Lecture Notes

Anorexia Nervosa

The clinical criteria for a diagnosis of anorexia nervosa are:

- Refusal to maintain body weight normal for age and height.
- An intense fear of becoming overweight.
- A distortion of body image
- In women, a cessation of menstrual cycles for at least 3 months.

Incidence rates
My most recent source is:

An estimated point prevalence of 0.5% in young women
"point prevalence" is the rate right now, at this point

That is just anorexia. A patient might have
An "eating disorder not otherwise specified" (EDNOS)
That is more common 2-5% of young women

At least 5% mortality rate

Rates have risen over the last 40 years.
Etiology (What are the causes?)

TWO CAUTIONS

1. We are not talking about you (etc)
2. Contributing factors are not the same as flawless predictions of disease.

Characteristics of the girl (recall that the typical patient is female):

Characteristics of the family:

Societal pressures:
   A society obsessed with eating and with thinness.
   Barbie, Miss America, and James Bond's girlfriends
   magic cures for imperfections
   The superwoman myth

Biological factors

How might all of this conspire to produce anorexia?
   Perhaps as a trap that the girl falls into.

Treatment

"simple" stories have not worked well.
   1) Psychoanalytic (and other talk therapies)
   2) Behavior Modification
   3) It is all society's fault.
   4) Have a pill

Hybrid approaches

Is there a role for the family?

Prognosis:
Bulimia Nervosa

Incidence rates

10-20% of college age women have some experience with bulimia.
About 30:1 female
1% point incidence

Etiology (What are the causes?)

Treatment

Prognosis:

Lecture 23: Date Rape

The Abstract: In this lecture, we look at date rape (also called acquaintance rape). It is distinct from what is sometimes called "blitz rape" – the stranger in the bushes variety of sexual assault. A distinguishing characteristic of date rape is that it is a behavior that we consider pathological (and/or criminal) committed by people who do not appear to be psychopathological. Here we want to know how abnormal behavior can arise from the normal mind. In this case, I will propose a story that combines 1) the power of narrative thought – the stories we tell ourselves, 2) aspects of operant conditioning, and 3) a bit of evolutionary psychology into another "successful disaster".

Lecture Notes

Hippolyta, I wooed the with my sword,
And won thy love doing thee injuries
But I will wed thee in another key,
with pomp, with triumph, and with reveling.
    Shakespeare, Midsummers Night's Dream 1:1:16-19

A case literally ripped from the headlines

What are the chances that she is thinking:
    I think I will get drunk out of my mind and engage in a variety of sexual acts with six guys while I slip in and out of consciousness.

What are the chance that he is thinking
    I will take her home and force or coerce her into having sex with all my roommates.
Lots of questions – most of which we cannot address

Today's basic question

Given that this isn't the way she, he, or we want things to work out
HOW does it happen that the guy next door finds himself accused of sexual assault?

gender-specific: 95% of cases involve male assaults on females.

There are biological, psychopathological, and sociological accounts.
   Surprise: None of them work by themselves

NOTE (again): Explaining a behavior is not the same as condoning a behavior.

Incidence

From Koss et al (1987)
25% of women report intercourse because "they were overwhelmed by a man's continual arguments and pressure"

Think about being "overwhelmed by a man's continual arguments and pressure"

sexual relations are different from other relations

Etiology

A bit of evolutionary psych review
   What do men want? What do women want? And when?

risk factors
   who pays (really?)

   who drives (really?)

   What is a risk factor anyway.

heavy drinking (The Risk Factor)
   (50-75% incidence in various studies)

   "The superego is soluble in alcohol"
      says Franz Alexander (early US Freudian)

   "Better" living through chemistry
      now we can improve on merely getting drunk

      flunitrazepam (Rohypnol) =The date-rape drug (there are others)

      Alcoholic beverages potentiate the drug effects.

What you do at time A is a risk factor for time B

Miscommunication (The Other Really Big Risk Factor)
Theories

Psychopathology: These guys are sick.

Evolutionary Psych: All guys are sick (a gender-wide pathology?)


The argument

Is there any evidence for this?

Feminist accounts.

A way to induct younger men into masculine roles?

The role of pornography (see Katherine McKinnon)

A "male confidence racket" where "good males" protect women from "bad males".

A hybrid theory (and review for the final)

Sexual behavior is about narrative thought

Where does the script come from?

How is the dialog?

The power of conditioning

The evolutionary psych backdrop

Consider the ambiguous "no".

Remember variable ratio schedules of reinforcement

Remember shaping?

A route to another successful disaster

And then?