

## Models in Developmental Psychopathology (H002093)

**Course size** *(nominal values; actual values may depend on programme)*

**Credits 4.0**

**Study time 120 h**

### Course offerings and teaching methods in academic year 2024-2025

A (semester 1)

Dutch

Gent

group work

lecture

independent work

### Lecturers in academic year 2024-2025

Goossens, Lien

PP07

lecturer-in-charge

De Mey, Wim

PP07

co-lecturer

Van Malderen, Eva

PP07

co-lecturer

Verbeken, Sandra

PP07

co-lecturer

### Offered in the following programmes in 2024-2025

[Bachelor of Science in Psychology\(main subject Clinical Psychology\)](#)

crdts 4

offering A

[Bachelor of Arts in Moral Sciences](#)

4

A

[Bachelor of Arts in Philosophy](#)

4

A

[Linking Course Master of Science in Psychology\(main subject Clinical Psychology\)](#)

4

A

[Preparatory Course Master of Science in Psychology\(main subject Clinical Psychology\)](#)

4

A

### Teaching languages

Dutch

### Keywords

Psychopathology; development; models; child; adolescent.

### Position of the course

This course can be situated within the block of Models in psychology (Block 2) and focuses more specifically on developmental psychopathological models. This course prepares for the courses Integration of Models in Clinical Psychology (Block 2), Assessment of developmental psychopathological processes (Block 3), Developmental Psychotherapy and Cases in developmental psychological therapy (Block 4).

### Contents

This course covers the following topics:

- In a first part, focus is placed on the **conceptualization of developmental psychopathology (DP)** and clinical developmental psychology (CLDP) and an overview is provided of the basic principles for the description, explanation and prediction of deviation of normal development according to the DP-model. In these courses, the following topics will be covered:
  - prevalence of psychopathology in children and adolescents
  - view on classification
  - developmental tasks/normal development
  - principles of equifinality and multifinality
  - transactional view with risk and protective factors (resilience) at different levels
  - stability and change in pathological development
  - developmental trajectories and prevention

Here, the answers to the 7 core questions according to the DP-model are initiated (see below).

- Next, an overview is provided of the **different models within DP** (e.g., goodness-of-fit model, diathesis-stress model, differential susceptibility model...). These models represent different views to look at the development of psychopathology and they will be linked to

**clinical problems that emerge throughout different age phases.** This will be linked with the basic principles of the DP-model that were introduced during the first courses. The following problems will be outlined:

- early socialization problems, attachment problems, child abuse and trauma
- impulse regulation problems in childhood and adolescence (i.e. behavioral problems, addiction, non-suicidal self-injury)
- internalizing problems in childhood and adolescence (anxiety problems, depressive problems, eating problems)
- Throughout the course, **both problem specific as transdiagnostic models** are included and **recent scientific studies** with regard to the research domain of DP are provided.

Overview of the 7 core questions from the DP-view:

- **View on human functioning:** Humans are thinking creatures who provide meaning/significance to their world (cognitive vision). Underlying cognitive schemas play an important role in this. They guide our information processes and determine our feelings, thoughts and behaviors. They form the glasses that give color to a person's life. DP studies development and its maladaptive deviations in youth and cognitive schemas may form an important maintaining mechanism.
- **View on normality and abnormality:** To describe what deviates from normal development in youth a dimensional view can be used from which children are situated on a dimension or continuum, going from less to more problems/pathology. Next to this view, also a categorical view can be used (DSM), from which a disorder is either present or not. Also it is important to take into account impairment, as well as which developmental tasks are associated with a certain age, as well as cultural factors. Finally, DP does not only focus on descriptions at a behavioral level, but is also interested in underlying (specific and transdiagnostic) mechanisms/causes.
- **Etiology and resilience:** Psychopathology can be explained by the interaction between child and environmental factors. The state-of-the art model here is the transactional model, in which dynamic and bi-directional influences (interactions) are present between risk and protective factors. Both the risk and protective factors can be situated on several levels: organic, intrapersonal, interpersonal and higher order level (bio-psycho-social). Pathways that deviate from normal development are not considered to be deterministic, but may be weakened or bended through protective factors/mechanisms.
- **Core concepts:** Description, explanation and prediction of maladaptive development, longitudinal, mechanisms, equifinality and multifinality, resilience, transactional model
- **Protective/hindering factors of change (moderators):** From a diathesis-stress vision, vulnerabilities within an individual (i.e., temperament, cognitive style) interact with chronic or acute stressors in order to develop psychopathology. Changes in the balance between these factors may have either a helpful or hindering effect on change.
- **Processes of change (mediators):** Change can be brought through intrapersonal processes, such as self-regulation processes, emotion regulation processes and cognitive processes. Next to this, change can also be brought via the environment.
- **Context:** An ecological and transactional view is put forward (contexts can be seen on different levels, where they interact with each other). Context is often seen as stressor, which in interaction with personal vulnerabilities can explain psychopathology.

### Initial competences

This course unit builds on certain course competencies of Developmental psychology, Current Developmental Psychological Theories.

### Final competences

- 1 To define, fit, differentiate and compare theoretical concepts.
- 2 To describe, argument on and relate theoretical models with scientific findings and clinical questions.
- 3 To describe, explain and predict clinical disorders at different ages.
- 4 To recognize and argument on methods of research in the domain.
- 5 To describe and critically evaluate recent developments in the field.
- 6 To develop and argument on a clinical developmental psychological view on prevention and intervention.

### Conditions for credit contract

Access to this course unit via a credit contract is determined after successful competences assessment

### Conditions for exam contract

This course unit cannot be taken via an exam contract

## Teaching methods

Group work, Lecture, Independent work

## Extra information on the teaching methods

Lectures: The lectures are supported by powerpoint presentations and illustrated with demonstrations via video-demonstrations. Interactive discussion of learning contents to promote active learning and gaining insights on the topic and to stimulate critical thinking. Guided self-study by means of learning paths in which students complete intermediate tasks. These tasks include e.g.: reading and comprehension of recent scientific literature, applying theoretical insights on cases.

Teamwork: preparing and applying theoretical content in the own environment. Reflecting about the group processes.

This course assumes the responsible use of generative artificial intelligence (GAI). During the lessons, what this means will be explained.

## Study material

Type: Handbook

Name: Prins, P., & Braet, C. (2014). *Klinische Ontwikkelingspsychologie* (Herdruk). Houten: Bohn • Stafleu Van Loghum

Indicative price: € 52

Optional: no

Language : Dutch

Available in the Library : Yes

Available through Student Association : Yes

Usability and Lifetime within the Course Unit : regularly

Usability and Lifetime within the Study Programme : regularly

Type: Slides

Name: Slides beschikbaar via Ufora

Indicative price: Free or paid by faculty

Optional: no

Language : Dutch

Available on Ufora : Yes

## References

Lewis, M., & Rudolph, K. (2014). *Handbook of Developmental Psychopathology*. New York: Springer.

Sameroff, A., Lewis, M., & Miller, S. (Eds.) (2000). *Handbook of Developmental Psychopathology* (2nd ed.). New York: Plenum Publishers.

## Course content-related study coaching

Support via Ufora, via e-mail or via an appointment.

## Assessment moments

end-of-term and continuous assessment

## Examination methods in case of periodic assessment during the first examination period

Written assessment with multiple-choice questions, Written assessment with open-ended questions

## Examination methods in case of periodic assessment during the second examination period

Written assessment with multiple-choice questions, Written assessment with open-ended questions

## Examination methods in case of permanent assessment

Participation, Assignment

## Possibilities of retake in case of permanent assessment

examination during the second examination period is possible in modified form

## Extra information on the examination methods

Details for PE1 and PE2 (15 points): Written exam with multiple choice and one open ended question (combination of knowledge and insight)

Details for NPE (5 points)

- Form: paper (team work) in which student demonstrates his/her capacity to apply the theory from the lectures and demonstrations in the daily context; in addition the student participates throughout the learning paths within the proposed time schedule and is capable to integrate the information from the learning paths within the paper.
- Frequency: evaluation is based on the quality of the paper
- Description of second exam opportunity: paper will be (re-)executed/adapted between the

first and second exam period

- Who passes the written exam but failed for the paper in the first exam period, has to revise the paper for the second exam period
- Who fails both for the written exam and the paper in the first exam period, has to participate to the written exam in the second period and revise the paper as well.
- Who fails the written exam in the first exam period and passes for the paper, has to participate to the written exam in the second period.
- Feedback: feedback on learning paths will be provided in the course of the first semester, feedback on the paper will be provided via Ufora

#### **Calculation of the examination mark**

-A combination of end-of-term assessment (75%) and continuous assessment (25%).

-Partial results for which the student scored at least half of the points, are transferred to the next examination period within the same academic year.

Partial results will never be rounded.

-Students who eschew one or more parts of the evaluation can no longer pass the course.

Final scores will be reduced to the highest non-deliberative quotation (7/20) in case the final score is higher.

The final score is the weighted average of the components of the evaluation. Students can only pass for this course if they achieve a minimum of 10/20 for each component.

When students obtain less than 10/20 for at least one of the components, the following rules apply:

- 8/20 or 9/20 for at least one of the components: the student can no longer pass the entire course unit: if the total score is a mark of ten or more out of twenty, then this is reduced to the highest failing mark (9/20).
- less than 8/20 for at least one of the components, the student can no longer pass the entire course unit: if the total score is a mark of eight or more out of twenty, then this is reduced to the highest non-deliberative mark (7/20)