VS

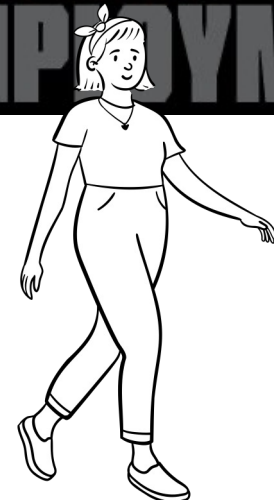
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BLINDNESS **AGING**
ACNE **WHEELCHAIR**
SKIN COLOUR
STUTTER **BODY SIZE**
AMPUTATIONS



LGBTQ+
MENTAL ILLNESS
IMPRISONMENT
ADDICTION
UNEMPLOYMENT





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Am I being discriminated against?

Here we go again. People don't know how to talk about my _____.

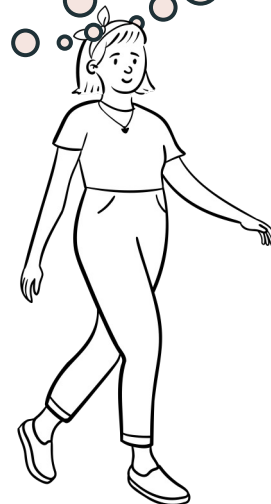
They think I'm not as good as them.



If they find out, what will happen to me?

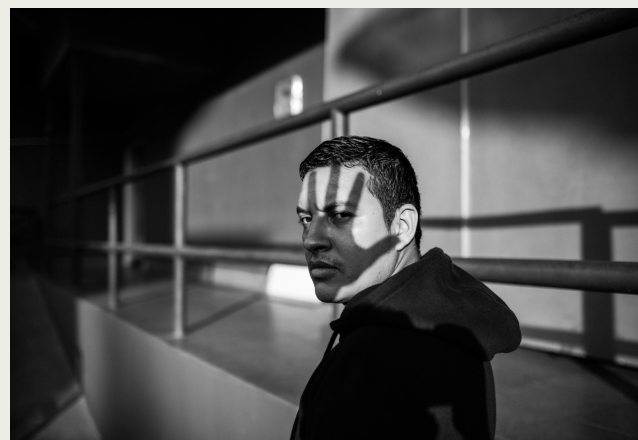
Is it safe to be myself here?

Did I let something slip?





SOCIETAL STIGMA



SELF-STIGMA



**INSTITUTIONAL
STIGMA**

Some Effects of Stigma

	Societal	Institutional	Self
Attitudes	<p>“You’re not as good as we are.” “You’re to blame for your problem.”</p>	<p><i>“Fix it yourself.”</i> <i>“We know best how you ought to live.”</i></p>	<p>“It’s all my fault.” “I don’t deserve to have people around me.”</p>
Discrimination	<ul style="list-style-type: none">• Less likely to be hired• Less likely to be accepted as a tenant	<ul style="list-style-type: none">• Lower standard of care• Poor access to treatment• Uneven enforcement of rules	<ul style="list-style-type: none">• Don’t ask for help• Don’t try• Lower aspirations

Effects of Stigma in Mental Health Care

- Fear of stigma impedes help-seeking and disclosure.
- Clinicians are less likely to engage in helpful behaviours when working with BPD than with other disorders.
- Professionals may avoid treating clients with certain diagnostic labels.
- Stigma directly impacts the quality of care a person receives.
- Research on stigmatized problems receives substantially less funding (e.g., BPD vs. bipolar disorder).

Stigma in Canada

- While 72% of Canadians would tell friends or co-workers that a family was diagnosed with cancer, only 50% would reveal a diagnosis of mental illness.
- 27% say they would feel fearful being around someone who is mentally ill.
- 42% are uncertain whether they would socialize with a friend diagnosed with a mental illness.
- Only 30% think mental illness hurts the economy.
- While 89% believe mental illness requires treatment by a professional, 40% said if they felt they were ill, they would try to deal with it themselves.

Health professionals' attitudes



self-harming
inattentiveness
refusing to eat
intense emotional outbursts

Institutional Stigma in Health Care

- Insufficient funding of mental health services relative to the prevalence and consequences of symptoms
- Provincial mental health statutes that focus not on province's obligations to ensure residents' mental health but on involuntary (protective) interventions
- Failure to provide clients with information on their illness and treatment (e.g., likely side effects, likelihood of benefit)

Putting it all together

How is social stigma related to theories about the origin of psychopathology?

5 Simple Ways to Reduce Mental Illness Stigma

- **Language matters:** the words you use can make all the difference.
- **Educate yourself:** knowing the facts and myths about mental illness can be a great way to help end the stigma.
- **Be kind:** simple acts of kindness can help open up the conversation and let someone know you are there for them.
- **Listen and ask:** being a good listener and asking how you can help can be the first step in recovery.
- **Talk about it:** mental illness touches us all in some way directly or through a friend, family member or colleague. Most people with mental health issues can and do recover, just by talking about it.

letstalk.bell.ca

What's Coming Next?

1. Read chapter 3 for **Friday**. Complete quiz #3 by 2:00pm on Monday.
2. In preparation for **Monday**, choose one disorder chapter from the DSM-5 to read. *Idea: Coordinate with a couple of students sitting nearby if you want to discuss that together.*
3. For next **Wednesday**, notice the assignment in the syllabus to read the Adam (2013) paper on dimensional views of mental illness.