

Definitions and Concepts for AQA Psychology A-level

Option 2: Schizophrenia

Atypical antipsychotics: Newer antipsychotics with fewer side effects that can affect more than one neurotransmitter.

Avolition: A chronic lack of motivation to complete tasks.

Delusions: Where a person holds an incorrect belief that is fixed and unchangeable in spite of offering evidence.

Diathesis-stress model: The theory that schizophrenia develops by genetic markers that increase vulnerability to schizophrenia, and external stressors that trigger it to develop.

Dopamine hypothesis: The theory that excess and lack of dopamine in different areas of the brain could be responsible for some schizophrenic symptoms.

Dysfunctional thought processing: The theory that schizophrenia could be attributed to faulty cognitive processes.

Family dysfunction: Some unhealthy family dynamics that may be a cause of schizophrenia, such as lack of communication, contradictory responses etc.

Hallucinations: Additional sensory experiences e.g. seeing someone that isn't really there.

Negative symptoms: Symptoms that occur with loss of regular functioning i.e. avolition.

Positive symptoms: Symptoms that occur with excessive to regular functioning, e.g. auditory hallucinations.

Schizophrenia: A mental disorder characterised by a confusion between reality and what is in their mind.

Speech poverty: The inability to produce fluent and coherent speech.

Token economy: A form of behaviour management that aims to increase desirable behaviour and reduce undesirable behaviour by use of tokens. If desirable behaviour

This work by [PMT Education](https://www.pmt.education) is licensed under [CC BY-NC-ND 4.0](https://creativecommons.org/licenses/by-nc-nd/4.0/)



is displayed, immediate (indirect) rewards in the form of tokens are given. These tokens can then be exchanged for a reward of choice.

Typical antipsychotics: Older antipsychotics that were developed to reduce dopamine levels in the brain.

