

Psychological Theories of Schizophrenia

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Schizophrenia

- The most puzzling/disenabling syndrome
- Characterized by disturbances in thought and verbal behavior, perception, affect, motor behavior and relationship to the external world.
- Schizophrenia is found in all societies and geographical areas and affects at least 1 in 100 people in the world.
- Onset occurs between ages 15 and 45.

Theoretical development

- Morel (1852)- Demence precoce
- Emil Kraepelin (1896) -Dementia praecox
- Eugen Bleuler(1911) coined the term schizophrenia.
 - Blunted Affect
 - Loosening of association
 - Ambivalence
 - Autism
- Kurt Schneider(1959)- First rank symptoms(FRS) and Second rank symptoms.

- Weygandt (1907) weakening of apperception lead to a disturbed psychic life.
- Stransky (1904) in coordination between emotional and intellectual contents of mind.
- Conrad(1958) gestalt theory to explain psychopathology.



Psychodynamic approach

Freud (1924) formulated two models

- Conflict defense model

- Deficiency deficit model

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Conflict defense model
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Intense conflict=use of primitive defenses=regression to pre-oedipal phase of development=schizophrenic psychopathology.

Deficiency deficit model

Conflict=severe withdrawal of libidinal energies from outside=break from external reality=symptoms of schizophrenia.

Paul Federn and Heinz Hartmann elaborated on Freud's concept.

Object relation theorists:

- Melanie Klein,
- Fairbairn,
- Winnicott

conflict involving love and hate in relationship.

Developmental theories:

- Margaret Mahler,
- Jacobson,
- Arieti

early autistic phase of development and disturbance with self

Interpersonal theory

- Sullivan
 - Social isolation
 - Impaired mother child relationship
 - Anxious/hostile interaction

Behavioral theories

The principles of conditioning and observational learning may play a role in the development of some forms of schizophrenic behavior.

Existential Theories

Szasz

-Failure to adjust to particular social situations.

R.D. Laing

-schizophrenia has its roots in early childhood experiences
-an acute attempt to survive irrational and dehumanizing demands.

Cognitive Theories

McGhie and Chapman (1961)

- Information processing and attention dysfunction in schizophrenia.

Theory of Mind(ToM)

- Frith (1992) difficulty in cognitive system.

- Hardy-Bayle (1994) schizophrenia is primarily related to an executive or planning deficit.

Socio-cultural explanations

Family Theories

- Schizophrenogenic mother
- Double bind
- Marital skew and schisms
- Communication deviance
- Expressed emotion Criticism Hostility over involvement

Social Theories

-Sociogenic/social causation hypothesis: situational factors associated with low social class contributes to schizophrenia.

-Social selection/Drift Hypothesis: during the development of schizophrenia, people drift into poverty.

Social Labelling Theory

• Scheff (1966) labelling theory of schizophrenia.

-social groups create the concept of psychiatric deviance by constructing rules for groups to follow.

-Thus the symptoms of schizophrenia are seen as as deviation from norms.

-Therefore those who display unusual behaviour are considered deviant, the label may be a self fulfilling prophecy.

Environmental factors

Environmental factors

Family based on epidemiological studies states that contribution of environmental factor is as much as 30-50% and include

- Problems with maternal bonding and early rearing
- Poverty, deprivation and inequality
- Discrimination
- Stress
- Migration

Vulnerability stress model

Vulnerability to schizophrenia is determined by a combination of biological, psychological and environmental factors.

- Biological include genetic
- Social include living in an urban environment
- Psychological may include

 -an externalizing bias
 -a tendency to jump to conclusions
 -difficulty in taking the role of other
 -negative or confusing underlying beliefs of self



Evaluation

- Psychodynamic theories propose the importance of adverse life events in infancy and early childhood but closer observation does not really suggest any increased chance of developing schizophrenia for children who had adverse life events in childhood and many of them develop the disease without any identifiable adverse life event in childhood.
- Behavioral and cognitive theorists did little studies and their views are considered a partial explanation.
- Existential theorists contribute little to the etiology and the recovery process.

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- Most family theories are seen to have more evocative effect than etiological significance.
- It is more likely that social class contributes to mental disorder than mental disorder contributes to social class.
- Labeling theory is an over-rated statement.

A purely psychosocial explanation of schizophrenia is unlikely. Nevertheless they appear to play an important role in the course of schizophrenia illness at least in understanding its duration, severity, course and prognosis.

Implications

- Theories of schizophrenia may have a therapeutic value that may lead to a more humane treatment of the mentally ill.
- Such theories will help in increasing our knowledge of the illness so that the illness may not be too alien to us.
- Once the course is known and understood, treatment and therapy can be directed accordingly.
- Broader understanding of schizophrenia needs a frame work on which to organize and integrate the findings that address the question of schizophrenia.

