Visualizing Psychology
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Chapter 13: Psychological Disorders
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Lecture Overview

- Studying Psychological Disorders
- Anxiety Disorders
- Mood Disorders
- Schizophrenia
- Other Disorders
- How Gender and Culture Affect Abnormal Behavior

Studying Psychological Disorders

- Abnormal Behavior: patterns of emotion, thought, and action considered pathological for one or more of four reasons:
  - statistical infrequency
  - disability or dysfunction
  - personal distress
  - violation of norms
Studying Psychological Disorders: Four Criteria for Abnormal Behavior

Studying Psychological Disorders (Continued)

- Historical perspectives:
  - In ancient times, people believed demons were the cause of abnormal behavior.
  - In the 1790s, Pinel and others began to emphasize disease and physical illness, which later developed into the medical model.

Studying Psychological Disorders (Continued)

- Modern psychology includes seven major perspectives on abnormal behavior.
Studying Psychological Disorders: Classifying Abnormal Behavior

- The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR):
  - provides detailed descriptions of symptoms
  - contains over 200 diagnostic categories grouped into 17 major categories and five dimensions (or axes)

Studying Psychological Disorders: Classifying Abnormal Behavior (Cont.)

- Five Axes of DSM-IV-TR (guidelines for making decisions about symptoms)
  - Axis I (current clinical disorders)
  - Axis II (personality disorders and mental retardation)
  - Axis III (general medical information)
  - Axis IV (psychosocial and environmental problems)
  - Axis V (global assessment of functioning)
Pause and Reflect:
Check & Review

1. What are the four major standards for identifying abnormal behavior?

2. The _____ provides detailed descriptions of the key symptoms of abnormal behavior.

Anxiety Disorders

- Anxiety Disorder: characterized by unrealistic, irrational fear
- Five Major Anxiety Disorders
  1. Generalized Anxiety Disorder: persistent, uncontrollable, and free-floating anxiety
  2. Panic Disorder: sudden and inexplicable panic attacks

Anxiety Disorders (Continued)

3. Phobia: intense, irrational fear of a specific object or situation

4. Obsessive-Compulsive Disorder (OCD): intrusive, repetitive fearful thoughts (obsessions), urges to perform repetitive, ritualistic behaviors (compulsions), or both
Anxiety Disorders (Continued)

5. Post Traumatic Stress Disorder: anxiety disorder following extraordinary stress

Explanations of Anxiety Disorders:

- Psychological—faulty cognitions, maladaptive learning
- Biological—evolution, genetics, brain functioning, biochemistry
- Sociocultural—environmental stressors, cultural socialization

Mood Disorders

Two Main Types of Mood Disorders:

- Major Depressive Disorder: long-lasting depressed mood that interferes with the ability to function, feel pleasure, or maintain interest in life
- Bipolar Disorder: repeated episodes of mania and depression

Mood Disorders: characterized by extreme disturbances in emotional states

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Mood Disorders (Continued)

- Using this hypothetical graph, note how major depressive disorders differ from bipolar disorders.

Explanations of Mood Disorders:
- Biological—brain functioning, neurotransmitter imbalances, genetics, evolution
- Psychosocial—environmental stressors, disturbed interpersonal relationships, faulty thinking, poor self-concept, learned helplessness, faulty attributions

Pause and Reflect:
Check & Review

1. What are the five major anxiety disorders?

2. _____ are characterized by repeated episodes of mania and depression.
Schizophrenia

- Schizophrenia: group of psychotic disorders, characterized by a general loss of contact with reality
- Five areas of major disturbance:
  1. Perception (hallucinations)
  2. Language (word salad, neologisms)
  3. Thoughts (psychosis, delusions)
  4. Emotion (exaggerated or flat affect)
  5. Behavior [unusual actions (e.g., catalepsy, waxy flexibility)]

Schizophrenia (Continued)

| Subtypes of schizophrenia | Types: A-B-C-D
|---------------------------|------------------|
| Paranoid                  | Distressed with delusions, paranoid, and guilt.
| Catatonic                 | Marked by motor disturbances (freezing or rigid body posture).
| Undifferentiated          | Marked by disorganized speech, thought insertion, thought withdrawal.
| Residual                  | No current signs of schizophrenia but shows any of the above subtypes.

Schizophrenia: group of psychotic disorders, characterized by a general loss of contact with reality.
Schizophrenia (Continued)

- Explanations of Schizophrenia:
  - Biological—genetic predisposition, disruptions in neurotransmitters, brain abnormalities
  - Psychosocial—stress, disturbed family communication

Schizophrenia – The Biopsychosocial Model

Pause and Reflect: Check & Review

1. _______ is a group of psychotic disorders, characterized by a general loss of contact with reality.

2. What are the three biological and two psychological factors that may contribute to schizophrenia?
Other Disorders

- Substance-related disorder
  (abuse of, or dependence on, a mood- or behavior-altering drug)

- Two general groups:
  - Substance abuse (interferes with social or occupational functioning)
  - Substance dependence (shows physical reactions, such as tolerance and withdrawal)

Other Disorders: Substance-Related Disorder

Other Disorders (Continued)

- People with substance-related disorders also commonly suffer from other psychological disorders, a condition known as comorbidity.
Other Disorders (Continued)

- Dissociative Disorders: splitting apart (disassociation) of experience from memory or consciousness

- Types of Dissociative Disorders:
  - Dissociative Amnesia
  - Dissociative Fugue
  - Dissociative Identity Disorder (DID)

Other Disorders (Continued)

- Best known and most severe dissociative disorder:
  - Dissociative Identity Disorder (DID): presence of two or more distinct personality systems in the same person at different times (previously known as multiple personality disorder)

Other Disorders (Continued)

- Personality Disorder: inflexible, maladaptive personality traits causing significant impairment of social and occupational functioning
- Examples of personality disorders:
  - Antisocial Personality Disorder
  - Borderline Personality Disorder
Other Disorders (Continued)

- Antisocial Personality Disorder: profound disregard for, and violation of, the rights of others

Key Traits: egocentrism, lack of conscience, impulsive behavior, and superficial charm

Other Disorders (Continued)

- Explanations of Antisocial Personality Disorder
  - Biological—genetic predisposition, abnormal brain functioning
  - Psychological—abusive parenting, inappropriate modeling

Other Disorders (Continued)

- Borderline Personality Disorder (BPD): impulsivity and instability in mood, relationships, and self-image
- Explanations of BPD:
  - Psychological—childhood history of neglect, emotional deprivation, abuse
  - Biological—genetic inheritance, impaired brain functioning
Pause and Reflect: Check & Review

1. People with substance-related disorders also commonly suffer from other psychological disorders, a condition known as ______.

2. A serial killer would likely be diagnosed as a(n) ______ disorder.

How Gender and Culture Affect Abnormal Behavior

- Gender and Depression:
  - Women more often depressed. Why?
  - Combination of biological, psychological, and social forces (biopsychosocial model)

- Culture-General Symptoms: shared symptoms across cultures
Culture-Bound Symptoms: unique symptoms that differ across cultures

How Gender and Culture Affect Abnormal Behavior (Continued)

- Gender and Cultural Diversity:
  Numerous culturally general symptoms, but significant differences exist in:
  - prevalence
  - form
  - onset
  - prognosis

Pause and Reflect: Check & Review

1. What factors contribute to the higher incidence of depression among women than men?
2. _________ are shared symptoms across cultures