

**GENERAL PSYCHOLOGY I**  
**CHAPTER 12: PSYCHOLOGICAL DISORDERS**  
11/10

*What is Psychological Abnormality?*

- abnormal psychology: describes, predicts, explain, and change abnormal patterns of functioning
- “abnormal”
  - deviance: unusual extreme, different, or bizarre feeling or thought a person is having
    - violations of social norms
    - cannot only look at deviance
  - distress: idea that behaviors, thoughts, and feelings can be unpleasant and cause them distress
    - doesn't mean they're abnormal, but it could cause distress to others
  - dysfunctional: interferes with the person's ability to normally function in society
    - have issues with everyday things
    - some psychologists feel this is the best definition of abnormality
  - danger: deviance causes a danger to the person

*Identifying Psychological Disorders*

- medical model: focuses on physiological conditions that underlie abnormal behavior
  - belief that abnormality can be diagnosed and cured
  - 1952 American Psychological Association created the DSM-IV-TR (Diagnostic and Statistical Manual Four Text Revision)
    - book of symptoms but does not include how
    - describes what disorders
    - criticisms:
      - treats disorders like illnesses with medicine
      - no theoretical basis
        - does not explain how the disorder occurs or why it happens
        - only describes symptoms
      - too complex
      - not enough reliability
        - two different diagnoses when two physicians diagnose two different patients
        - overall good reliability with clinical disorders
      - biased by gender and culture
        - could skew diagnosis
      - perpetuates a medical model
        - could pathologize everyday behaviors
        - negative effects with psychological disorder labeling
      - comorbidity: sometimes people suffer from more than one psychological disorder, so it makes diagnosis difficult
        - diathesis stress model: predisposed (heritability) for a mental disorder that remains unexpressed until it is triggered by something (ex. stress)
- DSM-IV-TR
  - five dimensions
    - axis I: clinical disorders
      - 17 different groups
    - axis II: personality disorders and mental retardation

- lifelong conditions that affect a person's functions
- axis III: current medical conditions
  - current medical issues that may influence a person's mental health
- axis IV: psychosocial or environmental problems
  - traumatic events, abuse
- axis V: global assessment of function
  - person's overall functioning abilities

### *Psychological Disorders*

- anxiety disorders
  - anxiety: generalized feeling of fear and apprehension
    - accompanied by physiological arousal
    - four components of anxiety:
      - physical component used to activate "fight or flight"/sympathetic nervous system
      - cognitive component is worrying, exaggerating in head about severity of situation, fear of loss of control, etc.
      - emotional components derive from cognitive (dread, terror, panic, irritability)
      - behavioral components derive from emotional (running away, starting a fight, freezing in tracks, avoiding situation in future)
  - generalized anxiety disorder (GAD): disorder characterized by chronic excessive worry and three or more of these symptoms and will have had them for at least 6 months:
    - restlessness
    - fatigue
    - concentration problems
    - irritability
    - muscle-tension
    - sleep disturbance
    - anxiety is difficult to control
    - no specific trigger
    - neurotransmitter imbalance
      - benzodiazepines stimulate GABA
    - prevalence
      - 5% of North Americans
      - occurs more frequently in low socioeconomic status
      - twice as likely to occur in women than men
      - family and twin studies show a mild-modest level of heritability
  - phobic disorders: characterized by persistent, excessive, and irrational fear and avoidance of a specific object, activity or situation
    - negative reinforcement can cause a phobia
    - two kinds of phobias:
      - social phobia: irrational fear or avoidance of situations where one might be evaluated or publicly embarrassed
        - public bathrooms, undressing in front of people, talking in presentations
        - most common is agoraphobia (fear of venturing into public places; sometimes people might not even leave their homes)
      - specific phobia: irrational persistent fear and avoidance of a specific object or situation

- five categories
      - animal
      - natural environments
      - situations
      - blood/injections/injury
      - other
    - prevalence
      - 11% of people in US
      - more common in women than men
    - systematic desensitization:
    - **READ PG. 353 about predispositions to phobias**
  - panic disorder: disorder characterized by the sudden occurrence of multiple psychological and physiological symptoms that contribute to a feeling of stark terror
    - characterized by panic attacks
      - intense anxiety and autonomic arousal
      - often feels like one is dying
      - no identifiable trigger for the panic attacks
    - in order to be a panic disorder, panic attacks **MUST** be present
    - low prevalence #s
  - obsessive-compulsive disorder: interplay with obsessions and compulsions
    - obsessions: repetitive, intrusive, persistent, and uncontrollable thoughts and irrational beliefs
      - typically derived from things that could cause a real threat
      - obsession becomes irrational
    - compulsions: ritualistic behaviors designed to reduce anxiety from the obsessions
    - key is that it interferes significantly with a person's functioning
    - ex. obsessive: germs compulsion: cleaning
    - prevalence
      - 2.5% of people
      - women more susceptible than men
      - moderate heritability
    - biological mechanism- undetermined, but has a heightened neural activity in the caudate nucleus of the basal ganglia
    - treatments are antidepressants
      - SSRI's- Prozac, Lexapro, Zoloft
  - post traumatic distress disorder would fall under this category, too
- dissociative disorders
  - loss of awareness of some part of ourselves
    - sudden but temporary alteration in consciousness, identity, sensorimotor behavior or memory
  - dissociative identity disorder: (formerly called multiple personality disorder) presence within an individual of two or more distinct identities that at different times take control of the individuals behavior
    - each identity is dominant at different times
    - alternate personalities will have their own thought, gestures, and mannerisms
      - own specific function
      - ex. one for romantic relationships, another for school/work
      - could be different ages, genders, or ethnicities
    - stress/crisis can bring on alternate personalities
    - lost time/frequent blackouts, amnesia, money out of the bank account