

Chapter one

Answer to question 1

Psychology abnormality could be defined as a scientific study of codes of conduct or norm(s) that is unacceptable to a group of people in a particular society.

Situations and circumstances may change a normal acceptable behavior to become unacceptable to the people of a particular society. Abnormality is usually assessed from the perspective or lens of society. The expression "Do in Rome as the Romans do" recognizes that societies have an acceptable code of conduct and that the wrong "timing of activities" could render a particular activity deviant and unacceptable to the people of that society. Hence, we do hear people say that there is time for everything.

The vast and peculiar nature of the field of psychological abnormality is such that does not give room for a universally acceptable definition of mental instability, however an attempt to define psychological abnormality with the four Ds acronym:(DDDD) is sufficient enough to identify, diagnose and treat individuals with psychological abnormality.

The first letter of the acronym D stands for Deviance. When the individual always appears different, extreme, and unusual acting against the normal acceptable norms and social way of life. Like driving against the traffic.

The second letter D stands for Dysfunction. This occurs when someone's behavior affects his daily life and livelihood or job. For example, the excessive fear of death may cause one to remain indoors and lose interest in work.

The third letter D stands for Distress: when one's unpleasant behavior affects one and another individual around him or her. Such behavior could make them and the people around them to be in perpetual fear, pain, sleeplessness, and loss of appetite.

The final letter D stands for Dangerous. This happens when such individual becomes a threat to themselves and the people around them. That they become physically violent and could harm themselves and the people around them.

Question 2

"I am feeling really lousy today and I don't know why" expresses the mental state of my friend, - a symptom of a mental disorder often triggered by stress, anxiety, and depression. If after the discussion my friend feels better about things, it means that I have provided psychological therapy to her.

Response.

The aim of the study and the application of psychological therapy is to prob and provide emotional balance and mental well-being of individuals through the knowledge of positive psychology to make unstable individuals feel better, happy, and optimistic about their future, bring about the general well-being of individuals and avert incidents of full-blown mental disorders. This is in agreement with Jerome Frank who opined that the aim of all forms of therapy is to alleviate suffering and bring about a change in the emotional attitude and behavior of the individual in question.

Question 3

Many philosophers and physicians contributed to the treatment of abnormal psychology but the contribution of Hippocrates, Johann Weyer, and Pinel & Tuke is quite outstanding.

Hippocrates who lived in Ancient Greece between 500 BC and 500 A.D. in the pre-historic era are quite notable. He believed that illness had natural consequences and not metaphysical causes. For him, it is the imbalances in bodily fluids from the bile, kidney, blood, and heart that bring about illnesses. He, therefore, tried to stabilize these fluids in treating

Johann Weyer a German physician who lived in the Renaissance era during the booming of Asylums between 1400- 1700 AD disagreed with the popular belief of his time that demons were not responsible for illness but that just like the body could deteriorate that the mind could also be sick. He advocated that the mind should be cared for when it falls ill like the body. This encouraged to keep their mentally sick people in asylums to be cared for.

Pinel lived in France and Tuke lived in England in the early nineteenth century (1800). They championed a reform that brought about the moral treatment of people with mental health issues giving them a human face.

CHAPT 1 QUESTION 4

The five major events in the history of abnormality in the order of their occurrence would be:

Answer:

1. Demonology. The belief that evil spirits or dark forces created psychological dysfunction.

permeated the belief about mentally ill individuals and their treatment for years. Demonology led to some of the greatest atrocities committed against those who were mentally ill and may still be a factor in the stigma, many feel against the mentally ill today. Our text, for example, notes that 43 percent of people still believe that those with mental illness have brought it on themselves.

2. The Rise of Asylums. The unspeakably cruel ways in which the mentally ill have been treated.

should not be forgotten. The asylums began with good intentions but eventually became a national shame. Asylums reflect the ways in which we viewed those who struggled with mental illness.

3. Moral Treatment. Figures such as Tuke, Pinel, Rush, and Dix were essential to revolutionizing.

the way in which those who struggled with mental illness were treated was a turning point in the history of how those with mental dysfunction were viewed and treated. By framing mental dysfunction as an illness to be treated, it set the stage for those like Freud to develop theories that framed clients and their treatments with humanity.

4. The Advent of Psychotropic Medications. When individuals with mental dysfunctions were institutionalized, even with humane practices, there were many who could not be helped because of the nature of their illness was so inherently biological. Psychotropic medication allowed many to function outside of an institutional setting who may never have had a chance of recovery otherwise. Psychotropic medications of the past also solidified the status of mental illness as a treatable and often biologically based illness.

5. Deinstitutionalization. The final inclusion of deinstitutionalization is present because it both reflects hope and the need for improvement. While people were released from institutions, the care and support structure provided when they left has still been sorely lacking. While so many mentally ill individuals are still homeless or in prisons, and 40 to 60 percent of those with severe mental illness receive no treatment at all, there is still much work to be done.

Chapter 3

Question 19

A classification system such as the DSM-5 is judged by its reliability and validity. Define and discuss both reliability and validity and why they are important criteria for DSM-5.

Answer:

Reliability is something about being trustworthy and performing well. It can also be defined as the degree to which an assessment tool produces stable and consistent results.

Validity is something being logical and correct. This also refers to how well a test measures what it is purported to measure. These are important for DSM-5 because you would want a system that diagnoses mental disorders to be both these things, so mistakes are limited.

Chapter 3

Question 20

What are the weaknesses in assessment? What can be done to address these weaknesses?

Be sure to address reliability, validity, and bias issues.

Answer:

The main weakness of DSM-5 is that many of the criteria have little research behind them so more research needs to be done to fix this in order to make it more reliable and valid. Assessments come with a variety of weaknesses that are specific to the tool. Some variables are needed to judge assessment tools which include.

Reliability is an important variable that ensures that an instrument is consistent in what it measures. To address the weakness here, test-retest data is often used to modify the tool until there are more consistent results.

Validity shows that a tool measures what it is supposed to measure. For example, a tool has solid face validity, but most often, it does not measure what it is supposed to measure. This calls for researchers' attention to address this factor of validity so that tools accurately measure what they are supposed to measure.

Bias. Some people can experience biases that can deeply affect how they interpret or diagnoses things. Ethnicity or culture can affect how one reason or do things. Training and care need to be taken to not misinterpret client behaviors or beliefs that differ from the dominant culture,

3. Distinguish between neurological tests and neuropsychological tests, giving examples of each and describing in general how each type of test is used diagnostically.

Answer:

Neurological tests measure brain structure and/or activity, these are used to find physical problems like a tumor that can impact your behavior. Neuropsychological tests find brain impairments by measuring cognition, perception, and motor skills, these find underlying brain

issues like brain damage.

4. Choose either the MMPI-2 or the TAT. Describe the test in detail, being sure to categorize it and describe its strengths, weaknesses, and applications.

Answer:

The MMPI-2 is the revised version of the MMPI that is used today, it has 500+ self-statements that can be labeled true/false. This ranges from mood, sexual behavior, physical concerns, and social activities. This is much more detailed than other tests but has cultural limitations because sometimes abnormal for one culture could be the norm in another culture but does not make difference between cultural norms.

