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| Key Words |
| **Unipolar depression:** a type of mood disorder causing periods of feeling sad and lacking motivation to do everyday activities.**Monozygotic twins:** twins developed from one fertilised egg that has split into two; monozygotic twins are genetically identical. **Dizygotic twins:** twins developed from two different eggs fertilised during the same pregnancy; dizygotic twins are not genetically identical.**Genetic predisposition:** a biological tendency to develop a particular behaviour as a result of the genes someone has. **Diathesis-stress model:** an explanation for depression that claims people can have a gene that makes them more likely to develop depression, but only if they face a stressful situation that triggers depressive thoughts.**Deterministic:** our actions come from what we are born with and what we experience; this is the opposite of having ‘free will’ or free choice. **Free will:** explanations of behaviour that claim we have the ability to choose exactly what type of behaviour we want to show; this is the opposite of being ‘determined’.**Cognitive theory:** an explanation that focuses on how thought processes influence behaviour **Negative triad:** a set of three thought patterns where people feel bad about themselves, the future and the world in general.**Nature:** explanations of behaviour that focus on innate factors (the things we are born with). **Nurture:** explanations of behaviour that focus on environmental factors (the things that happen to us).**Neurotransmitters:** chemicals found within the nervous system that pass messages from one neuron to another across a synapse.**Reuptake:** the process by which neurons reabsorb neurotransmitters that they released.**Placebo:** an inactive substance, or ‘fake pill’, used instead of an active substance. The person given a placebo will not know it is fake. **Relapse:** a return of symptoms after treatment has been given.**Addiction:** a mental health problem that means people need a particular thing – a substance or an activity – in order to be able to go about their normal routine. **Withdrawal:** a set of unpleasant physical or psychological symptoms someone gets when they are trying to quit or cannot satisfy their addiction**Functional analysis:** the first stage of CBT to treat addiction that identifies triggers. **Skills training:** the second stage of CBT to treat addiction whereby addicts learn ways to control the patterns of behaviour that lead to their addiction.**Detoxification:** when an addict tries to stop taking the substance they are addicted to |

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| **Depression** |
| Symptoms | Explanations | Treatment  |
| **Physical** (Tired, weight loss, difficulty sleeping)**Behaviours** (withdrawal from others, doesn’t get things done, stops doing enjoyable activities, difficulty concentrating)**Thoughts** (“It’s my fault” “I’m a failure” “Life is not worth living”.**Feelings** (Unhappy, overwhelmed, frustrated) | **Genetic explanation:** 17 different gene variations are linked to developing depression. McGuffin et al. (1996) found that if one MZ twin became depressed, there was a 46% chance that their twin would also become depressed. This decreased for DZ twins, at only 20%. However, maybe there needs to be an environmental stressor that triggers depressive thoughts (diathesis stress model).**Cognitive theory:**Becks cognitive triad Beck’s ABC Model | **CBT:** Aims to change the way that people think in order to change their behaviour. Irrational ways of thinking are challenges and replaced with reational ones.**Drug therapy:** Anti-depressant drugs work on increasing the levels of neurotransmitters such as serotinin. Types include: SSRIs, SNRIs, MAOIs and TCAs. |

**\*Use SCOUT to evaluate these theories.**

Psychological Problems

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| **Addiction** |
| Symptoms | Explanations | Treatment |
| Tolerance to substance, a feeling that you must take or do something, withdrawal symptoms, ignoring evidence that it is harmful, difficult to stop. | **Genetic:** DDR2 gene linked to depression (A1 variation of this gene)**Classical conditioning**: learning behaviour through association with something positive.**Operant conditioning:** Behaviour is encouraged/discouraged through reinforcement and punishment.**Social learning theory:** Behaviour is learned through observation.  | **CBT:** It aims to help people understand the triggers for their addictive behaviours and then learn how to control and manage these behaviours. CBT occurs in two key stages: functional analysis followed by skills training.**Drug therapy:** Drugs can reduce withdrawal symptoms and can reduce cravings (e.g. nicotine replacement therapy) |

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| **Caspi et al (2003) Influence of Life Stress on Depression: Moderation by a Polymorphism in the 5-HTT Gene** | **Young (2007) Cognitive Behaviour Therapy with Internet Addicts: Treatment Outcomes and Implications.** |
| **Aim:** To see why stressful experiences lead to some people developing depression and the role or serotonin.**Procedure:** Participants were group depending on their variation of the 5-HTTLPR gene. Stressful life events were measured between their 21st and 26th birthday. Depressive symptoms were measured at age 26. **Results:** Stressful life events predicted major depression among carriers of an (s) allele. Childhood maltreatment predicted adult depression only among those carrying the (s) allele.**Conclusion:** The 5-HTT gene interacts with life events to predict depressive symptoms. Those carrying the (l) allele were less likely to develop depression.  | **Aim:** To investigate the effectiveness of CBT for those suffering from internet addiction.**Procedure:** 114 participants were involved in CBT over a number of weeks. They were give a questionnaire to complete after the 3rd, 8th and 12th online sessions and then at a 6 month follow up.**Results:** Most participants saw an improvement by session 3 and this continued through session 8 and 12.**Conclusion:** CBT led to a decrease in thoughts and behaviours associated with compulsive internet use.  |

**\*Use GRAVE to evaluate these studies**