

PSYCHOPATHOLOGY AND THERAPIES

There are different therapies available in psychopathology. All treatments are supposed to benefit the patient. However as therapists charge for these services it is sometimes unclear how much of the treatment is for the benefit of the patient and how much is for the therapist, because of this ethical issues arise.

One approach is psychoanalysis. The main technique is free association, the patient is encouraged to talk freely about their childhood and relationships. The aim of psychoanalysis is to make people happier and better adjusted, and as the patient is talking freely the patient is actively involved in the process. However a problem is that the therapy is difficult to evaluate as happiness is hard to measure. It is also important to note that patients are paying a lot of money to a psychoanalyst and it isn't obvious when the treatment should cease. The treatment could last for years therefore this raises the issue of who is getting the most benefit the patient or the therapist. Patients also have to give consent to the therapy at the beginning, because of this the patient sometimes feels obliged to carry on with the treatment even if they are not happy to do so.

Psychoanalysts try to get the patient to give an insight to the root causes of feelings by asking the patient to talk freely about difficult issues. This can put the patient in a very stressful situation, and perhaps this stress is worse than the problem the patient had beforehand.

One Feature of psychoanalysis is transference. Transference in itself is needed in therapist and patient relationships and is not necessarily a bad thing. However there are times when the therapist projects his or her personal feelings back onto the patient. This leads to concerns over the potential for sexual abuse. Nanette Gartrell discovered 6% of psychoanalysts admitted at some stage to having sexual contact with a patient. Whilst the therapist claimed it was a necessary part of the

treatment, the patients said it was damaging to not only themselves but the therapist as well.

In psychoanalysis the therapist has to analyse what the patient is saying. Each therapist has their own belief system and it is subjective as to what they consider the problem and solution should be. There are other therapies with belief systems such as cognitive therapy and humanistic therapy. However it is unlikely the patient is in a position to evaluate any belief system. The patient's thoughts cannot be measured and it could take a lot of money and time for a therapist to reconstruct a patient's personality to get to the underlying causes of problems. This again raises concerns over the potential for financial abuse.

One therapy which is quicker and cheaper is behavioural therapy. Behaviourists are not concerned with underlying causes and just address the symptoms. The aim is to just eliminate problem behaviour.

Aversion therapy is a treatment where a patient is exposed to a stimulus whilst at the same time being subjected to some discomfort. This is so the patient associates the stimulus with the unpleasant sensations in order for the specific behaviour to stop. The main use for aversion therapy is to treat drug and alcohol addiction.

Lang & Melamed (1969) used aversion therapy to save a young boy's life. Every time the boy ate he vomited within 10 minutes of eating and because of this he was dying. Doctors and hospitals were unable to get to the root cause of the problem, so Lang and Melamed gave the boy an electric shock when he was sick after eating, the boy associated the unpleasant electric shock with vomiting and the vomiting stopped. Lazarus however has suggested that some aversion therapy is nothing more than torture, for example making people sick and giving electric shocks. Also this type of treatment has been found to be only 50% effective in treating alcoholism, so there are ethical concerns about the other 50% who were made to be sick when the treatment was ineffective.

Behaviourists use classical conditioning techniques for the treatment of phobias. One such technique is flooding. The patient is overloaded with

whatever stimulus the patient is afraid of. However there is a great deal of stress involved to the patient as the fear of the stimulus is too great, and consequently many patients cannot handle flooding. In some instances a different technique is employed called counter conditioning. This technique is used in a gradual way known as systematic desensitisation. This involves the patient establishing a fear hierarchy of what is acceptable. The patient and therapist work through the fear hierarchy and when the patient is relaxed at one stage the patient moves onto the next. This is less stressful to the patient as they are in control before they move on to the next stage. This has also been used with success by big companies such as British Airways and London Zoo as a cure for phobias.

Based on the principles of operant conditioning, institutions often use a token economy system. It is used as a way of modifying behaviour. If the patient is deemed to have behaved in a positive way they are given tokens which can be exchanged for various treats such as time watching television or cigarettes. Ayllon and Azrin (1968) found that behaviour of even severely disturbed patients improved with this system, this in turn also improved staff morale as the patients were better behaved. However this raises ethical issues as some believe it is a patients right to be able to watch television and have cigarettes without having to please others first, and although staff morale improves this is likely to be of a greater benefit to the regime rather than the patients. This also means that that by having to please others the patients often act to what the regime deems acceptable and not to their own wishes. Psychoanalysts would argue that the bad behaviour isn't being cured as quite often when the patient leaves the institution and the tokens stop then so does the good behaviour. This means the underlying causes of problems are left untreated.

Drug therapies have often worked for patients when other treatments haven't helped. Anti psychotics are effective ways of treating schizophrenia, drug treatments can be effective and have been very useful for a variety of people for various disorders. Drugs can often make people happier, however this treatment does neglect how other problems may be affecting the patient.

Doctors only have a short time with patients, and some don't have the necessary skills or training to deal with the patient's problems and drugs are often prescribed when the patient may benefit from psychotherapy or time with a psychologist. Drugs can help the symptoms but the underlying problems are not addressed. Trained therapists are expensive and there is not enough of them, it is important to note however that the government are making more therapists accessible.

Drugs can often be addictive and patients can become dependant on them and unable to function without them, an example of this would be a patient cannot sleep at night until they have had a pill. Patients also often have to struggle with withdrawal symptoms if they try to stop taking the drugs. There are also many unpleasant side effects associated with drug use, such as dizziness and an increase in blood pressure. It has been noted that some schizophrenia sufferers were unable to move after prolonged use of phenothiazine. Cardiac dykenesia is another potentially unpleasant side effect from long term drug use. Some patients prefer to live with the illness rather than having to suffer the side effects of drug treatments.

There is an increase of drug treatments available as behaviour is becoming increasingly medicalised. Drug companies continually invest millions of pounds in order to bring more drugs to the market place. They have a vested interest in convincing people of the need for these drugs by advertising results of trials that support their drug, however S.A.N.E have compared research on Prozac and Seroxat and found that in a majority of cases a placebo worked just as well. A.D.H.D is increasingly diagnosed in children, particularly in the USA. These children are then prescribed drugs, however many people argue that these children are just naughty and they have parents with poor parenting skills. These drugs are given to calm these children down, but there is a risk of long term damage to these children.

Thomas Szas argued that mental illness is a myth. He stated that you can have brain disease but it should be called that, as the mind is not physical it

cannot be sick. Szasz also argued that maybe people just have a problem with living.

At the present time there are a variety of therapies available. However there isn't a proper way for patients and therapists to evaluate the strengths and weaknesses of these treatments. Holmes argued that there is the need for a professional framework to help patients and therapists make an informed choice about which form of treatment is suitable for a particular person.