

PSYC353 Exam 1 Study Guide

Chapter 1 – Looking at Abnormality

- **Psychopathology** – people who suffer mental, emotional, and often physical pain.
- The context or circumstances surrounding a behavior influences whether the behavior is viewed as abnormal.
- **Cultural relativism** – the view that there are no universal standards or rules for labeling a behavior as abnormal. There are different definitions of abnormal across cultures.
 - Some people argue that societies label individuals and groups as abnormal in order to justify controlling them.
 - **Drapetomania** – slaves who desired freedom.
 - **Dysaesthesia aethiopsis** – refusal to work for one's master. Believed whipping slaves who refused to work would revitalize their lungs and bring them back to their senses.
- **Gender roles** and **culture** impact how we label behaviors as normal or abnormal. Also impacts how we express and treat behaviors. Can influence people's willingness to admit certain behaviors. Can influence the type of treatments deemed acceptable.
- **Unusualness** – deviant behaviors, depends on the cultures norm.
 - An issue with this is that many rare behaviors are positive for the individual and society, such as being able to play the piano.
- **Distress** – behaviors should be considered abnormal only if the individual suffers from distress and wishes to be rid of the behavior.
- **The Four D's of Abnormality**
 - **Dysfunction** – behaviors and feelings interfere with a person's daily life.
 - **Distress**
 - **Deviance**
 - **Dangerousness**
- **Supernatural theories** – believed people were possessed by evil spirits and needed an exorcism.
- **Trephination** - in the Stone Age, people **drilled holes** in the skulls of people displaying abnormal behaviors to allow the spirits to depart.
- Ancient Chinese medicine was based on the balance of **yin and yang**. Yin was negative force and Yang was the positive force. People who had weird behaviors were said to have had yin and yang out of balance.
- Some cultures believed that emotions were controlled by internal organs, and when air passed through them they showed those emotions.
- Egyptians were aware of many disorders.

- **Wandering uterus** – the idea that the uterus was roaming the female body.
- Greeks and Romans saw madness as an affliction from the gods.
- Hippocrates saw abnormal behavior as an imbalance in the body's composition. He classified such behavior into epilepsy, mania, melancholia, and brain fever.
- The Middle Ages believed in supernatural forces, such as **witchcraft** and demons.
- **Psychic epidemics** – large numbers of people engage in unusual behaviors that appear to have a psychological origin. Ex: dance frenzy.
 - **Tarantism** – people suddenly developed an acute pain, which they attributed to the bite of a tarantula.
- **Hospital of Saint Mary in Bedlam** – mentally ill were held against their will, put in extremely harsh conditions, and exhibited to the public for a fee.
- **Act for Regulating Madhouses (1774)** – the first act that provided for licensing and inspection of madhouses and required that a physician signed a paper before the patient could be admitted.
- **Pinel** began the campaign for moral treatment of patients. Ordered for patients to be able to walk freely around asylums and provided with clean and comfortable rooms.
- **Dix** lobbied for laws and appropriations to fund the cleanup of mental hospitals and training of the mental health professions.
- **General paresis** – a disease that leads to paralysis, insanity and eventually death. Showed syphilis is a cause of one form of insanity. Lead to many breakthroughs in biological factors.
- **Mesmerism** – the use of hypnosis to cure people from hysteria. Under hypnosis, people talked more freely about their problems.
- **Psychoanalysis** – the study of the unconscious.
- **Self-efficacy beliefs** – people's beliefs about their ability to execute the behaviors necessary to control important events.
- **Managed care** – a collection of methods for coordinating care that ranges from simple monitoring to control over what care can be provided and paid for. Not covered by health insurance.

Chapter 2 – Theories and Treatment

- **Theory** – a set of ideas that provides a framework for asking questions about phenomenon and for gathering and interpreting information about the phenomenon.
- **Therapy** – a treatment that addresses the factors the theory says cause the disorder.
- **Nature vs. Nurture** – is the behavior a result of biology or the environment?

- **Biopsychosocial Approach** – it takes a combination of biological, psychological, and sociocultural factors to result in the development of a specific disorder.
- **Diathesis** – vulnerability.
- **Diathesis-stress model** – when the diathesis and stress come together in the same individual and a disorder emerges.
- **Biological approaches:** brain dysfunction, biochemical imbalances, and genetic abnormalities.
- **The Brain** – divided into three main regions
 - **Hindbrain** – crucial for basic life functions.
 - **Midbrain** – sensory information and control movement
 - **Forebrain**
- Hindbrain
 - **Medulla** – helps control breathing and reflexes.
 - **Reticular formation** – controls arousal and attention to stimuli.
 - **Pons** – attentiveness and the timing of sleep.
 - **Cerebellum** – coordination of movement.
- Midbrain
 - **Superior colliculus** and **inferior colliculus** – relay sensory information and control movement.
 - **Substantia nigra** – regulates responses to reward.
- Forebrain
 - **Cerebral cortex** – advanced thinking processes.
 - **Corpus callosum** – bridge of fibers separating the hemispheres.
 - **Thalamus** – handles incoming and outgoing signals.
 - **Hypothalamus** – regulates basic biological needs such as hunger, thirst, sexual arousal, emotions and temperature control.
 - **Pituitary gland** – regulates endocrine system.
- **Hemisphere lobes** – frontal, parietal, occipital, and temporal.
- **Limbic system** – a set of structures that regulate many instinctive behaviors such as reactions to stressful events, eating, sex. Closely related to the hypothalamus.
 - **Amyglada** – critical emotions such as fear.
 - **Hippocampus** – memory.
- **Reuptake** – when the initial neuron releasing the neurotransmitter into the synapse reabsorbs the neurotransmitter, decreasing what is left in the synapse.
- **Degradation** – neuron releases an enzyme that breaks down neurotransmitter into biochemicals.
- **Serotonin** – emotions and impulses.
- **Dopamine** – reinforcements or rewards and muscle functioning.
- **Norepinephrine** – accounts for attentiveness and depression. Can stimulate you or make you down.
- **GABA** – tranquilizing effect.