

Preface

The United States spends more money on mental disorders than on any other health condition, with heart disease and cancer trailing far behind (Roehrig, 2016). As important as that statistic is, it is not the main reason that it is incumbent upon us to understand more about these conditions. We all have friends or family members who have battled with mental health in some way. It is therefore important to learn what we can about mental difficulties and disorders, including how they are identified, how they develop, how they can be treated, and, ultimately, how they can be prevented.

As in the previous editions of *Abnormal Psychology: Clinical and Scientific Perspectives*, this seventh edition was prepared with the goal of producing a readable, useful, well-referenced, and inexpensive resource that could serve as a primary text for students in undergraduate courses in abnormal psychology or psychopathology. It provides a detailed (and critical) overview of the official system for classifying mental disorders—the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*—describing the many ways in which the *DSM-5* differs from its predecessors. As this text reviews both past and present etiological theories, treatment approaches, and their supporting research, it also encourages students to think critically and to evaluate the strength of evidence.

This seventh edition incorporates several features, including:

- Thorough description of *DSM-5* classification with *DSM-5-TR* (“Text Revision”) changes, including frequent examples of diagnostic criteria and differential diagnosis
- Extensive attention to diagnostic reliability and validity, emphasizing the strengths and limitations of the *DSM* system
- Coverage of continued controversies within psychiatry and psychology, and their relevance to a biopsychosocial perspective on mental disorders
- Over 400 new and updated references from the professional literature
- Expanded glossary and index
- End-of-chapter reviews, key terms, questions for study, and pop quizzes

It is also available in a variety of formats, ranging from eBook to bound textbook.

The original framework of Barclay Martin’s *Abnormal Psychology: Clinical and Scientific Perspectives* reflected the substantial changes taking place in clinical psychology and psychiatry in the early 1980s. At that time, a new diagnostic system for psychopathology (the *DSM-III*) had appeared, and Martin recognized the implications of the shift from a more subjective and analytic era in abnormal psychology to the less theory-dependent, more objective *DSM-III* model. The value of a science of clinical psychology and psychiatry was becoming apparent, and issues such as diagnostic reliability, validity, and empirical outcome began to drive the classification and treatment of mental disorders.

The present text, built on that framework, reviews the extensive subsequent developments in research and practice since the *DSM-III*: In the past 43 years, the *DSM* has undergone five revisions—new diagnostic categories have been added, others have been proposed, and still others have been modified or removed. Thousands of research studies have been published, exploring the biological, genetic, social, cognitive, and behavioral foundations of psychopathology; the effectiveness of various psychological and biological interventions; the incidence of disorders among different populations; and the usefulness of different classifications. A strongly biomedical model of abnormal behavior became dominant within psychiatry, enabling the proliferation of pharmacological interventions for nearly every *DSM*-identified condition. Still, many of the questions about etiology and treatment considered in Martin’s text remain unanswered. In most cases of mental disorders, no biological markers or laboratory tests can identify or confirm any *DSM* diagnosis. Many contributory factors have been identified, but the specific etiologies of most mental disorders remain elusive. Pharmacological therapies are often helpful, but for many conditions, psychological interventions have been developed that are at least as effective as medication, with fewer side effects and lower risk of relapse.

The history of abnormal psychology contains many conceptual blind alleys, mistaken assumptions, and unsupported claims. In such an environment, there is always a danger that pseudoscience can masquerade as an acceptable alternative. There are scores, if not hundreds,

of competing therapies for common disorders such as depression and anxiety. The high level of nonspecific (or placebo) response in treatment increases the risk of promoting ineffective psychotherapies and medications, fostering conceptual confusion. Adopting a scientific perspective does not prevent such errors, but it does allow us to eventually recognize them. The current state of the science reminds us that we have often been too quick to oversimplify and too slow to think skeptically about both causes and treatments. Inevitably, mental disorders are defined within a social and cultural context, diagnosed within an interpersonal behavioral exchange, and treated within a biological-environmental interaction; they are *biopsychosocial* developments, not usefully reduced to their cellular basis. Therefore, I have endeavored to avoid the use of the common terms *mental illness* or *mental disease*—which may imply that we know more than we actually do; instead, I refer to these conditions more accurately as *mental disorders*. It should be noted that this informed skepticism does not discount the very real distress and disability associated with many *DSM* conditions, nor the importance of prompt, effective treatment.

In the text's coverage of these important issues, I have given preference to reviewing the more empirical and evaluative publications; as a result, articles from biomedical science, neuroscience, behavioral psychology, and cognitive psychology are overrepresented in the bibliography. I have highlighted research involving direct treatment comparisons or the use of randomized

controlled trials to best describe empirical support for particular therapeutic interventions. I readily admit to a bias in favor of the scientific method over all other approaches in the field. However, I also accept that outcomes and consequences drive the selective process in science, and I realize that what may appear to be today's truth may be tomorrow's folly. We can expect continued shaping and revision of the content and structure of our diagnostic system, as well as our treatments; some investigative pathways will prove fruitful, and others will not. I hope to have correctly reported the current state of affairs within this captivating subject, without minimizing the many disputes, controversies, and unresolved issues that exist.

Dr. Barclay Martin, the author of the original editions of this textbook, passed away in 2018. I have retained, where noted, some of his original text for the seventh edition, especially in sections reviewing the early history of the field, the theories of Freud, psychoanalytic perspectives on various disorders, a case study of Charles Manson, and observations of unusual conditions and cultural practices in the use of psychoactive substances across time. Martin's observations remain interesting and useful contributions to this fascinating area of human behavior, even after several decades.

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Supplements & Resources

Instructor Supplements

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