

Upsides of being down

- 1 **D**iscuss the positive aspects of mental disorder, and the British public seems to feel threatened. When actor Stephen Fry gave an account of his bipolar disorder, he was accused of “normalising” what was a “severe mental illness”, that he had the luxury of shunning treatment due to his privilege and wealth. These sorts of criticisms missed the point: his wealth was earned largely because of his so-called disorder. The years when he was contributing to hit TV shows such as *A Bit of Fry and Laurie* and *Black Adder* were largely fuelled by protracted periods of elevated mood – in the form of mild mania, or “hypomania”.
- 2 4, straightforward depression (unipolar depression) has no elated, productive, hypomanic side and, as a consequence, very few people have written about the positive aspects of the condition. The focus has been on the acute symptoms of what can be an incapacitating illness, while forgetting that depression has meaning, and that there is a life after recovery.
- 3 The assumption that depression is a disease has been reinforced and perpetuated by biologists, psychiatrists and pharmaceutical companies, all of whom have a vested interest – consciously or unconsciously – in the clinical perspective. This might be an appropriate model for the more severe “melancholic” forms of depression that psychiatrists tend to see, but not for the majority of cases of depression. Most depression resolves itself without a single medical consultation.
- 4 Although technological advances in antidepressant treatments have undoubtedly been responsible for the alleviation of much suffering, strict adherence to the medical (disease) model is preventing a more complete understanding of why we as a species are so susceptible to depression, with at least 20% of men and 25% of women experiencing the condition in their lifetimes. The disease model may also be engendering a sense of powerlessness in those with depression or ex-sufferers. What so commonly goes along with this perspective is the implication that the condition is due to some unusual constitutional weakness. The only solution, 7, is chemical.
- 5 It is complete nonsense to talk of depression being unusual when it is plainly common. The search for a “depression gene” has foundered because the genetic underpinnings are spread across the population, like the genes determining height. Most of us probably have a moderate susceptibility to the condition under certain stressful circumstances. 8, we see GPs overprescribing antidepressants,

and the World Health Organisation talks of increasing access to “treatment” to deal with the global epidemic in depression-related disability – predicted to be second only to heart disease as the most important cause of disability. All of this ignores the “ultimate” cause of depression.

6 My recent review of theories and personal observations suggests that depression might serve some useful functions. The truth is that short-term pain can lead to longer-term gain. A recently published follow-up study of depression in Holland – the Netherlands Mental Health Survey and Incidence Study (Nemesis) – used a sample of 165 people with a major depressive episode, and provides some preliminary scientific evidence to suggest that depression may indeed be helpful. Researchers who were looking for evidence to suggest that depression leaves people chronically disabled were surprised to discover the opposite.

7 The population they followed from before illness to the period after recovery showed that people seemed to cope better with life’s trials after depression than they were doing before its onset. In the group as a whole, averaged ratings of vitality, psychological health, social and leisure activities, occupational performance and general health all significantly improved upon recovery from depression, compared to functioning prior to the depression. A minority of individuals got worse

after a depressive episode, mostly in the realms of general health, vitality, and physical functioning. However, much to the researchers’ surprise, severity of depression and availability of treatment were not significant predictors of this decline. It was more to do with additional problems such as social isolation, having a physical illness, or drug or alcohol addiction.

8 Depression may bring about a “rebirth” because it removes self-delusion. There is some evidence from scientific studies to show that depressed people are rather more realistic in their thinking than “healthy” individuals – the phenomenon of “depressive realism”. It prompted the scientific journalist Kyla Dunn to write: “One cognitive symptom of depression might be the loss of self-enhancing biases that normally protect healthy people against assaults to confidence in their abilities. In many instances, depressives may simply be judging themselves and the world much more accurately than non-depressed people, and finding it not a pretty place.”

9 With recovery, and with the lifting of mood, a new kind of truth could emerge. It would be devoid of blind optimism: a more humble assessment of the depressed person’s own capability, containing a more balanced picture of his or her perceived strengths and limitations.

*Adapted from Paul Keedwell in
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Tekst 3 Upsides of being down

- 1p 3 Which of the following is in line with the point made in paragraph 1?
- A People do not approve of actors bragging about a mental disorder they may have.
 - B Stephen Fry has become a wealthy man despite his mental problems.
 - C Stephen Fry's mental breakdown was partly due to the pressure to live up to his success.
 - D The constructive side of mental affliction is not generally recognised.
- 1p 4 Which of the following fits the gap in paragraph 2?
- A Consequently
 - B However
 - C Similarly
 - D What's more
- 1p 5 What is meant by "the clinical perspective" (paragraph 3)?
The view that
- A depression cannot be remedied without medical treatment.
 - B depression may be the cause of all sorts of physical diseases.
 - C only cases of major depression should be treated by specialists.
 - D the medical world has a financial interest in treating mental disorder.
- 1p 6 Which of the following characterises the contents of paragraph 4?
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- A describes some possible consequences of the belief in the medical model discussed.
 - B explains some feasible arguments in favour of the medical model discussed.
 - C sums up some of the areas still to be covered by the medical model discussed.
- 1p 7 Which of the following fits the gap in paragraph 4?
- A after all
 - B however
 - C paradoxically
 - D therefore

- 1p 8 Which of the following fits the gap in paragraph 5?
A Admittedly
B Besides
C Nevertheless
- 1p 9 Which of the following statements is in line with the contents of paragraph 7?
A After a depression life may be somewhat richer.
B Mental stability usually goes together with physical health.
C Non-psychological factors may make it impossible to overcome a depression.
D Prescription of medication cannot always prevent a relapse into depression.
- 1p 10 Wat is de essentie van “a new kind of truth” (alinea 9)?

Bronvermelding

Een opsomming van de in dit examen gebruikte bronnen, zoals teksten en afbeeldingen, is te vinden in het bij dit examen behorende correctievoorschrift, dat na afloop van het examen wordt gepubliceerd.