

LESSON 18

MENTAL DISORDERS AND THEIR TREATMENT

SUMMARY


Behaviour that is atypical or statistically uncommon within a particular culture or that is maladaptive or detrimental to an individual or to those around that individual. Such behaviour is often regarded as evidence of a mental or emotional disturbance, ranging from minor adjustment problems to severe mental disorder.

There are many factors which lead to mental disorders, including heredity, personality weaknesses, low stress tolerance, childhood experiences, stressful situations and inability to cope.

The situations, which the individual perceives difficult to deal with or cope with, are called stressors. Stress imposes certain demands on the individual which he or she finds excessive and difficult to deal with. Consistent failure in meeting these demands of the stressors creates mental stress in the individual.


Stress as a source of disturbed mental health

Hans Selye was the first person who used the term 'stress' in medical lexicon. He defined it as a non-specific response of the body to any demand on it. He conceptualized two categories of stress:



Eustress

- moderate and desirable stress
- E.g., when playing a competitive sport



Distress

- bad, excessive, irrational or undesirable stress

Appraisal of stress - Interpretation of the situation in relation to the coping resources available to the individual. These two factors (appraisal and coping resources) help in the process of adaptation. **Adaptation** is the process through which people manage their environment to maintain an optimum level of physical, psychological and social wellbeing.

Stressors

Any event or object in the environment that has potential to induce stress in the individual is called a stressor. Stressors are organized under the following categories:

- Major life events and changes
- Daily Hassles
- Chronic role strain
- Traumas

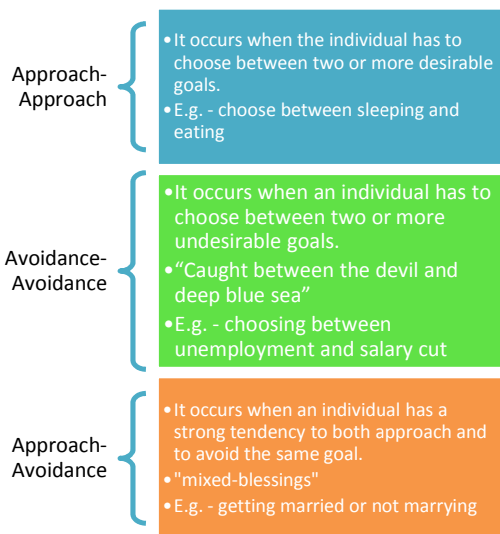
Some of the common responses to stressors are-

Common responses to stressors

- **Behavioural** - sleep disturbances, aggression, drug abuse etc.
- **Emotional** - anxiety, shame, depression etc.
- **Cognitive** - pessimistic view of self and others
- **Interpersonal** - competitiveness, lying etc.
- **Biological** - high BP, weak immune system etc.
- **Imagery** - images of helplessness, losing control etc.

Types of Conflicts and frustrations

An individual becomes stressed when he or she faces obstacles in reaching the goals. This often creates conflict and frustration in the individual. There are three types of conflict which the individual faces depending on the nature of goals and situation. These are:



Frustration –it is as experiential state resulting from either blocking

of needs and motives by some external forces which create hindrance and prevent the attainment of needs or by the absence of a desired goal.

Types of Mental Disorders

Two types of coping methods –

Problem-focused

- individual uses his/her intellectual resources to deal with stressful situation and often reach an effective solution.

Emotion-focused

- individual displays emotional behaviour in dealing with the stressful situation e.g. crying

Defense-oriented behaviours– when individual fails to deal with the stressors, they turn to defense-oriented behaviours. These behaviours do not deal with the situation, but are used methods to justify own actions.

Diagnostic and Statistical Manual (DSM) of mental disorders published by American Psychiatric Association mentions various types of mental disorders. The branch of psychology which deals with these disorders is called **Abnormal psychology**.

A. Disorders of Childhood

DSM-IV-TR deals with various kinds of childhood disorders usually first diagnosed during infancy, childhood, or adolescence. Some of them are-

Attention deficit hyperactive disorder (ADHD)- child has

problems in paying attention or is extremely over-active.

Autistic disorder - child is withdrawn, does not smile and has delayed language development.

B. Anxiety disorders

If a person persistently becomes fearful, apprehensive, and anxious without any appropriate reason you may call this person as having anxiety disorders. Different forms of anxiety disorder are – phobia, obsessive-compulsive disorder.

C. Mood disorders

In mood disorder, a person experiences these emotions for a long period of time in a restricted way, remains fixed at one emotion or fluctuates on the ranges of these emotions. It is of two types –

Depression – it is characterized by sadness, loss of interest and pleasure in routine activities, disturbances in sleep and appetite, being lethargic, feeling of guilt, worthlessness, helplessness, and hopelessness, difficulty in concentration, and negative thinking about self and others. If these symptoms remain for at least two weeks, the person can be diagnosed with depression.

Bipolar – it is characterized by alternating phases of depression and excitement or mania.

D. Psychosomatic and Somatoform disorders

Psychosomatic (Psycho-psyche, somatic-body) **disorders** are those

psychological problems which have physical symptoms but psychological causes, e.g. – high/low blood pressure, diabetes, hypertension.

Somatoform disorders are those disorders which are characterized by physical symptoms that do not have any known, identifiable biological causes.

E. Dissociative disorders

In this category of disorders, the personality of the individual becomes dissociated from the rest of the world. Different categories of this disorder are -

Dissociative amnesia - the person is unable to recall important personal information usually after some stressful episode.

Dissociative fugue- the person suffers from memory loss and assumes a new identity.

Depersonalization disorder - the person suddenly feels changed or different in a strange way.

Multiple personality disorder or **dissociative identity disorder** - several distinct personalities emerge in the same individual at different time.

F. Schizophrenia and other Psychotic disorders

Schizophrenia is characterized by disturbances in thought, emotion, and behaviour. Schizophrenics have incoherent thinking; faulty perception, disturbances in motor

activity, and flat or inappropriate emotions. They withdraw from people and reality; often into a fantasy world of delusions and hallucinations.

G. Personality Disorders

These are inflexible and maladaptive patterns of thinking and behaving. They have been classified in three clusters –

Clusters of PD
<ul style="list-style-type: none"> • Cluster A: Paranoid, schizoid, and schizotypal; characterized by odd or eccentric behaviour. • Cluster B: dependent, avoidant, and obsessive; characterized by anxiety and apprehension. • Cluster C: Antisocial, borderline, histrionic, and narcissistic; characterized by dramatic, emotional, or erratic behaviour.

Psychotherapeutic process

Psychotherapy is used to treat patients with mental disorders and it is often called “the talking cure” as help is provided through interpersonal contact. The person who designs these processes is called **clinical psychologist** or **psychotherapist**.

The medication to treat mental disorders can only be prescribed by a **psychiatrist** who is a medical doctor with further specialization in mental disorders.

The person who requires treatment is known as **client**.

The different approaches to psychotherapy are psychoanalysis, behaviour therapy, cognitive-behaviour therapy, client-centred therapy etc. The steps in psychotherapy include:



Steps:

- **Rapport formation** - building good working relation with the client
- **Taking Case history** - client's history from birth till current time is recorded. It involve information about family, occupation, social aspects etc.
- **Determination of problem** - it is done by using clinical tests and interview.
- **Therapeutic session** - the therapist conducts treatment plans and the progress is monitored.
- **Termination** - after the desired outcome is achieved, the sessions are terminated.

Process of Coping with stress

There are two types of coping strategies –

- Task-oriented coping** – it is based on an objective appraisal of the stressful situation on a conscious and rational level and taking a constructive course of action. It is divided into three categories:
 - **Attack** - individual directly confronts with the situation.

Withdrawal - individual admits defeat at the first instance if the situation is too difficult to handle or he/she has used inappropriate strategy.

Compromise - individual may accept a substitute goal if he/she feels that the original goal cannot be obtained.

- b. Defense-oriented coping**– it is not helpful because the person is not moving towards any solution, but only using methods to make himself/herself feel comfortable.

It is important to understand that in order to deal and cope effectively with stress, one should adopt a healthy life-style. By using positive thinking, emotions and actions, not only can we deal with stress in a better way, we will be far happier, healthier and more productive in our lives.

Evaluate yourself

1. What do you understand by “conflict”? Discuss its various types.
2. Write the different types of mental disorders.
3. What are the steps involved in psychotherapy?