

Sample Response

A phobia is an intense, irrational fear of a specific object or event. A phobia is considered as a mental disorder where there is significant distress experienced, dysfunction to everyday life and behaviour is considered atypical (not common). Curtis has a phobia of being contaminated with germs. His behaviour affects his everyday life as he becomes anxious in certain situations that would not typically cause anxiety, for example if a person sneezes, he leaves the room. Curtis also experiences distress in this situation as he becomes highly agitated.

In the above paragraph, the acronym IDEA has been applied:

I – Phobia

D – phobia defined

E – characteristics of a phobia have been elaborated on (explained)

A – reference has been made to the scenario and these ideas have been applied.

The biopsychosocial model describes how a range of factors may influence and interact to contribute to the development of a mental disorder. A variety of factors contributed to the development of Curtis' phobia.

Exposure to a phobic results in a stress response. This is an internal, biological contributing factor. The sympathetic nervous system is activated which results in the fight, flight freeze response. Curtis may have an overactive sympathetic nervous system where he experiences an increase in some of his physiological responses. For instance, when Curtis sees a sick person, he is likely to experience an anxiety response where stress hormones are released which results in an increase in his heart rate and breathing increases.

Long term potentiation is a biological contributing factor which involves the strengthening of neural pathways within the brain. Every time Curtis is exposed to an anxiety induced stimulus in this case a sick person or germs, the amygdala is activated which in turn triggers the fight-flight-freeze response and he will experience a high level of fear. This creates & consolidates a fear pathway in his brain via LTP. The more time the fear pathways in his brain are activated via exposure to the phobic stimulus the more that neural pathway in the brain is strengthened.

Observational learning involves individuals paying attention to a model, retaining the information in memory and imitating the behaviour. Curtis observed his mother's phobic anxiety surrounding germs and within that, he observed processes of operant conditioning perpetuation (via negative reinforcement) of her avoidant behaviours. This would have provided a source of vicarious conditioning.

According to the behavioural model, phobias are a result of interactions with the environment. Phobias can be perpetuated by operant conditioning, where consequences influence whether behaviour is likely to be repeated. Curtis' fear may continue due to negative reinforcement where a behaviour increases due to the removal of an unpleasant stimulus. Curtis is likely to continue engaging in avoidance behaviour, for instance not using public toilets in order to remove the unpleasant stimulus of anxiety and fear.

A cognitive bias is a type of error in thinking that occurs when people interpret information. Cognitive biases may lead to inaccurate judgements or illogical interpretations of a situation. Curtis experiences illogical and irrational thoughts about dirt and cleanliness. He believes that he may not be able to work when he is older. This is a psychological contributing factor that may inhibit his recovery.

There are a range of biological, psychological and social evidence based interventions that could be used to help treat Curtis' phobia.

Breathing retraining is a biological intervention used to help treat phobias and it involves identifying incorrect breathing habits and replacing them with correct ones. An anxious person's breathing may consist of small, shallow breaths (hyperventilation), which can prolong the body's reaction to anxiety and make the situation worse. Breathing retraining involves teaching Curtis to consciously control his breath (by taking slow, deep inhalations and exhalations through the nose when experiencing fear. This would reduce his physiological arousal associated with fear and anxiety and regulate his breathing rate.

A psychological intervention is cognitive behaviour therapy which uses a range of therapies to help people change unhelpful or unhealthy thought processes, feelings and behaviours. Curtis would be encouraged to challenge his irrational thoughts about cleanliness and germs and replace these thoughts with more neutral and balanced thoughts, hence altering the neural pathways in his brain. He would also be encouraged to change his avoidance behaviours and gradually confront the phobic stimulus. Gradually being exposed to the phobic stimulus is an additional form of treatment Curtis could engage with. It would involve him being taught relaxation techniques, creating a fear hierarchy of anxiety arousing situations with a psychologist and slowly presenting Curtis with the least provoking fear stimulus to the most fear provoking. It is important that during the sessions, Curtis feels calm and relaxed when being presented with stimuli associated with the phobic stimulus.