

Psychological Disorders

Patterns of thoughts, feelings, or actions that are deviant, distressful, and dysfunctional

- What is deviant, distressful, and dysfunctional depends on:
 - Culture
 - Time Period
 - Environmental Conditions
 - Individual Person

What if I told you that an individual spent hours screaming at the top of his lungs, demonstrated emotional swings between jubilation, anger, and depression, and yelled obscenities at people?

Would you say they have an emotional disturbance?





Is that deviant?

Here's a photo of Miriam "Mae-Mae" Burbank, just sitting at a table in a living room setting holding a menthol and her favorite beer. The only strange thing about the scene? She's 100% dead.

Burbank's two daughters said Burbank was "full of life" and they wanted her funeral to reflect her life.

What Victorian-Era people did with their dead in the 1800's

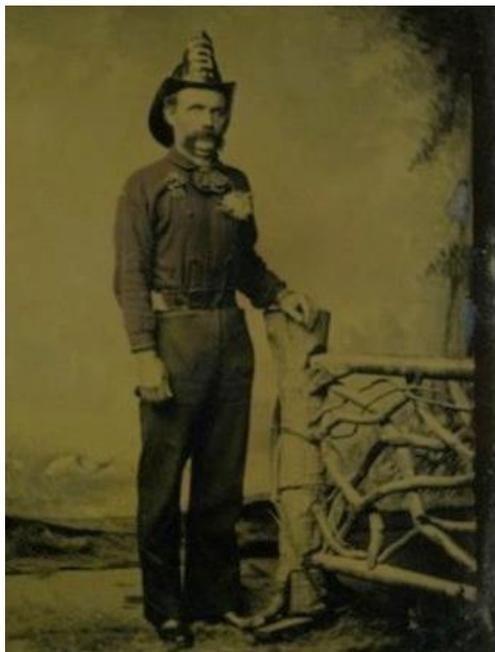


TABLE 16.4**PERCENTAGE OF AMERICANS WHO HAVE EXPERIENCED
SELECTED PSYCHOLOGICAL DISORDERS IN THE PRIOR YEAR**

Disorder	Percentage
Alcohol abuse	5.2
Generalized anxiety	4.0
Phobias	7.8
Obsessive-compulsive disorder	2.1
Mood disorder	5.1
Schizophrenia	1.0
Antisocial personality	1.5
Any mental disorder	14.9

(Some people experience two or more of these disorders, such as depression and alcohol abuse, simultaneously.)

Source: Data from Narrow & others, 2002.

Early Theories and treatment of Mental Disorders

- Afflicted people were seen through the lens of religion, and believed to be possessed by evil spirits.

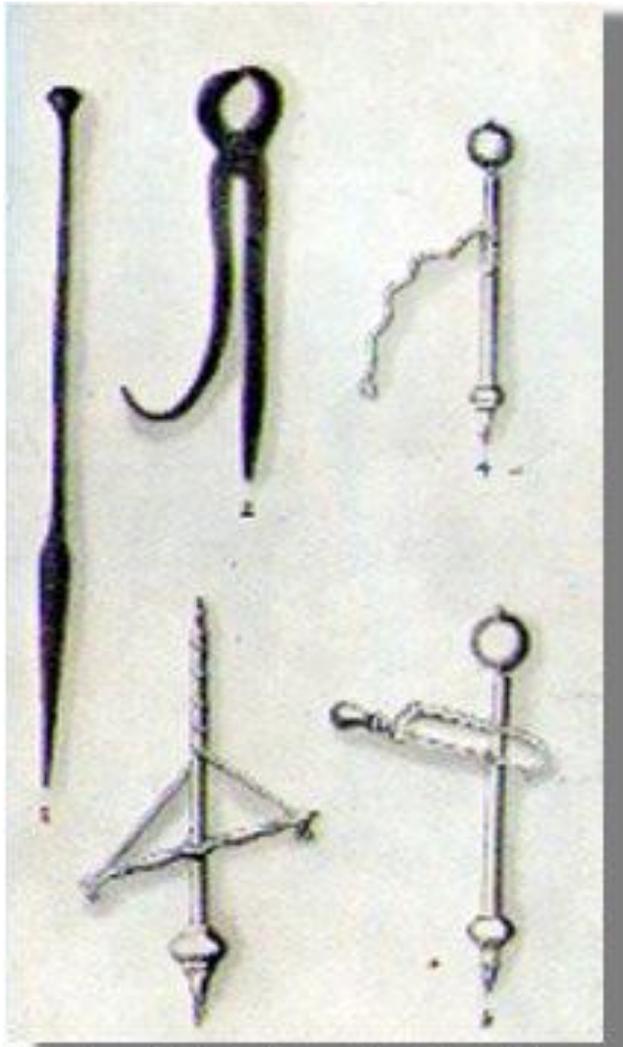


Ancient Treatments of psychological disorders include **trephination**.

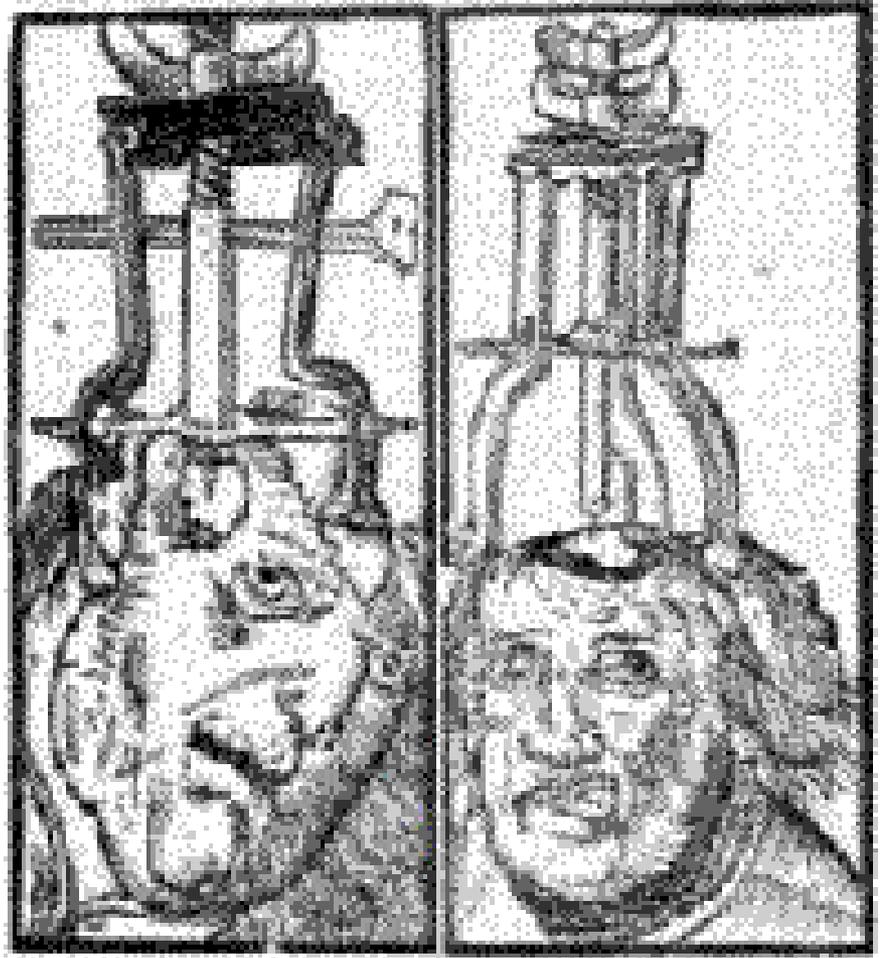
Other treatments included exorcism, being caged like animals, being beaten, burned, castrated, mutilated, or transfused with animal's blood.



Trephening



Ancient Greek metal trephines



European "Crown" trephines

History of Mental Disorders

- In the 1800's, disturbed people were no longer thought of as madmen, but as mentally ill.



They were first put in hospitals.

Did this mean better treatment?

Early Mental Hospitals

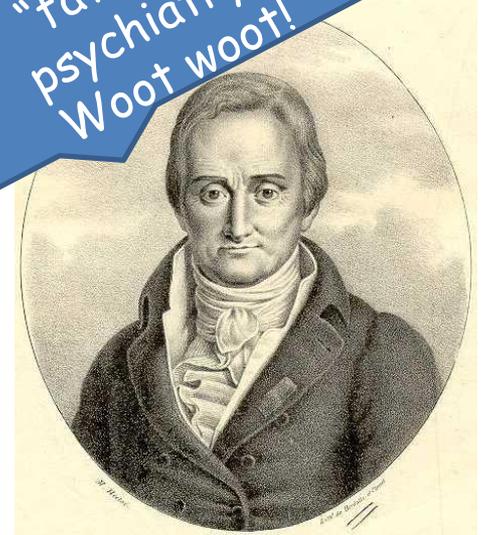
- They were nothing more than barbaric prisons.
- The patients were chained and locked away.
- Some hospitals even charged admission for the public to see the "crazies", just like a zoo.



One reason to **diagnose** a disorder is to make decisions about **treating** the problem.

I am now considered the "father of psychiatry"! Woot woot!

Philippe Pinel



- French medical doctor who, in 1792, was the first to take the chains off and declare that these people are sick and "a cure must be found!!!"

Psychopathology

The scientific study of the origins, symptoms, and development of psychological disorders



Medical Model

When physicians discovered that syphilis led to mental disorders, they started using **medical models** to review the physical causes of these disorders.

- Disorders can be **diagnosed**, labeled as a collection of **symptoms** that tend to go together.
- People with disorders can be **treated**, attended to, given **therapy**, all with a goal of restoring mental health.

Somatogenic

- At this time- it was believed that mental illness had a bodily cause- Somatogenic.

But Somatogenic causes could not explain disorders such as hysteria.

Many disorders are psychogenic: the origin is psychological, not physical.

Psychological Disorders - Current Perspectives

- **Medical Perspective:** psychological disorders are sicknesses and can be diagnosed, treated and cured.
- **Bio-Psycho-Social Perspective:** assumes biological, psychological and sociocultural factors combine to interact causing psychological disorders.
 - Used to be called **Diathesis-Stress Model:** diathesis meaning predisposition and stress meaning environment.

The Biopsychosocial Approach

Biological influences:

- evolution
- individual genes
- brain structure and chemistry

Psychological influences:

- stress
- trauma
- learned helplessness
- mood-related perceptions and memories

Psychological disorder

Social-cultural influences:

- roles
- expectations
- definitions of *normality* and *disorder*

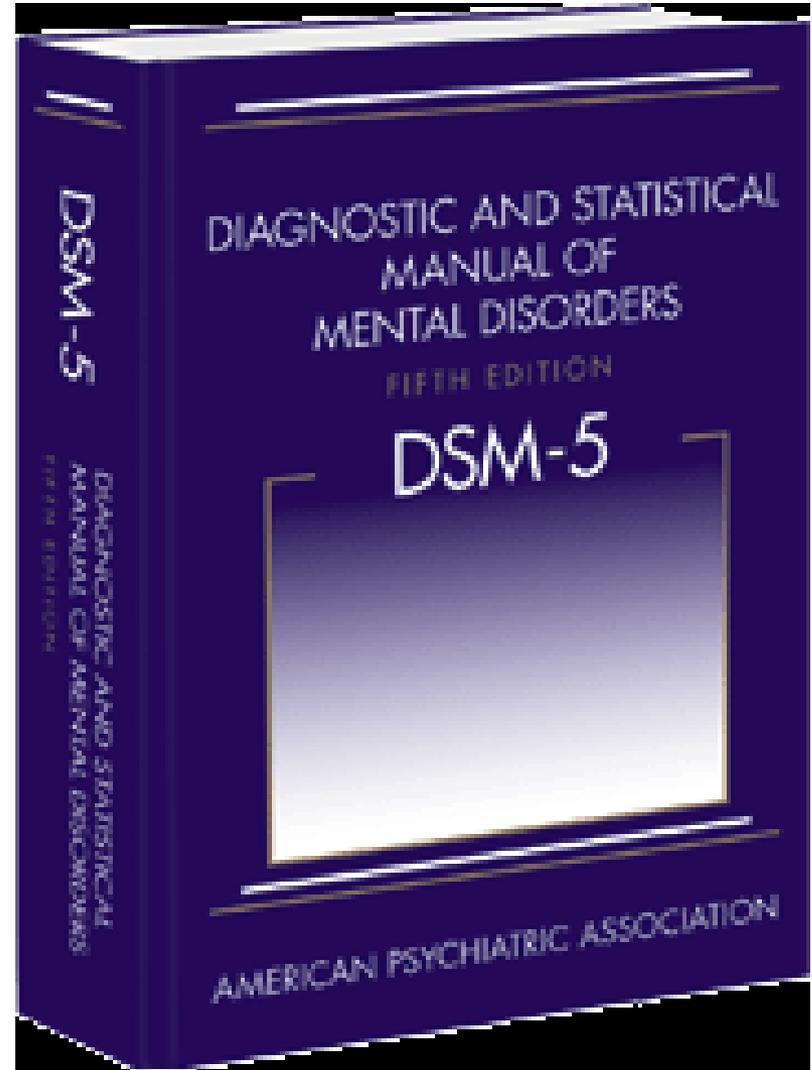
Mental disorders can arise in the interaction between nature and nurture caused by biology, thoughts, and the sociocultural environment.



Classifying Psychological Disorders

- It's easier to count cases of depression if we have a clear definition.

- **DSM-V:**
Diagnostic Statistical Manual of Mental Disorders
 - the big book of disorders.



Classifying Psychological Disorders

What is its purpose:

- Describe and classify disorders, predict course.

What does it not do:

- Provide treatment options
- Provide definitive causes for disorders

Diagnostic Criteria for 301.7 Antisocial Personality Disorder

- A. There is a pervasive pattern of disregard for and violation of the rights of others occurring since age 15 years, as indicated by three (or more) of the following:
 - (1) failure to conform to social norms with respect to lawful behaviors as indicated by repeatedly performing acts that are grounds for arrest
 - (2) deceitfulness, as indicated by repeated lying, use of aliases, or conning others for personal profit or pleasure
 - (3) impulsivity or failure to plan ahead
 - (4) irritability and aggressiveness, as indicated by repeated physical fights or assaults
 - (5) reckless disregard for safety of self or others
 - (6) consistent irresponsibility, as indicated by repeated failure to sustain consistent work behavior or honor financial obligations
 - (7) lack of remorse, as indicated by being indifferent to or rationalizing having hurt, mistreated, or stolen from another
- B. The individual is at least age 18 years.
- C. There is evidence of Conduct Disorder with onset before age 15 years.
- D. The occurrence of antisocial behavior is not exclusively during the course of Schizophrenia or a Manic Episode.

Critiques of Diagnosing with the DSM

1. The DSM calls too many people "disordered."
2. The border between diagnoses, or between disorder and normal, seems arbitrary.
3. Decisions about what is a disorder seem to include value judgments; is depression necessarily deviant?
4. Gender bias and no sensitivity to cultural diversity
5. Creates the problem of Diagnostic labels...

DIAGNOSTIC AND STATISTICAL
MANUAL OF
MENTAL DISORDERS
FIFTH EDITION

DSM-5™

AMERICAN PSYCHIATRIC ASSOCIATION



Labeling Psychological Disorders

Critics of the DSM-V argue that labels may stigmatize individuals.



Asylum baseball team (labeling)

David L. Rosenhan



- "On Being Sane in Insane Places"
A study by D.L. Rosenhan
1973
- Professor of Law and Psychology at Stanford University, Stanford, CA.
- "A label can have a life and an influence of its own."

Rosenhan's Questions

- ❑ Rosenhan wanted to know that if the patients were misdiagnosed, what the consequences were.
- ❑ Can mental health professionals really tell the difference between mental illness or no mental illness?
- ❑ Eight pseudopatients (5m/3f,) from various backgrounds pretended to be mentally ill and tried to gain admittance into various psychiatric institutions.

Thud !!!

Being sane in insane places...





Psychiatry

- ❑ Participants faked symptoms to gain admittance to mental institutions. Upon admittance they immediately stopped showing any symptoms of abnormality.
- ❑ All but one were diagnosed to have schizophrenia.
- ❑ The length of hospitalization was 7 to 52 days with an overall average of 19 days.
- ❑ The study also showed in certain situations the label becomes self-limiting and self-confirming.
 - ★ Most of all Rosenhan's Studies proved that the hospital could not distinguish the mentally sane from the insane.

