

A case study paper for psychopathology

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My subject is Keith a 15 year old African -American male, in the 10th grade at Overbook High School lives with his Mother, Rachel, A certified nurse's assistant and sister, Patricia age 10. Father, Harold returned to the family after a brief separation.

Statement of the Problem Keith has experienced an increasing fear of social situations for the past two years. It has been reported that Keith has always been a shy child. Who has been unable to participate in peer activities. Kith's younger sister is his only companion. His mother, the only financial support of the family is constantly working.

Keith was raised by different people.

When Keith was younger he cried a lot at daycare. He is studious about the presentation of himself. Keith has been hospitalized to alleviate his problems, family therapy is to be initiated and must obtain psychological and psychiatric evaluation. Diagnosis Axis I: 300. 23 Anxiety disorder w/Social Phobia II: WI . 09 Deferred Axis III: Anemia Axis Ib.

Problems with primary support group/ unstable parental relationship, father abdicated responsibility, mother's inability to be more nurturing.

Problems with social environment/ unable to relate to peers. Axis V: Current Global Assessment of Functioning 41 (Serious symptoms OR serious impairment in one of the following: social, occupational, or school tincturing. Criteria My subject, Keith meets the criteria for and anxiety disorder category of the AD5M ' V. ' Anxiety Disorders categorize a large number of disorders where the primary feature is abnormal or inappropriate anxiety.

Everybody has experienced anxiety. Think about the last time a loud noise frightened you and remember the feelings inside {Our body.

Chances are you experienced an increased heart rate, tensed muscles, and perhaps an acute sense of focus as you tried to determine the source of the noise. These are all symptoms of anxiety. They are also part of normal process in our bodies called the 'fight or flight' phenomenon. This means that your body is preparing itself to either fight or protect itself or to flee a dangerous situation.

These symptoms become a problem when they occur without any recognizable stimulus or when the stimulus does not warrant such a reaction.

In other words, inappropriate anxiety is when a person's heart races, breathing increases, and muscles tense without any reason for them to do so. Once a medical cause is ruled out, an anxiety disorder may be the culprit (Lavishly Online: The Virtual Psychology Classroom, 004). In the case of my subject Keith, he meets the required criteria for this disorder, specified in a social phobia; Keith experiences severe stress that enables him to communicate or socialize with his peers. Keith has missed a semester of school and has been unable to function in everyday life, he spends time alone watching television or reading a book.

Symptoms include either extreme anxiety or fear associated with the object or situation or avoidance.

To be diagnosed, the symptoms must be disruptive to everyday functioning (such as quitting a great job because you have to use an elevator)

(Lavishly Online: The Virtual Psychology Classroom, 2004). Characteristics ' The Primary Characteristics of social phobia is an irrational and intense fear that one's behavior in a public situation will be mocked or criticized by others.

People Ninth this disorder recognize that their fears are unreasonable, yet they cannot stop themselves from worrying that others are scrutinizing them. Although people with social phobia go to extremes to avoid such public situations, there are situations in Inch they have no choice; when this happens, they become crippled with anxiety' (Hailing, 2010). Etiology ' Often a traumatic event is the precursor for a phobia, which may or may not be at the conscious level (Lavishly Online: The Virtual Psychology Classroom, 2004). Recent interest in the topic of social phobia is leading to a greater understanding of the disorder as a biophysically phenomenon.

Parents of children with this disorder are more likely to be diagnosed with major depression. Biological theories focus on abnormalities in neurotransmitters such as serotonin and morphogenesis. Some researchers have found evidence of left -hemi-sphere dysfunction in people Ninth social phobia. This finding is important in light of the role of verbal processes in social interactions.

This contributes to the stress that people with social phobia nave interpersonal situations.

Treating people Witt social phobia involves helping them learn more appropriate responses to the situations they fear. Behavioral and cognitive - behavioral techniques, such as those used to treat people with specific <https://assignbuster.com/a-case-study-paper-for-psychopathology/>

phobias (Hailing, 2010). There may be a diathesis stress model, where Keith is concerned. But, we have no record of either of his parents being diagnosed with MAD(Major Depression Disorder).

The biological theory can still be applied if we did CAT scan to see if there are some issues with Kith's neurotransmitters.

The psychological and social factors can possibly be determined by the relationship that Keith has with his parents. Information on coloratura variations in social phobia is slowly emerging as this phenomenon becomes more apparent. I would believe that if we look at Sullivan, Adler and Ackerman. We may have some answers to why Keith is suffering with social phobia. Traditionally, psychodrama theory wouldn't be noninsured as a technique to use for this type of disorder.

But if we start at Childhood, my subject Keith is only and adolescent, which is between childhood and adulthood and examine the environment and social context of the family that Adler Mould suggest; or look at Sullivan theory of recurrent patterns of interpersonal situations and also investigate Ackermann theory of " dynamic psychosocial unit", Inch is the family ' s influence encourages the behavior of the identified patient; the consistent interaction between the biological, inner conflict, family unit and social environment that are affecting Keith (Goldenberg, Herbert; Irene, 2008).

Proposed Treatment Plan ' People with social phobia need to develop new ways of thinking about their Interactions with others (Hailing, 2010). "

Cognitive-Behavioral and Behavioral Therapy ' Cognitive-behavioral therapy (CB) is a form of psychotherapy that is very effective in treating social

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phobia. It has two components. The cognitive component helps people change thinking patterns that keep them from overcoming their fears. For example, a person with social phobia might be helped to overcome the belief that others are notational watching and harshly Judging him.

The behavioral component of CB seeks to help people become more comfortable with the situations that frighten them”. ‘ A key element of this component is exposure, in which people confront the things they fear. The exposure process generally involves three stages. First, a person is introduced to the feared situation. The second step is to increase the risk for disapproval in that situation so a person can build confidence that she can handle rejection or criticism.

The third step involves teaching a person techniques for opining with disapproval. In this stage, one is asked to imagine his worst fear and is encouraged to develop constructive responses to his fear and perceived disapproval” (Social Phobia(Treatment), 2002-2011). Biological therapy (medication) ‘ Several types of medications are used to treat social anxiety disorder. However, selective serotonin eruptive inhibit torso (Girls) are generally considered the states and most effective treatment for persistent symptoms of social anxiety.

Girls your doctor may prescribe include: * Appropriate (Paxar, Paxar CRY) * Serialize (Zloty) Fulmination (Luvs, Luvs CRY) * Florentine (Approach, Carafes, others) rhea serotonin and morphogenesis eruptive inhibitors (SINS) drug ventilating Foxier, Officer CRY) also may be used as a first-line therapy for social anxiety disorder.

To reduce the risk of side effects, your doctor will start you at a low dose of medication and gradually increase your prescription to a full dose. It may take up to three months of treatment for your symptoms to noticeably improve.

Other medication options (our doctor or mental health provider may also prescribe other medications for homonyms of social anxiety, including: * Other antidepressants. You may have to try several different antidepressants to find which one is the most effective and has the fewest unpleasant side effects. * Anti-anxiety medications. A type of anti-anxiety medication called benzodiazepines (Ben-zoo-did-AZ-uh-pens) may reduce your level of anxiety.

Although they often work quickly, they can be habit-forming. Because of that, they're often prescribed for only short-term use. They may also be sedating. Beta blockers.