

GENERAL PSYCHOLOGY (PSYC 210)
Study Guide: Psychopathology (Abnormal Behavior)
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Psychopathology: the scientific study of mental, emotional, and behavioral disorders, e.g.

- **An inability to behave in ways that foster the well-being of the individual and, ultimately, society**
- **Good “mental health” implies getting what you want in socially acceptable ways**

--Mental health problems are extensive

- 1 in 100 will require hospitalization
- In any given week, 7% of the population is experiencing an anxiety-related disorder

--Defining abnormality

- Subjective discomfort
- Statistical definitions
- Social non-conformity
- Situational context
- Cultural relativity (all definitions of abnormality are relative)
- It is generally agreed that behavior must interfere with normal activities and cause distress to be abnormal; behavior must be “maladaptive,” not meeting demands of day to day life (e.g., danger to self and/or others)

CLASSIFYING MENTAL DISORDERS (DSM IV, 1994: Mental disorder defined as a significant impairment in psychological functioning)

Overview of DSM IV

1. Psychotic disorders (disorders of thought): characterized by a retreat from reality, by hallucinations and delusions, and by social withdrawal; psychotic person cannot tell fantasy from hallucination from reality [e.g., schizophrenia (probably a disorder of the frontal cortex); delusional disorders; severe mood disorders]
2. Organic mental disorders: problems caused by brain pathology (e.g., senility, injuries)
3. Substance related disorders (e.g., drugs, alcohol)
4. Mood disorders: disturbances in affect or emotion (e.g., manic or depressed in “manic-depressive” or “bi-polar” disorder); may include psychotic symptoms
5. Anxiety disorders: panic, phobias, or generalized anxiety [neurosis; chronic and persistent anxiety; post-traumatic stress disorder (PTSD: anxiety existing after a distressing or traumatic event); obsessive (thoughts)-compulsive (acts) disorder (OCD)]
6. Somatoform disorders: physical symptoms that mimic physical disease or injury for which there is no apparent cause (e.g., hypochondriasis; conversion reactions)

7. Dissociative disorders (N.B. no longer “multiple personality disorders”): sudden amnesia; multiple personality; depersonalization
8. Personality disorders: unhealthy personality patterns [e.g., paranoid, narcissistic, dependent, borderline, and antisocial (poor socialization, lack of impulse control)]
9. Sexual and gender identity disorders: as, gender identity disorder; paraphilias [exhibitionism, fetishism, voyeurism; also, sexual dysfunction (N.B. rape a crime not a sexual disorder; homosexuality no longer considered a sexual disorder)]

--What is “insanity?” A legal term

--Mental illness and violence: most mentally ill persons are not violent

--Three theoretical pathways to anxiety and disorder: Na x Nu--→ Be

1. Psychodynamic: conflicts in id, ego, superego (anxiety caused by forbidden sexual and aggressive impulses that threaten to break through into behavior; psychopathology acts like a defense by protecting the ego)
2. Humanistic: Carl Rogers (faulty self-image)
 - Existential theory: individual’s loss of meaning
3. Behavioral approach: phobias (classical conditioning); avoidance learning; anxiety reduction hypothesis (short-term relief)

MAJOR MENTAL DISORDERS

Psychosis: a major loss of contact with shared views of reality

- Changes in thinking and emotion
- Characteristics:
 - Delusions: false beliefs (depressive delusions; somatic delusions; delusions of grandeur; delusions of persecution, etc.)
 - Hallucinations and sensations: hallucinations are sensory experiences that occur in the absence of a stimulus, as “hearing voices”
 - Disturbed emotions: characteristic of psychosis (e.g., elation or “flat affect”)
 - Disturbed communication (e.g., garbled and chaotic)
 - Personality disintegration: impairment at work, in social relations, and in personal hygiene
- Symptoms of psychosis come and go (not like movie depiction of “madhouse;” see movies “Shine” and “A Beautiful Mind”); change in landscape and demographics of psychosis primarily a function of psychoactive drugs
- Humane treatment/reform of mentally ill began in France and slowly spread to USA
- Some view psychosis as “cry for help”—a primitive form of communication
- Types of psychosis
 - organic psychosis (e.g., brain injuries or disease)
 - functional psychosis [delusional disorders (“paranoid psychosis such as delusions of persecution), schizophrenia, psychotic mood disorders)]

Two categories of Major Mental Disorders: Schizophrenia and Mood Disorders

- Behavioral: learned helplessness model (M.E.P. Seligman)
- Cognitive: self-defeating thoughts

--Treatment for mood disorders with psychosis

- Drugs
- Psychotherapy
- Somatic therapy (e.g., electroconvulsive shock; surgery)
- hospitalization

Major mental disorders appear to be endogenously rather than exogenously induced.
Discuss.