

PSYCHOLOGY

DSM-V Abnormal

Essentials including mental illness, medical & behavioral models, psychological perspective, diagnostic classification & DSM-V classifications

MENTAL ILLNESS

CRITERIA & DEFINITIONS

- **Statistical models:** "Normality" is what a majority (e.g., 68%) of the population exhibits, based on a statistical normal curve.
- **Societal expectations:** "Normality" is conformity to sociological roles.
- **Consensus of opinions of experts:** Experts (namely, psychologists and psychiatrists) stipulate what is normal.
- **Subjective discomfort:** The person admits to a problem.
- **Social or vocational incapacity:** The inability to function in societal or work-defined roles.
- **Misinterpretation of reality:** The person is out of touch with or distorting perceived reality.
- **Immaturity:** The person's maturity level is below the degree of what is expected at specified age or social milieu.

NOTE: No single criterion for mental illness can describe all types of abnormalities. Defining mental illness relative to social norms or maladaptive behaviors invariably commits one to making a normative (i.e., value) judgment that one's societal norms are correct. Hence, all definitions of mental illness invariably become theory-laden.

Thomas Szasz's Objection

The concept of mental illness is a socially constructed myth for the purpose of advancing certain social and political agendas. Clinical psychology is an instrument of repression to enforce conformity and stigmatize nonconformist and deviant people with the label "mentally ill."

Reznek's Definition of Mental Illness

Something is a mental illness if and only if it is an abnormal and involuntary process that does mental harm and should best be treated by medical means.

NOTE: "Abnormality" is used in the constructivist (i.e., normative) sense and not in the statistical or idealistic sense, inasmuch as society determines what is acceptable normal behavior.

THE MEDICAL MODEL

CAUSAL FACTORS

- **Primary cause:** The agent believed to have initially caused the disease. In the medical model, the primary cause is assumed to be a virus, bacteria, a chemical toxin such as lead poisoning, a genetic inheritance, a chemical disorder, or a structural brain pathology.
- **Predisposing cause:** The organism is predisposed to disease under some circumstances (e.g., alcoholism).
- **Precipitating cause:** A specific event or factor triggers the onset of the disease (e.g., it is suspected that Alzheimer's disease has an environmental precipitating cause).
- **Reinforcing cause:** A factor that maintains the disease (e.g., severe stress may reinforce the need for narcotic opiates); environmental chemicals may also reinforce the disease.

Methodology

1. Describe symptoms
2. Diagnose (identify specific pathology)
3. Etiology (probable cause of disease)
4. Prescribe treatment
5. Prognosis (expected course of disease)

BASIC TERMINOLOGY

- **Symptoms:** The behaviorally manifest signs of a disorder.
- **Syndromes:** A collection of symptoms that identifies a disease.
- **Acute:** A disorder that has a sudden onset but is short-lived.
- **Chronic:** A persistent, long-lasting disorder.

CAUSES OF DISORDERS

- **Chemical imbalance:** usually of certain brain chemicals (e.g., it is suspected that an imbalance in the neurotransmitter serotonin plays a causal role in the onset of schizophrenia).
- **Infection by microorganisms** (e.g., syphilis; paresis is thought to be caused by the bacteria that initially infected the subject with syphilis, resulting in the subsequent dementia).
- **Genetic mutations or predispositions** (e.g., manic-depressive illness is thought to have a genetic predisposing factor).
- **Constitutional weakness** (i.e., the organism may have an enduring biological defect that predisposes it to some illness).
- **Physical deprivations**, such as lack of sleep, malnutrition, and the like.
- **Brain pathology**, such as a physical brain disorder, either congenital or traumatic (e.g., a head injury).

PSYCHOLOGICAL PERSPECTIVE

As humans attempt to adapt to their environment, maladaptive behavior causes abnormal behavior. The psychological perspective assumes that both normal and abnormal adaptive patterns are learned, not inherited. Thus, treatment consists of substituting healthy adaptive behaviors for maladaptive behaviors. The goal of this approach is to explain abnormality in terms of inefficient and ineffective coping mechanisms. A psychological treatment works only if the patient actively participates in the treatment; the approach is usually ineffective in the case of involuntary institutionalization.

GENERAL CAUSES OF ABNORMALITY

- These merely predispose persons to abnormal behavior:
 - **Maternal deprivation:** Especially orphans who are institutionalized or are abandoned by their natural parents.
- **Pathological family patterns:** Maladaptive family behavior (e.g., faulty role model) that the child imitates and internalizes or a faulty relationship between parent and child (e.g., overprotective, domineering, alcoholic, or emotionally abusive parents).
- **Psychic trauma:** Especially in the psychoanalytic view; for example, an early childhood traumatic experience (e.g., abandonment, death or divorce, sexual abuse) is expressed and then resurfaces later as a disorder.

CLASSIFICATION & DIAGNOSIS

Diseases are classified and identified by reference to symptoms and behavior deviating from normal. The major categorizing reference for the classification of mental disorders is The *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V). Note that disorders in the DSM are sometimes classified unreliable and are invalid for diagnostic agreement among psychiatrists. With the exception of the diagnosis of manic-depressive illness, the interobserver diagnostic reliability of the DSM is poor. People labeled by DSM classifications are often stigmatized for life.

ASSESSMENT TECHNIQUES

Assessment is the process of identifying the nature and severity of the condition, formulating treatment goals, and evaluating the effect of the treatment. It includes:

- Medical evaluation
- Personality and environmental variables
- Interviews with the patient
- Psychological tests and rating scales
- Direct observation of behavior

TREATMENTS

- **Psychosurgery:** Partial or total frontal lobotomy or other procedure wherein brain tissue is severed or excised.
- **Electroconvulsive shock therapy (ECT):** The administration of an electrical current of varied intensity to the brain to alleviate symptoms of severe chronic depression.
- **Psychoactive drugs:** Prescribed drugs that alter mood or behavior by effecting metabolic processes that affect the brain. They are administered to stabilize moods (e.g., lithium for manic depression), to alleviate depressed states (e.g., Prozac), or to induce or subdue certain emotional states.

ADVANTAGES OF THE MEDICAL MODEL

The medical model promotes a more human understanding of patients, aids in the understanding of some organic mental disorders, and further instills research in brain functioning.

DISADVANTAGES OF THE MEDICAL MODEL

Environmental variables are unduly minimized or neglected, and diagnostic and treatment methods are questionable, thus fostering an "institutionalization syndrome." This approach removes responsibility from the person to want to be cured and promotes dependence on hospitals and chemicals.

- **Pathological interpersonal relationships:** Stressful, anxiety-causing, maladaptive personal relationships (e.g., codependent, narcissistic, or control-obsessive) or no relationships at all.
- **Severe stress:** Extreme pressure on the coping mechanisms that takes a destructive toll on psychological processes (e.g., posttraumatic stress disorder resulting from combat, captivity, torture, natural disasters, or being kidnapped or terrorized).

OVERVIEW OF PSYCHOLOGICAL SCHOOLS OF THOUGHT

- **Psychoanalysis:** Early development models the personality and adaptation; the determinants of behavior are largely subconscious processes.
- **Neo-Freudians:** Focus is on pathological social and interpersonal relationships; concentrates on the power of the ego instead of the id; emphasizes social interactions in the formation of personality and deemphasizes instincts and biological factors; in psychotherapy, neo-Freudians emphasize the present, not the past, tend to advocate shorter periods of treatment, and focus on specific problems that could be readily treated.
- **Behaviorists:** Early learning and conditioning processes produce abnormality; the determinants of behavior can usually be understood only by investigating overt observable behavior.
- **Humanism:** Focus is on how blocked personal growth and value conflicts lead to abnormality.

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Mark L. Howe



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Tb-Psych Concept/Connect Spencer A. Rathus,2003-07 **Psychology Catalog 2005** Neil Thomson,2004-09

Clinical Health Psychology in Military and Veteran Settings Larry C. James,William O'Donohue,Jeanne

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Library of Medicine Current Catalog National Library of Medicine (U.S.),1965 **The Nature of Early Memory** Mark

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PhD,2011-05-04 A valuable resource for anyone interested in the development of memory This text discusses the development of long term memory including autobiographical memory and argues that memory is an adaptive mechanism for the development and survival of humans and non human animals *Handbook of Physiological Research Methods in Health*

Psychology Linda J. Luecken,Linda C. Gallo,2007-10-10 The field of health psychology has exploded in the last decade due to progress identifying physiological mechanisms by which psychological social and behavioral factors can put people s health and well being at risk The Handbook of Physiological Research Methods in Health Psychology provides thorough state of the art and user friendly coverage of basic techniques for measurement of physiological variables in health psychology research It is designed to serve as a primary reference source for researchers and students interested in expanding their research to consider a biopsychosocial approach Chapters addressing key physiological measures have been written by international experts with an eye towards documenting essential information that must be considered in order to accurately and reliably measure biological samples The book is not intended to be a lab manual of specific biomedical techniques nor is it intended to provide extensive physiological or anatomical information Rather it takes the approach most useful for a non specialist who seeks guidance on how and when to collect biological measures but who will have the actual samples assayed elsewhere The Handbook can be thought of as a primer or a gateway book for researchers new to the area of physiological measurement and for readers who would like to better understand the meaning of physiological measures they encounter in research reports **Handbook of Evidence-Based Practices in Autism Spectrum Disorder** Brian Reichow,Peter

Doehring, Fred R. Volkmar, 2025-02-17 The handbook examines the empirical status of interventions and treatments for individuals with autism spectrum disorder ASD It offers an insightful and balanced perspective on topics ranging from the historical underpinnings of autism treatment to the use of psychopharmacology and the implementation of EBPs The book reviews the conceptualization of evidence based practices EBPs as well as considerations for implementing such practices across settings In addition it describes emerging treatments though they cannot yet be considered evidence based that have produced limited but highly promising results The book also describes treatments and therapies that have been proved ineffective It explores ways in which EBPs can be applied in inclusive school settings pediatric settings in patient treatment programs and college based programs for transition aged youth The volume describes outcomes from the development of EBP guidelines at the national level in Scotland and more broadly in the United States and outlines how such guidelines can be adapted to offer more individualized intervention Key areas of coverage include Comprehensive treatment models including early intensive behavioral intervention pivotal response treatment Early Start Denver Model and Naturalistic Developmental Behavioral Interventions Focal treatments addressing the core deficits of ASD and its co occurring conditions Social skills communication and the use of applied behavior analysis ABA practices for teaching new skills and decreasing challenging behaviors Sensory based interventions psychopharmacology cognitive behavior therapy and parent education programs e g Project IMPACT The Handbook of Evidence Based Practices in Autism Spectrum Disorder is an invaluable resource for researchers professors and graduate students as well as clinicians therapists and all professionals working in the fields of developmental clinical child and school psychology pediatrics social work behavior analysis allied health sciences public health child and adolescent psychiatry early childhood intervention and general and special education The Science, Treatment, and Prevention of Antisocial Behaviors: Evidence based practice Diana H. Fishbein, 2000 This authoritative reference featuring chapters by nationally and internationally recognized experts details behavioral science research with respect to antisocial criminal violent behavior substance abuse and other high risk behaviors and puts it in context for criminologists criminal justice practitioners and policymakers public and mental health professionals treatment providers and prevention professionals This resource provides a rich source of leading edge thinking and data on the causes and treatment of antisocial behavior Breaking the Silence on Spiritual Abuse L. Oakley, K. Kinmond, 2013-10-17 Providing a balance of empirical research and practical concerns this book explores the definitions and historical context of spiritual abuse outlines a process model for the different stages of spiritual abuse and includes strategies for therapists working with survivors of spiritual abuse Psychology Spencer A. Rathus, Lisa Valentino, 2003 By Lisa Valentino Seminole Community College This student tool offers everything a student needs to get that desired A for the course Aligned with the PQ4R learning model found in the main text the Study Guide opens with a Preview section that encourages students to note initial impressions of chapter material what surprised them what they re curious about and specific queries they have The Question

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Essential Urology Jeannette M. Potts,2012-11-06 Extensively revised and updated the second edition of Essential Urology A Guide to Clinical Practice provides support to primary care physicians through its review of common genitourinary problems This edition continues to provide the primary care physician with tools to better recognize urological diseases as well as updated management strategies for these disorders To enhance the theme of comprehensive care and family medicine the volume is formatted according to the life cycle and the urological challenges which may be detected and diagnosed by primary care physicians respective of the patient s stage in life beginning with pregnancy and in utero diagnoses Pediatric themes such as infection and voiding dysfunctions are followed by adult urological topics ranging from prostate diseases nephrolithiasis overactive bladder syndromes incontinence and urological cancer screening Three new chapters are added addressing male infertility andrology and the growing demand for integrative and alternative medical care of urologic patients as well as commonly encountered dermatological problems in the genital area Essential Urology A Guide to Clinical Practice Second Edition is extremely comprehensive and yet very accessible It is authored by experts representing the spectrum of urological subspecialties further enhancing the value of this unique work *Index Medicus* ,2001 Vols for 1963 include as pt 2 of the Jan issue Medical subject headings **Time Distortions in Mind** ,2015-07-14 Time Distortions in Mind brings together current research on aspects of temporal processing in clinical populations in the ultimate hope of elucidating the interdependence between perturbations in timing and disturbances in the mind and brain Such research may inform not only typical psychological functioning but may also elucidate the psychological consequences of any pathophysiological differences in temporal processing This collection of current knowledge on temporal processing in clinical populations is an excellent reference for the student and scientist interested in the topic but it also serves as the stepping stone to share ideas and push forward the advancement in understanding how distorted timing can lead to a disturbed brain and mind or vice versa Contributors to this volume Ryan D Ward Billur Avlar Peter D Balsam Deana B Davalos Jamie Oppen Yvonne Delevoye Turrell H l ne Wilquin Mariama Dione Anne Giersch Laurence Lalanne Mitsouko van Assche Patrick E Poncelet Mark A Elliott Deborah L Harrington Stephen M Rao Catherine R G Jones Marjan Jahanshahi Bon Mi Gu Anita J Jurkowski Jessica I Lake Chara Malapani Warren H Meck Rebecca M C Spencer Dawn Wimpory Brad Nicholas Elzbieta Szelag Aneta Szymaszek Anna Oron Melissa J Allman Christine M Falter Argiro Vatakis Alexandra Elissavet Bakou **Comorbidity of Substance Use Disorders With Mental Health Disorders** Christopher Jonathan Evans,Rita J. Valentino,David Belin,2022-05-06 **COVID-19: Risk Communication and Blame** Victoria Team,Rukhsana

Ahmed, Mohan Jyoti Dutta, Audra Diers-Lawson, 2024-01-16

Rethinking Perception and Centering the Voices of

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Nerren, Jessica Block, 2022-06-30

Ensuring classrooms are inclusive to all students particularly those with disabilities such as autism spectrum disorder is crucial in today's educational landscape. It is vital that educators are prepared and knowledgeable on the current best practices and policies in order to provide these students with the most thorough education possible. Rethinking Perception and Centering the Voices of Unique Individuals: Reframing Autism Inclusion in Praxis introduces a new model of reframing autism spectrum disorder inclusion for professors of preliminary teacher candidates and provides meaningful understanding and support for professors who prepare preliminary teacher candidates. Covering key topics such as equity, mental disorders, inclusive education, and educational reform, this reference work is ideal for administrators, stakeholders, policymakers, teacher educators, counselors, researchers, academicians, scholars, practitioners, instructors, and students.

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M. José Coperías Aguilar, 2000

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