



**UNIVERSITY OF SUSSEX  
SCHOOL OF PSYCHOLOGY**

Contemporary Issues in Clinical Psychology  
and Mental Health (912C8)

**Masters level Module  
15 Credits  
Autumn Term 2013**

**Module Convenor: Dr. Kate Cavanagh**

**NOTE: Most of the questions you need answers to about this module are in this document. Please read it fully and carefully before your first seminar.**

NOTE: This document concerns the structure and content of the module. If you have questions about procedures, please consult the School of Psychology Administration Office in Pev1 2A13 or via [psychology@sussex.ac.uk](mailto:psychology@sussex.ac.uk).

## MODULE INFORMATION & REQUIREMENTS

### Module Structure, Aims and Objectives

#### Module Outline

This module describes what clinical psychology is and explores a range of contemporary issues in the professional practice of clinical psychology and related professional groups.

The module will begin by exploring the profession of clinical psychology and how it has evolved - we'll think about how people become clinical psychologists and what they do when they are qualified. We'll explore the different models of working in clinical psychology including the 'intuitive practitioner', 'scientist practitioner' and 'reflective practitioner' approaches. We'll consider what makes clinical psychology unique in the multidisciplinary context - and learn about what it means to work psychologically in the modern healthcare system. This will include a consideration of the roles other professional groups who offer psychological intervention such as psychological therapists and psychological well-being practitioners.

We'll think about the range of different theoretical approaches and basic psychological science that underpins the knowledge and practice of clinical psychology - in particular learning theory and behaviourism, cognitive theory, systemic approaches and psychodynamics.

Contemporary debates in clinical psychology practice will be considered, these include the value of formulation versus diagnosis, the role of common versus specific factors in psychological interventions, the meaning and implementation of evidence based practice in clinical psychology.

We'll go on to explore some of the important drivers of clinical practice that influence the delivery of clinical psychology within modern health services in the United Kingdom - this will include an introduction to the modern National Health Service, the National Institute for Health and Clinical Excellence, and the Improving Access to Psychological Therapies Programme. Finally, we'll look to the future of clinical psychology, and try to make some predictions about the shape of the clinical psychology and related professions in the years to come.

### Module Learning Outcomes.

#### Learning Outcomes

When you have completed this module, you should be able to:

1. Explain what clinical psychology is and describe the ways in which clinical psychologists work in the National Health Service and beyond.
2. Describe the main theoretical approaches underpinning the professional practice of clinical psychology and their application.
3. Demonstrate a systematic understanding and critical awareness of a range of contemporary issues in the professional practice of clinical psychology.

### Pre-Requisites

None

## Module Contact Information

Convenor: Dr. Kate Cavanagh  
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 E-mail: [kate.cavanagh@sussex.ac.uk](mailto:kate.cavanagh@sussex.ac.uk)

## Teaching and Learning

*The syllabus details for the module are available via links on the Psychology teaching web pages and via Sussex Direct.*

### ▪ Workshops

There will be 10 workshops for this module, each lasting approximately 2 hours. In addition there will be a library/information skills workshop held during week 6.

To avoid disruption to the majority, please try to arrive at least 5 minutes before the start time of the workshop (see workshop attendance etiquette in Course handbook).

It is **CRUCIAL** for you to understand that formal examination on this module will be based on material covered in the workshops **and** your readings for each week. It is also important for you to understand that workshops will **NOT** attempt to 'cover' all such material. That is, workshops are not intended to provide an alternative to you learning the material in your reading. Any attempt to rely solely on learning material presented in workshops will severely restrict your ability to do well during formal assessment of this module. Workshops are intended to fulfil functions other than repeating or précising material covered in the readings.

Please see your timetable in Sussex Direct for details of *when* and where *your* workshops will be held.

Workshops on this module are intended to perform several functions. First, they allow students to review material covered in prior workshops and associated essential reading. All students **must** do at least the essential reading before the workshop. In addition, there will usually some additional readings that will be assigned to some of you each week by your workshop leader. These are designed to supplement the essential reading and to provoke lively discussion in the workshop.

A second function of workshops is 'interrogate' at least some of the material covered in prior workshops and associated essential reading. This will be done by use of particular exercises you will learn about on a week-by-week basis. Again, students **must** have done the essential reading and workshop quality will improve to the extent that each student has gone beyond this in areas of particular interest to them.

Third, workshops will be used to provide students with the means of developing oral and listening skills that will unarguably be of tremendous benefit to them throughout their university career and beyond. Through the exchange of ideas and perspectives, you will develop a deeper

understanding of the issues covered in the module. This crucial function of seminars also provides a uniquely active way of learning which is not possible in workshops or by private study

Forth, workshops will illustrate the nature of a critical approach to students. The lecturer will sometimes simply explain material. At other times, however, the lecturer will criticise the material in some way. University education is about learning how to constructively criticise as well as simply absorb information. Evaluate your lecturer's criticisms. Are they simply personal prejudices (e.g., "I don't like this") and, if so, are they presented as such? Or are reasons given for criticisms made (e.g., "I don't like this because...")?

Fifth, workshops allow students a chance to get to know each other and to discuss material of mutual interest and relevance in a supportive social setting. Learning at university is not and should not be a competitive exercise. Your learning will benefit to the extent that you share your insights and problems with others and support and encourage them to do the same with you. This will often lead to collaborative learning opportunities *outside* formal teaching contexts.

You should note that all the study skills advice in existence suggests that straightforward 'absorption' of material (i.e., reading, listening, rote-learning and memorising) should take up about 20% of learning time. The other 80% should come from 'interrogating' that information (e.g., looking for links, attempting to summarise and synthesise, looking for strengths and weaknesses and possible improvements, applying to different areas, etc.).

- **Independent study** The difference between studying at university and study you may have done previously is that at university the emphasis is on you finding out things for yourself. Just as fitness clubs attempt to foster and facilitate (but cannot impose) fitness, universities attempt to foster and facilitate (but cannot impose) academic excellence. Results will (and can only) come as a direct result of *you* making appropriate use of the facilities at your disposal. Workshops, seminars and the like are there to support and guide your independent learning – they are not there to "pass information from tutors' heads to students' notebooks without passing through the brains of either." Not everything you will need or want to know will be covered in the workshops, seminars or essential readings. You need to become familiar with the material you are guided towards, but you also need to learn to 'manipulate' that material: apply it to new domains, compare and contrast across topics, synthesise it, evaluate it, consider its relevance to issues of interest to you, supplement it, etc. This can only be done by being interested and working hard because you want to. As we shall learn below, an exclusive focus on passing exams will *undermine* that motivation and will make you perform less well as a result. Thus, study because you want to learn and stop when you have answers to your own satisfaction for the questions you care about. Finally, note that independent study is study you engage in outside of formal contact hours with faculty – it does not have to be solitary (see under 'seminars' above).

- **Office Hours** Your module convenor, and other module tutors will hold an office hour each week. Please see the Psychology Office for when and where this will be held. Students may use these office hours (without appointment) to discuss or ask about anything module-related.

- **Study Direct** You are encouraged to access module materials and use the module forum in Study Direct. This is the best way to share ideas amongst your fellow students and ask

questions about the module. Module convenors and tutors would prefer to receive queries via the Study Direct module forum than by email.

## Books and Reading

You are expected to engage in a range of readings for this module. Weekly readings will usually include journal articles which will be posted on the Study Direct site each week.

Useful reading might also include (you should consider buying one of these books, or borrowing them from the library):

- Carr, A. (2012) *Clinical Psychology: An Introduction*. Routledge.
- [Clinical Psychology in Practice](#) - Helen Beinart, Paul Kennedy, and Susan Llewelyn (2009). Routledge.
- [Clinical Psychology](#) - Graham Davey (2008). Hodder Education.

You should also be familiar with a general text book on clinical/abnormal psychology – you do not need to buy a new text book – one from your undergraduate course, or selecting one from the library is fine – for example:

Davey, GCL. (2008) *Psychopathology*. Chichester, W. Sussex: Wiley.

This excellent textbook offers a grounding in a broad range of topics relevant to this module, and others across the MSc programme. You should become familiar with the ideas and issues presented in this book, for this module, particularly introductory sections of the book, and the chapters exploring diagnosis and aetiology for each of the various disorders.

Additional books that may be of interest:

Johnstone & Dallos (2006). *Formulation in Psychology and Psychotherapy*. Routledge.

This is a book which introduces and explores the use of formulation in psychology and psychotherapy. There is a copy in the library and a new edition will be published later this year.

Bentall, R.P. (2004) *Madness explained: psychosis and human nature*. London: Penguin.

This is an excellent “popular science” style book, which cover themes regarding the nature of understanding mental health problems, psychological approaches and present a critique of the “medical modal”.

Bentall, R.P. (2010) *Doctoring the mind: why psychiatric treatments fail*. London: Penguin.

This is another excellent “popular science” style book, which cover themes regarding the nature of understanding mental health problems, psychological approaches and present a critique of medical approaches to treating mental health problems.

**Weekly readings will also be listed on Study Direct. It is expected that you will be familiar with the general topic area each week (e.g. having read the chapter on the topic from a text book) and have read at least one recommended journal article prior to the workshop each week. Further optional readings will also be highlighted.**

Examples of these readings include:

Kinderman, P. (2005). A psychological model of mental disorder. *Harvard Review of Psychiatry*, 13, 206-217

Bieling, P. J. & Kuyken, W. (2006) Is cognitive case formulation science or science fiction? *Clinical Psychology: Science and Practice*, 10, 52-69.

Luborsky, L., & Barrett, M. S. (2006) The history and empirical status of key psychoanalytic concepts. *Annual Review of Clinical Psychology*, 2, 1-19.

Lilienfeld, S.O. e al., (in press) Why many clinical psychologists are resistant to evidence-based practice: Root causes and constructive remedies. *Clinical Psychology Review*.

Jorm, AF., Christensen, H. & Griffiths, KM. (2005). Public beliefs about causes and risk factors for mental disorders: Changes in Australia over 8 years *Soc Psychiatry Psychiatr Epidemiology*, 40: 764–767 DOI 10.1007/s00127-005-0940-z

Hirsch, C. & Clark, DM. (2004) Information-processing bias in social phobia. *Clinical Psychology Review*, 24,799–825

Dowbiggin, I. (2009) High Anxieties: The Social Construction of Anxiety Disorders. *Canadian Journal of Psychiatry*.;54(7):429–436.

Bogels, SM. & Brechman-Toussaint. (2006) Family issues in child anxiety: Attachment, family functioning, parental rearing and beliefs. *Clinical Psychology Review*, 26 , 834–856

France, CM., Lysaker, PH. & Robinson, RP. (2007) The “Chemical Imbalance” Explanation for Depression: Origins, Lay Endorsement, and Clinical Implications. *Professional Psychology: Research and Practice*, 38, No. 4, 411–420

Beck., AT. (2008)The Evolution of the Cognitive Model of Depression and Its Neurobiological Correlates. *Am J Psychiatry* 2008; 165:969–977

*Nolen-Hoeksema, S. (1987) Sex Differences in Unipolar Depression: Evidence and Theory. Psychological Bulletin. Vol. 101. No. 2, 259-282*

Arseneault,L., Cannon,M., Witton, J. and Murray, RM. (2004) Causal association between cannabis and psychosis: examination of the evidence. *British Journal of Psychiatry*, 184:110-117.

Levine, MP. & Murnen, SK. (2009) "Everybody knows that mass media are/are not [*pick one*] a cause of eating disorders": A Critical Review of Evidence for a Causal Link between Media, Negative Body Image, and Disordered Eating in Females. *Journal of Social and Clinical Psychology, Vol. 28, No. 1*, pp. 9-42

Bentall, RP. (1992) A proposal to classify happiness as a psychiatric disorder. *Journal of Medical Ethics*;18:94-98

Carey, T. A. & Pilgrim, D. (2010) Diagnosis and formulation: What should we tell the students? *Clinical Psychology and Psychotherapy, 17*, 447–454.

**You are also expected to engage in independent literature search and reading for this module, especially in preparation for discussion of the presentations. Guidance on this will be offered during your workshops.**

## **Assessment**

Assessment details for this module are shown on your Syllabus in Sussex Direct. Submission deadlines are shown on your timetable. The assessment criteria for assessed work is displayed on Study Direct and on the School teaching pages

In line with University regulations, every effort will be made to ensure that one marked copy of each essay is returned with feedback within 15 term time working days of the relevant submission deadline. You will be informed by the School Office when work is ready to collect.

### **Module Assessment**

**Three pieces of work contribute to your assessment for this module (15 credits):**

- 1. An in-class presentation (20%).**
- 2. An essay of 2000 words in total (60%).**
- 3. A short term paper or 500 words in total (20%)**

**Assessment titles and further information will be given during the Introductory Workshop for this module (Thursday, Week 1).**

### **Submission deadlines and late penalties**

Two copies of your module assessment must be submitted to the Psychology School Office, Pevensey 1 2A13 before the deadline. Students must ensure they have attached the relevant coversheet.

The University late submission policy applies to this module work. Information about the University late submission policy is available here:

<http://www.sussex.ac.uk/academicoffice/documentsandpolicies/examinationandassessmenthandbooks>

For any piece of late work where the student wishes to claim mitigating circumstances or impairment a MEC form needs to be completed and submitted to the relevant School Office i.e., the office which owns the module. Information about this process is available here:

<http://www.sussex.ac.uk/studentlifecentre/mitigation>

**Very Important Note:** Appropriately completing and submitting formally assessed work is your responsibility. Definitive guidelines on this are provided in the '*Handbook for Candidates*' available on the web or via School offices. If you are in any doubt about the rules concerning submissions check with the School Office.

**A warning about plagiarism and collusion:** There are strict guidelines on copying material and all work is routinely checked for plagiarism. If you are found to have copied material you will be referred to the Misconduct Panel. Up to date information on the University regulations concerning plagiarism and collusion can be found at the following link:

<http://www.sussex.ac.uk/academicoffice/resources/misconduct>

## Student Evaluation

All modules at Sussex are fully audited. You will be asked to complete an anonymous student evaluation form near the end of each term, allowing you to comment on and criticise all aspects of the module. You may also comment on the module at any time, either to convenors or tutors, and you may do this directly or via some intermediary (e.g. a student representative). Feedback received in this way will be collated and shown to all tutors and module convenors for the module. It will also be reported to the psychology teaching and learning committee. Module Evaluation summaries from the previous year are available on the School web pages.

Reactions and responses to such student feedback will be reported back to students via student representatives (who attend School meetings). In addition, module convenors meet regularly with seminar tutors to discuss how the module is progressing and whether and when improvements might be made. We want the module be as good as it possibly can be so all and any feedback is gratefully received.



## Workshop Overview

**You do not need to prepare anything for week 1. Readings will be provided in workshops and seminars and added to the *Study Direct* resource for this module on a weekly basis.**

<b>Week 1</b>	<b>Thurs 19<sup>th</sup> Sept</b>
Introduction	
<b>Week 2</b>	<b>Thurs 26<sup>th</sup> Sept</b>
Thinking psychologically about mental health	
<b>Week 3</b>	<b>Thurs 3<sup>rd</sup> Oct</b>
Cognitive and behavioural models of mental health	
<b>Week 4</b>	<b>Thurs 10<sup>th</sup> Oct</b>
Psychodynamic models of mental health	
<b>Week 5</b>	<b>Thurs 17<sup>th</sup> Oct</b>
Systemic models of mental health	
<b>Week 6</b>	<b>Thurs 24<sup>th</sup> Oct</b>
Reading week: Information Skills Session in Library NOTE THIS SESSION IS NOT ON YOUR TIMETABLE AND WILL BE HELD IN THE LIBRARY'S <a href="#">Open Learning Space</a>	
<b>Week 7</b>	<b>Thurs 31<sup>st</sup> Oct</b>
Formulation versus diagnosis in clinical psychology and mental health	
<b>Week 8</b>	<b>Thurs 7<sup>th</sup> Nov</b>
Common and specific factors in psychological interventions	
<b>Week 9</b>	<b>Thurs 14<sup>th</sup> Nov</b>
Evidence based practice	
<b>Week 10</b>	<b>Thurs 21<sup>st</sup> Nov</b>
Improving access to psychological therapies (IAPT) and the future of clinical psychology	
<b>Week 11</b>	<b>Thurs 28<sup>th</sup> Nov</b>
Module Conclusions and Reflection	
<b>Week 12</b>	<b>Thurs 5<sup>th</sup> Dec</b>
Reading week & drop-in assessment plan feedback clinic	

