

**Psychopathology Across the Life Cycle**

Code: 102572  
ECTS Credits: 6

Degree	Type	Year	Semester
2502443 Psychology	OB	2	1

The proposed teaching and assessment methodology that appear in the guide may be subject to changes as a result of the restrictions to face-to-face class attendance imposed by the health authorities.

### Contact

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### Use of Languages

Principal working language: catalan (cat)  
Some groups entirely in English: No  
Some groups entirely in Catalan: No  
Some groups entirely in Spanish: No

### Other comments on languages

Teaching in Catalan and Spanish in all groups; some teaching in English in group 5. Materials can be provided in different languages. The exam in Spanish must be requested in the first 4 weeks; Ev1 also available in English.

### Teachers

Eduardo Fuente Diez  
Maria Soledad Fernandez Gonzalo  
Maria Jesus Tarragona Oriols  
Natàlia Díaz-Regañón Serra

### Prerequisites

None.

### Objectives and Contextualisation

#### Context

Psychopathology implies a deviation from human normal functions, which only can be understood in a developmental context, understanding that social environment and culture are key factors. Competences in psychopathology across development are basic for the practice of psychology in all disciplines, given that the limits between normality and abnormality are inherent in human nature and can be addressed in all contexts. This subject is a presentation of the most representative disorders in mental illness during the life cycle.

#### Aims

Principal: to understand the most representative disorders in psychopathology across the life cycle, along with their main characteristics.

Specific: When the students complete the subject, they should be able...

1. ...to identify the most important forms of behavioral abnormality
2. ...to recognize the main risk factors for psychopathology as well as person-environment interaction in the etiology of psychopathology

## Competences

- Analyse the demands and needs of people, groups and organisations in different contexts.
- Apply knowledge, skills and acquired values critically, reflexively and creatively.
- Criticise the effects of personal practice on people, taking into account the complexity of human diversity.
- Formulate hypotheses about the demands and needs of the recipients.
- Maintain a favourable attitude towards the permanent updating through critical evaluation of scientific documentation, taking into account its origin, situating it in an epistemological framework and identifying and contrasting its contributions in relation to the available disciplinary knowledge.
- Recognise the deontological code and act ethically.
- Recognise the determinants and risk factors for health and also the interaction between people and their physical and social environment.
- Recognise the diversity of human behaviour and the nature of differences in it in terms of normality abnormality and pathology.
- Students must be capable of applying their knowledge to their work or vocation in a professional way and they should have building arguments and problem resolution skills within their area of study.
- Students must be capable of collecting and interpreting relevant data (usually within their area of study) in order to make statements that reflect social, scientific or ethical relevant issues.

## Learning Outcomes

1. Apply knowledge, skills and acquired values critically, reflexively and creatively.
2. Classify psychological disorders.
3. Criticise the effects of personal practice on people, taking into account the complexity of human diversity.
4. Distinguish between the different signs and clinical symptoms of different psychopathological disorders.
5. Formulate problems of people in diagnostic terms.
6. Identify factors of risk for mental health.
7. Identify functional variables of acquisition and maintenance of problems in examples of clinical cases.
8. Identify normal and abnormal development and behaviour patterns.
9. Maintain a favourable attitude towards the permanent updating through critical evaluation of scientific documentation, taking into account its origin, situating it in an epistemological framework and identifying and contrasting its contributions in relation to the available disciplinary knowledge.
10. Recognise the deontological code and act ethically.
11. Recognise the most characteristic psychopathology of each life cycle, its genesis, clinical, epidemiology and course.
12. Students must be capable of applying their knowledge to their work or vocation in a professional way and they should have building arguments and problem resolution skills within their area of study.
13. Students must be capable of collecting and interpreting relevant data (usually within their area of study) in order to make statements that reflect social, scientific or ethical relevant issues.

## Content

1. Introduction: concept, causality and classification of psychopathology
2. Neurodevelopmental disorders: Intellectual disability, autism, tics, elimination and sleep disorders
3. Infancy: Anxiety and disruptive behavior disorders
4. Adolescence: eating disorders, substance abuse
5. Adulthood: cognition and affective disorders, psychosis and personality disorders.

## Methodology

Content acquisition will be done through:

a) Lectures. Lectures present general concepts both about basic issues (abnormality, causality, classification) and psychopathological aspects in order to allow students to look further in depth in the non-directed part of learning (reading, cases, problems).

Material: Recommended readings.

Program: 24 hours (face-to-face and virtual sessions of 1.25h-1.5h hours)

b) Seminars. Clinical case-based problems and Problem-Based Learning (PBL) allow students to look in depth at contents and to practice competences from a different point of view. Eventually, some students will be able to present materials in class. Assessment 1 is also related to this type of learning and requires submission of a written document before week 9 (see specific calendar of each group).

Material: Cases and other supporting material will be available in Virtual Campus.

Program: 10 sessions of 2 hours each (total 20 hours).

Groups assignment to the seminars is done by *Gestió Acadèmica* (Academic Administration). It is important to follow lecturers' guidelines before considering a change of group, and to carefully consider the conditions and requirements before going ahead with a change. Regarding assessment 1 submission, since it means group work, it is crucial to stay in the assigned group (11, 12, 21...) to submit this assessment in order to avoid problems to obtain a mark. Assessment 1 submission is via Virtual Campus and group assignments are programmed. Choosing students who are not in the assigned group could make difficult to grade this assessment.

For the first part of the subject (Child-Adolescent Psychopathology) lectures will take place before the first assessment period and for the second part of the subject (Adult Psychopathology) lectures will take place after the first assessment period (see the academic calendar of the current year).

N.B. The proposed teaching and assessment methodologies may experience some modifications as a result of the restrictions on face-to-face learning imposed by the health authorities. The teaching staff will use the Moodle classroom or the usual communication channel to specify whether the different directed and assessment activities are to be carried out on site or online, as instructed by the Faculty.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

## Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Lectures	24	0.96	2, 6, 8, 12, 10
Seminars	20	0.8	1, 2, 3, 4, 5, 6, 8, 7, 9, 12, 13, 11
Type: Supervised			
Optional meetings with tutor	7.5	0.3	1, 9, 12, 13
Type: Autonomous			
Readings	42	1.68	2, 6, 8, 9

## Assessment

To consult the assessment rules of the Faculty please link: [  
<https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>]

Assessment consists of 4 assessments. Chronologically:

Ev1 (CC): Children case-work. In groups, written, virtual, First assessment period, weight 10%.

Ev2 (CE): Exam part children-adolescents. Individual, written, in class, First assessment period, weight 40%.

Ev3 (AC): Adults case-work. Individual and/or group, written and/or oral, in class and virtual, Second assessment period, weight 10%.

Ev4 (AE): Exam part adults. Individual, written, in class, Second assessment period, weight 40%.

To pass the subject

Weighted mean must be  $\geq 5$

Weighted mean implies all the assessments weighted by their weight. So:

Final score (Weighted mean) =  $(E1 \cdot 0.10) + (E2 \cdot 0.40) + (E3 \cdot 0.10) + (E4 \cdot 0.40)$

The condition of "presented"

Submission of assessments equivalent to or above 4 points on the total of the assessment (40%) means "presented" in this subject (according to point 3 of the assessment regulations of the faculty).

Re-assessment

The assessment model of this subject establishes a system of FINAL re-assessment.

To resit the subject students must take an exam based on ALL THE CONTENTS OF THE PROGRAM (lectures and seminars of both parts of the subject). This exam does not allow students to improve the mark obtained if they pass the subject. This exam allows to obtain a maximum score of 6.5 in the subject.

Resits consist of a test exam with 4 options to answer and a number of questions similar to the sum of assessments 2 and 4. Re-assessment is on the WHOLE SUBJECT, including assessments 1, 2, 3 and 4.

It is possible to take resits when 3 conditions are met:

- 1) Having not achieved a pass grade in the subject (see above)
- 2) Having been assessed on at least 2/3 of the total assessment (i.e., 66% of total score in continuous assessment)
- 3) Having obtained a score in continuous assessment between 3.5 and 4.9

The mark obtained in the resit exam will be directly included in the final results (in substitution of the preceding score) with a maximum of 6.5. This means that any score equivalent or higher than 6.5 will be included as a maximum of 6.5 because this is the highest score obtainable through the re-assessment or resit system. Resits will take place in the resit examination period and in the week programmed by the Faculty.

Second enrolment or more students

No unique final synthesis test for students who enrol for the second time or more is anticipated.

Link to Faculty's assessment requirements: [  
<https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>]

## Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Ev1. Children case-work	10%	0	0	1, 2, 3, 4, 5, 6, 8, 7, 9, 12, 13, 10, 11
Ev2. Exam children-adolescents part	40%	1.5	0.06	2, 4, 5, 6, 8, 7, 9, 12, 13
Ev3. Adults case-work	10%	0	0	2, 4, 5, 6, 8, 7, 12, 13, 10
Ev4. Exam adults part	40%	1.5	0.06	1, 2, 3, 4, 5, 6, 8, 7, 9, 12, 13, 10

## Bibliography

Specific references will be provided in English.

Basic references in Spanish or Catalan are:

Mandatory

In Spanish:

For the first part (developmental psychopathology or childhood and adolescence):

Ezpeleta, L.y Toro, J. (2014). Psicopatología del desarrollo. Madrid: Pirámide.

For the second part (psychopathology of adulthood and old age), one of these two manuals:

Obiols, J. (Ed.) (2008). Manual de psicopatología general. Madrid: Biblioteca nueva.

Vallejo, J. (1015). Introducción a la Psicopatología y la psiquiatría 8a Edición. Madrid: Elsevier.

Some alternatives in English:

Cicchetti, D. (2016). Developmental Psychopathology, 4 volumes. Wiley.

American Psychological Association (APA) (2018). APA Handbook of Psychopathology, 2 volumes. APA.

American Psychiatric Association (APA) (2013). Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-5). New York: APA.

Complementary

Asociación Americana de Discapacidades Intelectuales y del Desarrollo (2011). Discapacidad intelectual. Definición, clasificación y sistemas de apoyo. Madrid: Alianza. [American Association of Mental Retardation. (2006). El retard mental. Definició, classificació i sistemes de suport. Vic: Eumo].

American Psychiatric Association (2013). DSM-5 Manual de diagnóstico y estadístico de los trastornos mentales. Washington: American Psychiatric Publishing.

Barkley ,R.A., Benton,C.M. (2000). Hijos desafiantes y rebeldes. Consejos para recuperar el afecto y lograr una mejor relación consu hijo. Barcelona: Ed.Paidós.

Barlow, D. H., & Durand, V. M. (2003). Psicopatología (3ª ed.). Madrid: Thomson.

Bragado, M.C. (2009). Enuresis nocturna: tratamientos eficaces. Madrid: Pirámide.

Bragado, M.C. (1998). Encopresis. Madrid: Pirámide.

Caballo, V.E., Salazar, I.C. y Carrobles, J.A. (Dir.). (2015). Manual de psicopatología y trastornos psicológicos. Madrid: Pirámide.

Belloch, A., Sandin, B., y Ramos, F. (1994). Manual de psicopatología. Vol I. Madrid: McGraw Hill. Interamericana.

Durand, V.M. y Barlow, D. H. (2007). Psicopatología: Un enfoque integral de la psicología anormal. Thomson Paraninfo.

Echeburúa, E. & de Corral, P. (2009). Trastornos de ansiedad en la infancia y adolescencia. Madrid: Pirámide.

Ezpeleta, L. (Ed.). (2005). Factores de riesgo en psicopatología del desarrollo. Barcelona: Masson.

Kaplan, H. y Sadock, B. (2008). Manual bolsillo psiquiatría clínica. Lippincott Williams & Wilkins. Wolters Kluwer Health.

Méndez, F.X., Orgilés, M. y Espada, J. P. (2008). Ansiedad por separación. Psicopatología, evaluación y tratamiento. Madrid: Pirámide.

Toro, J. (2004). Riesgo y causas de la anorexia nerviosa. Barcelona: Ariel.

## **Software**

Non special programs are required.