



YEAR 12 Autumn 1 TERM

'An ambitious curriculum that meets the needs of all'

Medium Term Planning - Topic: Psychopathology

Symptoms of phobias	Pupils will be taught the following this term:
Skills/ Assessment Objective Links	<p>Why do we teach this to students? Application of core approaches to explaining particular types of behaviour related to mental health. A central component of psychology, as well as being engaging.</p> <p>Why do we teach this now? After Approaches, when students gain a core understanding of what psychology is about, these principles can be applied to the mental health context so students can see psychology in action. It should be taught before year 13 schizophrenia and so it is at the latter end of year 1. Useful to come after approaches as there is a key approach for each disorder, makes sense to come after biopsychology which includes a lot of research on neurotransmitters which helps with OCD component of psychopathology.</p> <p><u>Definitions of abnormality</u>, including deviation from social norms, failure to function adequately, statistical infrequency and deviation from ideal mental health.</p> <p>The behavioural, emotional and cognitive <u>characteristics</u> of phobias</p> <p><u>The behavioural approach</u> to explaining and treating <u>phobias</u>: the two-process model, including classical and operant conditioning; systematic desensitisation, including relaxation and use of hierarchy; flooding.</p> <p>The behavioural, emotional and cognitive <u>characteristics</u> of obsessive-compulsive disorder (OCD).</p> <p><u>The biological approach</u> to explaining and treating <u>OCD</u>: genetic and neural explanations; drug therapy.</p> <p>The behavioural, emotional and cognitive <u>characteristics</u> of depression</p> <p><u>The cognitive approach</u> to explaining and treating <u>depression</u>: Beck's negative triad and Ellis's ABC model; cognitive behaviour therapy (CBT), including challenging irrational thoughts.</p> <p>The exams will measure how students have achieved the following assessment objectives:</p> <p>AO1: Demonstrate knowledge and understanding of scientific ideas, processes, techniques and procedures. AO2: Apply knowledge and understanding of scientific ideas, processes, techniques and procedures :in a theoretical context, in a practical context, when handling qualitative and quantitative data. AO3: Analyse, interpret and evaluate scientific information, ideas and evidence, including in relation to issues, to make judgements and reach conclusions, develop and refine practical design and procedures.</p>
Spiritual, moral, social, and cultural development	<p>SMSC: understanding that people who have mental health conditions have voting rights, understanding that mental health conditions mean that others need to be cared for.</p> <p>PSHE/British Values: Oxfordshire Mind/Young Minds website.</p> <ol style="list-style-type: none"> 1. How to talk about emotions accurately and sensitively 2. That happiness is linked to being connected with others 3. How to recognise the early signs of mental wellbeing concerns 4. Common types of mental ill-health 5. How to critically evaluate when something you do has a positive or negative effect on their own/others mental health 6. The link between exercise, time outdoors, community participation and voluntary/service based activities on mental wellbeing and happiness <p>Democracy – through understanding that people who have mental health conditions have voting rights. Mutual respect – through understanding that mental health conditions mean that others need to be cared for. Rule of law – through understanding that psychologists can be barred from the BPS for breaking the ethical guidelines.</p> <p>:</p> <p>Skills Builder: Critical thinking and analytical. communication and interpersonal, Leadership and teamwork skills, Organization/time management skills, Goal setting and prioritizing.</p>

	Relationships: what constitutes good mental health and how to recognize signs of wellbeing concerns in others. An understanding of the benefits of healthy relationships with others and power to identify when a relationship might be unhealthy.
Numeracy	Numeracy: Statistical infrequency definition, mental health statistics.
Literacy	<p>Vocabulary Tier 2: phobia, characteristic, irrational, avoidance, distortion, therapy</p> <p>Vocabulary Tier 3: Mental health, abnormality, DSM-IV, ICD-X, phobias, depression, OCD, two-process model, cognitive theory, cognitive behavioural therapy, drug therapy. Statistical deviation, failure to function, cognitive characteristic, irrational, avoidance, distortion, trichotillomania, hoarding, excoriation, systematic desensitisation, flooding, negative triad, schema, cognitive-behavioural therapy, serotonin, synapse, polygenic, dopamine, parahippocampal gyrus, selective serotonin reuptake inhibitor, tricyclics,</p> <p>Reading: reciprocal reading strategies used, eg predictions – many hooks/ starters include asking what do we already know about this topic. Opportunity to summarize eg write down the main points of an argument/ theory. Questioners – does the text raise any questions, group work as an opportunity to discuss. Connectors – can the text be linked to any theories (either for or against). Opportunity to clarify – discussion of any words or ideas that the student didn't understand.</p> <p>Writing: As Psychology is all exam classes, many lessons are dedicated to essay writing skills for the 8/ 16 mark essays. Students are required to show knowledge which should link to key psychological terminology, application which should integrate fully with the stem and an critical analysis and discussion when evaluating.</p> <p>Oracy: group work in the majority of lessons, think pair share activities eg a debate on definitions of abnormality.</p>
Becoming future ready	<p>Personal Skills: As a Psychology student you will learn research skills, an understanding of how people think and behave which is essential in the real world, you will gain an ability to relate and empathise with a range of people, you will gain an understanding of how to listen to others sensitively and good questioning skills, you will learn techniques of how to cope with emotionally demanding situations, you will get the chance to work on your own and with others.</p> <p>Careers/Employability: As well as the above personal skills leading to employability, Psychology A level delivers skills employers value, such as numerical skills, the ability to understand and work with statistics, effective communication and the ability to work productively in teams. It also gives an understanding of the human mind and behaviour and so any employment would use these skills as all employment involves working with others in some aspect or another.</p>
Adaptation	Throughout this topic, quality first teaching will provide differentiation:
QFT/ SEND Provision	<p>By product: differential outcomes using must, could, should.</p> <p>By resource: each PowerPoint has different levels of differentiation to access, 'key points' extension, stretch and challenge. Stimulus questions are of a different ability.</p> <p>By Intervention: by providing different levels of supervision and support, psychology drop ins, catch up sessions.</p> <p>By Progressive Questioning: exploring pupils' understanding through interactive dialogue.</p> <p>By Grouping: according to prior attainment, gender, social preference, preferred learning style.</p> <p>By Task: Pupils should be involved in the identification of targets which are meaningful to them and in the selection of an appropriate task from the given range.</p> <p>By Offering Optional Activities: In class or as homework, to extend learning.</p> <p>This QFT/SEND provision will be explicit within the lesson-by-lesson schemes of work.</p>
Implementation Curriculum Delivery	To be able to:
Learning Outcomes (Most powerful knowledge)	Know the definitions of abnormality: deviation from social norms
	Know the definitions of abnormality: failure to function adequately
	Know the definitions of abnormality: statistical infrequency
	Know the definitions of abnormality: deviation from ideal mental health
	Describe the behavioural, emotional and cognitive characteristics of phobias
	Describe the behavioural, emotional and cognitive characteristics of depression
	Describe the behavioural, emotional and cognitive characteristics of obsessive compulsive disorder (OCD)



	Discuss the behavioural approach to explaining and treating phobias: the two-process model including classical and operant conditioning
	Discuss the behavioural approach to explaining and treating phobias: systematic desensitisation, including relaxation and use of hierarchy
	Discuss the behavioural approach to explaining and treating phobias: flooding.
	Outline the cognitive approach to explaining and treating depression: Beck's negative triad
	Outline the cognitive approach to explaining and treating depression: Ellis's ABC model
	Outline the cognitive approach to explaining and treating depression: cognitive behaviour therapy (CBT), including challenging irrational thoughts
	Discuss the biological approach to explaining and treating OCD: genetic and neural explanations
	Discuss the biological approach to explaining and treating OCD: drug therapy
	Red denotes interleaving; aspects of knowledge covered previously.
Current learning to be developed in the future within:	Discussion of psychopathology is revisited in Schizophrenia topic, issues and debates and statistics.
Assessment	Refer to assessment maps for formative and summative assessment opportunities.
Impact	Attainment and Progress – Refer to assessment results / data review documentation.