

CHAPTER 15: PSYCHOLOGICAL DISORDERS

Abnormal vs. Normal Behavior? (more than 1)

1. Personal distress
2. Violation of social normal
3. Harmful dysfunction
4. Impairment

BELIEFS ABOUT DISORDERS

Ancient Greeks:

- The gods punished humans by causing madness
- Hippocrates suggested a link to the brain

Middle Ages

- “The Demonic Model” = possession by the devil
- Punishment for sin
- “Witches”

Renaissance

- “Medical Model”
- Asylums (most likely a placebo effect)
- Moral treatment

The Modern Era

- 1950's
- Dramatic change in treatment of mentally ill
- Deinstitutionalization
- Community mental health centers

CULTURE BOUND DISORDERS

- Certain conditions are culture bound
 - Remain poorly researched
- May be variants of conditions in western culture
 - ex. Social anxiety
- Individualistic vs. collectivistic
- Many mental disorders appear to be universal across cultures
 - ex. Schizophrenia, alcoholism

MISCONCEPTIONS

- Psychiatric diagnosis is nothing more than pigeonholing
- Psychiatric diagnoses are unreliable
- Psychiatric diagnoses are invalid
 - Robins and Guze criteria for *validity*
 - Diagnoses usually distinguish themselves from other diagnoses (ruling out other things in the process)
 - The diagnoses do predict performance on laboratory tests

- Predicts what happens to the individual over time
 - Predicts response to treatment
- Psychiatric diagnoses stigmatize people

CLASSIFICATION

- Psychodynamic Diagnostic Manual (PDM)
- DSM-IV-TR Diagnostic and Statistical Manual
 - multiaxial system
 - diagnostic criteria
 - warns to think organic
 - gives prevalence rates

DSM-IV

- 5 Axes
 - I. Clinical Syndromes (mood, anxiety, learning)
 - II. Personality Disorders (narcissistic, anti-social)
 - III. Medical Conditions (diabetes, glaucoma)
 - IV. Social and Environmental Problems (financial difficulties, lack of social support)
 - V. Global Assessment of Functioning
- Criticisms
 - High level of **comorbidity**
 - ex. Major depression and anxiety go hand in hand
 - Reliance on **categorical** rather than **dimensional** model of psychopathology
 - All or none in categorical
 - Spectrum in dimensional
 - Vulnerable to political and social influences
 - ex. Homosexuality used to be seen as disorder but b/c of social influence is no longer

MENTAL ILLNESS AND THE LAW

- Overwhelming majority of people with schizophrenia are not aggressive or violent
- **Insanity defense** requires people to:
 - Not know what they were doing at the time of the crime
 - Not know what they were doing was wrong
- Less than 1% of criminal cases use this successfully
- Involuntary commitment
- Can only be committed against their will if:
 - Threat to themselves or others
 - Are so impaired they can't care for themselves

PERSPECTIVES

- Biological
- Psychological
 - Psychodynamic
 - Cognitive
 - Behavioral
- Sociocultural
- Biopsychosocial (combination)

DIATHESIS-STRESS MODEL

- Psychological theory that attempts to explain behavior as predisposition vulnerability together with stress from life experiences
 - Diathesis (B, P, or S) + Stressor (B, P, or S) → Disorder

AXIS I: CLINICAL SYNDROMES

- Developmental disorders
- Learning/ attention disorders
- Mood disorders
- Anxiety disorders
- Schizophrenia
- Somatoform disorders
- Dissociative disorders

AXIS II: PERSONALITY DISORDERS

- Deeply ingrained, maladaptive ways of perceiving others and behaviors that are stressful
- Narcissistic
- Antisocial
- Paranoid
- Borderline
- OCD and OCPD
- Dependent

AXIS II: GENERAL MEDICAL CONDITIONS

AXIS IV: GLOBAL AND ENVIRONMENTAL ISSUES

AXIS V: GLOBAL ASSESSMENT OF FUNCTIONING