

Module:
Mental Health in the Community

Week 4:
Psychosocial approaches to care in the community



Dr Angie Cucchi

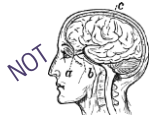
Topic 1
Psychological approaches I:
individual therapies

Part 2 of 2

Part 2

The behavioural model

Psychology should be the science of behaviour



The science of mind

Use the principles of **learning theory to explain human behaviour**

Sources of behaviour are **external**



Environmental stimuli

Mental state

Humans learn through **conditioning**.

- equal at birth
- environmental factors determine our behaviour

Dysfunctional behaviour (phobia/depression) are **learned**

Classical conditioning

A naturally-occurring stimulus is placed with a neutral stimulus allowing the neutral stimulus to, in time, evoke a natural reflex.

Pavlov 1849 - 1936

Operant conditioning

Learner makes a connection with the consequences associated with his/her behaviour through positive and negative reinforcement and punishment.

Skinner 1904-1990

Little Albert: Conditioned to become fearful of neutral stimuli.

Abnormal behaviour develops from **faulty learning**.

As it is learned, it can be unlearned.

Depression

- Stresses in the person's environment
- Lack of personal skills

Sammons (n.d.)

The cognitive model

To some

Behaviourism = Reductionist approach

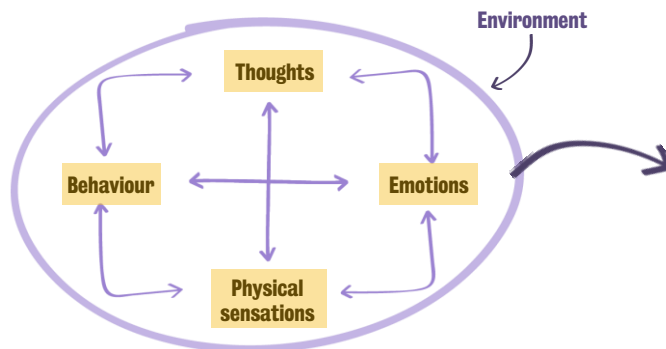
Behaviours matter

but what **really matters** is **how we interpret an event**

Cognitive model/Cognitive therapists

A process by which individuals engage in cognitive distortions, cognitive biases, and suggests that this is the cause of mental and psychological distress

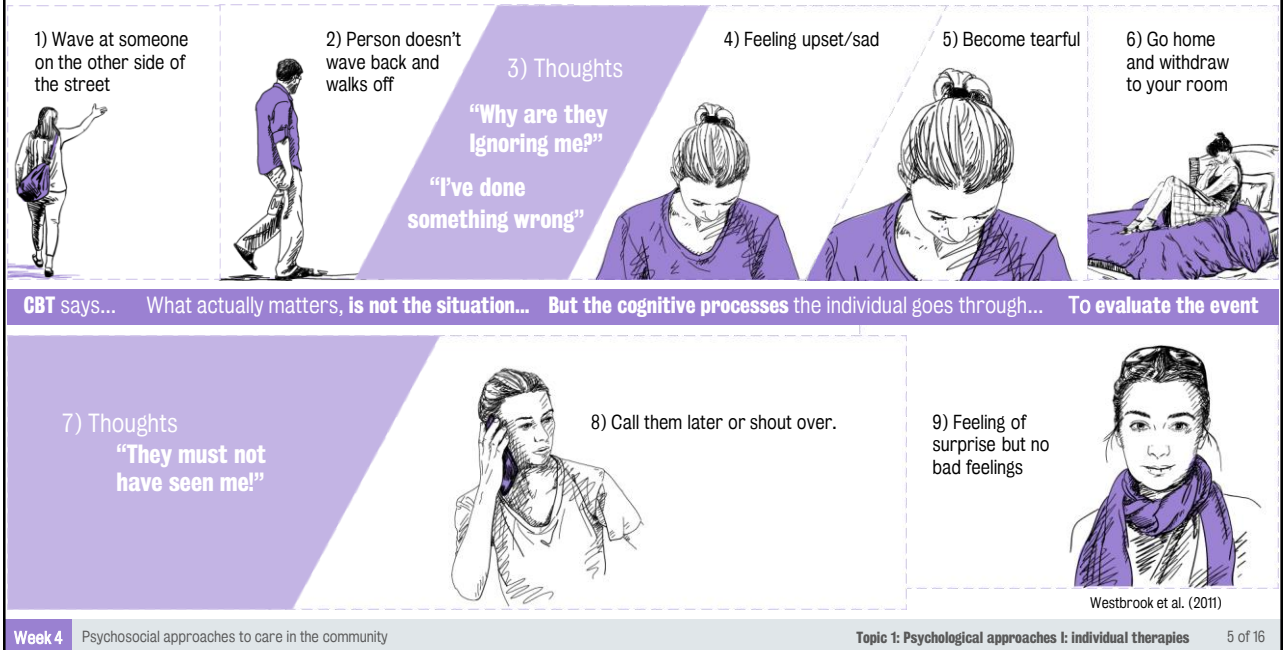
CBT "Hot Cross Bun"



Each aspect of the cycle has an impact on the others. All are interconnected in a "vicious cycle".

Westbrook et al. (2011)

The cognitive model - example



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The cognitive model - ABC

Activating event

Belief

- Negative thoughts
- Cognitive biases

Consequence

- Emotionally drained
- Negative thoughts of self, others and the world
- Isolate themselves
- Interpersonal struggles

Psychological difficulties are the result of cognitive distortions or biases.

Biases/thinking errors (cognitive distortions)

We all experience them

They become problematic when they:

- are the default position
- inflexible

Common cognitive distortions

- Mental filter →
- Mind-reading →
- Catastrophising →
- Black and white thinking →

Consequence

- Focus exclusively on the negative
- Know what another person is thinking
- Infer catastrophe from a mildly negative or neutral situation
- Thinking in extremes – **good or bad**

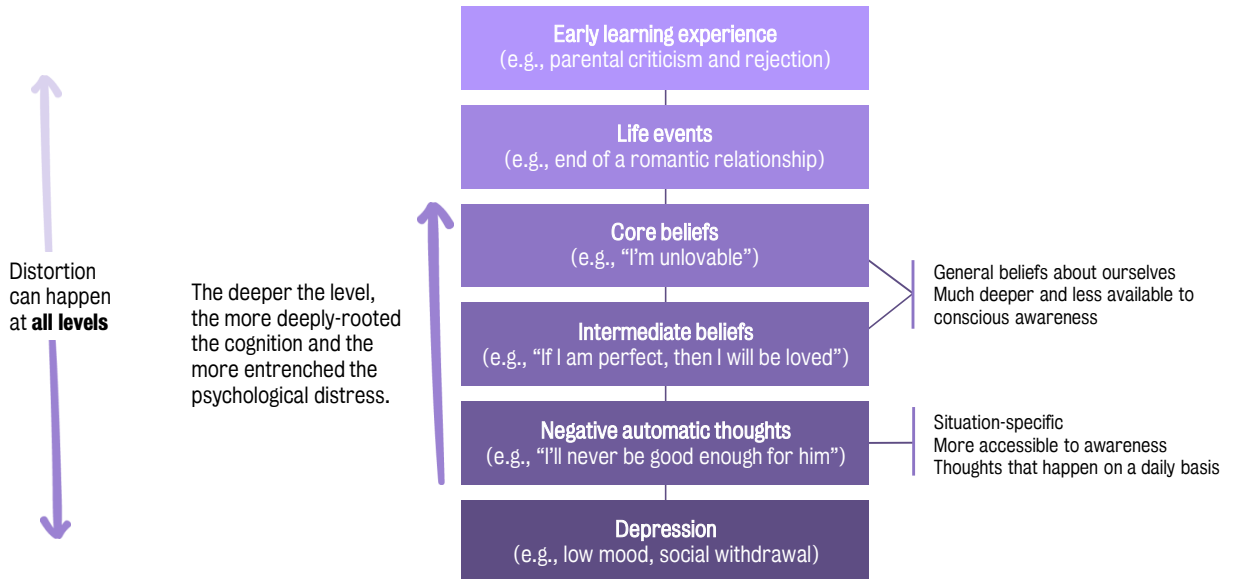
Westbrook et al. (2011)

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CBT layers of cognition



Westbrook et al. (2011)

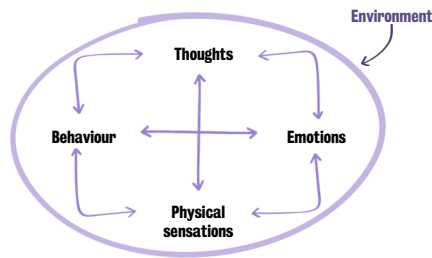
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Third wave CBT

1st

Wave
CBT

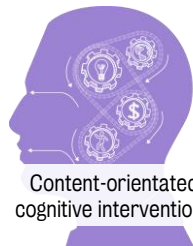
Reduce or change at least one of them

2nd

3rd

Wave
CBT

Move away from



Third wave psychotherapy treatments

1. Acceptance and commitment therapy
2. Behavioural activation
3. Dialectical behavioural therapy
4. Mindfulness-based cognitive therapy
5. Schema therapy

Westbrook et al. (2011)

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Dialectical behavioural therapy (1)

Dialectical Behavioural Therapy

is a

Cognitive behavioural approach that emphasises the social aspect of treatment

A package treatment:

- Team based interventions
- Group work
- One-to-one therapy

Created by

Dr. Masha Linehan

DBT approach to mental distress Diathesis-stress model**Primary Dialectical**

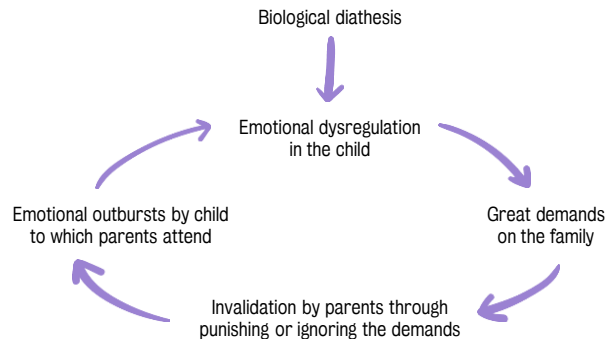
between

Acceptance

Accept clients as they are

Change

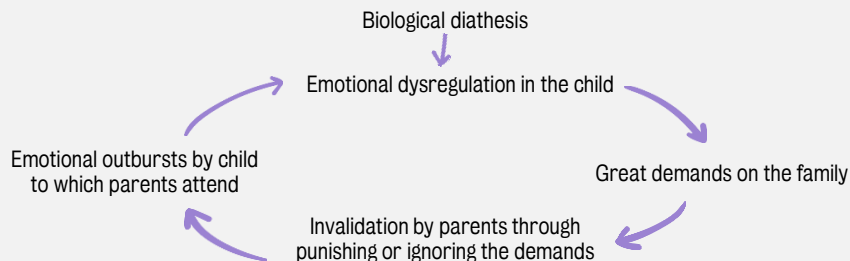
Acknowledge that the client needs to change



Psychological disorder is the result of a disorder-specific predisposition which lies dormant until activated by environment stressors.

Linehan (1987)

Dialectical behavioural therapy (2)

**Borderline Personality Disorder - Biosocial theory****Emotional sensitivity**

Automatic nervous system reacts severely to low levels of stress.

Automatic nervous system takes longer than normal to return to baseline.

**Invalidating Environment**

Child's experiences are not validated by the significant others around them (e.g., punished or ignored).

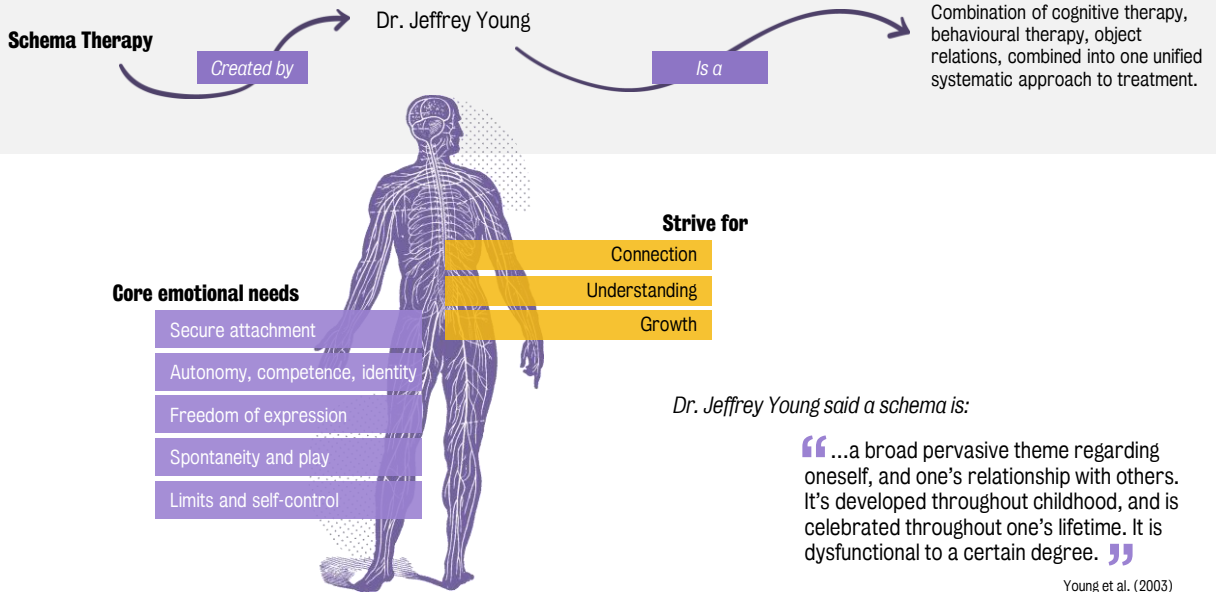
**Borderline Personality Disorder**
Chronic Emotion Dysregulation

Never learn to accurately label and understand one's feelings.

Susceptible to extreme displays of emotions.

Creates confusion both internally and externally.

Schema therapy (1)

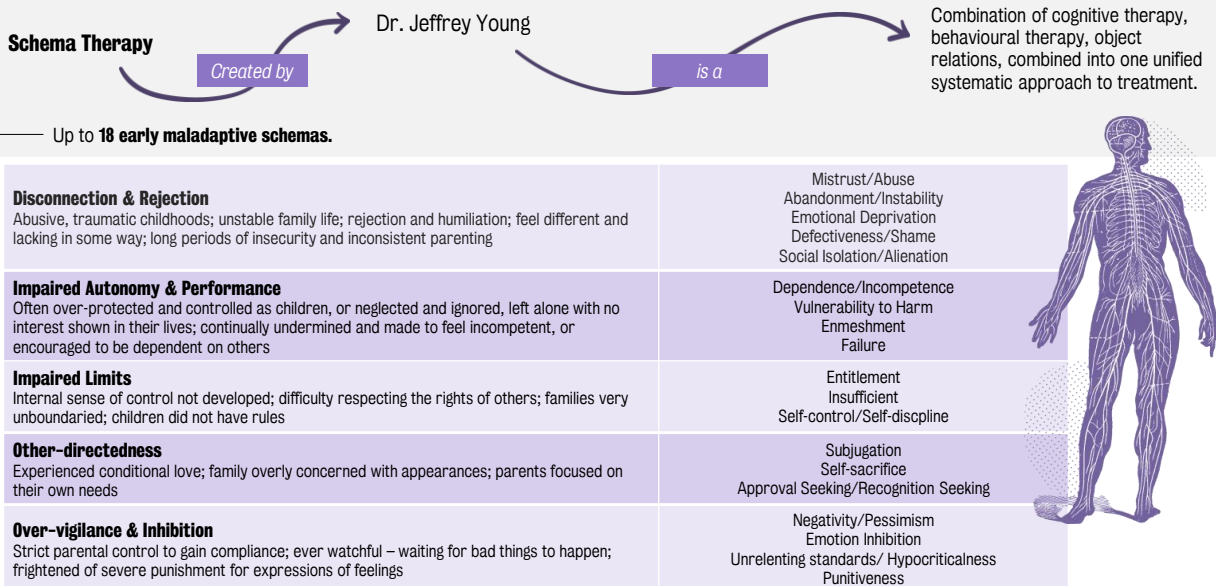


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Schema therapy (2)

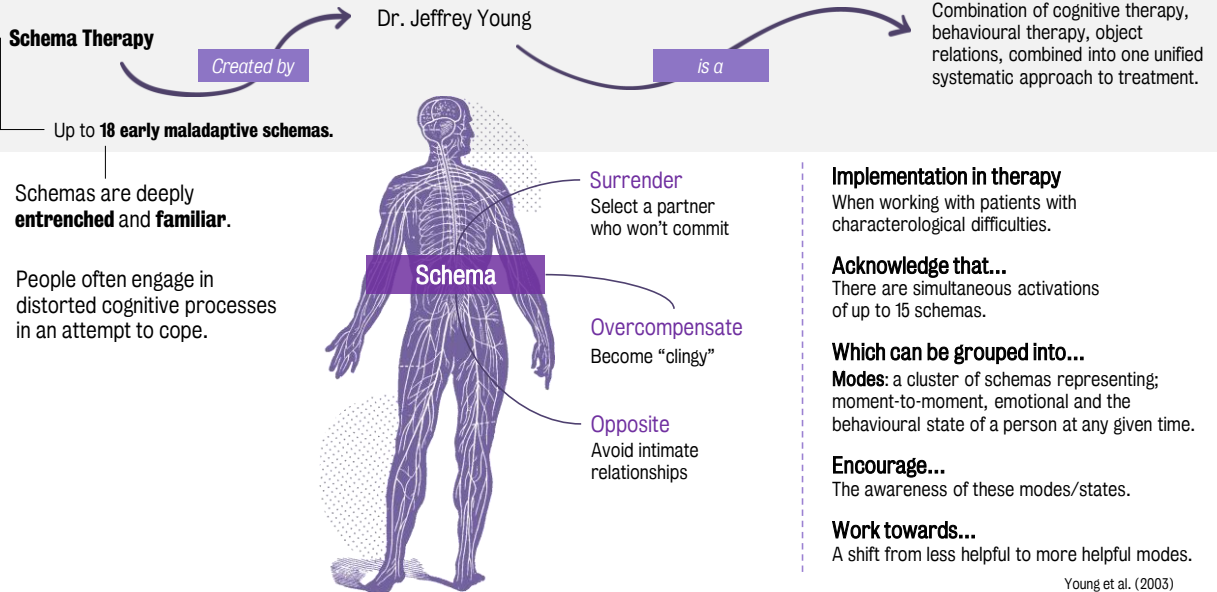


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Schema therapy (3)

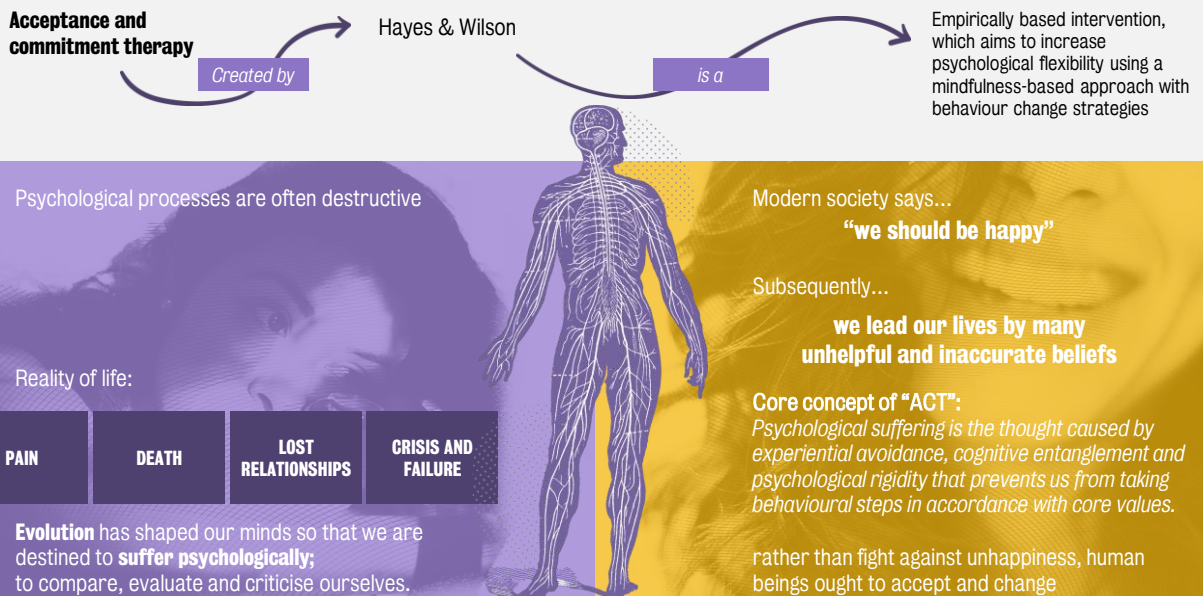


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Acceptance and commitment therapy



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End of topic