

# [The psychology of mental health](https://assignbuster.com/the-psychology-of-mental-health/)

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Introduction According to the description given in the case study, Jane experiences anxiety, sexual response to violence and personality disorder. This diagnosis is based on the facts that she describes herself as empty, worthless, hopeless and helpless, stupid and of no real concern to anyone. According to the medical model of mental illness, if a patient experiences extreme fear known as phobias and hallucination, then he/she has a mental disorder, resulting from anxiety. In Jane’s case, this anxiety is a response to violence after she has been raped by her stepfather.

Since she feels angry with herself for experiencing the rape at her teenage age and having a violent man in her life, she is also suffering from personality disorder. Jane feels that she could have helped the situation and that she has done all in her power. To deal with her relationship with a partner, she has a ‘ secret life’, in which she has a range of intense but short-lived sexual encounters with other people. She suggests these make her feel alive and less empty. Jane tells that she deals with the difficulties in her relationship by cutting herself and inserting objects under her skin because this makes her feel a sense of release. The following theories would be applicable in the case study to give an explanation of the causative factors of the mental illness in the question: humanistic therapy and cognitive behavioural therapy.

Cognitive Behavioural Therapy Cognitive behavioural therapy is used to treat mental disorders as physical illnesses, assuming that there must have been a physical cause that contributed to the mental illness. The individuals in support of the model take symptoms as perceivable signs of the unseen mental problem, which is termed as a syndrome. If these symptoms are put under serious consideration, the actual cause of the disorder could be discovered and treated properly. The supporters of this theory also argue that the mental illness should be attended to as early as it has been realized or as early as the symptoms have been detected. They emphasize that if the patient, suffering from the mental disorder, does not receive medical attention at this early stage of mental illness, the patient’s mental condition will deteriorate to a state where recovery chances will be very low. Cognitive behavioural therapy has assumptions which include such signs as extreme fears (phobias), hallucinations, and suicidal ideas, which are treated as mental disorder symptoms.

Several signs that the affected individual shows as a result of mental problem are said to be a syndrome. The signs discussed above make the medical psychiatrist come up with a conclusion called a diagnosis; for example, the patient has psychosis or a more severe condition known as schizophrenia. It also assumes brain pathology, biological reasons and genes or germs (Kendler et al., 2000). The psychiatrist comes up with a judgment concerning the patient’s conduct during a medical examination. The medical practitioner’s judgment will be that the patient is portraying abnormal, conducted that through the peculiar way of asking and answering questions in the assessment session or medical interview.

This conclusion is also greatly influenced by the information given to the medical practitioner by close relatives and also the environment in which the behaviour has been portrayed. The medical practitioner will give a treatment prescription based on his/her diagnosis; for example, such prescription as psychosurgery, drugs, electroconvulsive therapy as well as talk therapy. From the cognitive behavioural theory perspective, it is evident in the discussed case study that Jane’s mental disorder is a result of the physical violation of her humanity. Jane’s current mental state has resulted from the occurrences in her life in the past years. That is the event in her relationship as well as the occurrence of being raped by a stepfather at teenage age. It is evident that Jane is suffering from personality disorder, which is in the case study supported by the words “ she describes herself as empty, worthless, hopeless and helpless, stupid and of no real concern to anyone”.

The personality disorder made her to cut herself and insert ojects under her skin because she believes that this makes her feel a sense of release (Evans, 2007). Jane’s serious incidents of self-harm and attempted suicide are responses to violence. As it has been explained in the case study, she has suffered violence from the hands of man she trusted. In the case study, it is mentioned that she was experiencing anxiety, high level of stress and low mood, hence evidence of a lack of peace. She responds to the violence she has experienced by secluding and isolating herself.

She tends to feel released only after cutting herself and inserting objects in her skin. She engages in secret sexual affairs with other men to fell released. It seems that she enjoys being away from the only people she can closely relate with since she feels that; in this way, her private life is respected and she is secure from the knowledge in her past. Jane developed the phobia of being in the company of male colleagues or friends because of the rape, which made it so difficult for her to enjoy the company of males. This is why she had experienced many short lived and intense relationships as well as a string of ‘ one night stands in an attempt to fight this phobia.

Therefore, Jane needs to be helped in dealing with the phobia and feeling comfortable once again in the company of different people (Kendler et al., 2000). Humanistic Therapy/ Counseling Talking Therapy Humanistic therapy models emphasize the psychological trauma from childhood as the main reason for the occurrence of the mental disorders and distress in adulthood. These models are based on the perception that traumatizing experiences are commonly more serious than mental disorders’ diagnosis. Traditionally, these models have been known to be related with such approaches as a psychoanalytic one, an example of Freud Sigmund’s ideas about childhood hysteria and sexual abuse (Coon, D. W.

(2003). In support of the humanistic therapy theories, the developer of the attachment model, John Bowlby associates a mental disorder with effects of poor relationship of young children and infants with their caregivers. There have been many researches in support of association of early experiences and later negative mental health and chronic maltreatment. Humanistic therapy models have also been associated with anti-psychiatry and humanist approaches with regard to the link between the family relationship and schizophrenia. Personality disorders have also been focused on a disorder known as borderline personality in particular (Bronfenbrenner, 1979).

In general, the humanistic therapy theories particularly highlight the relationship between traumatic and stressful factors during early childhood relations with mature interpersonal relations development. In administering drug treatment under the humanistic therapy models, the drugs are presented as appealing things so as to gain the patient’s trust. The medical practitioner must ensure that patients suffering from mental disorder takes the drugs in good faith and willingly so as convince them that they have received the right treatment for their illness, which will enhance their recovery as a result of contentment. In most cases, the talk therapy cannot be applied to mental patients since they are not in a position to apply whatever will be said to them by the psychiatrist due to their mental incapacity. Mostly, the same drug is administered to all patients regardless of their symptoms or medical history since the drugs are not meant to deal with the causative root, but with the symptoms exhibited.

Patients just need to feel that they have been attended to; the effectiveness of the drugs that are being prescribed does not matter much. In most cases mental disorder patients prefer drug treatment to talk therapy. Despite the fact that some drug treatments cause drug dependency, the medical practitioners also prefer drug treatment since it is better than no treatment at all. Even though the drugs have negative side effects, they are the most effective in mental disorder cases; if the patients do not receive any attention medically, the mental state will deteriorate to a non-controllable state. Hence, approximately one-half to two-thirds of patients with mental disorders benefit from the drug treatment (Dattilio & Hanna, 2012).

In Jane’s case, due to the high level of stress, low moods and anxiety that she has experienced in the relationships, she lost confidence in herself as well as in others. This was worsened by the sexual assault that she suffered from the hands of her stepfather. It made her feel threatened and get involved in secret sexual life in order to make herself satisfied. She has difficulty to imagine herself being happy in a new relationship as she has been in several relationships which ended up being unsuccessful (Bronfenbrenner, 1979). In this case, administering drug treatment as well as talk therapy is important.

Drugs will deal with her sleeplessness and heal her cut wounds while the talk therapy will deal with her feeling angry with herself. Drugs will give her a relaxed feeling and also help her to sleep; hence, it will subdue her anxiety and difficulty in sleeping. Drugs also deal with the rheumatic pains that occur as a result of instability of mind. Most of the mental disorder patients suffer from rheumatic pains since their minds are not at peace as a result of past experiences that have led to the mental disorder. Having the knowledge that Jane’s mental capacity is not completely incapacitated, talk therapy, on the other hand, will be important to convince her to accept the situation she is going through and live positively with all that has happened to her. The practitioner should advise her on ways of preventing such occurrences in the future, which would cause more damage, hard to recover from (Berk, 2007).

Talk therapy will also bring her realization how important is dating again because if she does not date, later, she will experience personality disorder again since she will feel that she did not do as she ought to have done when there was time for dating. Talk therapy will also make her understand the harms of isolation. In this case, if not talked to, it would be hard for her to enjoy social life and to have friends, which would add her state of depression since the loneliness will give her time to re-examine her fate. Thus, she will live in self-pity and the already existing self-rejection and hatred. Humanistic therapy/ counselling talking therapy will also help to bring her to appreciating herself, appreciating others around her and the whole society as well. By appreciating the society, Jane will not have difficulty dating or relating with male colleagues or keeping their company (Bronfen & Morris, 1998).

Conclusion In conclusion, in this case, we have considered two most applicable theories of mental illness. These theories are the humanistic therapy/ counselling talking therapy and the cognitive behavioural therapy. These two theories are in line with the description of the case study. The cognitive behavioural therapy states that there is a physical cause to every mental disorder; in Jane’s case, the mental illness has resulted from the sexual violence she has experienced at teenage age. The humanistic therapy argues that the mental illness is usually caused by traumatic experiences in the past. In this case, her experience in the relationship and her past life has led to her mental disorder.

In this case the diagnosis of the mental disorder is that Jane is suffering from anxiety, sexual response to violence and personality disorder. As a result of the diagnosis, the treatment prescribed is talk therapy and drug treatment. In addition to what has been discussed above, this will help to work on her self-esteem and personality to quicken her recovery.