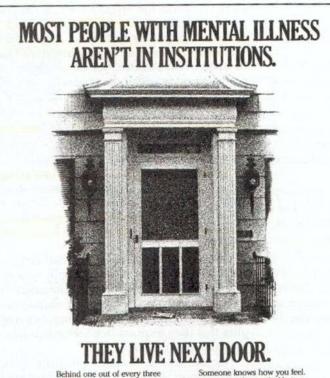
# Mandal Disorders 1



Behind one out of every three doors in America is a person with some form of mental illness. Someone who is suffering. And often those who love them suffer, too. Someone knows how you feel. Someone can make you feel better. Open the door to help. Call your Mental Health Association.

Open the door to help.

#### Three Minute Review PERSONALITY

- How consistent is personality?
  - fairly
  - 7i-Up
- What determines behavior?
  - personality traits?
  - situation?
  - interaction of personality and situation?
  - Consistency itself may be a trait
    - High vs. Low self monitors
  - Personality changes with age up to 30
  - nature vs. nurture
    - genes
      - studies of twins separated at birth
      - suggest heritability of personality traits
    - environment
      - birth order has small effects on personality

#### Temperaments

- predisposition to particular traits and behaviors
- biologically-based
- extroverts and introverts may differ in inherent levels of arousal and need for external stimulation
  - reliable differences in sensitivity to stimulation
  - may be brain-based effects
  - same logic used for high vs. low sensation seekers
- shyness may be partly heritable but can be affected by environment
- could there be genetic bases for sensation-seeking and neuroticism ("Woody Allen gene"?)
- evolutionary explanations
  - group adaptability
  - wide range of niches
  - evolution may find an equilibrium of different personalities

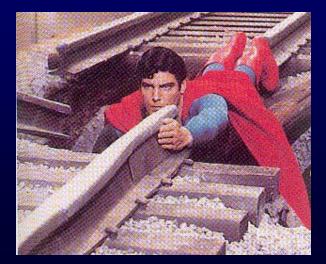
# Clarification

#### Situationism

- different individuals behave surprisingly similarly in the same situation
- e.g., almost everyone gets frustrated in traffic jams

#### Interactionism

 a given individual behaves a particular way in one situation but differently in another





#### **Personality Theories**

- 1. Psychoanalytic
- 2. Behavioral
- 3. Social Cognitive
  - Internal vs. External Locus of Control
- 4. Humanistic
  - optimistic view of human potential
  - Maslow's Hierarchy of Needs
    - Physiology
    - Safety
    - Belonging
    - Esteem
    - Self Actualization
      - » peak experiences

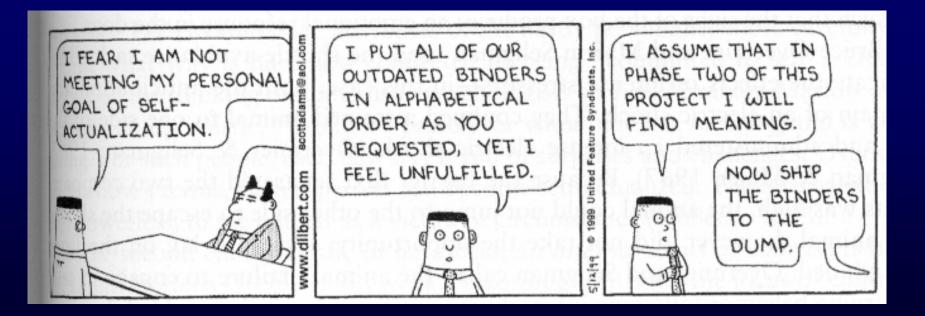
## Test Yourself

As people age from 20 to 30, they are likely to become:

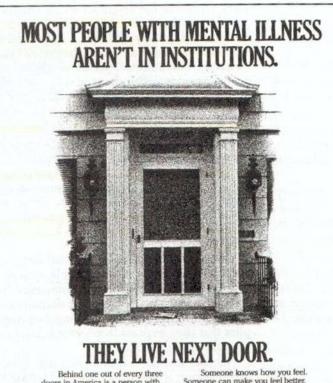
- A. less conscientious
- B. less introverted
- C. more open to experience
- D. less neurotic
- E. less agreeable

#### **Self-Actualization**

A musician must make music, an artist must paint, a poet must write, if he is ultimately to be at peace with himself. -- Abraham Maslow, 1968



# Mandal Disorders



doors in America is a person with some form of mental illness. Someone who is suffering. And often those who love them suffer, too. Someone knows how you feel. Someone can make you feel better. Open the door to help. Call your Mental Health Association.

Open the door to help.

#### What is "Normal"?

Normality is the average of deviance.

-- Rita Mae Brown

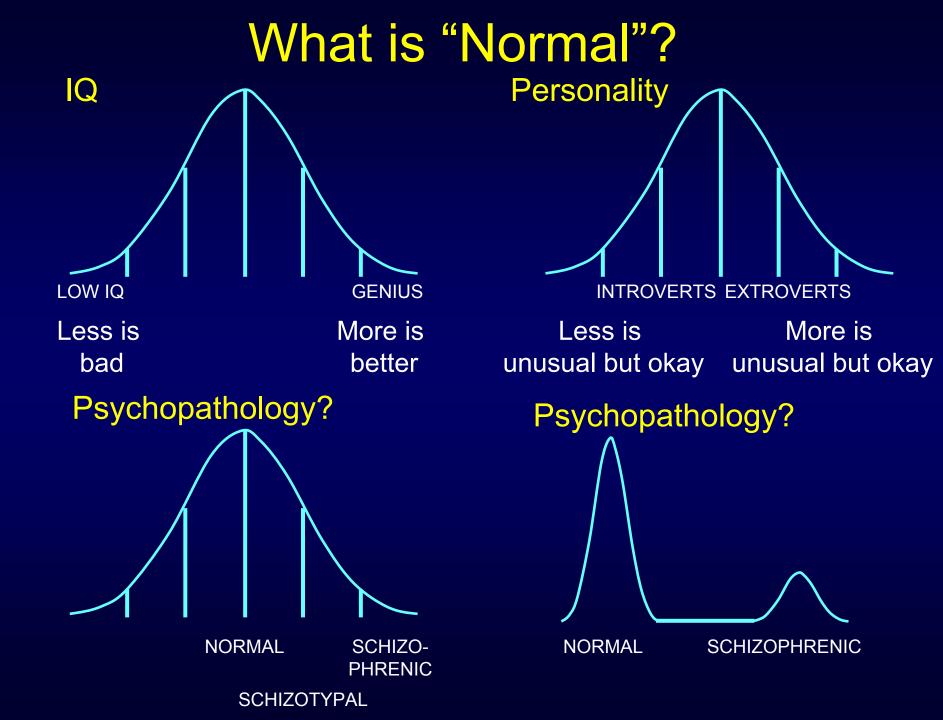
Sanity is making your pathology work for you rather than against you.

20 Percentage of population 15 10 **Generalized Social** Specific Obsessive- Panic Dysthymia Major Bipolar Alcohol Other Schizophrenia Antisocial anxiety phobia phobia compulsive depression drugs personality Substance Mood disorders Males Anxiety disorders dependence -Females

--Anonymous

Estimates of lifetime prevalence of mental disorders: ~30-50% of population for both males and females

Is abnormality normal?!



#### What's abnormal?



This guy who collects buttons is certainly eccentric. But is he abnormal?

# What's abnormal?

- Statistically unusual behavior?
  - may not be pathological (button guy)
  - pathology may be common (e.g., plague in 14<sup>th</sup> c., eating disorders in modern college dorms)
- Personal suffering?
  - A mentally healthy widow may suffer
  - A psychopath may not
- Violations of norms?
  - Whose norms? Where and when?
  - Are punk rockers abnormal or just rebellious?
  - Are homosexuals abnormal? Are male transvestites abnormal? Are female cross-dressers abnormal?
  - Must be careful or anyone society disagrees with can be classed as abnormal

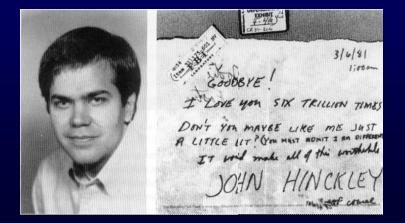


Salem witch trials 1692

# Legal Definitions of In/Sanity

The Insanity Defense

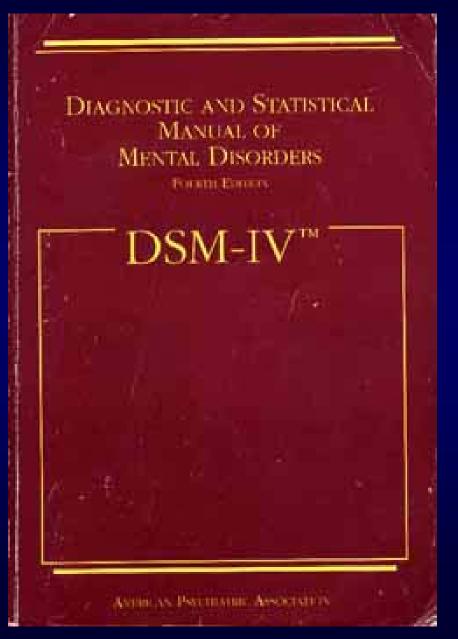
- Legal definition (American Law Institute): "a person is not responsible if, at the time of a crime, a mental illness or defect led to a lack of capacity to appreciated the criminality of the act or to an inability to conform to the requirements of law"
- seldom used but use in high-profile cases has drawn public attention
- John Hinckley Jr.
  - shot Ronald Reagan to get Jodie Foster's attention
  - "not guilty by reason of insanity"
  - outrage changed burden of proof to defense (to prove rather than prosecution
- Theodore "Unabomber" Kaczynski
  - lawyers suggested insanity defense based on diagnosis of schizophrenia
  - Kaczynski decided to plead guilty instead







# The Modern Psychiatric Bible



- Diagnostic and Statistical Manual of the American Psychiatric Association
- began in 1952
- currently in fourth edition (1994)
- fifth edition is in the works for 2010 release
- dominant classification system for mental disorders throughout the world
- more recent editions place emphasis on criteria for diagnosis and on research results

## DSM's definition of abnormal

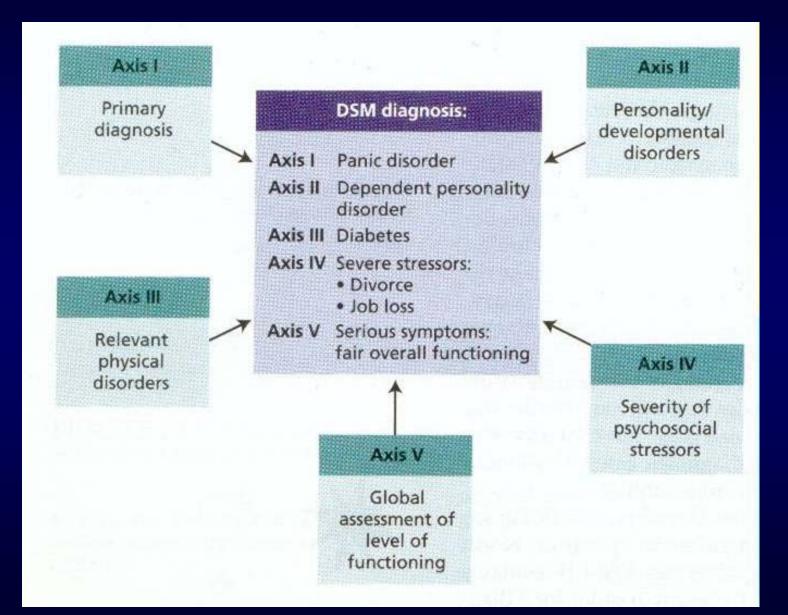
- "A clinically significant behavioral or psychological syndrome or pattern that occurs in a person and that is associated with present distress (a painful symptom), or disability (impairment in one or more important areas of functioning) or with a significantly increased risk of suffering death, pain, disability or loss of freedom."
- disorders are not result of normal reactions (e.g., sadness after death of a loved one)
- makes no judgments about what is a disease

# **Historical Categories**

#### neuroses

- main problem is anxiety
- individual is still in touch with reality
- e.g., modern day "anxiety disorders"
- psychoses
  - distortions of perception or thought
  - out of touch with reality
  - e.g., modern day "schizophrenia"

#### **DSM IV: Five Axes**



#### **Beware of Medical Students' Disease**

#### Biology student:

• "I'm thirsty. I must have water!"

#### Engineering student:

• "I'm thirsty. I must have beer!."

#### Medical student:

• "I'm thirsty. I must have diabetes!"

#### Psychology student:

• "I'm thirsty. I must have Dihydrogen Oxide Addictive Disorder. Is that in the DSM?"

# Criticisms of the DSM

- diagnoses can involve value judgments
  - Example: homosexuality
    - removed from DSM in 1973
      - attitudes changed
      - gay rights lobbyists campaigned for change
      - research showed no difference in mental health between heterosexuals and homosexuals
- diagnoses may be biased by fact that health care billing depends on DSM categories
  - Examples: "everyday disorders"?
    - nicotine dependence disorder
    - pathological gambling disorder
- many people fit multiple categories

#### **Diathesis-Stress Model**

Diathesis "Predisposing Causes" (hereditary predisposition)

Stress "Precipitating Causes" (situational factors)

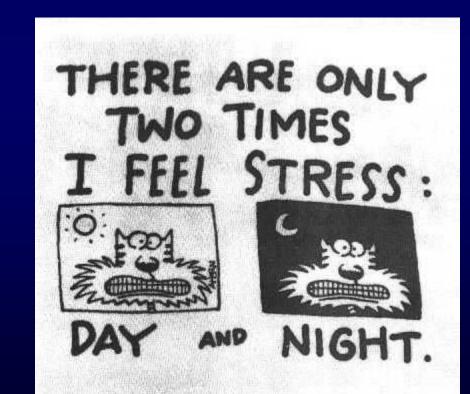
#### **Biopsychosocial** Approach

 emphasizes interaction of biological and social factors Disorder

"Maintaining Causes"

Recovery

I THINK I'M HAVING STRESS III



# What is Stress?

#### Stress

- any circumstances that threaten or are perceived to threaten one's wellbeing and thereby tax one's coping abilities
- 1. Physiological response
  - sympathetic nervous system activity
  - stress hormones (corticosteroids)
  - long term stress effects
    - immune suppression
    - high blood pressure
    - coronary heart disease (Type A) and cancer (Type C)
    - brain damage (esp. hippocampus)?
- 2. Emotional response
  - e.g., annoyance, anger, anxiety, fear, dejection, grief, guilt, shame, envy, disgust
- 3. Behavioral response
  - coping: healthy or unhealthy
  - disorders: diathesis + stress
    - anxiety disorders
    - posttraumatic stress disorders
    - stress can trigger other disorders (e.g., depression, schizophrenia)

#### **Sources of Stress**

- environment
  - heat, crowding, noise
  - socioeconomic status, cultural factors
- self-expectations
  - e.g., I must get good grades
- frustration
  - any situation in which pursuit of a goal is thwarted
    - e.g., declined promotion
- conflict
  - approach-approach
    - choice between two good options
    - e.g., "Do I want pizza or spaghetti for supper?"
    - least stressful
  - avoidance-avoidance
    - choice between two bad options: "between a rock and a hard place"
    - e.g., "Do I want to live with back pain or undergo surgery?"
    - most unpleasant and highly stressful
  - approach-avoidance
    - choice about single option with both attractive and unattractive aspects
    - e.g., "Do I want to date Mike because he's cute even though he's a jerk?"
    - characterized by vacillation

#### **Sources of Stress**

- pressure
  - expectations and demands made by others
  - perform and conform
- change
  - often includes negative events (e.g., death, layoffs)
  - can include positive events that require readjustment (marriage, children, promotion, retirement)
  - social readjustment rating scales (SRRS)

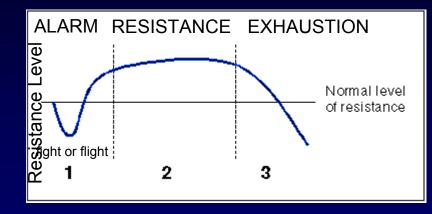
Event	Life-Change Un
Death of a close family member	100
Death of a close friend	73
Divorce between parents	65
Jail term	63
Major personal injury or illness	63
Marriage	58
Being fired from job	50
Failing an important course	47
Change in health of family member	45
Pregnancy	45
Sex problems	44
Serious argument with close friend	40
Change in financial status	39
Change of major	39
Trouble with parents	39
New girl- or boyfriend	38
Increased workload at school	37
Outstanding personal achievement	36
First quarter/semester in college	35
Change in living conditions	31
Serious argument with instructor	30
Lower grades than expected	29
Change in sleeping habits	29
Change in social activities	29
Change in eating habits	28
Chronic car trouble	26
Change in number of family get-togethers	26
Too many missed classes	25
Change of college	24
Dropping of more than one class	23
Minor traffic violations	20

# **Student Stress Scale**

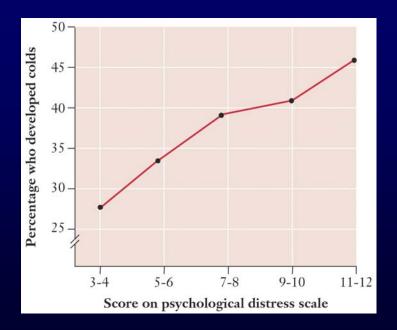
- in most scales, adults rated stressfulness of various life events (usually with respect to some baseline, e.g., marriage = 50 pts)
- people more stressed in 1990s than 1960s
- women report more stress than men
  - more stressed?
  - more willing to admit stress?
- scores of 300+ points
  - high health risk
- scores of 150-300 points
  - 50-50 health risk
- scores < 150 points
  - 1/3 chance of health risk

## **Effects of Stress**

- Impaired task performance
  - remember the Yerkes-Dodson curve?
- Burnout
  - physical, mental and emotional exhaustion
  - people can adapt to stress for awhile but chronic stress can lead to exhaustion (Selye's General Adaptation Syndrome)
- Physical illness
  - blood pressure, skin disorders (e.g., eczema), headaches
  - greater stress → increased susceptibility to common cold
  - Types A, B & C
- Beneficial Effects
  - at least you're not bored (can make performance better if you're on the low end of the Yerkes-Dodson curve)
  - can promote personal growth and resilience: "what doesn't kill you makes you stronger"



#### Selye's General Adaptation Syndrome (GAS)

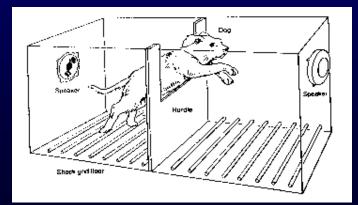


#### Learned Helplessness

Experiment (Seligman and colleagues, 1969)

- Stage 1:
  - dogs received strong shocks while strapped in a hammock
  - Group A could exert some control by pushing a button to end shock
  - Group B had no control
    - yoked groups: same number and duration of shocks
- Stage 2
  - dogs given standard avoidance learning task, had to jump from one compartment to another to avoid a shock
  - Group A learned task easily
  - Group B lay down whined and took the shocks
- learned helplessness: an acquired sense that one can no longer control one's environment such that one gives up trying





# Coping with Stress

Happiness = Reality/Expectations

- 1. Problem-focused coping
  - change the situation
- 2. Emotion-focused coping
  - "Life is 10% what happens to you and 90% how you take it"
  - change your reaction to the situation
  - positive reappraisal: "look for the silver lining"
    - downward comparisons
- 3. Seeking social support
  - more friends  $\rightarrow$  fewer health problems
  - ill people who are isolated are much more likely to die

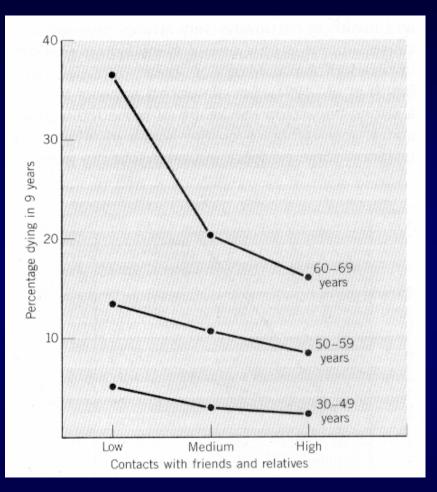


Place kit on FIRM surface.
 Follow directions in circle of kit.

- Pollow directions in circle of kit.
   Repeat step 2 as necessary, or until unconscious.
- 4. If unconscious, cease stress reduction activity.

- Studies of airline workers during FBI simulations of terrorists (Strentz & Aurebach, 1988) suggested emotion-focused coping led to least stress
  - results might be very different post 9-11
- Men emphasize problem-solving more; women use emotion-focused coping and social support more
- Westerners use problem-solving more than Asian and Hispanic people

#### I get by with a little help from my friends

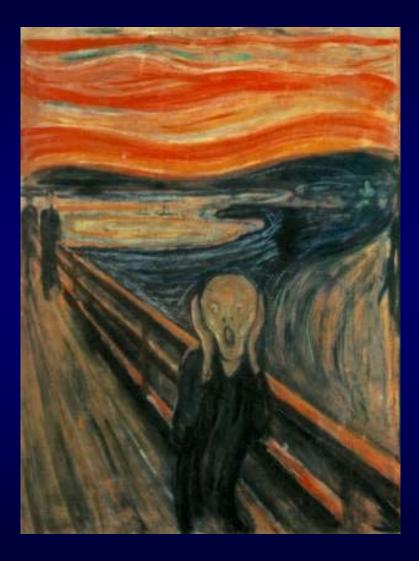


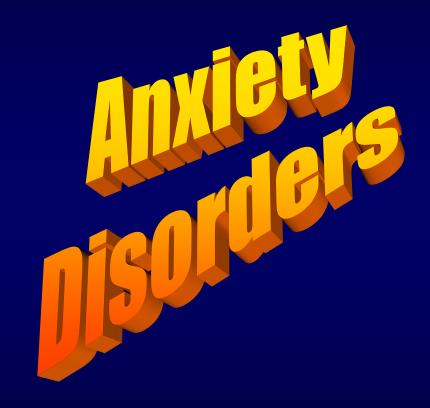
(Berkman & Syme, 1979)
social support = marital status, family & friends, church membership, associations

- correlational
  - in newer studies, groups were equal in initial health levels, but got same results
  - seems that support → health rather than vice versa
- Vietnam vets with strong social support were less likely to develop PTSD
- married people live longer than single and divorced people

# **Other factors**

- Stress can be reduced by:
  - having a hardy personality
    - internal locus of control
    - sees stressors as challenges rather than threats
    - comes from supportive family background
  - improving one's control
    - e.g., time management skills, avoiding procrastination
  - anticipating how you will cope with upcoming stressors
  - aerobic exercise
  - relaxation, meditation
  - humor
  - releasing emotions
    - gay men who were "out" were healthier than those "in the closet" (Cole et al., 1996)
  - distracting yourself
  - medication in extreme cases (Treatment)
  - cognitive therapy (Treatment)

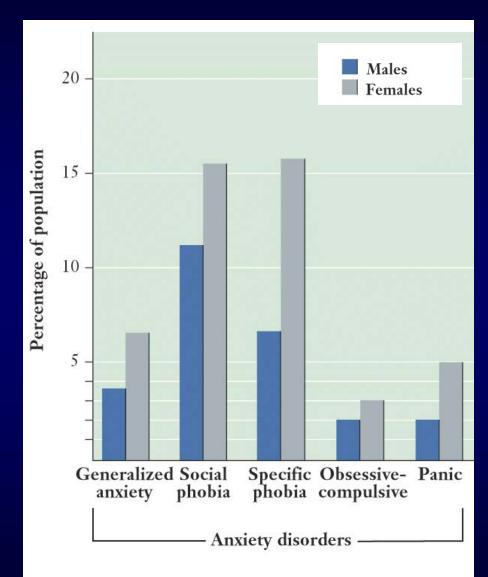




# **Anxiety Disorders**

- Primary disturbance

   (a) distressing, persistent anxiety
   or (b) maladaptive behaviors that reduce anxiety
- Anxiety diffuse, vague feelings of fear and apprehension
  - everyone experiences it
  - becomes a problem when it is irrational, uncontrollable, and disruptive

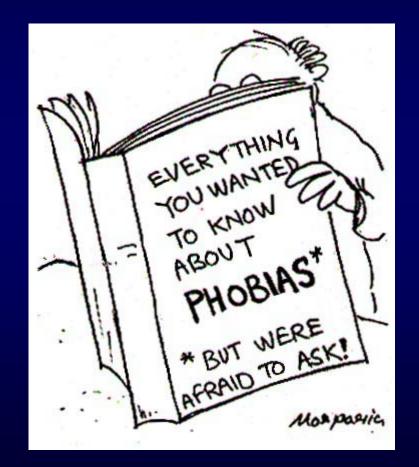


# Generalized Anxiety Disorder (GAD)

- More or less constant worry about many issues
   anxiety not restricted to one particular thing
- The worry seriously interferes with functioning
- ~3-6% of population
- Physical symptoms
  - rapid heart rate, irregular breathing
  - headaches
  - stomach aches
  - muscle tension
  - irritability
- Hypervigilance
  - sufferers are constantly on alert for problems
  - makes them distracted and irritible

#### **Phobias**

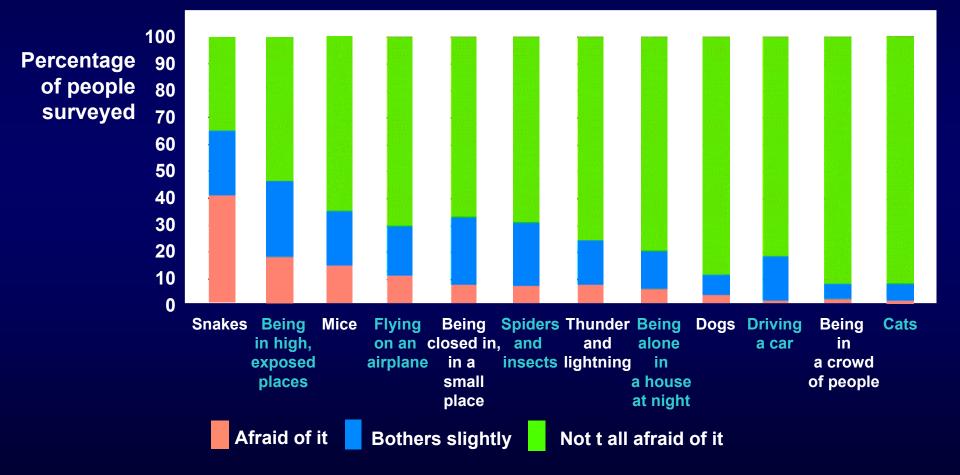
 Intense, irrational fear that is out of proportion to the threat



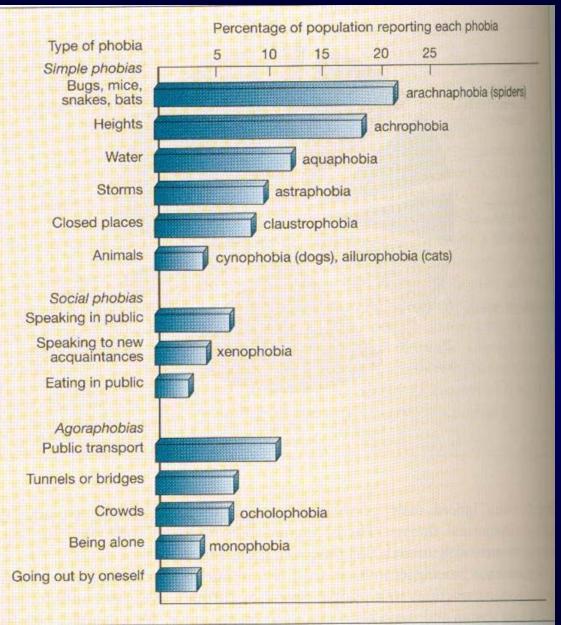
#### Phobias

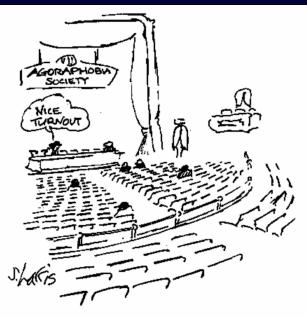
#### • It is not phobic to simply be anxious about something

Study of normal anxieties



# Sample phobias



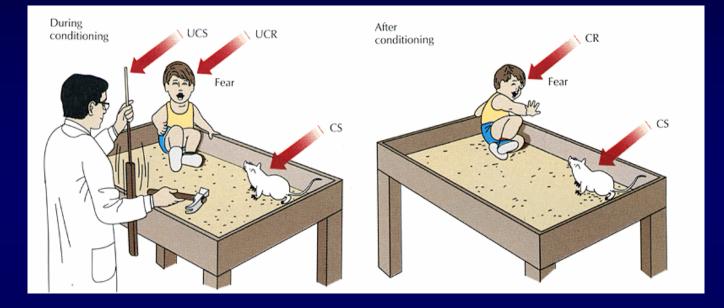


## **Social Phobias**

- fear of failing or being embarrassed in public
  - public speaking (stage fright)
  - fear of crowds, strangers
  - meeting new people
  - eating in public
- Considered phobic if these fears interfere with normal behavior
- May use alcohol and drugs to cope, leading to risk of substance abuse

# **Classical Conditioning Theories**

#### Remember Little Albert?



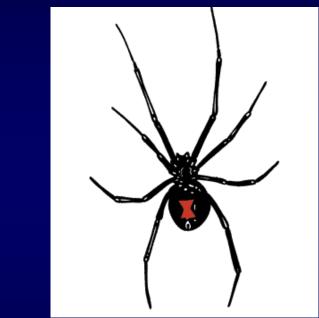
#### - problems:

- often no memory of a traumatic experience
- traumatic experience may not produce phobia
- humans and animals may fear things (e.g., snakes) that they've never encountered

#### The real things you should be afraid of...

 Why aren't people more afraid of the things that are truly dangerous?





#### Lifetime odds of dying in a car crash: 1 in 244 Lifetime odds of dying from a venomous spider bite: 1 in 582,829

VS.

(Source: National Safety Council web site, U.S., 1999 stats)

# Why do people fear what they fear?

Preparedness theory of phobias

 evolution favored animals that feared threats during evolutionary history (spiders and snakes, not cars and bathtubs)