Psychology 311
Abnormal Psychology

University of Idaho
3 Semester-Hour Credits

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University of Idaho

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2-Psyc 311
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Welcome!
Whether you are a new or returning student, welcome to the Independent Study in Idaho (ISI) program. Below, you will find information pertinent to your course including the course description, course materials, course objectives, as well as information about assignments, exams, and grading. If you have any questions or concerns, please contact the ISI office for clarification before beginning your course.

Policies and Procedures
Refer to the ISI website at www.uidaho.edu/isi and select Students for the most current policies and procedures, including information on setting up accounts, student confidentiality, exams, proctors, transcripts, course exchanges, refunds, academic integrity, library resources, and disability support and other services.

Course Description
Nature, causes, treatment, and prevention of patterns of emotional disturbances and personality disorders, including neuroses and psychoses. Prerequisites: Psyc 101

Recommended prerequisites: a Methods in Psychology, such as Psyc 218: Introduction to Research in Behavioral Sciences

Required: Internet access
10 graded lessons, 7 self-study lessons, 3 proctored exams
May submit up to 2 assignments per week.

Course Materials
Required Course Materials

Course Introduction
This course will provide an introduction to abnormal psychology by presenting an interactional view of abnormal behavior involving personal attributes and the challenges that people confront in life. The interactions of life situations, vulnerabilities, and resiliency influence the development of disorders, treatment plans, and clinical outcomes.

Traditionally, it was believed that biology drove most of everything and that biological defects always underlie maladaptive behavior. Biological determinants are pertinent; however, there is growing evidence that the environment can have a major impact on biological processes; for optimal outcomes, treatment typically requires a combination of elements such as medication and psychotherapy. Our focus is on the complexity of human behavior and the elements that contribute to the development of adaptive and maladaptive behavior. Research is central to the study of human behavior because new evidence greatly influences how we understand people with problems.

Throughout the course, you will be asked to look internally at your behavior and externally to the environment around you. Consider how you adapt and cope with your environment, and observe the behaviors of others. Ask yourself: What is considered normal behavior? What is considered abnormal? Why?
Course Objectives
1. To gain an appreciation of the fundamental issues that underlie the concept of mental abnormality. These issues include such questions as: How does one define mental disorder? Is the definition of mental illness relative, depending on society, or on historical context? What tools are used to assess mental disorder and how are they used? What are the consequences, both practical and ethical, of classifying individuals? Can such classification be made accurately and reliably?
2. To become familiar with how, in terms of symptoms, the various psychological disorders present themselves.
3. To appreciate different explanations of abnormality. That is, to understand the role of environment, genetic factors, psychodynamics, neuropsychology, and biochemistry in the determination of psychopathology.
4. To appreciate the experience of mental disorder. This will be accomplished through the use of case histories and similar material.

Lessons
Overview
The course structure covers the seventeen chapters in the Abnormal Psychology text and the selected readings from the Lanahan Cases text. There are seventeen lessons in total. There is an assignment following each lesson to check your understanding of the material. You will be responsible for ten graded assignments, listed in the Assignment Submission Log and in the Written Assignment section of the lessons. For these assignments, feel free to use the texts and your notes; they are entirely “open book.”

The remaining seven assignments are “self-study.” These assignments are not graded and do not need to be submitted. They are intended to assist you in preparing for exams. For each self-study activity, I have included the answers to the questions following the Final Exam Information sheet in this study guide to assist in understanding. Material from the self-study activities and the graded assignments will appear on the exams.

Many students ask how much time they can reasonably expect a lesson to take. Of course, this varies with the material. But you should note that a general rule of thumb for a three-credit class is that it should involve a time investment of about nine hours per week, or 144 hours total, distributed across a 16-week semester. Basically then, it would be reasonable to spend an average of 5 to 6 hours on any one lesson, graded or self-study, and the balance of your time studying for the three exams.

Study Hints
- Complete all assigned readings.
- Set a schedule allowing for completion of the course one month before your desired deadline.
  (An Assignment Submission Log is provided for this purpose.)

To help you get the most out of your essays, use the formula of state, show, and explain.
- **State** the answer to the essay question using the appropriate psychological concepts or issues.
- **Show** or illustrate the concept or issue by using an example from the world around you.
- **Explain** why this concept or issue is relevant to the study of psychology. In other words, why do psychologists study this issue or concept?

Exams
Overview
- You must wait for grades and comments on lessons before taking each subsequent exam.
- For your instructor’s exam guidelines, refer to the letter sent to you upon registration and the Exam Information sections in this study guide.
- Material from the self-study activities and the graded assignments will appear on the exams.
Choosing a Proctor/Scheduling Exams

All exams require a proctor.

Grading

Grades will be based on the total number of points earned. The arrangement is as follows:

<table>
<thead>
<tr>
<th>Component</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exams I, II, and Final Exam (100 points each)</td>
<td>300 points</td>
</tr>
<tr>
<td>10 Lessons (20 points each)</td>
<td>200 points</td>
</tr>
<tr>
<td>Total possible</td>
<td>500 points</td>
</tr>
</tbody>
</table>

Your letter grade is determined as a percentage of the total number of points it is possible to earn:

- 90% to 100% (450–500) = A
- 70% to 79% (350–399) = C
- 59% and below (below 300) = F
- 80% to 89% (400–449) = B
- 60% to 69% (300–349) = D

Of the 100 points possible for an exam, about 60% of the grade is based on multiple-choice, and the remainder is short to medium length essay.

The final course grade is issued after all submitted lessons and exams have been graded.

About the Course Developer

My name is Renea Sowder. Although I am not your course instructor, I developed this course for Independent Study in Idaho. I have a Master’s Degree in Education and Counseling and Human Services from the University of Idaho. I am a Licensed Professional Counselor and am a practicing clinician at Interventional Pain Consultants, in Lewiston, Idaho. I also have a partnership in Behavioral Health Solutions, a mental health clinic in Moscow, Idaho. We specialize in psychological and behavioral approaches to pain management, as well as treatment of trauma. However, abnormal psychology is really the core of all clinical practices.

My primary treatment approach combines cognitive-behavioral theories with somatic psychotherapy and body psychology. Working with chronic pain patients introduces many challenges, in that there are both physical complaints and emotional suffering. The suffering comes from the effects that persistent or chronic pain have on emotions, relationships, physical abilities, and overall quality of life. The majority of chronic patients experience depression, anxiety, and some have additional psychopathology. This is where the understanding of abnormal psychology is pertinent to my clinical practice.

As I mentioned earlier, abnormal psychology is the core of clinical practice. It is a discipline that constantly informs the work of the clinician. You will want to know, for example, what causes mood disorders, a disturbed sense of sexual identity, or personality dysfunction, and so on. However, there is a second point of interest that is a bit more introspective: the experience of the patient. What is it like to be inside the experience of a person with schizophrenia, depression, or a personality disorder? In a way, the study of abnormal psychology can enhance one’s own experience.

I hope the study of this topic will shed light upon the experience of others, and enhance your own self-discovery.

Sincerely,

Renea Sowder, M.Ed, LPC, NCC

Contacting Your Instructor

Instructor contact information is available in BbLearn.
## Assignment Submission Log

### Reading Sources:

**Texts:** Bernheim, Kayla F., *The Lanahan Cases and Readings in Abnormal Psychology*
Sarason, Irwin G., and Barbara R. Sarason. *Abnormal Psychology*

*Check your answers to the self-study questions with the Self-Study Answer Key in this study guide.*

<table>
<thead>
<tr>
<th>Lesson</th>
<th>Reading</th>
<th>Written Assignment</th>
<th>Date Submitted</th>
</tr>
</thead>
</table>
| 1      | *Abnormal Psychology*, Chapter 1, pages 2–43  
*Lanahan Cases* 1, 2, pages 1–11; Readings 3, 4, pages 12–18 | *Self-Study* | |
| 2      | *Abnormal Psychology*, Chapter 2, pages 44–85 | Multiple-choice/ and Essay | |
| 3      | *Abnormal Psychology*, Chapter 3, pages 86–125  
*Lanahan Cases* 48, 55, pages 339–359, 418–422 | *Self-Study* | |
| 4      | *Abnormal Psychology*, Chapter 4, pages 126–155 | *Self-Study* | |
| 5      | *Abnormal Psychology*, Chapter 5,  
pages 156–181  
Bernheim, *Lanahan Case* 9, pages 53–57; Reading 11, pages 64–75; Case 13, pages 84–89; Reading 16, pages 102–109 | Multiple-choice and Essay | |
| 6      | *Abnormal Psychology*, Chapter 6,  
pages 182–217  
*Lanahan Cases* 33, 35, pages 223–229, 234–242 | Multiple-choice and Essay | |

**It is time to make arrangements with your proctor to take Exam 1.**

<table>
<thead>
<tr>
<th>Lesson</th>
<th>Reading</th>
<th>Written Assignment</th>
<th>Date Submitted</th>
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</thead>
</table>
| 7      | *Abnormal Psychology*, Chapter 7, pages 218–235  
*Lanahan Cases* 14, 15, pages 90–101 | Multiple-choice and Essay | |
| 8      | *Abnormal Psychology*, Chapter 8,  
pages 236–269  
*Lanahan Cases* 6–8, 10, pages 35–52, 58–63 | Multiple-choice and Essay Project | |
<table>
<thead>
<tr>
<th>Lesson</th>
<th>Reading</th>
<th>Written Assignment</th>
<th>Date Submitted</th>
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</table>
| 9      | *Abnormal Psychology*, Chapter 9, pages 270–301  
*Lanahan Cases* 27–30, pages 183–203 | *Self-Study* |                |
| 10     | *Abnormal Psychology*, Chapter 10, pages 302–329  
*Lanahan Cases*, Chapter 9, pages 273–299 | Multiple-choice and Essay |                |
| 11     | *Abnormal Psychology*, Chapter 11, pages 330–371  
*Lanahan Cases*, Chapter 4, pages 114–152 | Multiple-choice and Essay |                |
| 12     | *Abnormal Psychology*, Chapter 12, pages 372–411  
*Lanahan Cases*, Chapter 5, pages 153–180 | Multiple-choice and Essay |                |

**It is time to make arrangements with your proctor to take Exam 2.**

<table>
<thead>
<tr>
<th>Lesson</th>
<th>Reading</th>
<th>Written Assignment</th>
<th>Date Submitted</th>
</tr>
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</table>
| 13     | *Abnormal Psychology*, Chapter 13, pages 412–439  
Bernheim, Chapter 8, *Lanahan Cases* 36, 37, pages 248–261; Reading 38, pages 262–272 | *Self-Study* |                |
| 14     | *Abnormal Psychology*, Chapter 14, pages 440–477  
*Lanahan Cases* 31, 32, pages 209–222; Reading 34, pages 230–233  
http://www.peele.net/lib/approach.html | Multiple-choice and Essay |                |
| 15     | *Abnormal Psychology*, Chapter 15, pages 478–513  
Bernheim, Chapter 10, *Lanahan Cases* 43–45, pages 300–320 | Multiple-choice and Essay |                |
<table>
<thead>
<tr>
<th>Lesson</th>
<th>Reading</th>
<th>Written Assignment</th>
<th>Date Submitted</th>
</tr>
</thead>
</table>
| 16     | *Abnormal Psychology*, Chapter 16, pages 514–549  
         | *Lanahan Cases* 46, 47, pages 321–332                             | *Self-Study*      |                |
| 17     | *Abnormal Psychology*, Chapter 17, pages 550–579  
         | *Bernheim, Lanahan Case* 4, pages 19–23  
         | *Self-Study*      |                |
|        | *Cases 51, 52, pages 368–403; Chapter 12, pages 411–444             |                   |                |

It is time to make arrangements with your proctor to take the Final Exam.
Lesson 1
Self-Study
Introduction to Abnormal Psychology

Lesson Objectives
After successfully completing this lesson, you should understand:
1-1 the problems encountered in attempting to define abnormal behavior;
1-2 how abnormal behavior may be defined in terms of adaptation;
1-3 the usefulness of the concepts of resilience and vulnerability;
1-4 the epidemiology of maladaptive behavior;
1-5 the changes in the ways the mentally ill have been treated;
1-6 the various explanations of mental illness that have been held historically; and also
1-7 the vocabulary of research design, with the ways research information is gained, and to know the advantages and drawbacks of various methods of study.

Reading Assignment
Abnormal Psychology, Chapter 1, pages 2–43
Lanahan Cases 1, 2, pages 1–11; Readings 3, 4, pages 12–18

Important Terms
<table>
<thead>
<tr>
<th>stigma</th>
<th>adaptive</th>
<th>maladaptive</th>
<th>risk factors</th>
<th>movements in psychology</th>
</tr>
</thead>
<tbody>
<tr>
<td>resilience</td>
<td>incidence</td>
<td>prevalence</td>
<td>statistical analysis</td>
<td>assessment studies</td>
</tr>
<tr>
<td>case studies</td>
<td>hypothesis</td>
<td>variables</td>
<td>vulnerability</td>
<td></td>
</tr>
</tbody>
</table>

Lecture
How do you decide on a definition of abnormal behavior? What criteria would you use to decide if a person is mentally ill? Is the term “mental illness” itself misleading, in that it implies that psychological disorder is akin to mental illness? These are the kinds of issues that we must grapple with in approaching the topic of abnormal psychology.

The authors of your textbook, Abnormal Psychology, take an interactional approach to abnormal behavior. People have problems because of interactions involving their own personal attributes and the situations and challenges they confront in life. Mental illness can be defined in terms of adaptive behavior; that is, abnormal behavior amounts to inadequate adaptive behavior. Two factors that determine how we adapt are vulnerability and resilience, concepts that are returned to throughout the text. These factors may influence whether we are more likely to show symptoms in response to stress (vulnerability), or adapt well to adversity (resilience).

Chapter 1 introduces the reader to the historical views of mental illness. In the beginning, there were two models used to explain mental illness: a supernatural model, which presumes that mental illness is the work of a spirit or demon, and an organic model, which presumes that mental illness is the product of a bodily process such as an imbalance of the humors. A third approach, the psychological approach, is of much more recent origin, dating back to the 1800s. In this approach, psychological processes such as defense mechanisms are thought to be the cause of mental illness.

To bring this all together, the text introduces the reader to various research methods. One source of research information comes from epidemiology, a field of medical science that deals with disease transmission and control; in this field, growth rates of particular disorders, as a function of various risk-
factors, are of interest. Other information comes from the source of case studies, or, correlational studies, which document the relationship between uncontrolled events, and experimental studies, where the investigator has control over the independent variable. Basically, the approach of the investigator, and therefore the type of study, depends on what you are trying to measure, and on whether the experimental control is either practical or ethical.

**Written Assignment (Self-Study)**

Check your answers with the *Self-Study Answer Key* in this study guide.

**MULTIPLE-CHOICE**

1. What is the primary focus of the field of abnormal psychology?
   a. group processes
   b. maladaptive behavior
   c. prevention programs
   d. pharmacological treatments

2. What focus of St. Augustine’s writings led him to be described as a forerunner of modern psychodynamic theories?
   a. the unconscious
   b. introspection
   c. sexuality
   d. aggression

3. Stigmatization can
   a. require extended hospitalization to deal with events that prevent recovery.
   b. lead to diminished self-esteem and increase pathology, but does not retard recovery.
   c. be either external, internal, or a combination of the two.
   d. increase self-esteem depending on if presenting factors are external or internal.

4. The year is 1949 and a patient at a mental hospital is being prepared for a lobotomy, which is a new surgical intervention for treating mental illnesses. Many staff members are unfamiliar with the procedure, so they are full of questions. When they inquire they are told that a lobotomy involves cutting the fibers that connect the
   a. left and right hemispheres.
   b. cerebellum and parietal lobe.
   c. frontal lobe and thalamus.
   d. limbic system and occipital lobe.

5. As a young boy, Jamar saw another child killed in a car accident. As an adult, he witnessed a terrible multi-car pileup and fire and found himself frozen and unable to respond to the desperate cries for help from the occupants who were trapped in the burning wreckage. Jamar’s inability to respond in this case may be due to his unique
   a. vulnerability.
   b. adaptation.
   c. resiliency.
   d. adjustment.
6. What term do we use for data that describe the frequency of a disorder at a particular point in time?
   a. prevalence
   b. experimental
   c. incidence
   d. longitudinal

7. When a psychologist describes behavior as maladaptive, this indicates that a
   a. problem exists but the person can maintain the ability to deal with stress.
   b. person may have a problem but coping strategies can still be implemented.
   c. problem exists and the person has vulnerability which led to problems in living.
   d. problem exists but the person is not in danger to others but may be a danger to self.

8. Double-blind studies are designed to reduce
   a. eye strain.
   b. side effects.
   c. expectation effects.
   d. animal research.

9. Plato believed that disturbed behavior grew out of conflicts between
   a. biological and psychological stressors.
   b. emotion and reason.
   c. individuals and the community.
   d. children and parents.

10. Adaptation is the ability to
    a. feel at peace with oneself.
    b. master the environment.
    c. learn the expectations of one’s social group.
    d. modify behavior in response to change.

ESSAYS (At least one-half page per question)

1. What are some factors associated with rates of mental disorder diagnoses?
2. What are the functions and characteristics of a good theory?