

## EXAM 1 STUDY GUIDE:

### 1. Introduction to Abnormal Behavior: Contemporary and Historical Perspectives

**Trephining-** early attempt to treating mental disorders. Idea of possession (abnormal behavior)

**Who was Hippocrates-** father of modern medicine. Disorders have natural causes. Brain pathology. Heredity. Pointed out importance of head injury. Scientific viewpoint is clinical.

**Four Humors-** blood, phlegm, bile, black bile. Different proportion and temperament = personality.

**What was the approach towards abnormal behavior during the middle ages-** ritual/spiritual. First hospital in Baghdad. Mass madness- cases of hysteria. Witchcraft. Scientific aspects of medicine survived in Islam. "The canon of medicine."

**Mental Asylums-** 16<sup>th</sup> century- scientific questioning. Places to hold mentally ill. Remove them from society. Filthy and cruel. Many died. Grew rapidly. Public Hospital, VA first in US. Wanted to intimidate patients.

**What was the Humanitarian reform?** Late 18<sup>th</sup> c. took notice of bad condition. Philippe Pinel (took chains off of patients) William Tuke- York Retreat- house for very ill (used kindness). Saw improvements.

- **Moral management-** social, individual, and occupational needs of a patient. No drugs used.
- **Mental Hygiene Movement-** physical wellbeing. Dorothea Dix- reformed many mental institutions.

**What is the contemporary view of Abnormal Behavior?** Scientific treatment.

**Identify major biological discoveries influencing how we view abnormal behavior today**

**BIOLOGICAL DISCOVERIES:** connection b/t paresis and syphilis. (Krafft-Ebing experiment). Brain pathology- Alzheimer's.

**CLASSIFICATION SYSTEM:** Emil Kraepelin

**PSYCHOLOGICAL CAUSATION VIEWS:** mesmerism (the Nancy school) Wundt

**EXPERIMENTAL PSYCHOLOGY:** Ivan Pavlov (classical conditioning) John Watson- behaviorism. B.F. Skinner- operant conditioning (reinforcement)

**Significance of Phineas Gage incident-** personality changes. Decision making and emotional processing. Different parts of the brain function for different things.

**Emil Kraepelin-** wrote Compendium der Psychiatrie (1898). Believed in brain pathology. Created the DSM system. Each disorder considered distinct.

**Wilhelm Wundt-** first lab in Germany. Father of psychology. Memory and sensation. His students brought his methods to US

#### **Elements of abnormality**

Deviancy- not always bad

Violation of societal standards- cultural norms.

Suffering- does behavior cause distress?

DSM-IV definition of abnormal behavior

Social discomfort- does the behavior affect others?

Maladaptiveness- does it interfere w/ one's life?

Irrationality-

**Benefits of Classification**

**Disadvantages of classification**

**Criticisms of the DSM-IV (also located in chapter 4 of the book)**

## **2. Causal Factors and Viewpoints Part 1**

**Define etiology-** casual pattern (of abnormal behavior)

- **Main goal of etiological research?**

**Types of Causal Factors**

**Necessary cause-** is a condition that must exist for a disorder to occur. If Y occurs, then X must have preceded it.

**Sufficient cause-** a condition that guarantees the occurrence of disorder. If X occurs, then Y will also occur.

**Contributory cause-** one that increases the probability of a disorder developing but is neither necessary nor sufficient for the disorder to occur. If X occurs then the probability of Y occurring increases.

**Distal-** some factors may not show their effects for many years

**Proximal-** operates shortly before the occurrence of the symptoms of a disorder.

**Protective factors-** influences that modify a person's response to environmental stressors, making it less likely that the person will experience the adverse consequences of the stressors.

**Resilience-** the ability to adapt successfully to even very difficult circumstances.

- **Diathesis-Stress Model (additive model)** - Many disorders are believed to develop as the result of some kind of stressor operating on a person with a diathesis, or vulnerability, for that disorder. (interactive model)

**Bio-psycho-social Model-** biological, psychological, and sociocultural factors all interact and play a role in psychopathology and treatment.

**Biological Perspectives:** disorders of the CNS, ANS, and Endocrine system that are either inherited or caused by some pathological process. Psychological and sociocultural causal factors.

**Biological viewpoints of abnormal behavior**

**Types of biological causes-**

- ▶ **Neurotransmitter Abnormalities-** Abnormalities in the communication between neurons – typically occurs at the synapse
- ▶ **Hormonal Abnormalities-** Nervous system is linked with endocrine systems  
Pituitary gland – master gland that controls others  
Hypothalamic-Pituitary-Adrenal-Cortical Axis - Stress response system.  
Problems in this system related to depression and post-traumatic stress disorder.
- ▶ **Genetic Vulnerabilities-** Chromosomal abnormalities

e.g., Trisomy 21 – Down Syndrome – form of mental retardation. However, most not related to chromosomal abnormality

Gene Abnormalities- Almost always polygenic – multiple genes

Can be additive or interactive

Genes can passively influence one's environment

Gene-environment interactions e.g., Serotonin Transporter Gene

- ▶ *Temperament*- child's characteristic emotional and arousal response to various stimuli. Basis of our future is personality. Interacts w/ environment. Fearfulness Irritability/frustration Positive affect Activity level Attentional persistence/effortful control

- ▶ *Brain Dysfunction and Neural Plasticity*- Subtle deficiencies in certain brain structures or function have been linked to various disorders. **Neural Plasticity** Flexibility of the brain in making changes in organization and/or function in response to pre and post natal experiences, stress, diet, drugs, etc

**Abnormalities in communication between neurons – 3 possible**

**Genetic abnormalities – polygenic, gene-environment relationships**

**Neural Plasticity**

**Psychodynamic Perspectives:**

**Sigmund Freud**- role of early childhood experiences and the unconscious.

**Psychoanalytic perspective on abnormal behavior**- anxiety, defense mechanism, psychosexual stages. Fear and apprehension play role.

**Fundamentals of psychoanalytic theory**- Id (pleasure principle, unconscious), Ego(controls id, subconscious, reality), Superego( operates like our conscience. Moral reasoning)

Oral stage- mouth is the principal zone (feeding)

Anal stage- anus provides source of stimulation (toilet training)

Phallic stage- self- manipulation of the genitals

Latency period- sex recedes. Developing skills and other activities

Genital stage- deepest feelings of pleasure come from sexual relations.

**Newer perspectives**- Interpersonal Perspective

- We are social beings, and as such, much of who we are is a reflection of our relationships with others.

- Motivated by the desire to belong and participate in a group

- Attachment Theory

- Emphasizes the importance of early childhood experiences, particularly attachment relationships

- Stresses the importance of the quality of parental care and the development of secure attachments

**Implications of Harry Harlow's and Mary Ainsworth's experiments for Attachment theory**- Conducted a series of famous experiments Gave baby monkeys a choice