

Abnormal Behaviour in Context and an Integrative Approach to Psychopathology Summary

Abnormal Psychology in Historical Context

Understanding Psychopathology:

- Psychological disorder: A psychological dysfunction within an individual that is associated with distress or impairment in functioning and a response that is not typical or culturally expected.
 - o All three basic criteria must be met; no one criterion alone has yet been identified that defines the essence of abnormality.
- The field of psychopathology is concerned with the scientific study of psychological disorders.
 - o Trained mental health professionals range from clinical and counselling psychologists to psychiatrists and psychiatric social workers and nurses.
- Psychopathology: A scientific study of mental disorders.
- Mental Disorder: A syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning.
 - o Usually associated with significant distress or disability in social, occupational, or other important activities.
 - o Not a mental disorder: An expectable or culturally approved response to a common stressor or loss, such as the death of a loved one, is not a mental disorder.
 - Socially deviant behaviour (e.g., political, religious, or sexual) & conflicts that are primarily between the individual and society are not mental disorders unless the deviance or conflict results from a dysfunction in the individual.
- Nature of Abnormal Behaviour:
 - o Distress
 - o Dysfunction
 - Difficulty performing everyday responsibilities
 - o Deviation
 - Statistical infrequency
 - Violations of cultural & social norms
- Variability:
 - o Mental disorders have a variable course (i.e., individual pattern)
 - Episodic course: Recurrent episodes.
 - Chronic course: Ongoing symptoms
 - Time-limited course: Disorder will improve in a relatively short period.
 - o Mental disorders can have differences in onset
 - Acute: Begin suddenly
 - Insidious: Develop gradually over an extended period
 - o Mental disorders have variable severity
 - Influenced by numerous factors (e.g., stress, physical ill-health, substance use, bereavement, medication compliance etc.)
- Symptoms: The 'complaints' made by a person seeking treatment (e.g., pain, sadness).
- Signs: The health professional's findings (e.g., irregular heartbeat, disoriented in time & place).
- Syndrome: A cluster of symptoms & signs.
- Prevalence: The percentage of a population that has the disorder at a given time.
- Incidence: The rate at which new cases occur in a given place at a given time.

The Supernatural, Biological and Psychological Traditions:

- Historically, there have been three prominent approaches to abnormal psychology.
 - o Supernatural Tradition: Abnormal behaviour is attributed to agents outside our bodies or social environment, such as demons, spirits, or the influence of the moon and stars,
 - o Biological Tradition: Disorders are attributed to disease or biochemical imbalances.

- Psychological Development: Abnormal behaviour is attributed to faulty psychological development and to social context.
- Each tradition has its own way of treating individuals who suffer from psychological disorders.
 - Supernatural Treatments: Exorcism to rid the body of supernatural spirits
 - Biological Treatments: Emphasise physical care and the search for medical cures, especially drugs.
 - Psychological/Psychosocial Treatment: Begin with moral therapy and include modern psychotherapy.
- Sigmund Freud, the founder of the psychoanalytic therapy, focused on tapping into the mysteries of the unconscious through such techniques as catharsis, free association and dream analysis.
- Humanistic Psychology: Focuses more on human potential and self-actualising than on psychological disorders.
 - Person-Centred Therapy: The therapist shows almost unconditional positive regard for the client's feelings and thoughts.
- Behavioural Model: Both research and therapy focus on things that are measurable, including such techniques as desensitisation, reinforcement and shaping.

The Present: The Scientific Method and an Integrative Approach:

- With the increasing sophistication of our scientific tools, and new knowledge from cognitive science, behavioural science and neuroscience, we now realise that no contribution to psychological disorders ever occurs in isolation. Our behaviour both normal and abnormal is a product of a continual interaction of psychological, biological and social influences.

An Integrative Approach to Psychopathology

One Dimensional vs Multidimensional Models:

- Must consider:
 - Genetic contributions.
 - Role of the nervous system.
 - Behavioural and cognitive processes.
 - Emotional influences.
 - Social and interpersonal influences.
 - Developmental factors
- Nature vs nurture.

Genetic Contributions to Psychopathology:

- Diathesis-Stress Model: Individuals are assumed to inherit certain vulnerabilities that make them susceptible to a disorder when the right kind of stressor comes along.
- Gene-Environment Correlation: The individual's genetic vulnerability toward a certain disorder may make it more likely that the person will experience the stressor that, in turn, triggers the genetic vulnerability and thus disorders.
- Epigenetics: The immediate effects of the environment, such as early stressful experiences, influence cells that turn certain genes on or off. This effect may be passed down through generations.

Neuroscience and Its Contributions to Psychopathology:

- Within the nervous system, levels of neurotransmitter and neuroendocrine activity interact in complex ways to modulate and regulate emotions and behaviour and contribute to psychological disorders.
- Key neurotransmitters:
 - Serotonin
 - GABA
 - Glutamate
 - Norepinephrine
 - Dopamine
- Irregularities in the workings of neurotransmitters systems in the brain play important roles in the development of abnormal behaviour patterns.

- Psychiatric drugs work by affecting the availability of neurotransmitters.
 - o Agonists: Substances that increase the activity of a neurotransmitter.
 - o Antagonists: Substances that decrease (block) a neurotransmitter.
- Abnormalities in specific brain structures of the central nervous system are implicated in different forms of abnormal behaviour.
 - o EG: Abnormalities in parts of the cerebral cortex & limbic system in people with schizophrenia.

Behavioural and Cognitive Science:

- Learned helplessness
- Modelling
- Prepared learning
- Implicit memory

Emotions:

- Mood, a persistent period of emotionality, is often evident in psychological disorders.

Cultural, Social and Interpersonal Factors:

- Social and interpersonal influences profoundly affect both psychological disorders and biology.
- Gender:
 - o Can influence the development, expression or consequence of psychopathology.
 - o Social roles & expectations can be seen as risk factors.

Life Span Development:

- Principle of Equifinality: We must consider the various paths to a particular outcome, not just the result.
- Some disorders are specific to certain developmental periods.
 - o EG: Conduct disorder & antisocial personality disorder.
 - o Gender distribution in depression is equal until puberty.
- Important to consider when evaluating whether behaviours are problematic.
 - o May be age or stage appropriate in one instance & indications of pathology in another.
- Require developmentally appropriate treatments.