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Chapter 12

6. I would advise the individual that the experiences might be brought on by biological elements that could result in schizophrenia. I would warn him that if his friends and family denied the truth of his feelings, he would eventually believe that someone was attempting to mislead him. He may reject criticism and go on to believe, or have fantasies of, being victimized. Jumping to conclusions might aid in the process of coming to absurd and wrong conclusions (delusions).

7. In the middle of the twentieth century, individuals with a diagnosis of schizophrenia were kept in a typical public state hospital. While simultaneously physically restraining the sick, the institutions would give them refuge, food, and clothes. Many of the patients suffered from abuse and neglect, and they rarely saw a real doctor. Most of the time, the facilities were overcrowded, and poorly qualified nurses and staff were responsible for practically all patient care.

9. The patient is respected and expected to act in a desired way in both the milieu therapy and the token economy programs. However, milieu treatment is founded on a humanistic method, and the token economy program has behaviorist underpinnings. Milieu therapy aims to assist the patient by fostering an environment that respects and supports desired behavior. The token economy program reinforces the patient's conduct by giving out tokens, which the patient

may subsequently exchange for special privileges. In this manner, positive conduct is encouraged.

13. Due to inadequate service coordination and a lack of resources, community treatment has proven unsuccessful for people with schizophrenia. The agencies in a community and the people who work there frequently don't actively contact with one another. As a result, patients cannot be referred to or provided treatments that might be advantageous to them. Additionally, there is a lack of community services for people with more serious mental illnesses like schizophrenia. These organizations occasionally provide their assistance to people who suffer from less severe conditions, such as people with anxiety disorders.

17. Even when the symptoms of schizophrenia have faded, therapy is still necessary for life. Psychosocial counseling and medical treatment can assist control of the illness. Hospitalization may be required in specific situations. Schizophrenia was not distinguished from other types of mental disease or mental retardation, most of which was historically viewed to be of supernatural origin, brought on by evil spirits, demonic possession, punishment for sin, or similar spiritualist events. Delusions, hallucinations, or speech impairment must be at least one of the symptoms. The doctor does a physical examination, orders blood work, and carefully examines the patient's medical, mental, and family histories before making a diagnosis. It is also believed that the chance of developing schizophrenia is increased by genetic duplications or deletions that can affect several genes on any one of several chromosomes.

Chapter 13

22. A person's personality is made up of distinctive characteristics that are frequently consistent and predictable throughout life. These characteristics frequently have an impact on

how that individual behaves, feels, thinks, and interacts with others. People who suffer from personality disorders have excessive and dysfunctional personality features that make interactions difficult and hurt other people's feelings as well as their own.

24. People with uncommon personality disorders sometimes exhibit odd or eccentric actions that are reminiscent of schizophrenia. Suspiciousness, social disengagement, and odd ways of thinking and experiencing things are some of these. The person is frequently isolated from other people because of these actions. These illnesses are hardly treated by their patients. Dramatic personality disorders cause people to be unstable, emotional, and dramatic. Due to their conduct, they frequently struggle to establish and sustain intimate social ties. These are the personality disorders that are diagnosed the most frequently, and the treatments are usually ineffectual.

25. Odd personality disorders are hardly self-diagnosed, according to research. They frequently do not consider their actions to be troublesome. Those who do enter therapy tend to regard the therapist's function as inferior, which leads them to mistrust their therapists and occasionally rebel against them. They could also be emotionally cut off from their therapists, which would make treatment less successful.

33. Obsessive-compulsive, dependent, and avoidant personality disorders are examples of anxious personality disorders. These diseases cause anxiety and panic in their patients. People who have avoidant personality disorder find themselves uneasy in social settings, feel inadequate, and are sensitive to criticism. Plenty of attention is needed for those with dependent personality disorder. Obsessive-compulsive personality disorder patients are fixated on control, perfection, and order.