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Psychomythology of Psychopathology: Myths and Mythbusting in Teaching Abnormal Psychology

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Abstract

Background: A great amount of information is presented to psychology students through various mediums, often leading to misinformation and believing inaccurate psychological myths. **Objective:** We conducted two studies to examine psychomythology of psychopathology and whether mythbusting may be an effective pedagogical tool. **Method:** In Study 1, a total of 251 participants were recruited and asked about psychology myths they believed by using the Myths of Abnormal Psychology Questionnaire (MAP). In Study 2, a total of 46 students across two sections of abnormal psychology courses were asked about psychological myths they believed at the onset of class and at the end of class using the MAP. These students also were provided with an educational mythbusting intervention throughout the class. **Results:** Participants endorsed several myths of psychopathology and indicated that the greatest sources of their understanding came from instructors, the internet, movies, and mythbusting led to a decrease in myth endorsement. **Conclusion:** Students enter abnormal psychology courses believing several inaccurate myths and mythbusting appears to be a viable tool to address these misconceptions. **Teaching Implications:** Mythbusting can be implemented within abnormal psychology courses as an an engaging and effective teaching tool, as well as a means to model scientific thinking.

Keywords

abnormal, psychopathology, psychomythology, misconceptions, mythbusting

Information can easily be accessed and passively consumed. As students are inundated with messages from a variety of sources they are left to sift through fact and fiction (Lilienfeld et al., 2010). A great amount of misinformation can be found related to psychology leading to psychological misconceptions, referred to as psychomythology (Lilienfeld et al., 2010). Examples include believing that people with psychological disorders are more likely to injure other people or that schizophrenia means having multiple personalities. Psychomythology and information grounded in psychological science compete for students' attention and influences their understanding of the world. Scientific misconceptions tend to be pervasive, passing as well-corroborated research, and affect how people think about the world (Hammer, 1996). Scientific misconceptions are found in psychology as well, with many undergraduate students holding misconceptions about the discipline (Furnham, 2018; Furnham & Hughes, 2014; Gaze, 2014; Kowalski & Taylor, 2009, Lilienfeld et al., 2010; Taylor & Kowalski, 2004). McCutcheon and colleagues (1993) stated that "dating back to at least the 1920s there has been some concern about the misconceptions that students bring with them when they enroll in their first class in psychology" (p. 243). Psychological misconceptions are pervasive and can be costly for students' understanding and can have direct consequences on students' grades (Kuhle et al., 2009). Furthermore, misunderstandings of psychological disorders that result in stigma can be a barrier to people seeking mental health services (Corrigan et al., 2014).

While psychomythology can be detrimental to understanding, challenging these myths can be used to augment students' understanding of psychological science. Popper suggested in 1963, which was reiterated by Lilienfeld in 2010, that teaching psychological science begins by addressing myths and misconceptions, or by the process of "unlearning incorrect knowledge as learning correct knowledge" (¶5). Thus, various formal measures have been created to assess students' psychological misconceptions (Basterfield et al., 2020; Bensley & Lilienfeld, 2015; McCutcheon, 1991). Additionally, several psychology textbooks have adopted this pedagogical framework for teaching psychological science, the process of assessing myths and

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misconceptions followed by mythbusting (Curtis & Kelley, 2020; Erber & Szuchman, 2014; Hupp & Jewell, 2015; Jewell et al., 2015; Lilienfeld et al., 2010). Instructors are even encouraged to model, in the unlearning process, how they are not immune to bias and misconceptions by discussing erroneous myths they believed in the past (Lilienfeld, 2010). Further, instructors can illuminate the process of science through teaching activities that use myth-checking, inviting students to critically evaluate the development of various myths and reasons that an instructor may have abandoned or modified the use of a teaching activity (Curtis & Kelley, 2019).

Part of myth-assessment is to examine the sources of the misconceptions along with the content. Lilienfeld and colleagues (2010) suggested 10 sources of psychological myths (e.g., word-of-mouth, misleading film, exposure to a biased sample). Taylor and Kowalski (2004) found that a number of participants could not remember where they learned the information but of those sources recalled were: personal experiences, media, classes, and readings. Among those sources of influence, media was responsible for the lowest accuracy (Taylor & Kowalski, 2004). While efforts to examine sources of influence have been made, it has only been researched with first-year introductory psychology (Taylor & Kowalski, 2004). Learning to examine the sources of psychological myths is an important tool in students' mythbusting kit (Lilienfeld et al., 2010). Discerning sources of influence can advance learning and scientific thinking by encouraging students to critically evaluate whether the source is reputable and scholarly or whether it may be solely designed for entertainment. Lilienfeld and colleagues (2010) suggested that by becoming aware of the "major sources of psychomythology, you'll be far less likely to fall into the trap of accepting erroneous claims" (p. 9).

Mythbusting has gained popularity in the public through the show *Mythbusters*, where Jamie Heineman and Adam Savage (2007) conduct various experiments that test beliefs and folklore found across a wide range of topics. In their textbook, Lilienfeld and colleagues (2010) promote learning about psychology through mythbusting, confronting 50 myths found across psychology. Some of the research on mythbusting using myth-debunking campaigns has revealed a twofold favorable outcome: reducing introductory psychology students' misconceptions and higher knowledge scores for upper level psychology students who participated in a mythbusting activity (LaCaille, 2015).

Attention to myths and misconceptions related to psychology has been explored within introduction to psychology courses (Lilienfeld et al., 2010), however, myths related to abnormal psychology have received much less attention. Abnormal psychology courses are popular courses within undergraduate curriculum (Pearlman & McCann, 1997). In efforts to address and challenge myths found in abnormal psychology courses, Curtis and Kelley (2016) authored an abnormal psychology textbook that focused on mythbusting. Curtis and Kelley (2020) discussed various myths within abnormal psychology courses, sources of misinformation (e.g., anecdote and movies), and mythbusting strategies. Movies and anecdotal experiences have been suggested as sources of misinformation in abnormal psychology courses, and movies may contribute to psychomythology by exaggerating features of disorders or completely misrepresenting mental health altogether (Curtis & Kelley, 2020; Lilienfeld et al., 2010; Wedding & Niemiec, 2014). However, people often report that movies have a stronger impact on others than themselves, which has been deemed the *third-person effect* (Bushman, 2018; Davison, 1983). The *third-person effect* can be consequential to learning about psychopathology if students assume that movies only influence others' understanding and fail to recognize how it could be a source of error or misinformation.

The research on psychomythology of psychopathology has been scant. One recent study recruited 113 students in an online abnormal psychology course and randomly assigned half of them to partake in a myth-debunking poster assignment (LaCaille et al., 2019). The students who were in the myth-debunking group were assigned to create a poster over one of five mental health myths (e.g., suicide and electroconculsive treatment; LaCaille et al., 2019). Students who created a myth-debunking poster within their course discussion forum demonstrated significantly greater accuracy of psychological knowledge (LaCaille et al., 2019). More recently, researchers constructed a 105-item questionnaire, the Abnormal Psychology Misconception Questionnaire (APMQ) to examine prevalence of mental health myths endorsed by students in introductory psychology courses (Basterfield et al., 2020). The researchers found a range of myth endorsement, from 3% to 96% of participants endorsing myth items across both versions of the APMQ (Basterfield et al., 2020). Basterfield and colleagues (2020) examined misconceptions held by students enrolled in introductory psychology courses, not students enrolled in abnormal psychology courses or those who have taken several psychology courses. They suggested that future researchers ought to examine "abnormal psychology misconceptions to upperclassmen in psychology" (Basterfield et al., 2020, p. 14). Though literature has documented various myths found in psychopathology, several myths have not been empirically explored until recently (e.g., Basterfield et al., 2020; LaCaille et al., 2019). The current studies were designed to address the dearth of research in psychomythology of psychopathology by exploring the beliefs students hold and whether implementing mythbusting pedagogy could be an effective teaching strategy.

Study 1

The purpose of Study 1 was to examine psychomythology of psychopathology. Specifically, we examined the (a) sources of understanding abnormal psychology, (b) perceptions of psychopathology, and (c) myth endorsement. The first research question was whether students would indicate that film/movies and personal experiences were the most influential sources of information about abnormal psychology content, in line with suggestions of scholars (Curtis & Kelley, 2020; Lilienfeld et al., 2010; Wedding & Niemic, 2014). Further, we wanted

to know whether students would indicate others' understanding of mental disorders is influenced by movies much more than their own understanding, deemed the *third-person effect* (Davison, 1983). The second research question was regarding the suggestion from Curtis and Kelley (2016) that some disorders are more socially acceptable or endorsed more readily (e.g., OCD) than others (e.g., schizophrenia). Some sayings regarding psychological disorders may reflect protrayals within film and lead to stogma. The fear of stigma discourages individuals with schizophrenia from disclosing their diagnosis with others (Dickerson et al., 2002). Lastly, we wanted to explore psychomythology of psychopathology by asking students to indicate whether a series of statements about abnormal psychology were true or false. As this study was conducted prior to knowledge of Basterfield and colleagues (2020) study, the APMQ was not utilized and comparisons of myths were not intended to be made.

Method

Participants

A total of 253 students were recruited from the psychology department research administration system at a Southwestern university. Through the research administration system students could voluntarily choose to participate in studies for class credit or extra credit. Two participants did not answer any of the questions beyond demographics and were omitted from analyses, resulting in 251 participants. Participants ranged in age from 18 to 48 (M = 19.97, SD = 3.40) and most identified as female (74%). Participants represented a variety of classifications based on credit hours completed: 0–29 (46%), 30–59 (30%), 60–89 (12%), and 90–120 (13%). Participants indicated a variety of racial/ethnic identities: White/Caucasian/European American (47%), Hispanic/Latinx (31%), African American (10%), Asian (5%), Native American (1%), and dual or mixed heritage (6%). Of the 251 participants, 208 (83%) reported that they had not taken an abnormal psychology course nor were they currently enrolled in the course.

Measures

The current study used two instruments: a demographics questionnaire and the Myths of Abnormal Psychology Questionnaire (MAP; Curtis & Kelley, 2021). The demographics questionnaire asked participants to provide information about age, sex, ethnicity, education, and whether they have enrolled in an abnormal psychology course. The MAP is a 60 item questionnaire developed by the researchers and based off of myths discussed by Curtis and Kelley (2016) and Lilienfeld and colleagues (2010). The MAP initially asked participants to rate 10 sources of learning about abnormal psychology (e.g., movies, memory), sources discussed by Lilienfeld and colleagues (2010). The 10 sources demonstrated high internal consistency (Cronbach's $\alpha = .85$). Subsequently, participants were asked 14 questions about various perceptions of abnormal psychology (e.g., I have said to others, "it's just my ADHD."), whether they would endorse some sayings over others, and their confidence about their knowledge of abnormal psychology by using a Likert-type rating scale (1 = *Strongly Disagree* to 7 = *Strongly Agree*; Cronbach's $\alpha = .69$). Lastly, the questionnaire provided 35 myth items and asked participants to indicate whether these items were true or false. All items were myths with *false* as the correct response for each item. One item was removed from analyses due to the item's ambiguity, reading as opinion rather than fact (i.e., most people with disorders rely on drugs to fix their problems). Internal consistency of the myth items was acceptable (Cronbach's $\alpha = .84$). Lastly, participants were asked to identify up to three myths that they have heard about related to abnormal psychology.

Procedure

The Institutional Review Board approved the study. The study was conducted from August 2017 through April 2018 at a southwestern university. Participants completed the study online through a secure research database and able to receive course credit or extra credit. Once participants selected the link to the study, then they were presented with an informed consent. Then, participants were asked to complete the demographic questionnaire and the MAP.

Results

To examine our first research question, sources of understanding abnormal psychology was analyzed by using a mixed factorial multivariate analysis of variance (MANOVA). The repeated measures variable was the source of informational influence (e.g., movies, personal experiences) and whether students had previously taken abnormal psychology as a between groups factor. Due to the sphericity not being met, a Greenhouse-Geisser correction was applied (Field, 1998). A significant main effect was found across sources of information, $F(5.75, 1293) = 31.20$, $MSE = 2.46$, $p < .001$, $\eta^2 = .12$. Thus, 12% of the proportion of variance was accounted for by the sources of information (Lakens, 2013). Cohen (1988) suggests a small proportion of variance is indicated at approximately $\eta^2 = .009$, medium is indicated at approximately $\eta^2 = .058$, and large is indicated at approximately $\eta^2 = .138$. Additionally, there was a significant interaction across sources and between groups (taken abnormal psychology), $F(5.75, 1293) = 2.58$, $p = .019$, $\eta^2 = .01$. One percent of the variance was accounted for by whether students had taken abnormal psychology. Essentially, students who had taken an abnormal psychology course indicated the greatest amount of influence from informational sources (Table 1). Movies were reported to be a greater source of influence than several other sources, but not more than instructors and the internet (see Tables 1 and 2). To explore the *third-person effect*, a paired samples *t*-test was conducted comparing the influence of movies on self and others, which revealed a statistically significant difference, $t(249) = 15.70$, $p < .001$, $d = 1.26$. Thus, a large effect size was found for the influence of movies between

Table 1. Study 1 Descriptive Statistics of Informational Sources.

Informational Sources	Taken Abnormal Psychology	*M*	*SD*	*n*
From others	Yes	5.03	1.17	38
	No	4.60	1.64	189
	Total	4.67	1.57	227
Movies or TV shows	Yes	5.34	1.17	38
	No	5.08	1.40	189
	Total	5.13	1.36	227
News or Media	Yes	5.21	1.17	38
	No	4.78	1.42	189
	Total	4.85	1.38	227
Personal experiences	Yes	4.84	1.41	38
	No	4.07	1.80	189
	Total	4.20	1.76	227
It is what comes to mind easily	Yes	4.11	1.37	38
	No	3.65	1.48	189
	Total	3.73	1.47	227
Memory	Yes	4.26	1.61	38
	No	3.75	1.53	189
	Total	3.83	1.55	227
Internet	Yes	5.53	1.18	38
	No	5.33	1.41	189
	Total	5.36	1.37	227
From a professor/teacher/ authority in the field	Yes	6.26	1.00	38
	No	5.26	1.66	189
	Total	5.43	1.62	227
Textbooks	Yes	5.95	1.335	38
	No	4.88	1.742	189
	Total	5.06	1.725	227
Scholarly books/articles	Yes	5.74	1.427	38
	No	4.51	1.818	189
	Total	4.72	1.814	227

self and others (Lakens, 2013). Participants rated other people's understanding of mental disorders as more influenced by movies ($M = 5.58$, $SD = 1.35$) than their own understanding ($M = 3.65$, $SD = 1.69$).

To investigate the second research question pertaining to whether some sayings about disorders were endorsed over others, a repeated-measures analysis of variance (RANOVA) was conducted on three sayings (e.g., "it's just my ADHD") with taken abnormal psychology as a between groups factor. A significant effect across endorsement of sayings about disorders was found, $F(1.83, 448) = 37.23$, $MSE = 2.30$, $p < .001$, $\eta^2 = .13$ (Greenhouse-Geisser correction). Thus, 13% of the total variance can be accounted for by participants endorsing some sayings over others. There was no significant difference between groups, $F(1.83, 448) = 0.83$, $p = .43$, $\eta^2 = .003$. Participants indicated saying "I'm so OCD" ($M = 3.35$, $SD = 2.01$) and "It's just my ADHD" ($M = 2.43$, $SD = 1.86$) more than saying "It's just my schizophrenia" ($M = 1.72$, $SD = 1.26$; $p < .001$). Further, participants endorsed saying "I'm so OCD" more than "It's just my ADHD" ($p < .001$).

A frequency analysis was conducted to examine the last research question about myth endorsement. In support of our hypothesis, students endorsed several myths, with the percentage of participants endorsing each myth ranging from 2% to 67% ($M = 30\%$, $Mdn = 28\%$, $SD = 21\%$). The myths mostly frequently endorsed were as follows: people can be diagnosed as being insane, the insanity defense is overused by people who want to avoid going to jail, and there are no standards for differentiating normal (see Table 3). The least endorsed myths were that only women are affected by eating disorders, all therapists practice the same way, and ADHD is not real (Table 3). A total score was computed of correct responses across the 35 myths. An independent samples *t*-test was used to examine whether there was a difference in overall myth endorsement between students who have taken an abnormal psychology course and those who have not, finding a significant difference ($t(44.88) = -2.00$, $p = .05$, $d = 0.39$). Students who had not taken an abnormal psychology course endorsed more myths ($M = 10.76$, $SD = 8.24$) than those who had taken the course ($M = 8.24$, $SD = 7.41$).

Discussion

Findings from Study 1 revealed that students gain information about abnormal psychology from a variety of sources, with instructors, internet, and movies being the top three sources. These findings align somewhat with suggestions of students' sources of information about abnormal psychology (Curtis & Kelley, 2020; Lilienfeld et al., 2010). However, participants reported instructors as one of the sources of greatest influence, which is a source not indicated by Lilienfeld and colleagues (2010). Additionally, memory and availability heuristics were reported as the lowest sources of influence. While there were differences between students who had previously taken abnormal psychology and those who had not, the effect size was small. Students who take abnormal psychology courses may be directed to reliable sources of gaining science-based information about psychological science. Perhaps, students who have not taken an abnormal psychology course may rely more on fewer, and less reliable, sources. The *third-person effect* was observed, in which students believe that others are more influenced by movies than themselves in their understanding of abnormal psychology. This finding parallels that of other research on the effects of violent music lyrics on people and suggested effects of violent media (Bushman, 2018; McLeod et al., 1997). In line with Curtis and Kelley (2020), participants report using some sayings about disorders more than others, with OCD being most popularly used.

Students endorsed a variety of myths about abnormal psychology. Some myths were more strongly endorsed than others. Fewer myths were believed by students who had previously taken an abnormal psychology course and by students who were older. While age and myth endorsement revealed a weak negative correlation, this could be due to mythbusting due to lived experiences. The findings related to students who have taken an abnormal psychology course speaks to Basterfield and colleagues' (2020) concern about upperclassmen holding different beliefs about abnormal psychology. However, it was unclear if the reduction in myth endorsement was due to

Table 2. Study 1 Pairwise Comparisons of Informational Sources.

		Mean Difference	Std. Error	Sig.	95% CI	
					Lower Bound	Upper Bound
Others	Movies or TV shows	−.399*	0.14	0.00	−0.67	−0.13
	News or Media	−0.18	0.14	0.20	−0.45	0.10
	It is what comes to mind easily	.359*	0.17	0.03	0.03	0.69
	Personal experiences	.937*	0.16	0.00	0.62	1.25
	Memory	.810*	0.17	0.00	0.48	1.14
	Internet	−.612*	0.15	0.00	−0.90	−0.33
	From a professor/teacher/authority in the field	−.946*	0.16	0.00	−1.26	−0.64
	Textbooks	−.598*	0.17	0.00	−0.94	−0.26
	Scholarly books/articles	−0.31	0.17	0.07	−0.65	0.03
Movies or TV shows	Others	.399*	0.14	0.00	0.13	0.67
	News or Media	.219*	0.09	0.01	0.05	0.39
	It is what comes to mind easily	.758*	0.18	0.00	0.41	1.10
	Personal experiences	1.335*	0.15	0.00	1.03	1.64
	Memory	1.209*	0.17	0.00	0.88	1.53
	Internet	−.214*	0.11	0.05	−0.43	0.00
	From a professor/teacher/authority in the field	−.548*	0.16	0.00	−0.87	−0.23
	Textbooks	−0.20	0.17	0.24	−0.53	0.13
	Scholarly books/articles	0.09	0.18	0.62	−0.26	0.44
News Media	Others	0.18	0.14	0.20	−0.10	0.45
	Movies or TV shows	−.219*	0.09	0.01	−0.39	−0.05
	It is what comes to mind easily	.539*	0.18	0.00	0.19	0.88
	Personal experiences	1.116*	0.16	0.00	0.81	1.42
	Memory	.990*	0.16	0.00	0.67	1.31
	Internet	−.433*	0.11	0.00	−0.65	−0.21
	From a professor/teacher/authority in the field	−.767*	0.16	0.00	−1.09	−0.44
	Textbooks	−.419*	0.17	0.01	−0.75	−0.09
	Scholarly books/articles	−0.13	0.18	0.47	−0.49	0.23
Comes easily to mind	Others	−.359*	0.17	0.03	−0.69	−0.03
	Movies or TV shows	−.758*	0.18	0.00	−1.10	−0.41
	News or Media	−.539*	0.18	0.00	−0.88	−0.19
	Personal experiences	.577*	0.14	0.00	0.30	0.85
	Memory	.451*	0.15	0.00	0.16	0.74
	Internet	−.972*	0.17	0.00	−1.31	−0.63
	From a professor/teacher/authority in the field	−1.306*	0.17	0.00	−1.65	−0.96
	Textbooks	−.957*	0.19	0.00	−1.33	−0.59
	Scholarly books/articles	−.670*	0.18	0.00	−1.03	−0.31
Personal experiences	Others	−.937*	0.16	0.00	−1.25	−0.62
	Movies or TV shows	−1.335*	0.15	0.00	−1.64	−1.03
	News or Media	−1.116*	0.16	0.00	−1.42	−0.81
	It is what comes to mind easily	−.577*	0.14	0.00	−0.85	−0.30
	Memory	−0.13	0.10	0.22	−0.33	0.08
	Internet	−1.549*	0.15	0.00	−1.84	−1.26
	From a professor/teacher/authority in the field	−1.883*	0.17	0.00	−2.22	−1.55
	Textbooks	−1.535*	0.18	0.00	−1.89	−1.18
	Scholarly books/articles	−1.247*	0.17	0.00	−1.59	−0.91
Memory	Others	−.810*	0.17	0.00	−1.14	−0.48
	Movies or TV shows	−1.209*	0.17	0.00	−1.53	−0.88
	News or Media	−.990*	0.16	0.00	−1.31	−0.67
	It is what comes to mind easily	−.451*	0.15	0.00	−0.74	−0.16
	Personal experiences	0.13	0.10	0.22	−0.08	0.33
	Internet	−1.423*	0.15	0.00	−1.72	−1.12
	From a professor/teacher/authority in the field	−1.757*	0.16	0.00	−2.06	−1.45
	Textbooks	−1.408*	0.17	0.00	−1.74	−1.07
	Scholarly books/articles	−1.120*	0.17	0.00	−1.46	−0.78

(continued)

Table 2. (continued)

		Mean Difference	Std. Error	Sig.	95% CI Lower Bound	95% CI Upper Bound
Internet	Others	.612*	0.15	0.00	0.33	0.90
	Movies or TV shows	.214*	0.11	0.05	0.00	0.43
	News or Media	.433*	0.11	0.00	0.21	0.65
	It is what comes to mind easily	.972*	0.17	0.00	0.63	1.31
	Personal experiences	1.549*	0.15	0.00	1.26	1.84
	Memory	1.423*	0.15	0.00	1.12	1.72
	From a professor/teacher/authority in the field	−.334*	0.15	0.02	−0.62	−0.04
	Textbooks	0.01	0.16	0.93	−0.30	0.32
	Scholarly books/articles	0.30	0.17	0.09	−0.04	0.65
From professors or authority	Others	.946*	0.16	0.00	0.64	1.26
	Movies or TV shows	.548*	0.16	0.00	0.23	0.87
	News or Media	.767*	0.16	0.00	0.44	1.09
	It is what comes to mind easily	1.306*	0.17	0.00	0.96	1.65
	Personal experiences	1.883*	0.17	0.00	1.55	2.22
	Memory	1.757*	0.16	0.00	1.45	2.06
	Internet	.334*	0.15	0.02	0.04	0.62
	Textbooks	.348*	0.12	0.00	0.12	0.58
	Scholarly books/articles	.636*	0.14	0.00	0.36	0.91
Textbooks	Others	.598*	0.17	0.00	0.26	0.94
	Movies or TV shows	0.20	0.17	0.24	−0.13	0.53
	News or Media	.419*	0.17	0.01	0.09	0.75
	It is what comes to mind easily	.957*	0.19	0.00	0.59	1.33
	Personal experiences	1.535*	0.18	0.00	1.18	1.89
	Memory	1.408*	0.17	0.00	1.07	1.74
	Internet	−0.01	0.16	0.93	−0.32	0.30
	From a professor/teacher/authority in the field	−.348*	0.12	0.00	−0.58	−0.12
	Scholarly books/articles	.288*	0.12	0.02	0.05	0.52
Scholarly books/articles	Others	0.31	0.17	0.07	−0.03	0.65
	Movies or TV shows	−0.09	0.18	0.62	−0.44	0.26
	News or Media	0.13	0.18	0.47	−0.23	0.49
	It is what comes to mind easily	.670*	0.18	0.00	0.31	1.03
	Personal experiences	1.247*	0.17	0.00	0.91	1.59
	Memory	1.120*	0.17	0.00	0.78	1.46
	Internet	−0.30	0.17	0.09	−0.65	0.04
	From a professor/teacher/authority in the field	−.636*	0.14	0.00	−0.91	−0.36
	Textbooks	−.288*	0.12	0.02	−0.52	−0.05

Note. *= statistically significant at $p < .05$.

mythbusting pedagogy within an abnormal psychology course based on the findings of Study 1. Simply, it is not known if students who have taken abnormal psychology endorse fewer myths at the onset of the class or as a function of taking the course.

Study 2

Some scholars have suggested that mythbusting is an effective pedagogical strategy to reduce myths and misconceptions in abnormal psychology (Curtis & Kelley, 2020; LaCaille et al., 2019; Lilienfeld et al., 2010). Mythbusting is an alternative approach to teaching abnormal psychology, which is a means to bridge the two typical teaching methods found in abnormal psychology: traditional teaching methods (e.g., imparting information) or personal teaching methods (e.g., experiential activities; Kendra et al., 2012). We sought to test this claim by investigating the effects of mythbusting across two abnormal psychology courses (taught in two different semesters by the same instructor). The purpose of Study 2 was to build upon Study 1 by assessing students' myth endorsement related to abnormal psychology at the onset of class and to examine whether taking a class utilizing myth-busting strategies would reveal a reduction in myth endorsement. Similar to predictions from Study 1, we predicted that students would indicate that movies and anecdote would be the greatest sources of information for their understanding of the subject matter at the beginning of class. We also predicted that at the beginning of class students would endorse a variety of myths. Lastly, we predicted that using mythbusting pedagogy in teaching abnormal psychology would result in a decrease in myth endorsement.

Table 3. Study 1 Myth Item Endorsement Percentages.

Myth Items	False (Correct)
People can be diagnosed as being insane.	33%
The insanity defense is overused by people who want to avoid going to jail.	33%
There are no standards for differentiating normal.	38%
Happiness is the goal of therapy.	39%
Hallucinations in schizophrenia are primarily visual (seeing things that are not actually there).	46%
Bipolar disorder means that you are happy one moment and then completely enraged in seconds.	49%
It is dangerous to wake someone who is sleep walking.	52%
Alcohol is a stimulant.	54%
OCD is people who are perfectionist.	57%
People who are addicted to heroin will die if they stop its use quickly.	57%
People who have disorders do so because of some childhood trauma.	58%
People with schizophrenia are likely to harm others.	61%
Any anxiety is bad.	62%
Forensic Psychologists do criminal profiling like that seen on Criminal Minds.	62%
Schizophrenia means having multiple personalities.	64%
Depression is only the result of a chemical imbalance.	72%
Psychologists and psychiatrists are developing disorders to stimulate growth in the medicinal marketplace.	72%
Older adults need less sleep than middle aged adults.	72%
Psychologists can detect if people are lying with a near perfect accuracy.	74%
Alzheimer's disease is due to getting old.	75%
People who do not like to talk with others have antisocial personality disorder	82%
Psychologists label all behavior as abnormal and disordered.	82%
People with eating disorders do not eat.	83%
A full moon makes people prone to mental illness and aberrant behaviors.	86%
Any person complaining of physical problems without a physical cause is a liar.	90%
Science is not a reliable source of information.	91%
Autism is caused by vaccines.	92%
People in therapy do not lie to therapists.	93%
Anxiety and Depression are the same thing.	94%
People with depression need to just go outside to stop being sad.	94%
People with a disorder are always a danger to others.	95%
Autism is contagious.	95%
All therapists practice the same way.	96%
ADHD is not real.	96%
Only women are affected by eating disorders.	98%

Method

Participants

The estimated sample size was calculated by using G*Power (Faul et al., 2009). To conduct a MANOVA with repeated measures and between groups factors, with an effect size *f* of .25, $\alpha = .05$, 2 groups, with 11 measurements, the total sample size needed was 24. We recruited a total of 76 participants from two abnormal psychology courses (fall and spring) taught by the same instructor at a southwestern university. Only 46 students completed both parts of the study and were retained in the analyses. Participants ranged in age from 19 to 48 ($M = 23.00$, $SD = 6.47$) and most identified as female (83%). Participants represented a variety of classifications based on credit hours completed: 30–59 (24%), 60–89 (50%), and 90–120 (26%). Participants indicated a variety of racial/ethnic identities: White/Caucasian/European American (44%), Hispanic/Latinx (41%), African American (2%), Asian (4%), and dual or mixed heritage (9%).

Measures

Study 2 utilized the same measures from Study 1: a demographics questionnaire and the Myths of Abnormal Psychology Questionnaire (MAP). Internal consistency of the MAP was acceptable to highly reliable across both administrations for sources (Cronbach's $\alpha = .83; .81$), perception items (Cronbach's $\alpha = .77; .75$), and myths (Cronbach's $\alpha = .82; .93$).

Procedure

The Institutional Review Board approved the study. The study was conducted from August 2017 through May 2018 from different sections of abnormal psychology taught in-person each semester. Participants completed the study online through a secure research database and were granted extra credit for participation. The instructor informed the students on the first day of class that they would receive an email with a link to the study. Once participants selected the link to the study and provided consent, then they were asked to complete the measures. Thoughout the course, the instructor used the Movies, Your experiences, Talking about the differences, and How this relate to what you have learned about abnormality (MYTH) mythbusting tool from Curtis and Kelley (2020). This pedagogical tool is designed to be used when introducing psychological disorders by showing students the MYTH acronym on a powerpoint slide along with the heading of the respective psychological disorder (Figure 1). Then, the instructor invites students to individually share the movies they have seen, things they have heard or experienced related to the psychological disorder and how these experiences related to what they have learned about abnormal psychology. This tool is introduced early in the semester and revisted at the onset of presenting material related to each psychological disorder studied. Students were encouraged to discuss movies that they have seen related to the psychological disorder, things they have heard or experienced, the differences of anecdotes and movies, and then how it relates to what they have learned about understanding and classification of psychopathology. After 14 weeks, participants were sent an email with a link to part 2 of the study, which asked them to complete the MAP again. Lastly, participants were debriefed. This procedure was the same for both classes (i.e., fall 2017 and spring 2018).

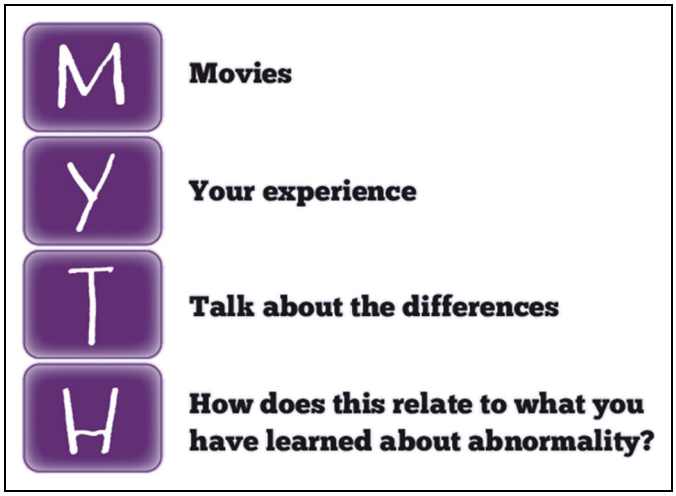

Figure 1. MYTH.

Results

Sources of understanding abnormal psychology were analyzed by using a factorial MANOVA, with class (fall or spring) as the between groups factor and sources (e.g., movies, personal experiences) as a repeated measures variable. There was a significant main effect across sources of information, $F(5.21, 224.05) = 5.69$, $MSE = 2.62$, $p < .001$, $\eta^2 = .12$, but not between classes, $F(5.21, 224.05) = .42$, $p = .84$, $\eta^2 = .01$ (Greenhouse-Geisser correction). Students reported that their most influential sources of information about abnormal psychology came from instructors, internet, and movies (see Table 4). These findings replicate those in Study 1.

Frequency analyses were conducted to examine myth endorsement at the beginning of class. A variety of myths were endorsed at the onset of the classes, ranging from 0% to 74% ($M = 25\%$, $Mdn = 25\%$, $SD = 22\%$). Some of the myths more frequently endorsed were: people can be diagnosed as being insane, the insanity defense is overused by people who want to avoid going to jail, and it is danerous to wake someone who is sleepwalking. However, two myths were not endorsed by any of the participants: ADHD is not real and people with depression just need to go outside and stop being sad. Fewer myths were endorsed at the end of the classes, ranging from 2% to 50% ($M = 13\%$, $Mdn = 9\%$, $SD = 12\%$; see Table 5).

Similar to Study 1, a total score was computed of correct responses across the 35 myths. A mixed factorial MANOVA was conducted to examine the effects of using the MYTH actvity on myth endorsement with class (fall or spring) as the between groups factor and myth score (pre-test and post-test) as the repeated measures vailable. With using the MYTH intervention there was a significant main effect across time ($F(1, 38) = 39.90$, $MSE = 8.34$, $p < .001$, $\eta^2 = .51$), but not between classes, $F(1,38) = .28$, $p = .60$, $\eta^2 = .007$. Myths endorsed at the beginning of class ($M = 8.28$, $SD = 4.99$) significantly decreased at the end of the class ($M = 4.20$, $SD = 6.06$; see Table 6).

Discussion

Findings from Study 2 indicated that students enter abnormal psychology classes holding numerous myths about the subject matter. While numerous myths were endorsed at the onset of class, two were not. None of the students indicated that ADHD was not real or that people with depression need to go outside and stop being sad. Students may have disregarded these beliefs based on information learned in other psychology courses. Thus, myths held by students entering abnormal psychology may be different from students in introductory psychology courses, as discussed by Basterfield and colleagues (2020). Additionally, students at the onset of class indicated that the most influential sources of information about abnormal psychology came from instructors, internet, and movies. This finding is parallel to the results from Study 1. The evidence suggests that utilizing mythbusting pedagogical strategies in an abnormal psychology class, specifically the use of MYTHs suggested by Curtis and Kelley (2020), may help reduce myths and misconceptions related to abnormal psychology.

General Discussion

Collectively, these two studies provide evidence that students believe a variety of myths and have misconceptions related to abnormal psychology. These findings add to those reported by Basterfield and colleagues (2020), in that students hold various misconceptions about mental illness and abnormal psychology. Students reported that most of their information came from various sources, including instructors, internet, and movies. Students also believed that they were more immune from the effects of movies on their understanding compared to others. As these sources may diverge in the information disseminated to students and students think they are not as affected as others, it is imperative for students and instructors to assess preexisting beliefs and discuss informational sources for rectifying misinformation. Thus, as corroborated in the Study 2 and extending the findings of Basterfield and colleagues (2020), mythbusting in abnormal psychology courses may be an effective pedagogical strategy to achieve this goal. Largely, our findings support the notion of intentional mythbusting as a teaching tool to reduce myth acceptance, misconceptions, and erroneous beliefs (Curtis & Kelley, 2020; Kowalsky & Taylor, 2009; LaCaille, 2015; LaCaille et al., 2019; Lilienfeld et al., 2010; Standing & Huber, 2003).

While our studies provide evidence that students enter abnormal psychology courses possessing several myths and misconceptions and mythbusting is a viable approach to resolve myths, there are some limitations worth mentioning. As with Basterfield and colleagues (2020), not all myths were endorsed equally. Thus, students generally believe some ideas more than others, such as the strong belief that the insanity defense is invoked frequently in forensic cases for acquittals. This myth tends to be strongly held by the public as well, as people tend to overestimate the use of the insanity plea (Silver et al., 1994). It is possible that this myth was highly endorsed

Table 4. Study 2 Pairwise Comparisons of Informational Sources.

Information Source	*M*	*SD*	*n*	Information Source	Mean Diff.	Std. Error	Sig.
Others	4.87	1.52	45	Movies or TV shows	−.472*	0.23	0.05
				News or Media	0.066	0.28	0.81
				It is what comes to mind easily	−0.29	0.26	0.28
				Personal experiences	.575*	0.27	0.04
				Memory	.559*	0.27	0.04
				Internet	−.513*	0.24	0.04
				From a professor/teacher/authority in the field	−.711*	0.27	0.01
				Textbooks	−0.377	0.28	0.18
				Scholarly books/articles	−0.027	0.27	0.92
Movies or TV shows	5.33	1.22	45	Others	.472*	0.23	0.05
				News or Media	.539*	0.19	0.01
				It is what comes to mind easily	0.183	0.27	0.5
				Personal experiences	1.047*	0.26	0
				Memory	1.032*	0.29	0
				Internet	−0.041	0.13	0.76
				From a professor/teacher/authority in the field	−0.239	0.26	0.36
				Textbooks	0.095	0.27	0.72
				Scholarly books/articles	0.446	0.31	0.15
News Media	4.80	1.36	45	Others	−0.066	0.28	0.81
				Movies or TV shows	−.539*	0.19	0.01
				It is what comes to mind easily	−0.356	0.28	0.21
				Personal experiences	0.509	0.28	0.07
				Memory	0.493	0.29	0.09
				Internet	−.579*	0.18	0
				From a professor/teacher/authority in the field	−.778*	0.28	0.01
				Textbooks	−0.444	0.29	0.13
				Scholarly books/articles	−0.093	0.32	0.78
Comes easily to mind	4.29	1.42	45	Others	0.29	0.26	0.28
				Movies or TV shows	−0.183	0.27	0.5
				News or Media	0.356	0.28	0.21
				Personal experiences	.865*	0.24	0
				Memory	.849*	0.21	0
				Internet	−0.223	0.25	0.39
				From a professor/teacher/authority in the field	−0.422	0.29	0.16
				Textbooks	−0.088	0.29	0.76
				Scholarly books/articles	0.263	0.29	0.38
Personal experiences	5.16	1.66	45	Others	−.575*	0.27	0.04
				Movies or TV shows	−1.047*	0.26	0
				News or Media	−0.509	0.28	0.07
				It is what comes to mind easily	−.865*	0.24	0
				Memory	−0.016	0.21	0.94
				Internet	−1.088*	0.23	0
				From a professor/teacher/authority in the field	−1.287*	0.28	0
				Textbooks	−.953*	0.31	0
				Scholarly books/articles	−0.602	0.33	0.07
Memory	4.31	1.47	45	Others	−.559*	0.27	0.04
				Movies or TV shows	−1.032*	0.29	0
				News or Media	−0.493	0.29	0.09
				It is what comes to mind easily	−.849*	0.21	0
				Personal experiences	0.016	0.21	0.94
				Internet	−1.072*	0.25	0
				From a professor/teacher/authority in the field	−1.271*	0.27	0
				Textbooks	−.937*	0.28	0
				Scholarly books/articles	−.586*	0.27	0.04

(continued)

Table 4. (continued)

Information Source	*M*	*SD*	*n*	Information Source	Mean Diff.	Std. Error	Sig.
Internet	5.38	1.30	45	Others	.513*	0.24	0.04
				Movies or TV shows	0.041	0.13	0.76
				News or Media	.579*	0.18	0
				It is what comes to mind easily	0.223	0.25	0.39
				Personal experiences	1.088*	0.23	0
				Memory	1.072*	0.25	0
				From a professor/teacher/authority in the field	−0.199	0.23	0.38
				Textbooks	0.135	0.25	0.59
				Scholarly books/articles	0.486	0.28	0.08
From professors or authority	5.58	1.48	45	Others	.711*	0.27	0.01
				Movies or TV shows	0.239	0.26	0.36
				News or Media	.778*	0.28	0.01
				It is what comes to mind easily	0.422	0.29	0.16
				Personal experiences	1.287*	0.28	0
				Memory	1.271*	0.27	0
				Internet	0.199	0.23	0.38
				Textbooks	.334*	0.16	0.04
				Scholarly books/articles	.685*	0.2	0
Textbooks	5.24	1.64	45	Others	0.377	0.28	0.18
				Movies or TV shows	−0.095	0.27	0.72
				News or Media	0.444	0.29	0.13
				It is what comes to mind easily	0.088	0.29	0.76
				Personal experiences	.953*	0.31	0
				Memory	.937*	0.28	0
				Internet	−0.135	0.25	0.59
				From a professor/teacher/authority in the field	−.334*	0.16	0.04
				Scholarly books/articles	.351*	0.17	0.05
Scholarly books/articles	4.89	1.77	45	Others	0.027	0.27	0.92
				Movies or TV shows	−0.446	0.31	0.15
				News or Media	0.093	0.32	0.78
				It is what comes to mind easily	−0.263	0.29	0.38
				Personal experiences	0.602	0.33	0.07
				Memory	.586*	0.27	0.04
				Internet	−0.486	0.28	0.08
				From a professor/teacher/authority in the field	−.685*	0.2	0
				Textbooks	−.351*	0.17	0.05

by participants because of opinions held about the insanity plea, in that maybe it should never be used. Other myths were not as popularly endorsed, such as believing that ADHD is not real. Thus, in efforts to engage in mythbusting, instructors may consider which myths are more commonly held by students so that more time may be dedicated to these topics. Specifically, if students do hold opinions that the insanity plea should never be used, then it would be a ripe area for discussion and an opportunity for instructors to present students with the data of its use. Another caution of the findings is that some myths persisted after completing an abnormal psychology course. Thus, while mythbusting appeared to be an effective strategy, it did not completely resolve all misconceptions. However, the complete resolution of all myths across all students may be an untenable expectation for instructors. Kowalski and Taylor (2009) suggested "it is impractical to think that instructors can address all misconceptions with classroom activities" (p. 158). Even so, mythbusting can be taught, practiced, and used by students within the classroom and applied to other myths found outside of academia. Lastly, it is unclear if the decrease in myth endorsment is lasting, or if students' misconceptions resurface years out or with other exposure to the internet or movies. Future research is warranted to explore longitudinal effects of mythbusting strategies.

As the current studies were conducted prior to the findings from Basterfield and colleagues (2020), future studies may benefit from exploring the concurrent validity between the APMQ and the MAP. Through examining both instruments, researchers may get a better sense of myths that may overlap and those that may be more widely endorsed. Another vein of research may be to explore the effects of myth endorsement and mythbusting on students' grades within abnormal psychology.

In sum, students enter abnormal psychology courses with notions about psychological disorders and mental health collected from various sources. Rather than providing another source of information for students to accumlate, a better strategy may be to heed the advice of Lilienfeld (2010), in which he stated "instructors can reap substantial rewards in their

Table 5. Study 2 Myth Item Endorsement Percentages.

Myth Items	Pre-Test False (Correct)	Post-Test False (Correct)
The insanity defense is overused by people who want to avoid going to jail.	26%	50%
People can be diagnosed as being insane.	28%	72%
It is dangerous to wake someone who is sleep walking.	33%	87%
There are no standards for differentiating normal.	40%	63%
Happiness is the goal of therapy.	54%	78%
People who are addicted to heroin will die if they stop its use quickly.	60%	87%
Alcohol is a stimulant.	61%	80%
Hallucinations in schizophrenia are primarily visual (seeing things that are not actually there).	61%	78%
Forensic Psychologists do criminal profiling like that seen on Criminal Minds.	61%	80%
People with schizophrenia are likely to harm others.	67%	93%
People who have disorders do so because of some childhood trauma.	70%	74%
Bipolar disorder means that you are happy one moment and then completely enraged in seconds.	70%	89%
Older adults need less sleep than middle aged adults.	70%	80%
Depression is only the result of a chemical imbalance.	72%	85%
Schizophrenia means having multiple personalities.	72%	96%
Any anxiety is bad.	74%	91%
OCD is people who are perfectionist.	74%	89%
Alzheimer's disease is due to getting old.	76%	96%
A full moon makes people prone to mental illness and aberrant behaviors.	78%	91%
Psychologists and psychiatrists are developing disorders to stimulate growth in the medicinal marketplace.	83%	91%
Autism is caused by vaccines.	87%	96%
People who do not like to talk with others have antisocial personality disorder	89%	91%
Psychologists can detect if people are lying with a near perfect accuracy.	89%	96%
People with eating disorders do not eat.	93%	96%
Anxiety and Depression are the same thing.	96%	98%
People with a disorder are always a danger to others.	96%	96%
People in therapy do not lie to therapists.	96%	96%
Psychologists label all behavior as abnormal and disordered.	96%	93%
All therapists practice the same way.	98%	98%
Autism is contagious.	98%	98%
Science is not a reliable source of information.	98%	98%
Only women are affected by eating disorders.	98%	98%
Any person complaining of physical problems without a physical cause is a liar.	98%	93%
ADHD is not real.	100%	98%
People with depression need to just go outside to stop being sad.	100%	98%

Table 6. Study 2 Pre- and Post-Test Correct Myth Scores.

	Class	*M*	*SD*	*n*
Pre-test	fall	8.12	4.12	17
	spring	8.39	5.63	23
	Total	8.28	4.99	40
Post-test	fall	3.65	3.55	17
	spring	4.61	7.45	23
	Total	4.20	6.06	40

teaching by bringing student misconceptions 'out of the shadows,' elucidating their psychological origins, and counteracting them with accurate information" (¶28). In doing so, instructors not only dispel myths with accurate information in an engaging and effective manner but also model the process of scientific thinking.

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