# **Psychology of Adjustment**

## What Is Psychological Disorder?

• Any pattern of behavior that causes people significant distress, causes them to harm others, or harms their ability to function in daily life.

## **Anxiety Disorders**

## **Definition of Anxiety**

- A feeling of general apprehension or fear accompanied by predictable physiological changes.
- Two levels:
  - o Subjective feelings:
    - Dread
    - Fear
  - o Physiological responses:
    - Increased muscle tension
    - Shallow rapid breathing
    - Increased perspiration
    - Drying of the mouth
    - Sympathetic response

## **Major Symptoms of Anxiety**

- Feeling of anxiety coupled with avoidance behavior.
- Attempt to avoid situations that seem to produce anxiety.
- Most common of all psychological disorders.
- Perhaps as many as 25-30% of people will experience an anxiety disorder at some time in their lives.
- More common in women.

## **Four Anxiety Disorders**

#### 1. Generalized Anxiety Disorder (GAD)

- O Unrealistic, excessive, persistent worry.
- Chronic
- An intense anxiety that is diffuse.
- O Not brought on by anything specific.
- O No clear insight into what is causing the anxiety.

#### 2. Panic Disorder

- Recurrent, unpredictable, unprovoked onset of sudden, intense anxiety.
- Can last from seconds to hours.
- O No particular stimulus to bring it on.
- More acute than GAD.
- $\circ$  1.5-3.5% of the population.
- Age of onset is adolescence to mid-twenties.
- O Initial attacks often associated with stress.

- Often accompanied by depression (comorbid).
- $\circ$  High rate of suicide attempts 20%.

#### 3. Phobic Disorders

- A persistent and excessive fear of some object, activity, or situation that consistently leads a person to avoid it.
- O No real or significant threat involved.
- The fear is unreasonable.
- O Two main categories of phobic disorders:

#### ■ Specific Phobias:

- Animals
- Physical environment (storms, heights)
- Blood, injection, or injury
- Specific situations (tunnels, airplanes)

#### ■ Social Phobias:

 Persistent fears of social or performance situations in which embarrassment could occur (e.g., public speaking).

#### 4. Obsessive-Compulsive Disorder (OCD)

O An anxiety disorder in which a person suffers from obsessions and/or compulsions.

#### Obsessions:

- A persistent, recurring, involuntary thought, image, or impulse that invades consciousness and causes great distress.
- Common obsessions: concern with contamination, worry about whether they performed a certain act (e.g., turning off the stove or locking the door).

### O Compulsions:

- A persistent, irresistible, irrational urge to perform an act or ritual repeatedly.
- The individual knows such acts are irrational and senseless but cannot resist performing them without experiencing an intolerable buildup of anxiety, which can be relieved only by yielding to the compulsion.
- People with OCD realize their behavior is not normal, but they simply cannot help themselves.

## Common Obsessions and Compulsions Among People With Obsessive-Compulsive Disorder

#### • Obsessions (repetitive thoughts):

- Concern with dirt, germs, or toxins (40%).
- O Something terrible happening (fire, death, illness) (40%).
- O Symmetry, order, or exactness (24%).

### • Compulsions (repetitive behaviors):

- Excessive hand washing, bathing, tooth brushing, or grooming (85%).
- O Repeating rituals (in/out of a door, up/down from a chair) (51%).
- O Checking doors, locks, appliances, car brake, homework (46%).

## **Depression**

## **Symptoms of Depression**

- Vary from person to person.
- Two key signs are loss of interest in things you like to do and sadness or irritability.

## **Additional Signs Include:**

#### • Changes in feelings:

- Feeling empty
- O Inability to enjoy anything
- Hopelessness
- Loss of sexual desire
- O Loss of warm feelings for family or friends
- o Feelings of self-blame or guilt
- O Loss of self-esteem
- O Inexplicable crying spells, sadness or irritability

#### • Changes in behavior and attitude:

- General slowing down
- O Neglect of responsibilities and appearance
- Poor memory
- Inability to concentrate
- O Suicidal thoughts, feelings or behaviors
- Difficulty making decisions

#### • Physical complaints:

- O Sleep disturbances (early morning waking, sleeping too much, or insomnia)
- Lack of energy
- Loss of appetite
- Weight loss or gain
- Unexplained headaches or backaches
- O Stomachaches, indigestion or changes in bowel habits

## **Common Types of Depression**

#### 1. Major Depression

- O Symptoms may begin suddenly, possibly triggered by a loss, crisis, or change.
- O Interferes with normal functioning.
- Can continue for months or years.
- O It is possible for a person to have only one episode of major depression. It is more common for episodes to be long-lasting or recurrent.

#### 2. Dysthymia

- O People with this illness are mildly depressed for years.
- They function fairly well on a daily basis but their relationships suffer over time.

### 3. Bipolar Disorder

- O People with this type of illness change back and forth between periods of depression and periods of mania (an extreme high).
- O Symptoms of mania may include:
  - Less need for sleep
  - Overconfidence
  - Racing thoughts
  - Reckless behavior
  - Increased energy
- O Mood changes are usually gradual, but can be sudden.

#### 4. Seasonal Affective Disorder (SAD)

- O Depression that results from changes in the season.
- O Most cases begin in the fall or winter, or when there is a decrease in sunlight.

#### Things to Do

- Reduce or eliminate the use of alcohol or drugs.
- Exercise or engage in some form of physical activity.
- Eat a proper, well-balanced diet.
- Obtain an adequate amount of sleep.
- Seek emotional support from family and friends.
- Focus on positive aspects of your life.
- Pace yourself, modify your schedule, and set realistic goals.

## Things to Avoid

- Don't make long-term commitments or important decisions unless necessary.
- Don't assume things are hopeless.
- Don't engage in "emotional reasoning" (e.g., because I feel awful, my life is terrible).
- Don't assume responsibility for events which are outside of your control.
- Don't avoid treatment as a way of coping.

## **Helping a Depressed Friend**

- Be empathetic and understanding.
- Don't try to "cheer up" a depressed person.
- Avoid critical or shaming statements.
- Challenge expressions of hopelessness.
- Empathize with feelings of sadness, grief, anger, and frustration.
- Don't argue about how bad things are.
- Don't insist that depression or sadness are the wrong feelings to be experiencing.
- Don't become angry even though your efforts may be resisted or rejected.
- Advocate for their recovery from depression.
- Emphasize that depression is treatable.
- Seek consultation.
- Encourage them to seek help, go with them to the counseling center.
- Be supportive of counselor or doctor suggestions.

## **Stress**

#### **Stress Facts**

- The American Academy of Family Physicians estimates that 60% of the problems brought to physicians in the U.S. are stress-related.
- Many are the result of stress; others are made worse or last longer because of it.

#### **Health Problems with Excessive Stress**

- Coronary heart disease and stroke.
- Gastrointestinal problems such as ulcers.
- Impaired immune system.
- Insomnia, headaches.
- Backaches.
- Drug and alcohol use.

#### **How Stress Promotes Illness**

- Direct effect:
  - O Raises blood pressure.
  - O Impairs immune system.

#### • Indirect effect:

- O Less positive behaviors (exercise, healthy diet, lack of sleep).
- O More negative behaviors (drinking, smoking, unhealthy diet).

## **Psychotherapies**

## **Cognitive Therapy**

- Tries to teach people more positive ways of thinking.
- Attempts to replace negative thoughts with rational responses.
- **Internalized Sentences**: Talking to oneself using self-defeating thoughts. Personalize failure; overgeneralize, jump to conclusions.
- Thought Processes: Need to change thoughts from being internalized, stable, and global.
- **Rational-Emotive Therapy**: Albert Ellis (Aaron Beck), vigorously challenges people's illogical, self-defeating attitudes and assumptions to stop catastrophizing and awfulizing.

## **Humanistic Therapy**

- Tries to move one toward self-fulfillment and to take responsibility for their actions.
- **Client-Centered Therapy**: (Rogers), listening with genuine acceptance to help them begin to heal themselves (non-directive).
- **Existential Therapy**: Helps clients find meaning in existence. Gives them the power to control their own destinies.
- Active Listening: Echoing, restating, and seeking clarification of what a person expresses.
- **Unconditional Positive Regard**: Therapists must be warm and show unshakeable regard for their client. They must be genuine and honest.

## **Group Therapy**

• Helps patients express their problems and show that they are not alone in suffering from this illness.

## **Gestalt Therapy**

- Commonly used in institutions and prisons.
- Focuses on looking at an individual as a whole.
- Can teach individuals to be more self-assertive and to use more self-revelation.

## **Family Therapy**

- Usually used to help children and adolescents.
- Role-play, facilitate good communication.

## **Eclectic Approach**

- Combines one or more treatments to most effectively treat the client.
- More popular type of treatment.

## Effectiveness of Psychotherapy

- Good relationships with therapists seem to be more effective than the type of treatment used.
- Alternatives: Encounter groups, self-help tapes, books.