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Introduction: Historical and Scientific Considerations

OVERVIEW

The first five chapters cover basic ideas and issues in abnormal psychology. These chapters are the background for the rest of the text, which covers the various forms of psychopathology and related topics.

The first two chapters discuss viewpoints on the nature of psychopathology. For example, should people with psychological problems be viewed as having chemical imbalances, mental imbalances, or as the victims of faulty socialization or learning? Chapter 1 discusses basic concepts and historical views on the nature of psychopathology. Chapter 2 discusses current views on psychopathology.

The way we view these problems becomes especially important when discussing ways of classifying and studying psychopathology in Chapters 3, 4, and 5. For example, if we view people with these problems as having physiological imbalances, then we will focus on brain factors and on developing ways to identify and treat the imbalances. If, instead, we perceive these people as having learned ineffective behaviors, then we will want to categorize and treat their behavior differently.

CHAPTER SUMMARY

Chapter 1 covers three major topics. *What is Abnormal Behavior?* offers five characteristics of abnormality. None are necessary or sufficient for a definition of abnormality but, together, they provide a framework for understanding it.

The *History of Psychopathology* shows that different historical periods have emphasized

one of three views concerning the causes of psychopathology: Demonology (caused by evil outside forces), Somatogenesis (bodily causes) or Psychogenesis (psychological or mental causes). These three views have led society to study and treat disturbed individuals in different ways.

Science: A Human Enterprise points out that science is never totally objective. It is influenced by the human beings who conduct it. Scientific research questions and data are influenced by the incomplete knowledge of scientists and by their views or assumptions about reality. These assumptions or paradigms influence the kinds of data scientists seek and the way they make sense out of what they find. Paradigms can also make it difficult for scientists to recognize phenomena that don't fit their paradigm.

ESSENTIAL CONCEPTS

1. Abnormality can be characterized in various ways. None of the characteristics hold up perfectly but, together, they provide a framework for understanding abnormality.
2. There are many different types of professionals involved in the field of mental health.
3. There have been differing views on the cause of abnormal behavior throughout history although contemporary ideas derive largely from the somatogenic and the psychogenic viewpoints.
4. The way different societies understand abnormal behavior strongly affects the way they treat it.
5. Past methods of treating abnormal behavior have varied and, often, been inhuman. However they may not have been as bad as portrayed nor are current practices as enlightened as sometimes depicted.
6. Although science strives to be objective, it is influenced by the limited knowledge and subjective views of scientists. The paradigms or subjective assumptions of scientists influence what data they collect and what questions they ask.

TO MY STUDENTS

Before you plunge into this study guide, I urge you to take a few minutes to understand it. After all, a study guide is a tool -- and tools are most useful if you know how to use them properly.

This study guide comes out of my experience with what helps my students in abnormal psychology. It was designed to help them, and you, learn the material more effectively and efficiently.

The introductory chapter in this guide (entitled "Studying in This Course") describes how to study effectively and provides suggestions for common study problems. Studying is a skill that has to be learned. Read this chapter for ideas on how to improve your own study skills.

For each chapter of the text, begin by reading the *Overview*, *Chapter Summary*, and *Essential Concepts* sections in this guide. These sections provide a broad outline of the chapter and how it fits into the overall text. That information will improve your studying later by helping you see how various details are part of broader topics.

The *Key Terms* section lists new technical terms introduced in the chapter. There is space for you to write in definitions which is an excellent way for you to learn and study these terms

The *Study Questions* provide you a guide for studying the chapter by identifying the important ideas in each part. Read the first question, then study the indicated pages looking for the answer. Write notes on the answers you find in the space provided. You will review these notes later to get ready for tests. Read the introductory chapter in this guide, "Studying in This Course," for more details.

Finally the *Self-Test* provides multiple-choice and short answer questions you can use to test your knowledge.

I hope you will enjoy and benefit from your study of abnormal psychology and from this study guide. I welcome your comments, criticisms and suggestions. Please feel free to write me at the address on the title page.

KEY TERMS

Psychopathology (p. 5)

Abnormal behavior (p. 6)

Normal [or bell-shaped] curve (p. 6)

Clinicians (p. 9)

Clinical psychologist (p. 9)

Diagnosis (p. 9)

Psychotherapy (p. 9)

Psychiatrist (p. 9)

Psychoactive drugs (p. 9)

Psychoanalyst (p. 9)

Psychiatric social worker (p. 9)

Counseling psychologist (p. 9)

Psychopathologist (p. 9)

Demonology (p. 8)

Exorcism (p. 10)

Somatogenesis (p. 10)

Psychogenesis (p. 10)

Asylums (p.13)

Moral treatment (p. 15)

Milieu Therapy (p. 17)

Syndrome (p. 18)

General Paresis (p. 18)

Germ theory [of disease] (p. 18)

Cathartic method (p. 19)

Paradigm (p. 21)

STUDY QUESTIONS

WHAT IS ABNORMAL BEHAVIOR (p. 6-8)

1. Briefly describe characteristics of abnormality. For each, explain how it applies to only some kinds of abnormality, and its basic limitation as an overall definition. (p. 6-8)

HISTORY OF PSYCHOPATHOLOGY (p. 8-20)

2. Describe demonology and somatogenesis as early theories of deviant behavior. How did each explain abnormality? What kinds of treatment resulted from these explanations? (p. 8-11)

3. According to many historians, how did views and treatment of mental illness change during the Dark Ages and, later, during the 13th and 14th Centuries? What evidence suggests that the mentally ill were considered witches -- and what evidence suggests they were not? (p. 11-13)

4. Describe the development of asylums for the mentally ill during the 15th and 16th

centuries. How were the mentally ill treated in these early asylums? (p. 13-14)

5. Describe the development of moral treatment under Pinel & others. How did they view and treat mental illness? Why was moral treatment largely abandoned? (p. 14-16)

6. Describe the development of contemporary views of somatogenesis and psychogenesis. Include the contributions of Kraepelin, Pasteur, Mesmer, Charcot and Breuer. (p. 17-20)

SCIENCE: A HUMAN ENTERPRISE (p. 20-22)

7. Identify an advantage and a disadvantage resulting from the fact that science is conducted by human beings. (p. 20-21)

8. Science is also limited by the subjectivity of scientists. Explain this by defining paradigms and their role in science. Why are paradigms (a) necessary and (b) potentially limiting for scientists? (p. 21)

9. Describe the work of Langer and Abelson (1974) as an example of paradigms in abnormal psychology. How does their study illustrate the role of paradigms? (p. 21-22)

SELF-TEST, CHAPTER 1
(*ed items not covered in Study Questions)

MULTIPLE-CHOICE

1. Which view of abnormality is most applicable to someone suffering from chronic anxiety?
 - a. statistical infrequency
 - b. personal distress
 - c. unexpectedness
 - d. violation of norms

2. Violation of social norms, social or occupational disability, and personal distress are all
 - a. examples of the diathesis-stress model.
 - b. ways of defining abnormal behavior.
 - c. problems particularly addressed by psychodynamic therapists.
 - d. considered to be in the realm of sociology, not psychology.

- *3. Clinical psychologists differ from most mental health professionals in that they
 - a. receive intensive research training.
 - b. must undergo a personal psychoanalysis.
 - c. are trained to work with severely disturbed patients.
 - d. prescribe medication for mental illness.

4. The primary difference between somatogenesis and psychogenesis is that
 - a. unlike somatogenesis, psychogenesis led to mistreatment of the mentally ill.
 - b. somatogenesis sees the physical body as the seat of mental illness, whereas psychogenesis looks to origins in the mind.
 - c. somatogenesis is a contemporary view, whereas psychogenesis was prevalent at the time of Hippocrates.
 - d. somatogenesis sees mental illness as caused by punishment from the gods, whereas psychogenesis implies that mental disorders are treatable.

5. Currently it appears that, during the Dark Ages, some mentally ill people were
 - a. responsible for most of the witch hunts.
 - b. treated humanely.
 - c. revered as gods.
 - d. taken advantage of by demonologists.

6. "Moral treatment" of the mentally ill refers to
 - a. exorcising the demons they were thought to be possessed by.
 - b. housing them in religious monasteries.
 - c. separating them from the rest of society.
 - d. creating a quiet, calm atmosphere for them to live in.
7. The discovery of the nature and cause of syphilis was historically important because
 - a. it helped scientists appreciate the need to consider several paradigms.
 - b. it led to treatments that eliminated the need for large asylums.
 - c. it showed that some brain diseases were biologically based.
 - d. it proved that the psychogenic hypothesis was false.
8. What is an implication of the fact that science is a human enterprise?
 - a. Results from scientific studies are usually later found to be false.
 - b. Scientific progress depends on continued public and financial support.
 - c. Most scientific results turn out to be biased.
 - d. Scientists can only find the facts they are prepared to find.
9. Paradigms are necessary in order for science to
 - a. avoid bias.
 - b. define the methods of investigation to use.
 - c. insure that all possible data is considered.
 - d. remain sensitive to the human implications of research findings.
10. Which result, in Langer and Abelson's study, demonstrated the importance of paradigms?
 - a. Clinicians' adjustment ratings agreed with their qualitative descriptions of the interviewee.
 - b. Clinicians were influenced by whether the man was described as a job applicant or a patient.
 - c. Clinicians disagreed as to the best treatment for the patient presented in the study.
 - d. Traditional clinicians were influenced by descriptions of the man as a patient more than behavioral therapists.

SHORT ANSWER

1. Give an exception to the view of abnormality as statistically infrequent behavior.
- *2. Describe the training of a psychiatrist.
3. What kinds of treatments evolved from early demonology?
4. Hippocrates argued that deviant behavior was not punishment by the gods but the result of . . .
5. Give one reason to believe that the witches of the middle ages were not mentally ill people.
6. How were the mentally ill treated in early asylums?
7. Why was moral treatment largely abandoned?
8. In what way is science (a) objective and (b) subjective?
9. Why are paradigms potentially limiting?
10. Langer & Abelson's study illustrates the role of paradigms in psychology. Describe what they did.

ANSWERS TO SELF-TEST, CHAPTER 1

MULTIPLE-CHOICE

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|-----------------|------------------|--------------|-----------------|
| 1. b (p. 7) | 2. b (p. 6-9) | 3. a (p. 9) | 4. b (p. 11) |
| 5. b (p. 13-14) | 6. d (p. 15) | 7. c (p. 19) | 8. d (p. 23-24) |
| 9. b (p. 24) | 10. d (p. 24-25) | | |

SHORT ANSWER

1. Your exception could be any behavior that, while infrequent, is not considered "abnormal". Possibilities include "genius," "heroism," or "ecstasy." (p. 6)
2. Trained in medicine (an M.D.) plus post-graduate supervised experience working with disturbed individuals. (p. 9)
3. Attempts to induce the demons to leave through prayer, drive them out through torture, etc. (p. 10)
4. Natural causes (p. 10)
5. During the middle ages there were hospitals and laws for the mentally ill suggesting people of the time recognized them as different from witches. (p. 12-13)
6. Confined with lepers and social outcasts under poor conditions. Some asylums sold tickets to people who found their behavior amusing. (p. 14)
7. Public hospitals became too large to provide individual care. Physicians gained control & shifted focus to biological factors (p. 16)
8. Objective in the observation and collection of data. Subjective in that observations are organized based on subjective paradigms. (p. 20-21)
9. They influence how research is done and interpreted so that biases and distortions may develop. (p. 21)
10. Behavioral and psychoanalytic therapists viewed a videotape of a man described as either a job applicant or a patient. Then they rated the man's mental health. (p. 21-22)