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## **Essays: Unit 1**

### **CHAPTER 1**

#### **#5**

The somatogenic and psychogenic perspectives on abnormal functioning originated in the early twentieth century as two competing views of causality for abnormal functioning. The somatogenic perspective asserts that mental dysfunction is caused by physical conditions such as exhaustion, whereas the psychogenic approach considers abnormalities to be produced by psychological issues. Following a lengthy period of research and experimentation, the first drugs were produced to aid in the treatment of aberrant functioning that was assumed to be caused physiologically, whereas the Psychogenic Perspective concentrated on the therapy's hypnosis and psychoanalysis. Recent study has shown that hypnotic methods can influence our thinking by either producing false memories or unearthing true memories concealed in the unconscious. An example of the success of the psychogenic method would be the treatment of mental problems such as anxiety and depression, which have no physical roots and may be treated and cured by a psychotherapist using psychoanalysis. While the somatogenic viewpoint produced less favorable proof results, one supportive finding would be the relationship between syphilis and general paresis, where it was observed that customers with paresis were resistant to syphilis, and so

the researchers felt that the previous instance of syphilis may be creating an immunity to syphilis as well as being the basis of their paresis.

## #9

Mental health specialists' Clinical psychologists, psychiatrists, and clinical researchers are all members of the abnormal psychology discipline, although they are not the same. Clinical psychologists are specially trained in the examination and diagnosis of psychological illnesses, which they treat through psychotherapy in an individual, couple, family, or group context. While some clinical psychologists engage in research or education, the majority work in hospitals, mental health clinics, or schools. Psychiatrists are medical professionals who evaluate, diagnose, and treat mental health problems. They are particularly concerned with pharmaceutical therapy and psychotherapy, and they require crisis interventions. Nonetheless, due to health-care rules that make it more economical to prescribe medicine rather than provide psychotherapy, there has been a movement toward psychiatrists primarily administering medication. Clinical researchers are interested in gauging unconscious intentions, monitoring internal thoughts, detecting mood changes, and assessing human potential. In their studies, they must take into account the participants' diverse cultural backgrounds, ethnicities, and genders. They must also ensure that the participants' rights, whether human or animal, are not violated and that they are handled ethically. To summarize, clinical psychologists and psychiatrists are both trained doctors who can chat with patients about their difficulties, however a psychiatrist is also a medical doctor and may thus prescribe medicine. Clinical researchers strive to help individuals with their problems, but unlike therapists, they do study with patients in order to establish universal laws and principles of disordered psychological functioning.

## #17

Some of the early therapies for mental problems included water therapy as well as heat and light to excite or soothe patients. Another therapy employed an insulin overdose to throw the patient into a coma and create a wet shock (extreme perspiration and twitching) or a dry shock (seizure). These early therapies imply that aberrant functioning and psychological problems were viewed as somatogenic, which means that they were caused by physical reasons and hence treated medically.

First and first, I feel it is critical to consider the patient's well-being during the process and not to overlook their human rights. Some of the early therapies appeared to be quite brutal, bordering on physical torture. Then, rather than focusing just on the patient's physical condition, it is crucial to evaluate the psychogenic variables. Individuality is also vital to execute because each client is the same and every mental condition develops and manifests differently.

#18

Speaking from my experience, I can state that expectations and attitude may have a significant impact on the results of some events. I understood that having high expectations for someone, an event, or oneself may cause a lot of strain and stress. Going into a scenario with no expectations made everyone involved, notably me, much calmer and easier to influence positively. For example, when I went to a summer campfire where I didn't know anyone, I didn't anticipate making many friends, have wonderful profound talks, or meet the love of my life; I simply assumed that whatever happened would be okay. This made the entire atmosphere much more relaxed by not attempting to force things, which worked out beautifully because I ended up developing amazing relationships with folks there.

Psychologists doing research must be mindful that the outcomes of whatever they are testing may be decided or affected by patients anticipating a specific conclusion. Some medications or therapies may have a lesser or greater impact on the participant depending on how much they believe or disbelieve in them. Therefore, it is a good idea not to disclose the volunteers what the researchers are hoping to discover throughout the testing session. I feel that the placebo effect is a critical component of psychotherapy's success. It may make patients feel a lot better simply by believing they would, without having to take any prescription. Because mental diseases occur in our thoughts, that is also where they may be healed, and the placebo effect can be quite beneficial in this regard.

## CHAPTER 3

#26

Clinical observations include naturalistic and analog observations, as well as self-monitoring. Naturalistic observations take place in ordinary settings such as homes, schools, institutions, and communities. The majority of the time, the emphasis is on interactions like parent-child, sibling-child, or teacher-child. Typically, "participant observers" undertake the observations, which are subsequently reported to a doctor. When naturalistic observation is either impossible or impractical, analog observations are used in an artificial situation. The term "self-monitoring" is self-explanatory in and of itself. In this sort of observation, patients examine themselves and record the frequency of specific actions, moods, or cognitions as precisely as possible across time. Naturalistic observation makes the most sense for individuals who are most themselves in a setting they know and feel comfortable in, such as with their family, however artificial observation may be more suitable when a person has overall underlying problems that would not show out in a natural context and must be examined more thoroughly and over time. And self-monitoring would be optimal for clients who are aware of their "odd" actions and behaviors and wish to learn when and what triggers them.

#28

A drawing test is an activity that requires a patient to draw something specific without any limits or constraints. The client will draw on their own perceptions and experiences, which might already reveal a lot about them. The Draw-a-Person exam (DAP) is the most common drawing test. It is a psychological projective personality test used to study and evaluate children and adolescents for a variety of objectives. It is frequently used to assess children's intellect or development. The youngsters are required to produce three individual drawings on three distinct sheets of paper throughout the assessment. The only guidelines provided are to sketch a man, a lady, and themselves, and the youngster is allowed to draw in whatever way they wish. There is no right or incorrect form of drawing; the only need is that the youngster sketches an entire person each time, from head to feet, rather than just the face. There is no time restriction, although the participating youngsters frequently finish all three paintings in less than 15 minutes.

#33

Even though psychotherapy has benefited millions of patients who have been suffering, some people remain dubious and do not understand the scientific validity as well as the justification for psychotherapy as a treatment for diseases. While I realize that it is difficult to accept that individuals are changing on the inside since you can't see from their outside look, I don't understand why some still refuse to think that psychotherapy is beneficial. Treatment outcome studies have been carried out in order to examine and show the real effectiveness of therapy in general, as well as certain specific therapies for specific issues. Overall, the studies show that therapy is helpful, although specific therapies for specific issues are more successful than generic ones. Psychotherapy is also proven to be more successful in the long run while producing fewer relapses than medication. However, for psychotherapy to be successful, a highly experienced psychotherapist is required. Interpersonal skills, empathy and understanding, the ability to create trust, the ability to communicate in the client's words, being influencing, reflecting and persuasive, and being aware of the patient's situation are all characteristics of a competent therapist. He or she should also keep up to speed with latest studies and continue to improve professionally.

#38

According to Kendra's legislation, physicians or parents can force people suffering from psychiatric problems to take medication or undergo therapy against their choice. The ban was enacted in reaction to multiple incidences in which persons suffering from schizophrenia shoved others in front of trains, killing one lady, Kendra. To some extent, I agree with Kendra's law; however, it is dependent on the severity of the sickness as well as the actual threat to others. I believe that many people with psychiatric illnesses are unable to accurately assess their own conduct, and that if they endanger themselves or others, they should be required to seek therapy. I will not support the law if the disease does no harm to anybody and the sole reason for them to seek treatment is out of desire or to make life easier for their parents. When to seek court-ordered therapy is difficult for laypeople to determine, especially for parents who may be so concerned about anything happening that they wish to seek treatment ahead of time even if their sons or daughters do not represent a threat to anybody. As a result, a doctor may have some additional scientific insights with which to appraise the patient as well as the parents' experiences and worries. On the contrary, it is equally important that the family knows the individual well and can detect when something is amiss or becoming worse, and I feel that they should be encouraged in their desire to help their relative before something terrible occurs.