The diagnosis and classification of mental disorders is a useful basis for exploring causes and cures of psychological problems—but these tools make it easy to assume that problems arise from single, internal causes that are inherited and involve brain dysfunction—and therefore can be dispelled with an intervention that simply eliminates the cause—NOT TRUE

- **Dangers of Labeling**
  - An important complication in the diagnosis and classification of psychological disorders is the effect of labeling
  - Psychiatric labels can have negative consequences since many of these labels carry the baggage of negative stereotypes and stigma—such as the idea that mental disorder is a sign of personal weakness or the idea that psychiatric patients are dangerous
    - 70% of people with diagnosable psychological disorders do not seek treatment
  - Expectation created by psychiatric labels can sometimes compromise the judgment of mental health professionals
    - David Rosenhan—“Schizophrenia” study

**Lecture #1—Psychological Disorders: Classification and Biological Models**
- Clinical psychology—focus on psychopathology; scientific study of the nature of psychological disorders
- DSM-IV-TR—current edition
- How is psychopathology and psychotherapy portrayed in American culture?
  - Focus on countless movies
    - Ex. *Girl Interrupted*
  - TV shows
  - Self-help books
    - Ex. *Men are from Mars, Women are from Venus*
  - Magazines
  - Newspaper headlines
    - Message: people with psychopathology are risky to us
  - Advertisements
    - Message: avoid people with psychopathology
  - Drug commercials
    - Message: psychological disorders are caused by a chemical imbalance—biological factors
- Does stigma matter?
  - Internalized stigma and social rejection lead to lower functioning and self-esteem
  - Fear of stigma is a barrier to receiving and seeking treatment
  - Family members’ beliefs about psychopathology affect outcomes
- How prevalent are psychological disorders in the United States?
  - About 50% of people in the US will have a psychological disorder in the US
Only about 25% of people with psychological disorders receive treatment
- National Comorbidity Study-Replication
- See slide
  - 12-month prevalence—experienced a disorder in the last 12 months
  - Lifetime prevalence—will experience a disorder over their lifetime

- What disorders are most common on college campuses?
  - 5000 young adults (18-24)
    - ½ attending college
  - 50% psychiatric disorder past year
    - Rates did not differ between college-attending and non-attending
    - 30% substance use disorder
    - 10% mood disorder
    - 12% anxiety disorder
    - 18% personality disorder
  - Only 25% who met criteria for a disorder sought treatment in the past year

- How do we define abnormality?
  - Three common misconceptions
    - Infrequency—people think psychological disorders are infrequent NOT TRUE
    - Deviance from the norm—just because something is deviant doesn’t mean it’s a psychological disorder
    - Distress—many people with a psychological disorder aren’t distressed or it’s not enough to qualify as a disorder
  - Four possibilities (Four D’s)—meet all four
    - Distress—experiencing distress or create distress in others
    - Dangerousness—risk to self or others
    - Dysfunction—when behavior interferes with daily functioning
    - Deviance
  - DSM-IV-TR definition of psychological disorder
    - A clinically significant behavioral or psychological syndrome (clustering of symptoms) or pattern
    - Associated with distress and disability (impairment)
    - Not simply a predictable and culturally sanctioned response to a particular event (e.g. death)
    - Considered to reflect behavioral, psychological, or biological dysfunction in the individual
  - *Any definition of a psychological disorder is arbitrary because our current classification system does not depend on the etiology of the disorder—diagnosis depends on subjective impression of person giving the diagnosis
  - More complexities in defining abnormalities: The DSM-IV-TR
    - Categorical vs. dimensional
Chapter 14 (pg. 558-564)
Anxiety Disorders: When Fears take Over

- **Anxiety disorder**—the class of mental disorder in which anxiety is the predominant feature
  - People commonly experience more than one type of anxiety disorder at a given time, and there is significant comorbidity between anxiety and depression
  - Types: generalized anxiety disorder, phobic disorders, panic disorders, and OCD

- **Generalized Anxiety Disorder**—generalized and unrelenting worries that are not focused on any particular threat, often exaggerated or irrational—chronic excessive worry is accompanied by three or more of the following symptoms: restlessness, fatigue, concentration problems, irritability, muscle tension, and sleep disturbance
  - The uncontrollable worrying produces a sense of loss control that can so erode self-confidence that simple decisions seem fraught with dire consequences
  - About 5% of North Americans suffer from GAD at some time in their lives
  - Occurs more frequently in lower socioeconomic groups than in middle and upper income groups
  - Twice as common in women as in men
  - Biological and psychological factors contribute to the risk of GAD
  - Neurotransmitter imbalances may play a role in the disorder because certain prescription drugs have helped those with GAD
    - Ex. Benzodiazepines
  - Stressful life situations often bring about GAD

- **Phobic Disorders**—characterized by marked, persistent, and excessive fear and avoidance of specific objects, activities, or situations
  - An individual with a phobic disorder recognizes that the fear is irrational but cannot prevent it from interfering with everyday functioning
  - **Specific phobia**—is an irrational fear of particular object or situation that markedly interferes with an individual’s ability to function
    - Fall into 5 categories: animals, natural environments, situations, blood-injections-injury, and other phobias such as illness and death
    - 11% of people in the US will develop a specific phobia during their lives for unknown reasons
    - Specific phobias are much more common among women than men 4 to 1
  - **Social phobia**—involves an irrational fear of being publicly humiliated or embarrassed
    - Can be specific or general
    - Individuals with social phobia try to avoid situations where unfamiliar people might evaluate them, and they experience