

# Deviations in psychology and diagnostic statistical manual



**ASSIGN  
BUSTER**

## Abnormal psychology

### Task A

Two ways that abnormality can be defined are: a deviation from the social norm or a deviation from the ideal mental health.

A deviation from the social norms

The social norms are the expected behavior of people in the environment you are in. Social norms are not set in stone rules of behavior, but expected known behavior that is different to every social group or area an example of this is suggested by (McLeod, 2008) " For example, it is common in Southern Europe to stand much closer to strangers than in the UK." The socially expected behavior is important within a group as it outlines the behavior that is expected in this group but a deviation from what is expected in this group can cause other members of the group to feel uncomfortable, when referring to the previous example if someone was to behave in that manner in the UK it would cause a discomfort or suspicion of that person.

A deviation from ideal mental health

When looking at the deviation from ideal mental health we first look at what is considered to be ' normal'. This was outlined by Jahoda (1958) who outlined the six characteristics of ideal mental health these are outlined by (McLeod, 2008) " o Positive view of the self

- Capability for growth and development
- Autonomy and independence

- Accurate perception of reality
- Positive friendships and relationships
- Environmental mastery – able to meet the varying demands of day-to-day situations”

By using the definitions of these six attributes of ideal mental health the absence of one of these can indicate the possibility of abnormality.

### Problems in defining abnormality

We define abnormality within definitions like the two previously explained but defining them in this way comes with inconsistencies and problems. Firstly there are many types of social groups in our society. Within every group within society there are accepted unwritten rules of behaviour but they are not the same within each group, but an outsider to a group may have different learnt behaviours, where as a action may be considered normal by one group may not by another, so just because they have a different set of behaviours to that group this person may be considered abnormal but dose that necessary make them abnormal. When you think about how we pick up these behaviours and look at them closely we are always changing our behaviours through learning different acceptable interacting and the changing of ideas as we grow and learn. This problem is evident by looking at abnormality as a deviation from statistical norms as well as because if in fact if a large percentage of a group has an abnormality this would suggest that this is normal in statistical terms. The problems with the deviation for ideal mental health also raises a lot of questions as a person may have a lot of these attributes and functions well but say for example they find it hard to

reflect analytically on past events both negatively and positively to draw conclusions from that then it would be considered to be abnormal but this is not necessarily true as a lot of people tend to look at the negatives from a situation and may find it hard to find the positives does this really mean they are abnormal?

DSM- diagnostic statistical manual of mental illness

The DSM is used by psychiatrists in order to effectively diagnose the condition that the patient is suffering from. The DSM is the way that mental illnesses are diagnosed this is done through the 5 axis system these are: clinical disorders, personal disorders, general medical condition, psychosocial and environment problems and global assessment of functioning, axis 1, 2, 3 are the ones that must be used in order to make a diagnosis but other two axis can be used to build up a bigger picture. By using the axis of the DSM it can be used to build up a picture of what is happening and what may be causing the symptoms that they are displaying.

DSM IV TR and the DSM V

The DSM is constantly being updated in order to keep up to date with the best diagnosis for patients. The newest version of the DSM is the DSM V. some of the changes that has been made in this version include the change to autism related conditions in the DSM IV TR they were separate conditions e. g. autism , asperger's where as in the new edition there has been a change where they have been grouped together under the autistic spectrum, this is a good update as it allows for personalized support to those diagnosed with the condition where as in the past the straight cut diagnosis may have <https://assignbuster.com/deviations-in-psychology-and-diagnostic-statistical-manual/>

caused judgment or in some cases unaware of the condition so unable to support the condition whereas with this diagnosis they can work out the best individual support. Another change that has occurred in the DSM V is the change to eating disorders in the previous DSM binge eating was not included but now it has been included in order to give support. All eating disorders are different and the need for different support is important and allows for sensitive appropriate care to help that patient. Another of the changes is the addition of the hoarding disorder.

It is important that changes like the ones explained are made as development of the understanding of various conditions are constantly being improved so changes in the DSM ensures a valid guide of mental illness.

#### Evaluation of the DSM

The DSM is a good tool in diagnosing mental conditions but should only be used as a guide. It is important that it is updated regularly to ensure the validity of the diagnosis's that are being given, sometimes it is hard to distinguish between different conditions. A full and unbiased look at all the details of the person's condition should be assessed. In the past the validity of the DSM has been questioned especially in 1973 where a number of people acted out mental disorder to gain entry into a hospital but whilst in the hospital they behaved normally and said any symptoms had gone but they were still diagnosed with mental conditions, and then secondly the hospital staff were told there were test patients with no condition and people who have conditions were believed to have no condition. This brings the question of is the DSM reliable this is suggested by (Holah, unknown) “

Rosenhan claims that the study demonstrates that psychiatrists cannot reliably tell the difference between people who are sane and those who are insane." This is why updates to the DSM are important to ensure that diagnoses are valid. The only other concern about the use of the DSM is where a condition is not serious a diagnosis has the danger of labeling a patient which in society could have a negative action that could cause distress to the patient as in society a lot of conditions are stigmatized which needs to be actively stopped through knowledge. But as a guide it is a very useful tool to help patients and continued development can only help patients and help to them receiving correct support and treatment.

## **Bibliography**

holah , unknown . <http://www.holah.co.uk/study/rosenhan/>. [Online] Available at: <http://www.holah.co.uk/study/rosenhan/> [Accessed 20 February 2014].

McLeod, S., 2008. Simply Psychology. [Online] Available at: <http://www.simplypsychology.org/abnormal-psychology.html> [Accessed 18 February 2014].