

Lecture 22 Abnormal Psychology

So far we have been looking at "normal" people's psychology
→ Pica: Appetite for non-nutritive stuff like glass, shirt, pencil, etc.

#1 What is abnormal - very difficult to define!

- Out of social norm? - Hmm not quite.
- Maladaptive? - But procrastination not always abnormal ...
- Personal distress? - But many people have that
- Observer discomfort? - But not liking may not indicate abnormal
- maybe some combination of these?

But also not quite. Someone doing all these may still not be abnormal - there are some culture/people to do that.

* Abnormality spectrum. where to draw line?



* Specific symptoms

- Hallucinations: false sensory
- Delusions: illogical thinking
- Affective Disturbances: abnormal emotion
- Cognitive Deficits

But we all may have these too!
... maybe religion/cult, maybe they actually see something we see are hallucination ... maybe part of spirituality... ?

→ Some ppl still able to function with these.

→ A prof with Hallucination but still able to teach.

#2 Effect of labels

DSM (by APA)

Diagnostic and Statistics Manual — bible for clinical psychologists

- By symptom profiles & criteria, etc.
- Must require distress or impairment in functioning

Why DSM?

- Reliability] → but still not perfect

- Validity → "Research Domain Criteria"

* RDoC — new attempt to understand underlying causes. Researchers are still using this

- Dimensional rather than bi-polar
- Problem: insurance company needs DSM and not look at RDoC. There's diversion between research & practice!

* Effects of labels:

Pros

Sense of control

Cognitive economy

Cons

Stigma

Self fulfilling prophecies.

→ People voluntarily hospitalise for fake hallucination

Turns out doctors keep them for a long time!

— and they view normal things as abnormal!

#3 Some Cases

* Terms

[Fear: rational response to sth dangerous. ← Body's natural defence
Phobia: irrational, persistent. May react with anxiety. And they know they have this phobia. People also avoid this.

→ Arachnophobia - spider phobia. Persistent.

→ Schizophrenia - disturbance in thinking, emotional responsiveness, & behaviour. We see larger dark area in their brain scan (fluid filled area). Categories:

- Positive: extra behaviours like hallucination, delusions, thought passivity (feeling others can hear your thought / thinking your thoughts are implanted)
- Negative: Alogia - thought interruption, _____
- Cognitive symptoms: memory.. etc.

→ Munchausen Syndrome by Proxy - disorder of parents to induce / exegerate kid's sickness.

→ Munchausen Syndrome - actively trying to become sick.

! Not same as malingering, hypochondria, medical student syndrome