

## Psychology – Psychopathology – Anxiety Disorders

- In anxiety disorders, all symptoms are due to activation of the sympathetic nervous system.
- High physiological arousal is shown in sufferers of anxiety disorders.

There are 11 anxiety disorders listed in the DSM IV:

- Agrophobia
- Specific phobias
- Social phobias
- Generalised anxiety disorder
- Specific anxiety disorder
- Panic attacks
- Anxiety due to illness
- Anxiety due to substance abuse / medication
- Obsessive compulsive disorder
- Acute stress syndrome
- Post traumatic stress syndrome

Phobias (unreasonable and irrational fears):

- Agrophobia (fear of open spaces)
- Social phobias (public speaking)
- Animal type (fear of spiders)
- Natural environment type (fear of heights)
- Situational type (fear of flying)
- Blood/injection/injury type (fear of injections)

There appears to be a relationship between age and phobia development, i.e. when experiences occur. Therefore, are phobias behavioural in nature?

### **Biological Explanations**

Evidence for genetic explanation:

- Twin studies ✓ about 30% concordance
- Family studies ✓ about 30% concordance
- Adoption studies ✗ no studies published, therefore treat above cautiously

This suggests there may be something biological there but unlikely.

### **Behavioural**

- Avoidance-Conditioning Model
  - Watson and Rayner's study is said to provide complete explanation of this model in Little Albert who was conditioned to fear white rabbits, generalised to anything white and fluffy.
  - A conditioned response to a neutral stimulus is the root of all phobias. Fear is then generalised.
  - Avoidance of phobic object / situation works through operant conditioning – by avoiding the phobic object you feel better, the reward.
  - Criticisms:
    - ⚠ Not everyone can remember a traumatic event that caused the phobia
    - ⚠ Reliability of Watson and Rayner's study is questionable after unsuccessful reproduction
    - ⚠ "Preparedness" – maybe the model works for certain phobias due to humans being inherently afraid of certain things - snakes, loud noises.
    - ⚠ Does not explain social phobias

- Modelling
  - Vicarious learning – Bandura’s Social Learning Theory
  - The model must have: higher status and usually the same sex
  - Parental reactions
  - Studies supporting:
    - Mineka:
      - Adolescent rhesus monkeys
      - Parents afraid of snakes
      - Adolescents exposed to parent’s fear six times
      - After the six times, the monkeys’ responses were identical to their parent’s responses.
    - Follow-up study:
      - Clips were shown on-screen to rhesus monkeys of fear responses in monkeys of crocodiles, flowers, rabbits and snakes
      - The monkeys showed the fear after being exposed to the clips
      - The fears for rabbits and flowers quickly dissipated – evidence for the preparedness theory

 Not everyone can remember their parents being afraid of something and then acquiring said fear.

### **Cognitive Explanations**


A person is predisposed to focus on negative things and to anticipate negative things in the future.

 Treatment is useless for certain phobias – they know it is an irrational fear already.

Social phobias are effectively treated with cognitive theories; social phobics have been found to be more concerned with evaluation of others, more reliant on others for self esteem.

### **Psychoanalytic Explanations**

- Freud:
  - Phobias arise from repressed id impulses
  - Repression is an ego-defence mechanism
  - Id impulses either conflicts or desires = FEAR
  - These impulses arise during childhood:
    - Maternal deprivation
    - Oedipus complex
    - Electra complex
    - Jealousy
    - Rivalry
  - Displaced onto symbolic object / situation:
    - Snakes – fear of penis
    - Birds – mobile above head, maternal deprivation
    - Spiders – sexual abuse, unwanted crawling over body
- Arieti
  - Forget id impulses – not important
  - Related to Erikson’s psycho-social stages
  - Trust versus mistrust
  - A loss in the belief that parents will always look after you
  - Ego displaces mistrust onto phobic object / situation

 Evidence reliant on clinical case studies makes generalisation difficult

 Lacks falsifiability

### **Most Successful Treatment**

- Drugs / relaxation exercises to calm down;
- Counselling – psychoanalytic (group therapy), cognitive behavioural;
- Behavioural – systematic desensitisation