

## OUTLINE AND EVALUATE PSYCHOLOGICAL EXPLANATIONS FOR SCHIZOPHRENIA (8 and 16 marks)



One psychological theory based around family dynamics focuses on “Expressed Emotion” (EE). EE is a family communication style that involves criticism, hostility and emotional over involvement. High EE environments are strongly linked with relapse. A similar family dynamic explanation is Bateson’s double bind theory which explains schizophrenia through the repeated exposure to faulty communication in which the child is given contradictory messages and so the development of an internally coherent construction of reality may be prevented.

Tarrier showed that higher levels of relapse occurred in families with disturbed communication and concluded that the exposure and amount of time spent in high EE environments more prominently lead to relapse. A problem with this explanation, however, is that a disturbed family may actually be an effect of the disorder rather than a cause of it as individuals who are in poor psychological shape are more likely to provoke expressed emotion from family members. High EE is also linked with other disorders such as depression and eating disorders so it is not unique to schizophrenia. This highlights that it must not be the sole cause of the illness. Nevertheless EE has led to an effective form of therapy whereby high-EE relatives can be shown how to reduce levels of EE. This therapy provides support as a study by Hogarty found that such a therapy reduced relapse rates.

The double bind theory also has some credibility. A study by Berger found that schizophrenics consistently reported a higher incidence of double blind statements from their mothers compared to a control group. However the incidence was not significantly higher than comparison groups who also had psychiatric conditions, suggesting that the double blind theory cannot be used to explain schizophrenia only. Additionally, as with any retrospective study, the interpretability of findings is limited by the fact that recall may be unequally biased in the schizophrenic group.

A different approach is the cognitive approach. It emphasises impaired thoughts and attention processing and acknowledges the role of biological factors in causing the initial sensory experiences but it claims that further features appear when a person attempts to understand these first experiences. Frith argues that schizophrenia occurs due to faulty information processing which leads to cognitive overload so that the person is unable to distinguish between their thoughts and outside stimuli and hence experience hallucinations.

The cognitive approach could explain symptoms such as hallucinations which are related to cognitive functioning but it cannot explain symptoms such as flat affect and mannerism and other negative symptoms so it cannot explain the whole complexity of the disorder.

The cognitive approach has also helped design therapies such as CBT which has shown to be helpful in the treatment of schizophrenia. However this therapy is mostly used in conjunction with drug treatment so it is difficult to ascertain which has led to the improvement. The approach also cannot explain why close relatives have higher risks of developing the disorder than the general population as it simply describes the symptom in terms of deficits in cognitive processes but it does not actually explain where these deficits come from.

Nevertheless support has been found as schizophrenics often perform poorly on various information processing tasks which shows that it may be caused by impaired attention mechanisms.

There is also the psychodynamic explanation which believes that a “schizophrenic mother”, who is cold and domineering, causes the person to regress to a pre-ego stage (before a realistic awareness of the world was formed) as a defence mechanism so that the individual will then be dominated by the id or the superego and thus they will lack a sound basis of reality. Schizophrenia can also be linked to an early part of the oral stage called primary narcissism during which the ego has not separated from the id.

Criticism for the psychodynamic approach can come from the fact that it is unfalsifiable and so it is impossible to test its credibility. If it is not objective and is just based on Freud’s subjective opinion then it lacks the principle features of science. Furthermore Waring contradicted the account of mothers being harsh and instead he found that they tended to be anxious, shy and withdrawn. It can also be argued that the difference with schizophrenic mothers is simply just an effect of having to live with a relative with schizophrenia. Psychodynamic approaches also suggest that the problems arise in childhood and so they cannot explain why schizophrenia does not develop until late adolescence.

Problems with psychological explanations as a whole are the ethical issue of attributing blame to the families. As psychological explanations believe the onset on schizophrenia is mainly due to a disturbed upbringing, this attributes blame onto the patient’s family. This could have serious ethical implications especially since the role of biological factors have substantial supporting evidence which highlights that it must not be the family environment alone that causes the illness and so psychological explanations are reductionist and unnecessarily place blame onto the family.