Chapter 16: The Nature and Causes Psychological Disorders
A. A person’s etiology (sources of disorder) is affected by a person’s genome, brain chemistry, and childhood environment

I. Classification and Diagnosis of Psychological Disorders
A. What Is “Abnormal?”
1. A person’s behavior, thoughts, and feelings are not considered to be “abnormal” but rather if they are maladaptive meaning that their actions cause distress or discomfort and interfere with people’s ability to lead productive lives
2. Abnormality is relative depending on which culture one is living in

B. Perspectives on the Causes of Psychological Disorders
1. DSM-IV-TR Classification Scheme
   a. A guide to diagnose people with psychological disorders
   b. Diagnostic and Statistical Manual IV Text Revision—a widely used manual for classifying psychological disorders based on five axes (dimensions)
   c. Many people use this to diagnose people with psychological disorders clinically
   d. It’s best use is to categorize people for research
   e. History
      i. The initial reason to develop a classification scheme was the need to collect statistical information
      ii. In 1952 the first DSM was released it had about 106 known disorders
      iii. In 1968, the second DSM was released it had about 50 more psychological disorders than the first
      iv. In 1974, homosexuality was taken off as a psychological disorder
      v. 1980 DSM III is released with 256 disorders listed
      vi. 1994 DSM IV is released 296 disorders listed, 886 pages. Clinical section is now added to the book
      vii. DSM TR-just a text revision but also classifies disorders based on five dimensions
         -1st axis—is it a major disorder?
         -2nd axis-personality disorder
         -3rd axis-physical disorder
         -4th axis-environmental disorder
         -5th axis-global assessment of function
   f. Cautions
      i. Using the manual requires extensive training to have effective diagnosis
   g. Criticisms
      i. The manual may not have the ability to consistently diagnose people with certain disorders
      ii. There is no scientific consensus on the axes of diagnosis
      iii. It lacks reliability

2. The Medical Perspective
   a. Mental disorders are caused by specific abnormalities of the brain and nervous system
   b. The DSM-IV-TR is most consistent with this view

3. The Psychodynamic Perspective
   a. Mental disorders originate as a result of the superego, the ego, and the id
   b. Mental disorders arise from intrapsychic conflict

4. The Cognitive-Behavioral Perspective
   a. Mental disorders are learned maladaptive behavior patterns that can be best be understood by focusing on environmental factors

5. The Humanistic Perspective
   a. Mental disorders arise when people perceive that they must have the positive regard of others

6. The Sociocultural Perspective
   a. The cultures in which people live play a significant role in the development of mental disorders.
   Moreover, some mental disorders appear to exist only in certain cultures

7. Biopsychosocial Perspective
a. A causal account of mental disorders based on the idea that mental disorder develop when a person possesses a predisposition for disorder and faces stressors that exceed his or her ability to cope with them
b. Diathesis Stress Model—you have a genetic or learned predisposition and certain environmental stressor that causes a psychological disorder to develop

C. Disorders Usually Diagnosed in Childhood
   1. **Attention-Deficit/Hyperactivity Disorder**
      a. Characterized by inattention, hyperactivity, and impulsivity
   2. **Autistic Disorder**
      a. Characterized by severe limitations of social interaction and communication
      b. Diagnosis occurs all before about age 3
      c. Children with this disorder prefer to be left alone and do not enjoy the company of others

II. **Substance Related Disorders**
A. Psychological disorders that are characterized by addiction to drugs or alcohol or abuse of drugs or alcohol
B. Substance dependence—when a person needs the substance in order to continue on their normal lives
C. Possible Causes of Substance-Related Disorders
   1. Genetic and Physiological causes
      a. Susceptibility to alcoholism is genetic
      b. Alcohol provides a physiologically produced reinforcing effect
      c. Alcohol appears to produce a larger amount of dopamine in the brain
   2. Cognitive causes
      a. A person may think there are positive results of taking a substance as it enhances aspects of their lives

III. **Schizophrenia**
A. Schizophrenia is characterized by thought disturbances, hallucinations, anxiety, emotional, withdrawal, and delusions; it is the most common of the psychotic disorders
   1. People with this disorder suffer disturbances of language, go off topic easily, are hard to follow
   2. The reason that for this disorder might be due to a breakdown in the selective attention mechanism
   3. Schizophrenics suffer many delusions, a belief with no basis in reality such as:
      a. Grandeur—feeling as they are more important than most other people
      b. Persecution—they believe that they are being plotted against at every point
      c. Control—they believe that some external force is controlling all of their actions
   4. Properties of Schizophrenics
      a. Most of the time they will hear voices in their head
      b. They have inappropriate emotional responses
      c. They exhibit strange movements
      d. They can contort into uncomfortable positions for no apparent reason and stay there, motionless for hours (catatonia)
      e. They are impaired socially; their relationship with others deteriorates and they are thrust further into social isolation
      f. Schizophrenics also have hallucinations, sensory images with no basis in reality
      g. Schizophrenics also have absence of normal speech, lack persistence
   5. Types of Schizophrenia
      a. **Paranoid**
         i. These types of schizophrenics believe that they are being persecuted however they may also have delusions of grandeur and think that they are actually famous people
      b. **Disorganized**
         i. They have serious disturbances in thought and will react with an inappropriate emotional response to most situations
         ii. They tend to speak in a “word salad”, by putting random words that rhyme together into a sentence
      c. **Catatonic**
         i. They have various motor disturbances
         ii. They can contort their body into uncomfortable poses and hold them for hours
      d. **Undifferentiated**
i. They have delusions, hallucinations, and disorganized behavior but do not meet the criteria for paranoid, disorganized, or catatonic schizophrenia

c. Residual
   i. They may seem to lose symptoms of schizophrenia but it may continue to prevail

6. Possible Causes
   a. Onset usually occurs around 16 to 25
   b. It is very rare for a person to get it after 30
   c. Genetic causes-some people have a genetic predisposition
   d. Neurophysiological causes-the dopamine hypothesis
   e. Physiological causes-schizophrenics tend to have a decreased brain volume which would cause the hallucinations and lack of emotional control
   f. Cognitive and environmental factors-dysfunctional families and inappropriate child rearing practices makes it more likely for the child to get schizophrenia

IV. Mood Disorders
A. They are characterized by shifts or disturbances in mood that adversely affect normal perception, thought and behavior
B. Major Depressive Disorder-Persistent and severe feelings of sadness and worthlessness accompanied by changes in appetite, sleeping, and behavior
   1. Women are more likely to become depressed. This may be due to the fact that historically, women have always been treated worse than men
C. Bipolar disorder-alternating states of depression and mania separated by periods of relatively normal affect
D. Depression
   1. People with depression usually have feelings of sadness and apathy and feel worthless
E. Possible Causes
   1. Cognitive-people with mood disorders exhibit learned helplessness and negative self-schema. They tend to have faulty thought processes
   2. Genetic-some people are genetically predisposed to have mood disorders
   3. Neurophysiological causes-the cerebrospinal fluid contains significantly lower levels of a compound produced by the breakdown of serotonin which implies that there is lower activity of serotonin-secreting neurons in the brains of depressed individuals

V. Anxiety Disorders
A. Anxiety-a sense of apprehension or doom that is accompanied by many physiological reactions, such as accelerated heart rate, sweaty palms, and tightness in the stomach
   1. Panic Disorder-characterized by unpredictable attacks of acute anxiety that are accompanied by high levels of physiological arousal and that last from a few seconds to a few hours
      a. Possible Causes
         i. There is a substantial heredity component
         ii. They also tend to breathe irregularly both awake and asleep
         iii. People with panic disorder are extremely sensitive to any element of risk or danger in their environment
   2. Phobic Disorder-characterized by an unrealistic, excessive fear of a specific class of stimuli that interferes with normal activities
      a. Agoraphobia-characterized by fear of an avoidance of being alone
      b. Social phobia-an anxiety disorder characterized by an excessive and irrational fear of situations in which the person is observed by others
      c. Causes
         i. Environmental causes-classically conditioned fears
         ii. Genetic Causes-innate fears in our evolutionary history
         iii. Psychodynamic causes-is because of displacement, the redirection of objective fears onto symbolic objects
         iv. Cognitive-behavioral perspective-occurs as a result of vicarious classical conditioning
   5. Obsessive Compulsive Disorder (OCD)-characterized by obsessions (reoccurring thoughts) and compulsions (repetitive actions one can’t stop performing)
a. Women are more likely to develop OCD than men
b. Causes
   i. Compulsions reduce the anxieties of the obsessions
   ii. Some instances may be due to heredity but this is very rare
6. Post-Traumatic Stress Disorder (PTSD)-characterized by a person’s feelings of social withdrawal accompanied by typically low levels of emotion
   a. Causes
      i. It usually occurs after a traumatic event

VI. Dissociative Disorders
A. These disorders are characterized where anxiety is reduced by a sudden disruption of consciousness, which may alter their memories or even their personalities
   1. Dissociative Amnesia—people cannot remember bad events
   2. Dissociative fugue—a person will not remember their past life
   3. Dissociative identity disorder (multiple personality disorder)—where a person will have several personalities within one person

VII. Personality Disorders
A. These are abnormalities that impair social or occupational functioning
   1. Antisocial personality disorder—characterized by a failure to conform to standards of decency;
   2. Borderline personality disorder—characterized by pervasive instability of interpersonal relationships, self-image, and emotions, as well as impulsivity, suicidal efforts and self-mutilation may also occur