

Abnormal Psychology

Chapter 1: *Past & Present*

Definitions:

- **Abnormal Psychology**- the scientific study of abnormal behavior in an effort to describe, predict, explain, and change abnormal patterns of functioning.
- **Norms**- a society's stated and unstated rules for proper conduct.
- **Culture**- a people's common history, values, institutions, habits, skills, technology, and arts.
- **Eccentricity**- an unusual pattern with which others have no right to interfere.
- **Treatment/Therapy**- a procedure designed to change abnormal behavior into more normal behavior.
- **Trephination**- an ancient operation in which a stone instrument was used to cut away a circular section of the skull, perhaps to treat abnormal behavior.
- **Humors**- according to the Greeks and Romans, bodily chemicals that influence mental and physical functioning (yellow bile, black bile, blood, and phlegm).
- **Asylum**- a type of institution that first became popular in the 16th century to provide care for individuals with mental disorders. Most became virtual prisons.
- **Moral Treatment**- 19th century approach to treating people with mental dysfunction that emphasized moral guidance and human/respectful treatment.
- **State Hospitals**- state-run public mental institutions in the United States.
- **Somatogenic Perspective**- the view that abnormal psychology functioning has physical causes.
- **Psychogenic Perspective**- the view that the chief causes of abnormal functioning are psychological.
- **Hypnotism**- a procedure that places people in a trance-like state during which they become extremely suggestible.
- **Psychoanalysis**- either the theory or the treatment of abnormal mental functioning that emphasizes unconscious psychological forces as the cause of psychopathology.
- **Psychotropic Medications**- drugs that mainly affect the brain and reduce many symptoms of mental dysfunction.
- **Deinstitutionalization**- the practice, begun in the 1960s, of releasing hundreds of thousands of patients from public mental hospitals.
- **Private Psychotherapy**- an arrangement in which a person directly pays a therapist for counseling services.
- **Prevention**- interventions aimed at deterring mental disorders before they can develop.

- **Positive Psychology**- the study and enhancement of positive feelings, traits, and abilities.
- **Multicultural Psychology**- the field of psychology that examines the impact of culture, race, ethnicity, gender, and similar factors on our behaviors and thoughts and focuses on how such factors may influence the origin, nature, and treatment of abnormal behavior.
- **Managed Care Program**- a system of health care coverage in which the insurance company largely controls the nature, scope, and cost of medical or psychological services.

Key Concepts:

What is Psychological Abnormality?

- o 4 “Ds” of Abnormality:
 - Deviance**- (different, extreme, unusual, bizarre)
 - Distress**- (unpleasant & upsetting to the individual)
 - Dysfunction**- (interference with the individual’s ability to conduct daily activities in a constructive way)
 - Danger**- (potential harm to the individual or others)
- o Behavior must be considered in the context in which it occurs
 - is the individual’s unusual behavior following a major traumatic event?
 - abnormality depends on the *norms* and *values* of the *society* in question

What is Treatment?

- o *therapy* (typically requires 3 essential features):
 - patient
 - therapist
 - series of therapeutic contacts → change in the patient’s emotional state, attitudes, and behavior

Ancient Abnormality Views & Treatments

- o Greeks & Romans: (500 B.C to 500 A.D.)
 - Hippocrates* (father of modern medicine)
 - believed illness had natural causes
 - abnormal behavior → caused by internal physical problems
 - brain pathology → imbalance of four fluids (*humors*) that flowed through the body (yellow bile, black bile, blood, and phlegm)

- v. treatment-
 - correct underlying physical pathology
 - quiet life, balanced diet, exercise, etc.
- o Europe in the Middle Ages: (500 A.D. to 1350 A.D.)
 - i. powerful clergy → return to demonological explanations of abnormal behavior
 - ii. time of great stress and anxiety (war, urban uprisings, and plague)
 - iii. mass madness, delusions, hallucinations, lycanthropy
 - iv. exorcisms
 - v. towns grew into cities & govt. officials took over nonreligious activities → people with mental disorders were treated in hospitals instead of by the clergy
- o The Renaissance:
 - i. improvement of treatment for individuals with mental disorders
 - ii. religious shrines → became centers for human treatment and healing
 - iii. mid-16th century → hospitals became overpopulated and turned into *asylums*
- o 19th Century:
 - i. again, improvements in care for individuals with mental disorders
 - ii. *Philippe Pinel (Paris)* started the movement toward *moral treatment*
 - iii. *William Tuke (England)* York Retreat
 - iv. *Dorothea Dix (United States)* movement to ensure legal rights & protection for people with mental disorders → establishment of *state hospitals*
 - v. late 19th century → moral treatment disintegrated & mental hospitals became warehouses where patients received minimal care
- o Early 20th Century:
 - i. *Emil Kraepelin* → general paresis research → *somatogenic perspective*
 - ii. *Sigmund Freud* → *psychogenic perspective* → *hypnotism* → *psychoanalysis* → gained acceptance by clinicians

Current Trends

- iii. significant changes within the past 50 years
 - *psychotropic drugs* → *deinstitutionalization*
 - *outpatient treatment*
 - *prevention programs*
 - *multicultural psychology*
 - *positive psychology*