

Psych 2035 Midterm Exam Notes

Chapter 2 (pg. 32)

The nature of personality

What is personality?

Personality refers to an individual's unique constellation of consistent behavioral traits.

What are personality traits?

A *personality trait* is a durable disposition to behave in a particular way in a variety of situations.

Raymond Cattell used statistical procedure factor analysis.

Factor analysis: correlations among many variables are analyzed to identify closely related clusters of variables.

Five-Factor Model of Personality

Robert McCrae and Paul Costa used factor analysis to create a simpler, five-factor model of personality. (Big Five)

1. *Extraversion*: high score= outgoing, sociable, upbeat, friendly, assertive (positive happy outlook)
2. *Neuroticism*: high score= anxious, hostile, self-conscious, insecure, vulnerable. (negative high response to stress)
3. *Openness to experience*: high score= curious, flexible, vivid fantasy's, imaginative, artistic, unconventional attitudes. (Fosters liberalism, important trait)
4. *Agreeableness*: high score= sympathetic, trusting, cooperative, modest, and straightforward. (constructive approaches to conflict solution)
5. *Conscientiousness*: high score= diligent, disciplined, well organized, punctual, and dependable. (strong self discipline and ability to regulate oneself effectively.)

Psychodynamic Perspectives

Psychodynamic theories include all the diverse theories descended from the work of Sigmund Freud that focus on unconscious mental forces.

Freud's Psychoanalytic Theory

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Sigmund Freud: Grew up middle-class Jewish home in Vienna, Austria. He was a physician specializing in neurology when he began his medical practice in Vienna. Devoted himself to treatment of mental disorders using an innovative procedure he developed, called *psychoanalysis*

Freud's arguments:

1. Unconscious forces govern human behavior
2. Childhood experiences strongly determine adult personality
3. Individuals' personalities are shaped by how they cope with their sexual urges.

Separated the personality into three components:

1. The *id*: is the primitive, instinctive component of personality that operates according to the pleasure principle.
2. The *ego*: is the decision-making component of personality that operates according to the reality principle.
3. The *superego*: is the moral component of personality that incorporates social standards about what represents the right and wrong.

The *conscious* consists of whatever one is aware of at a particular point in time.

The *preconscious* contains the material just beneath the surface of awareness that can be easily retrieved.

The *unconscious* contains thoughts, memories, and desires that are well below the surface of conscious awareness but nonetheless exert great influence on one's behavior.

Conflict and Defense Mechanisms

Freud assumed that behavior is the outcome of an ongoing series of internal conflicts.

Freud believed that conflict's dominate people's lives and were centering on sexual and aggressive impulses that are especially likely to have far-reaching consequences.

Why sex and aggression? –because sex and aggression are subject to more complex and ambiguous social controls than other basic motives. AND he noted that the sexual and aggressive drives are thwarted more regularly than other basic biological urges.

Freud believed that lingering conflicts rooted in childhood experiences cause most personality disturbances.

Defense mechanisms are largely unconscious reactions that protect a person from painful emotions such as anxiety and guilt.

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Rationalization involves creating false but plausible excuses to justify unacceptable behavior.

Repression involves keeping distressing thoughts and feelings buried in unconscious.

Projection involves attributing one's own thoughts, feelings, or motives to another

Displacement involves diverting emotional feelings (usually anger) from their original source to a substitute target.

Reaction formation involves behaving in a way that is exactly the opposite of one's true feelings.

Regression involves a reversion to immature patterns of behavior.

Identification involves bolstering self-esteem by forming an imaginary or real alliance with some person or group.

Sublimation occurs when unconscious, unacceptable impulses are channeled into socially acceptable, perhaps even admirable, behaviors.

Development: Psychosexual Stages

Freud asserted that the foundation of an individual's personality is laid down by the age of 5. *Psychosexual stages* are developmental periods with a characteristic sexual focus that leave their mark on adult personality.

Fixation is the failure to move forward from one stage to another as expected. It is caused by excessive gratification of needs at a particular stage or by excessive frustration of those needs.

Five psychosexual stages:

1. Oral-mouth (nipple, pacifier)
2. Anal- erotic pleasure from bowel movements
3. Phallic stage-genitals, self-stimulation, *Oedipal complex*- children manifest erotically tinged desires for their other-sex parent, accomplished by feelings of hostility toward their same-sex parent.
4. Latency and genital stages-during puberty, sexuality is suppressed, this is the stage after puberty when sexual urges reappear.

Jung's Analytical Psychology

Carl Jung a Swiss psychiatrist emphasized the unconscious determinants of personality. However, he proposed that the unconscious consists of two layers:

1. *Personal unconscious*: is essentially the same as Freud's version of the unconscious. The personal unconscious houses material from one's life that is not within conscious awareness because it has not been repressed or forgotten.

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2. *Collective unconscious*: a storehouse of latent memory traces inherited from people's ancestral past that is shared with the entire human race.
 - a. These memories were called *Archetypes*: emotionally charged images and thought form that have universal meaning.

Adler's Individual Psychology

Alfred Adler- charter member of Freud's inner-circle-The Vienna Psychoanalytic Society. Went on to make his own theory of personality called *individual psychology*.

Argued: The foremost human drive is not sexuality, but a *striving for superiority*. Viewed striving for superiority as a universal drive to adapt, improve oneself, and master life's challenges.

Believes: Everyone has to work to overcome feeling of inferiority.

Compensation involves efforts to overcome imagined or real inferiorities by developing one's abilities.

Introduced idea of inferiority complex.

Evaluating Psychodynamic Perspectives

Psychodynamic research theory has demonstrated that:

1. Unconscious forces can influence behavior
2. Internal conflict often plays a key role in generating psychological distress
3. Early childhood experiences can exert considerable influence over adult personality
4. People do rely on defense mechanisms to reduce their experience of unpleasant emotions.

Psychodynamic ideas and formulations have been criticized on several grounds:

1. Poor testability: very vague and do not permit a clear scientific test
2. Inadequate evidence- empirical evidence has been questioned, depends too much on case studies.
3. Sexism- harbor a bias against women, Freud believed women felt inferior to men due to 'penis envy'

Behavioral Perspectives

Behaviorism: A theoretical orientation based on the premise that scientific psychology should study observable behavior.

Been around since 1913- John B. Watson – argued that psychology should not study mental processes in a scientific manner because these processes are private and not accessible to outside observation.

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Behaviorists view an individual's personality as a *collection of response tendencies that are ties to various stimulus situations*. Focus extensively on personality development.

Pavlov's Classical Conditioning

Ivan Pavlov- 1903 Russian physiologist-Nobel prize-winning research.

Classical Conditioning is a type of learning in which a neutral stimulus acquires the capacity to evoke a response that was originally evoked by another stimulus.

Pavlov was studying digestive processes in dogs when he discovered dogs could be trained to salivate in the response to a sound of a tone. The tone started out as a neutral stimulus meaning it did not produce the salivation response. Pavlov changed that by mating the tone with meat powder and eventually was able to trigger a response of salivation.

In unconditioned bonds:

The *unconditioned stimulus (UCS)* is a stimulus that evokes an unconditioned response without previous conditioning. The *unconditioned response (UCR)* is an unlearned reaction to an unconditioned stimulus that occurs without previous conditioning.

The *conditioned stimulus (CS)* is a previously neutral stimulus that has acquired the capacity to evoke a conditioned response through conditioning.

The *conditioned response (CR)* is a learned reaction to a conditioned stimulus that occurs because of previous conditioning.

Pavlov's discovery: the conditioned reflex.

Skinner's operant conditioning

Operant conditioning is a form of learning in which voluntary responses come to be controlled by their consequences.

B. F. Skinner- Harvard Psychologist spent most of his career studying simple responses made by lab rats and pigeons.

Fundamental principle: organisms tend to repeat those responses that are followed by favorable consequences, and they tend not to repeat those responses that are followed by neutral or unfavorable consequences.

Positive Reinforcement: occurs when a response is strengthened (increases in frequency) because it is followed by the arrival of (presumably) pleasant stimulus. – positive reinforcement motivates much of everyday behavior. Study hard because good grades are likely to follow the result etc..

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Negative Reinforcement occurs when a response is strengthened (increases in frequency) because it is followed by the removal of a (presumably) unpleasant stimulus. –the strengthening occurs because the response gets rid of an aversive stimulus. (rushing home to get out of the cold, cleaning up to get rid of a mess, giving into a kid whining to shut them up) –plays a large role in developmental avoidance issues.

Bandura's Social Cognitive Theory

Albert Bandura 1960 takes issue with Skinner's view. They point out humans are obviously conscious, thinking, and have feelings.

Believe that personality is largely shaped through learning. However, contends that conditioning is not a mechanical process in which people are passive participants.

Observational learning occurs when an organism's responding is influenced by the observation of other, who are called models. Effectively it involves paying attention to a model's behavior, understanding its consequences, and storing this information in memory. Obviously, attention, understanding, information, and memory involve cognition, which behaviorists used to ignore.

Believes that *Self-efficacy*—one's belief about one's ability to perform behaviors that should lead to expected outcomes. High self-efficacy=confident in executing the response. Low self-efficacy=worry.

Evaluating Behavioral Perspectives

Negative arguments have been made about the following:

1. Dilution of the behavioral approach
2. Overdependence on animal research
3. Fragmentation of personality

Humanistic Perspectives

Humanism is a theoretical orientation that emphasizes the unique qualities of humans, especially their free will and their potential for personal growth.

Do not believe that we can learn anything of significance about the human condition from animal research.

Humanistic theories believe that:

1. Human nature includes an innate drive toward personal growth.
2. Individuals have the freedom to chart their courses of action and are not pawns of their environment.

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3. Humans are largely conscious and rational beings who are not dominated by unconscious, irrational needs and conflicts.

They believe how a person feels about the world from a subjective view will influence behavior more than the actual realities of how you really are. i.e thinking you are cool will make you act cooler than you really are.

Rogers's Person-Centered Theory

Carl Rogers \-University of Chicago new approach to psychotherapy.

Viewed personality structure in terms of just one construct. Called it the *self*.

Self-concept is a collection of beliefs about one's own nature, unique qualities, and typical behavior.

Incongruence refers to the disparity between one's self-concept and one's actual experience.

Rogers was concerned with how childhood experiences promote congruence or incongruence. Everyone has a strong need for the affection, love, and acceptance.

According to Rogers, experiences that threaten people's personal views of themselves are the principal cause of troublesome anxiety. To ward off this anxiety, such people often behave defensively. Rogers theory can explain defensive behavior and personality disturbances, but he also emphasized the importance of psychological health.

Maslow's Theory of Self-Actualization

Abraham Maslow grew up in Brooklyn.

He argued that psychology should take a greater interest in the nature of the healthy personality, instead of dwelling on the causes of disorders.

Maslow proposed that human motives are organized into a *hierarchy of needs*- a systematic arrangement of needs, according to priority, in which basic needs must be met before less basic needs are aroused.

The need for self-actualization is the need to fulfill one's potential.

Evaluation Humanistic Perspectives

Arguments made against humanistic perspectives include:

1. Poor testability
2. Unrealistic view of human nature
3. Inadequate evidence

Biological Perspectives

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Hans Eysenck was born in Germany but fled to London due to Nazi rule. He believed that personality is determined to a large extent by a person's genes.

Used the example of the identical twins separated at birth.

Twin studies are when researchers assess hereditary influence by comparing the resemblance of identical twins and fraternal twins on a trait.

Heritability ratio is the estimate of the proportion of trait variability in a population that is determined by variations in genetic inheritance.

Evolutionary psychology examines behavioral processes in terms of their adaptive value for members of a species over the course of many generations.

Evaluating biological perspectives

Weaknesses in regard to the biological perspectives include:

1. Problems with estimates of hereditary influence
2. Hindsight bias in evolutionary theory –the common tendency to mold one's interpretation of the past to fit how events actually turned out.
3. Lack of adequate theory

Chapter 3: Stress(pg. 70)

The Nature Of Stress

Stress is any circumstances that threaten or are perceived to threaten one's well-being and thereby tax one's coping abilities.

Emerging consensus among contemporary researchers is that stress is neither a stimulus nor a response but a special stimulus-response transaction in which one feels threatened or experiences loss or harm.

The threat may be to one's immediate physical safety, long-range security, self-esteem, reputation, or peace of mind.

Stressful events can have a *cumulative* or *additive* impact, meaning stress can add up.

Hassles that evoke strong negative emotions are the ones most related to stress.

Stress Lies in the Eye of the Beholder

The experience of feeling threatened depends on what events you notice and how you choose to interpret or appraise them. Events that are stressful for one person may be routine for another.

Primary appraisal is an initial evaluation of whether an event is:

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1. Irrelevant to you
2. Relevant but not threatening
3. Stressful

Secondary appraisal is an evaluation of your coping resources and options for dealing with the stress.

Stress lies in the eye (actually, the mind) of the beholder

Stress May Be Embedded in the Environment

Ambient stress consists of chronic environmental conditions that, although not urgent, are negatively valued and place adaptive demands on people. Ex. Excessive noise, pollution, traffic.

Crowding is a major source of environmental stress

Stress is Influenced by Culture

Cultures vary greatly in the predominant forms of stress their people experience.

Cultural Change- such as modernization and urbanization and shifting value and customs

Our society is not representative of life around the world

Racial discrimination negatively affects health and well-being

Verbal insults (ethnic slurs), negative evaluations, avoidance, denial of equal treatment, and threats of aggression.

For immigrants *acculturation, or changing to adapt to a new culture* is a major source of stress related to reduced well being.

There is usually a discrepancy between what individuals *expect* before immigrating and what they actually *experience* after immigration.

Major Sources of Stress

Theorists have tried to analyze the nature of stressful events and divided them up into subtypes:

1. *Acute Stressors*: Threatening events that have a relatively short duration and a clear end point. (encounter with a drunk, waiting for results of a test)
2. *Chronic Stressors*: Threatening events that have a relatively long duration and no readily apparent time limit. (debts, sick family member)
3. *Anticipatory Stressors*: Upcoming or future events that are perceived to be threatening. (things that may never even occur)

Frustration

Frustration occurs in any situation in which the pursuit of some goal is thwarted.

Frustration seems to be the culprit at work when people feel troubled by environmental stress.

A lot of the time insignificant events (traffic)

Internal Conflict

Internal conflict occurs when two or more incompatible motivations or behavioral impulses compete for expression.

Created by Neal Miller, conflicts come in three types:

1. *Approach-approach*: a choice must be made between two attractive goals
2. *Avoidance-avoidance*: a choice must be made between two unattractive goals
3. *Approach-avoidance*: a choice must be made about whether to pursue a single goal that has both attractive and unattractive aspects.

Approach-avoidance conflicts are common, and they can be highly stressful.

Change

Life Changes are any noticeable alterations in one's living circumstances that require readjustment.

Thomas Holmes and Richard Rahe research the relation between stressful life events and psychical illness.

According to Rahe positive events produce stress because they produce *change*.

Their thesis is that disruptions to daily routines are stressful.

Pressure

Pressure involves expectations or demands that one behave in a certain way.

Can be broken down into two subtypes:

1. *Pressure to perform*-expected to execute tasks and responsibilities quickly, efficiently, and successfully
2. *Pressure to conform*- Dependant of certain factors, a person is supposed to act in a certain way.

Pressure is often self-imposed. Self-imposed stress doesn't stop when you complete your education.

Some individuals may create stress for themselves by embracing unrealistic expectations and not realizing they have more control over stress than they think.

Responding To Stress

Emotional Responses

Emotions are powerful, largely uncontrollable feelings, accompanied by physiological changes.

More often than not, stress tends to elicit unpleasant emotions.

Negative emotions

Richard Lazarus proposed common negative emotional responses to stress:

1. *Annoyance, anger, and rage.*
2. *Apprehension, anxiety, and fear.*
3. *Dejection, sadness, and grief.*

Positive Emotions

Although investigators have tended to focus heavily on the connection between stress and negative emotions, research by Susan Folkman has shown that positive emotions also occur during periods of stress.

Simply put, positive emotions can contribute to building social, intellectual, and physical resources that can be helpful in dealing with stress and allow one to experience flourishing mental health.

Effects of Emotional Arousal

Strong emotional arousal can hamper efforts to cope with stress.

Test anxiety can interfere with test taking in several ways, but the critical consideration appears to be the disruption of attention to the test.

Physiological Responses

Stress frequently elicits strong emotional responses. These responses bring about important physiological changes.

The "fight-or-flight" Response

The *fight-or-flight response* is a physiological reaction to threat that mobilizes an organism for attacking (fight) or fleeing (flight) an enemy.

The *automatic nervous system (ANS)* is made up of the nerves that connect to the heart, blood vessels, smooth muscles, and glands. –It controls involuntary,

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visceral functions that people don't normally think about, such as heart rate, digestion, and perspiration.

The *parasympathetic division* of the ANS generally conserves bodily resources.

The fight-or-flight response is mediated by the *sympathetic division* of the automatic nervous system, which mobilizes bodily resources for emergencies.

General Adaptation Syndrome

Concept was popularized in both scientific and lay circles by Hans Selye. Born in Vienna, spend most of his life in Montreal.

Selye concluded from exposing laboratory animals to unpleasant stimuli and getting largely the same result from all animals, Selye concluded that stress reactions are non-specific.

To capture the general pattern all species exhibit when reposing to stress, Selye formulated a seminal theory called the *general adaptation syndrome*

The General adaptation syndrome is a model of the body's stress response, consisting of three stages:

1. *Alarm*- when the organism recognizes the existence of a threat
2. *Resistance*-physiological changes stabilize, as coping efforts get under way.
3. *Exhaustion*- if the stress continues for a substantial amount of time the organism's body has run out of resources for fighting stress.

Selye's theory and research forged a link between stress and physical illness. He showed how prolonged physiological arousal that is meant to be adaptive could lead to diseases.

Brain-Body Pathways

The endocrine system consists of glands that secrete chemicals called hormones into the bloodstream.

The hypothalamus, a small structure near the base of the brain, appears to initiate action along both pathways.

The pituitary secretes a hormone (ACTH) that stimulates the other part of the adrenal glands (the adrenal cortex) to release another important set of hormones-*corticosteroids*

Corticosteroids stimulate the release of chemicals that help increase your energy and help inhibit tissue inflammation in case of injury.

Stress can critically change your immune system.

Behavioral Responses

Although people respond to stress at several levels, their behavior is the crucial dimension of these reactions.

Coping refers to active efforts to master, reduce, or tolerate the demands created by stress.

The Potential Effects Of Stress

When stress becomes severe, it can have long-lasting effects.

Impaired Task Performance

Stress frequently takes a toll on the ability to perform effectively on a task at hand.

Roy Baumeister (1984) theorized that pressure to perform often makes people self-conscious and that this elevated self-consciousness disrupts their attention, thereby interfering with performance.

He theorizes that attention can be distorted in two ways:

1. Elevated self-consciousness- may divert attention from the demands of the task, creating distractions.
2. Focus too much- for well-learned tasks that should be executed almost automatically, the self-conscious person may focus too much attention on the task and worry about what they are doing.

Baumeister found support for his theory in a series of lab experiments where he manipulated the pressure to perform on a simple perceptual motor task.

Disruption of Cognitive Functioning

The effects of stress on task performance often result from disruptions from thinking or in cognitive functioning.

The results of some studies suggest that stress can have detrimental effects on certain aspects of memory functioning.

Thus, under stressful situations, people may not be able to process, manipulate or integrate new information as effectively as normal.

Burnout

Burnout is a syndrome involving physical and emotional exhaustion, cynicism, and a lowered sense of self-efficacy that is attributable to work-related stress.

Burnout is associated with increased absenteeism and reduces productivity, as well as increased vulnerability to a variety of health problems.

Psychological Problems and Disorders

On the basis of clinical impressions, psychologists have long suspected that chronic stress might contribute to many type of psychological problems and mental disorders.

In the domain of common psychological problems, studies indicate that stress may contribute to poor academic performance, insomnia and other sleep disturbances, alcohol abuse, and drug abuse. Stress is also associated with increases in negative mood.

Stress often contributes to the onset of full-fledged psychological disorders, including depression, schizophrenia, anxiety disorders, and eating disorders.

Posttraumatic Stress Disorder (PTSD) involves enduring psychological disturbance attributed to the experience of a major traumatic event.

PTSD is frequently seen after a rape, a serious automobile accident, a robbery or assault, or the witnessing of someone's death.

Common symptoms include reexperiencing the traumatic event in the form of nightmares and flashbacks, emotional numbing, alienation, problems in social relations, and elevated arousal, anxiety, and guilt.

Physical Illness

Stress can also have an impact on one's physical health.

Psychosomatic Diseases were defines as genuine physical ailments thought to be caused in part by stress and other psychological factors.

Classic psychosomatic illnesses were high blood pressure, peptic ulcers, asthma, skin disorders such as eczema and hives, and migraine and tension headaches. These diseases were not regarded as *imagined* physical ailments.

Psychosomatic Diseases were viewed as authentic organic maladies tat were heavily stress related.

Stress may influence the onset and the course of heart disease, stoke, gastrointestinal disorders, tuberculosis, multiple sclerosis, arthritis, diabetes, leukemia, cancer, various types of infectious disease, and probably many other types of illnesses.

Positive Effects

There appear to be three way in which stress can have positive effects:

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1. Stress can promote psychological change, or what Tedeschi and Calhoun call *posttraumatic growth*
2. Stressful events help satisfy the need for stimulation and challenge
3. Today's stress can inoculate and psychologically prepare individuals so that they can be less affected by tomorrow's stress. Some studies suggest that exposure to stress can increase stress tolerance.

Factors Influencing Stress Tolerance

Social Support

Social support refers to various types of aid and succor provided by members of one's social network.

Social support seems to be good medicine for the mind as well as the body, as most studies also find an association between social support and mental health.

Recent studies suggest that providing social support to others can also have both psychological benefits (less depression and perceived stress) and physical benefits (lower blood pressure)

Hardiness

Hardiness may moderate the impact of stressful events.

Suzanne Ouellette reasoned that if stress affects some people less than others, some people must be *hardier* than others. She set out to determine which factors might be the key to these differences in hardiness.

Hardiness is a disposition marked by commitment, challenge, and control that is purportedly associated with strong stress resistance.

Optimism

Optimism is general tendency to expect good outcomes.

Michael Scheier and Charles Carver found a correlation between optimism as measured by Life Orientation Test and relatively good physical health in a sample of college students.

In studies that focus on surgical patients, optimism was found to be associated with faster recovery and better post-surgical adjustment. Optimism was recently inversely related to PTSD.

Even with all these benefits, psychologists are currently debating whether or not optimism is always beneficial

Chapter 4: Coping Processes (pg. 104)

The Concept of Coping

Coping refers to efforts to master, reduce, or tolerate the demands created by stress.

People cope with stress in many ways.

Researchers Carver, Scheier, and Weintraub (1989) found they could sort the participants' coping tactics into 14 categories.

People who are grappling with stress, choose their coping tactics from a large and varied menu of options.

It is most adaptive to use a variety of coping strategies.

Cheng and Cheung identified a key difference between individuals with high and low coping flexibility.

Flexible copers can differentiate among stressful events in terms of controllability and impact.

Coping strategies vary in their adaptive value.

Common Coping Pattern of Limited Value

Giving up

People sometimes give up when confronting stress.

Learned helplessness is passive behavior produced by exposure to unavoidable aversive events.

Acting Aggressively

Aggression is any behavior intended to hurt someone, either physically or verbally.

People often lash out aggressively at other who had nothing to do with their frustration, especially when they can vent their anger at the real source of their frustration.

Freud theorized that behaving aggressively could get pent-up emotion out of one's system and thus be adaptive. He coined the term *catharsis* to refer to this release of emotion tension.

Research, however, has not supported the catharsis hypothesis. Indeed, most studies find just the opposite: behaving in an aggressive manner tends to fuel more anger and aggression.

Indulging Yourself

Stress sometimes leads to reduced impulse control, or *self-indulgence*.

Moos and Billings (1982) identified *developing alternative rewards* as a common response to stress.

When something is going poorly in one's life, they try to compensate by pursuing substitute forms of satisfaction.

A recent manifestation of this coping strategy is the tendency to immerse oneself in the online world of the Internet.

Kimberly Young developed a syndrome called *Internet addiction*, which consists of spending an inordinate amount of time on the Internet and inability to control online use.

People who exhibit this syndrome tend to feel anxious, depressed, or empty when they are not online.

Excess drinking and drug use may endanger one's health and affect work or relationship quality.

These indulgences can cause emotion ambivalence as immediate pleasure gives way to regret, guilt, or embarrassment. Marginal adaptive value.

Blaming Yourself

The tendency to engage in 'negative self-talk' in response to stress has been noted by a number of influential theorists.

Albert Ellis called this phenomenon "catastrophic thinking" and focuses on how it is rooted in irrational assumptions.

Aaron Beck analyzes negative self-talk into specific tendencies. Among other things, he asserts that people are often:

1. Unreasonably attribute their failures to personal shortcomings
2. Focus on the negative feedback from other while ignoring favorable feedback
3. Make unduly pessimistic projections about the future.

According to Ellis, catastrophic thinking causes, aggravates, and perpetuates emotional reactions to stress that are often problematic.

Using Defensive Coping

Defensive coping is a common response to stress. Building on Freud's insights, modern psychologists have broadened the scope of the concept and added to Freud's list of defense mechanisms.

Defense mechanism are largely unconscious reactions that protect a person from unpleasant emotions such as anxiety and guilt.

What do defense mechanisms defend against?

Above all else, defense mechanisms shield the individual from the *emotional discomfort* elicited by stress.

How do they work?

Defense mechanisms work through *self-deception*. They accomplish their goals by distorting reality so it do not appear so threatening.

Are they conscious or unconscious?

Mainstream Freudian theory originally assumed that defenses operate entirely at an unconscious level. However, the concept of defense mechanisms has been broadened to include maneuvers that people may have some awareness of.

Are they normal?

Yes. People use them on a regular basis.

Can Defensive Mechanisms Ever Be Healthy?

More often than not they are not.

Defensive coping has been linked to increased negative affect, depression, and suicide risk.

They are poor methods of coping for a number of reasons:

1. Defensive coping is an avoidance strategy, and avoidance rarely provides a genuine solution to our problems.
2. Defenses such as denial, fantasy, and projection represent “wishful thinking” which is likely to accomplish little.
3. A defensive coping style has been related to poor health.

Shelly Taylor and Jonathon Brown have reviewed several lines of evidence suggesting that defensive “illusions” may be adaptive for mental health and well-being.

1. “Normal” (that is, nondepressed) people tend to have overly favorable self-images.
2. Depressed people exhibit less favorable-but more realistic-self concepts.
3. Normal participants overestimate the degree to which they control chance events.
4. Depressed participants are less prone to this illusion of control.

The Nature Of Constructive Coping

Constructive Coping refers to efforts to deal with stressful events that are judged to be relatively healthful.

What makes a coping strategy constructive?

1. Constructive coping involves confronting problems directly.
2. Constructive coping takes effort.
3. Constructive coping is based on reasonably realistic appraisals of your stress and coping resources.
4. Constructive coping involves learning to recognize and manage potentially disruptive emotional reactions to stress.
5. Constructive coping involves learning to exert some control over potentially harmful or destructive habitual behaviors.

Moos and Billings divided constructive coping techniques into three broad categories:

1. Appraisal-focused coping- aimed at changing one's interpretation of stressful events
2. Problem-focused coping- aimed at altering the stressful situation itself
3. Emotion-focused coping- aimed at managing potential emotional distress

Appraisal-Focused Constructive Coping

Ellis's Rational Thinking

Albert Ellis- prominent influential theorist who died in 2007.

He believed that people could short-circuit their emotional reactions to stress by altering their appraisals of stressful events.

Rational-emotive behavior theory is an approach to therapy that focuses on altering clients' patterns of irrational thinking to reduce maladaptive emotions and behavior.

Catastrophic thinking involves unrealistic appraisals of stress that exaggerate the magnitude of one's problems.

Ellis used a simple A-B-C sequence:

- A. *Activating Event*-the event that produces the stress
- B. *Belief system*- B stands for your belief about the event. Represents your appraisal of the stress.
- C. *Consequence*- C stands for the consequences of your negative thinking.

The Roots of Catastrophic Thinking

Ellis theorized that unrealistic appraisals of stress are derived from the irrational assumptions that people hold.

Four particularly common irrational assumptions:

1. I must have love and affection from certain people- many people believe they should be liked by everyone.
2. I must perform well in all endeavors
3. Other people should always behave competently and be considerate of me.
4. Events should always go the way I like.

Reduced Catastrophic Thinking

Ellis asserts that you must learn:

1. How to detect catastrophic thinking
2. How to dispute irrational assumptions that cause it

Key words that show up are should, ought, always, never, and must.

Humor as a Stress Reducer

When the going gets tough, finding some humor in the situation is not uncommon and is usually beneficial.

Certain types of humor are better than others at reducing stress.

Chen and Martin found that humor that is affiliative (used to engage or amuse others) or self-enhancing (maintaining a humorous perspective in the face of adversity) is related to better mental health.

Humor is a rather versatile coping strategy that may have many benefits.

Positive Reinterpretation

“Things could be worse” thinking

Research suggests that this strategy of making positive comparisons with others is a common coping mechanism that can result in improved mood and self-esteem.

Another way to engage in positive reinterpretation is to search for something good in a bad experience.

Problem-Focused Constructive Coping

Using Systematic Problem Solving

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In dealing with life's problems, the most obvious (and most effective) course of action is to tackle them head on.

Evidence suggests that skills can be enhanced through training.

Clarify the problem

The first step in any systematic problem solving effort is to clarify the nature of the problem.

Generate Alternative Courses of Action

The second step in systemic problem solving is to generate alternative courses of action, not alternative solutions.

You need to avoid the temptation to go with the first alternative that comes to mind.

Brainstorming is generating as many ideas as possible withholding criticism and evaluation.

Evaluate Your Alternatives And Select a Course of Action

One alternatives are generated, you can start evaluating the possibilities.

Address three general issues:

1. Ask if each alternative is realistic.
2. Consider any costs or risks associated with each alternative
3. Compare the desirability of the probable outcomes of each alternative.

Using Time More Effectively

R. Alec Mackenzie, a prominent time-management researcher, points out that time is a non-renewable resource.

Although time is our most equitably distributed resource, some people spend it much more wisely than others.

The Causes of Wasted Time

1. Inability to stick to priorities
2. Inability to say no
3. Inability to delegate responsibility
4. Inability to throw things away
5. Inability to accept anything less than perfection.

The Problem with Procrastination

Procrastination is the tendency to delay tackling tasks until the last minute.

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Steel (2007) found that procrastination was strongly related to low self-efficiency, low conscientiousness, lack of self-control, poor organization, low achievement motivation, and high distractibility.

Schraw and colleagues found other factors besides personality that affect procrastination including:

1. Desire to minimize time on a task
2. Desire to optimize efficiency
3. Close proximity to reward

Studies show that procrastination tends to have negative impact on the quality of task performance.

Time Management Techniques

Future oriented- able to see the consequences and behavior for future goals

Present oriented- focused on immediate events and not worries about consequences.

Suggestions for spending time more efficiently:

1. Monitor your use of time
2. Clarify your goals
3. Plan your activities using a schedule
4. Protect your prime time
5. Increase your efficiency

Emotion-Focused Constructive Coping

There are going to be occasions when appraisal-focused and problem-focused coping are not successful in warding off emotional turmoil.

Enhancing Emotional Intelligence

Emotional Intelligence consists of the ability to perceive and express emotion, use emotions to facilitate thought, understand and reason with emotion, and regulate emotion.

Emotional intelligence includes four essential components:

1. People need to be able to accurately perceive emotions in themselves and in others to have the ability to express their own emotions effectively.
2. People need to be aware of how their emotions shape their thinking, decision making, and coping with stress.
3. People need to be able to understand and analyze their emotions, which may often be complex and contradictory.

4. People need to be able to regulate their emotions so that they can dampen negative emotions and make effective use of positive emotions.

Researchers have come up with a test to measure the concept of emotional intelligence: The Mayer-Salovey-Caruso Emotional Intelligence Test

Expressing Emotions

Research suggests people who inhibit the expression of anger and other emotions are somewhat more likely than other people to have elevated blood pressure.

When someone cannot express emotions the physiological arousal that accompanies emotion becomes problematic.

James Pennebaker has shown emotional expression through talking or writing about traumatic events can have beneficial effects.

The research on emotional disclosure indicates that both writing and talking about important personal issues can be beneficial.

Managing Hostility and Forgiving Others

Evidence shows that hostility is related to increased risk for heart attacks and other types of illness.

The goal of hostility management is not merely to suppress the overt expression of hostility that may continue to seethe beneath the surface, but to actually reduce the frequency and intensity of one's hostile feelings.

People tend to experience hostility and other negative emotions when they feel "wronged"- that is, when they believe that the actions of another person were harmful, immoral, or unjust.

Forgiveness involves counteracting the natural tendencies to seek vengeance or avoid an offender, thereby releasing this person from further liability for his or her transgression.

Research suggests that forgiving is an effective emotion-focused coping strategy that is associated with better adjustment and well-being.

Exercising

On the whole, it is well documented that physical activity promotes overall mental and physical health.

Sapolsky (2004) asserts that to get maximal benefits from physical exercise, you should consider three rules:

1. You want to exercise

2. You should engage in aerobic exercise
3. You should exercise on a regular basis.

Using Meditation and Relaxation

Meditation refers to a family of mental exercises in which a conscious attempt is made to focus attention in a nonanalytical way.

Advocates of meditation claim that it can improve learning, energy level, work productivity, physical health, mental health, and general happiness while reducing tension and anxiety caused by stress.

Benson (1975) set out to devise a simple, nonreligious procedure that could provide similar benefits. He called his procedure the “relaxation response”. Four factors are critical:

1. A quiet environment
2. A mental device
3. A passive attitude
4. A comfortable position

Attitudes About Death

Because death is a taboo topic in modern Western society, the most common strategy for coping with it is avoidance.

Kastenbaum (2001) calls a *death system*- the collection of rituals and procedures used by a culture to handle death.

Negativism and avoidance are not universal features of death systems.

Death anxiety: is the fear and apprehension about one’s own death.

Individuals who haven’t accomplished all that they had hoped are more likely to fear death.

The Process Of Dying

Elisabeth Kubler-Ross- pioneer researcher in the 1960’s on the experience of dying.

According to her model, people evolve through a series of five stages as they confront their own death:

1. Denial
2. Anger
3. Bargaining
4. Depression
5. Acceptance

Kubler-Ross asserted that people do not necessarily progress through these five stages in lock-step

Bereavement and Grieving

Bereavement- the painful loss of a loved one through death

Mourning- refers to the formal practice of an individual and community in response to a death.

The Grieving Process

Grief is a natural response to loss. Common emotional responses include shock, sadness, guilt, anger, and fear.

1. Numbness
2. Yearning
3. Disorganization and despair
4. Reorganization

Coping with Various Types of Loss

Bereavement overload occurs when individuals experience several deaths at the same time or in close succession.

Health professionals advise certain things to try when coping with grief:

1. Seek support while you are grieving
2. Care for your own emotional needs while grieving
3. Care for your own physical needs while grieving
4. Be aware and plan for grief triggers

Chapter 5: Psychology and Physical Health (Pg. 138)

More than any other time in history, people's health is more likely to be compromised by *chronic diseases* rather than *contagious diseases*.

The three leading chronic diseases (heart disease, cancer, stroke) account for almost 60% of all deaths in the United States.

Traditionally, illness has been thought of as a purely biological phenomenon produced by an infectious agent or some internal physical breakdown in the body.

Biopsychosocial model holds that physical illness is caused by a complex interaction of biological, psychological, and sociocultural factors.

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This model does not suggest that biological factors are unimportant, rather it simply asserts they operate in a psychosocial context that can also be highly influential.

Health psychology is concerned with how psychosocial factors relate to the promotion and maintenance of health and with the causation, prevention, and treatment of illness.

Stress, Personality, and Illness

Personality can affect wellness.

Personality, Emotions, and Heart Disease

Heart disease accounts for nearly 27% of the deaths in the US every year.

Coronary Heart Disease results from a reduction in blood flow through the coronary arteries, which supply the heart with blood.

Atherosclerosis is a gradual narrowing of coronary arteries.

Myocardial Ischemia- when the heart is temporarily deprived of adequate blood flow.

Myocardial Infarction- the abrupt interruption of blood flow can produce a full-fledged heart attack.

Inflammation plays a key role in the initiation and progression of atherosclerosis, as well as the acute complications that trigger heart attacks.

The presence of stress and depression, to, can be related to inflammation.

Hostility and Coronary Risk

Meyer Friedman and Ray Rosenman were cardiologists investigating the causes of coronary disease.

They concluded that there is an apparent connection between coronary risk and a pattern of behavior they called the *type A personality*.

Friedman and Rosenman divided people into two types:

1. Type A Personality: includes three elements
 - a. A strong competitive orientation
 - b. Impatience and time urgency
 - c. Anger and hostility
2. Type B personality is marked by relatively relaxed, patient, and easygoing, amicable behavior.

Type B's are less hurried, less competitive, and less easily angered than Type A's

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Hostility refers to a persistent negative attitude marked by cynical, mistrusting thoughts, feelings of anger, and overtly aggressive actions.

Recent research trends suggest that hostility may be the crucial toxic element that accounts for the correlation between Type A behavior and heart disease.

Anger is an unpleasant emotion that is accompanied by physiological arousal, whereas hostility involves a social component—a negative attitude toward others.

The manner in which individuals deal with their anger, though, may be quite consequential, creating a link to hostility toward others. Possible explanations linking anger and hostility include:

1. Anger-prone individuals appear to exhibit physiological reactivity than those lower in hostility.
2. Hostile people probably create additional stress for themselves
3. Thanks to their antagonistic ways of relating to others, hostile individuals tend to have less social support than others.
4. Perhaps because of their cynicism, people high in anger and hostility seem to exhibit a higher prevalence of poor health habits that may contribute to the development of cardiovascular disease.

Emotional Reactions and Heart Disease

One line of research has supported the hypothesis that transient mental stress and the resulting emotions that people experience can tax the heart.

The evidence suggests that mental stress can elicit ischemia in about 30%-70% of patient with ongoing heart problems.

Keeping negative emotions to oneself is potentially more harmful than expressing anger toward others.

Rumination- engaging in repetitive and negative thinking about some event.

Depression and Heart Disease

Depressive disorders are characterized by persistent feelings of sadness, which are characterized by persistent feelings of sadness and despair, are a fairly common form of psychological disorder.

Studies have found elevated rates of depression amount patients suffering from heart disease.

Overall, studies have found that depression roughly doubles one's chances of developing heart disease.

Stress and Cancer

Cancer is a collection of over 200 related diseases

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Cancer refers to malignant cell growth, which may occur in many organ systems in the body.

It is widely believed by the general public that stress and personality play major roles in the development of cancer.

The research linking psychological factors to the onset of cancer is weak.

Evidence has shown that stress and personality influence the course of the disease.

Stress and Other Diseases

Among infectious diseases, Stress has been clearly implicated in development of the common cold.

People reporting higher levels of stress are more likely to become ill.

Stress and Immune Functioning

The immune response is the body's defensive reaction to invasion by bacteria, viral agents, or other foreign substances.

Immune reactions are remarkably complex and multifaceted.

Chronic illnesses have a negative impact on immune function and the presence of stress renders people's abilities to deal with these illnesses even worse.

Chronic stress can reduce both cellular immune responses and humoral immune responses. They also report that the duration of a stressful event is a key factor determining its impact on immune function.

Chronic stress can produce premature aging of immune system cells.

Evidence suggests in the face of stress, people's immune systems do not fight off illnesses as well as they grow older.

Habits Lifestyles and Health

People behave in self-destructive ways for the following reasons:

1. Many health-impairing habits creep up on people slowly.
2. Many health-impairing habits involve activities that are quite pleasant at the time
3. The risks associated with most health-impairing habits are chronic diseases such as cancer that usually take 10, 20, or 30 years to develop.
4. It appears that people have a tendency to underestimate the risks associated with their own health-impairing habits while viewing the risks associated with others' self-destructive behaviors much more accurately.

Unrealistic optimism- where people are aware that certain health-related behaviors are dangerous, but they erroneously view those dangers as risks for others rather than themselves.

Smoking

24% of adult men and 18% of adult women in the US continue to smoke regularly.

Health Effects

Smokers face a much greater risk of premature death than nonsmokers (13-14 years shorter)

Giving up Smoking

Research shows that if people can give up smoking, their health risks decline reasonably quickly.

Evidence suggests that 70% of smokers would like to quit, but they are reluctant to give up a major source of pleasure.

Drinking

Alcohol rivals tobacco as the leading causes of health problems in North America.

Half of the adults in the US drink.

Why do people drink?

Negative emotions such as tension, worry, anxiety, and depression are dulled and inhibitions may be loosened.

Drinking is widely endorsed and encouraged social ritual in our culture.

Short Term risks and Problems

Life-threatening overdoses, hangover, negative effect on intellectual functioning and perceptual-motor coordination.

Long Term Health Effects

Alcohol Dependence is a chronic, progressive disorder marked by a growing compulsion to drink and impaired control over drinking that eventually interferes with health and social behavior.

It is clear that heavily drinking increases the risk for heart disease, hypertension, and stroke. Excessive drinking is also correlated with an elevated risk for various types of cancer, including oral, stomach, pancreatic, colon, and rectal cancer. Moreover, serious drinking problems can lead to cirrhosis of the liver,

malnutrition, pregnancy complications, brain damage, and neurological disorders.

Overeating

Body Mass Index (BMI)- weight (in kilograms) divided by height (in meters) squared.

Obesity is similar to smoking in that it exerts a relatively subtle impact on health that it is easy for many people to ignore.

Obesity is a significant health problem that elevates one's mortality risk.

Evolution-oriented researchers point out that over the course of history, most animals and humans have lived in environments where they was fierce competition for limited, unreliable food resources and starvation was a very real threat. As a result, warm blooded, foraging animals evolved a propensity to consume more food than immediately necessary when the opportunity presented itself.

Determination of Obesity

Obesity was thought to be a function of personality affecting mostly depressed, anxious, compulsive people who overeat to deal with their negative emotions or individuals who are lazy and undisciplined.

Research shows that there is no such thing as an "obese personality"

Heredity

Chief among factors contributing to obesity is genetic predisposition.

Excessive eating and Inadequate exercise:

Bottom line for overweight people is that their energy intake from food consumption chronically exceeds their energy expenditure from physical activities and resisting metabolic processes.

Test, high caloric foods are available everywhere.

Set Point

People who loose weight on a diet have the strong tendency to gain it all back again after.

Set-point theory proposes that the body monitors fat-cell levels to keep them (and weight) fairly stable.

Settling-point theory proposes that weight tends to drift around the level at which the constellation of factors that determine food consumption and energy expenditure achieve an equilibrium.

Losing Weight

Studies have demonstrated that relatively modest weight reductions can significantly diminish many of the health risks associated with obesity.

There is only one way to lose weight. Individuals must change their ratio of energy intake to energy output.

Poor nutrition

Nutrition is a collection of processes (mainly food consumption) through which an organism utilizes the materials (nutrients) required for survival and growth.

Nutrition And Health

Evidence is accumulating that patterns of nutrition influence susceptibility to a variety of diseases and health problems.

Other possible connections between eating patterns and health include:

1. Heavy consumption of foods that elevate serum cholesterol level (eggs, cheeses, butter, shellfish, sausage, etc) appears to increase the risk of cardiovascular disease.
2. Vulnerability to cardiovascular diseases may also be influenced by other dietary factors such as low fiber, high intake of red meat, sweets, potatoes etc.
3. High salt intake is thought to be a contributing factor in the development of hypertension.
4. High caffeine consumption may elevate one's risk for hypertension and for coronary disease
5. High-fat diets have been implicated as possible contributors to cardiovascular disease and some forms of cancer. Especially prostate cancer.

Nutritional Goals

1. Consume a balanced variety of foods. Six are essential to well being: proteins, fats, carbohydrates, vitamins, minerals, and fiber.
2. Avoid excessive consumption of saturated fats, cholesterol, refined-grain carbohydrates, sugar, and salt.
3. Increase consumption of polyunsaturated fats, whole-grain carbohydrates, natural sugars, and foods with fiber

Lack of Exercise

Regular exercise is associated with increased longevity.

Benefits and Risks of Exercise

Exercise promotes a diverse array of specific benefits:

1. An appropriate exercise program can enhance cardiovascular fitness and thereby reduce one's susceptibility to cardiovascular problems.
2. Regular physical activity can contribute to the avoidance of obesity.
3. Some studies suggest that physical fitness is also associated with decreased risk for colon cancer and for breast cancer and reproductive cancer in women.
4. Exercise may serve as a buffer that reduces the potentially damaging effects of stress.

Devising an Exercise Program

1. Look for an activity that you will find enjoyable
2. Exercise regularly
3. Increase the amount of time you exercise gradually
4. Reinforce yourself for your participation
5. It's never too late to begin an exercise regimen.

Behavior and AIDS

AIDS-Acquired Immune Deficiency Syndrome, a disorder in which the immune system is gradually weakened and eventually disabled by the human immunodeficiency virus (HIV)

Prior to 1996-1997, the average length of survival for people after the onset of AIDS syndrome was about 18 to 24 months. Improved treatment with drug regimens called *highly active antiretroviral therapy* hold out promise for *substantially* longer survival.

Transmission

The HIV virus is transmitted through person-to-person contact involving the exchange of bodily fluids, primarily semen and blood. In heterosexual relations, male-to-female transmission is estimated to be about eight times more likely than female-to-male transmission.

Misconceptions

Many people believe that AIDS can be transmitted through casual contact with infected individuals. These people worry about contracting AIDS from a handshake, sneeze, or eating utensil. Some people believe it is bad to donate blood, but blood donors are at no risk whatsoever.

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Many young heterosexuals who are active with a variety of different partners foolishly downplay their risk for HIV.

Many people are unaware they even have the condition.

Prevention

People can reduce their risk by have sexual contacts with fewer partners, using condoms, anal sex also has a higher result.

Reactions to Illness

The decision to seek treatment

Symptoms are a matter of individual interpretation, and the level of symptoms is what prompts people to seek medical advice.

Another key consideration is how family and friends react to the symptoms.

Age matters, young children and older adults are more likely to utilize health services.

The process of seeking medical treatment can be divided into three stages of active, complex problem solving:

1. People have to decide that their physical sensations are symptoms and are indicative of illness.
2. They have to decide that their apparent illness warrants medical attention
3. They have to go to the trouble to make the actual arrangements for medical care, which can be complicated and time consuming.

The Sick Role

Though many people delay medical attention some people are eager to seek medical care.

Up to 60% of patients' visits to the primary care physicians appear to have little medical basis.

The sick role absolves people from responsibility for their incapacity and can be used to exempt them from many of their normal duties and obligations.

Sick people often find themselves receiving a lot of attention from friends and relatives.

Adherence to Medical Advice

Some considerations that influence the likelihood of adherence:

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1. Frequently, noncompliance is due to patients forgetting instructions or failing to understand the instructions as given.
2. Another key factor is how aversive or difficult the treatments are
3. If a patient has a negative attitude toward a physician, the probability of noncompliance will increase
4. Treatment adherence can be improved when physicians do follow-ups.

Drug Related Concepts

Tolerance is a progressive decrease in a person's responsiveness to a drug with continued use.

Physical dependence exists when a person must continue to take a drug to avoid withdrawal illness

Psychological dependence exists when a person must continue to take a drug to satisfy intense mental and emotional craving for it.

An Overdose is an excessive dose of a drug that can seriously threaten one's life.

Narcotics

Narcotics (or opiates) are drugs derived from opium that are capable of relieving pain.

Effects

Most users inject this drug intravenously with a hypodermic needle. Common side effects include nausea, lethargy, drowsiness, constipation, and slowed respiration.

Risks

High risk for both psychological and physical dependence.

Sedatives

Sedatives are sleep-inducing drugs that tend to decrease central nervous system behavioral activity.

Effects

People usually consume larger doses than are prescribed for medical purposes.

Feelings of tension, anxiety, and depression are temporarily replaced by relaxed, pleasant state of intoxication, in which inhibitions are loosened.

One's emotional control may become unstable, with feelings of dejection often intruding on the intended euphoric mood.

Risks

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Potential to produce both psychological and physical dependence.

Risk for accidental injuries as well.

Stimulants

Stimulants are drugs that tend to increase central nervous system and behavioral activity

Cocaine an organic substance extracted from the coca shrub, is usually consumed as a crystalline powder that can be snorted.

Effects

Amphetamines and cocaine have almost indistinguishable effects, except that cocaine produces a very brief high while a speed high can last many hours.

Common side effects include increased blood pressure, muscle tension, sweating, and restlessness.

Risks

Can cause physical dependence but the physical distress caused by stimulant withdrawal is mild compared to that caused by narcotic or sedative withdrawal.

Can suppress appetite and disrupt sleep.

Severe psychological disorder called amphetamine or cocaine psychosis which is dominated by intense paranoia.

Hallucinogens

Hallucinogens are a diverse group of drugs that have powerful effects on mental and emotional functioning, marked most prominently by distortions in sensory and perceptual experience.

Effects

Intensify and distort perception in ways that are difficult to describe and they temporarily impair intellectual functioning as though processes become meteoric and jumbled.

Produce feelings of euphoria.

Risks

No potential for physical dependence and no deaths to attribute to overdose are known to have occurred.

Emotion is highly volatile.

Marijuana

Cannabis is the hemp plant which marijuana, hashish, and THC are derived.

Effects

Immediate effect that can last several hours

Subtle effects on emotion, perception, and cognition.

Mild state of euphoria.

Risks

Overdone and physical dependence are not problems, but there is a potential for psychological dependence.

Can cause transient problems with anxiety and depression in some people.

May help to precipitate schizophrenia in young people who have vulnerability to the disorder.

Chapter 6: The Self

The Nature of Self Concept

Self-concept is an organized collection of beliefs about the self.

they are derived from past experience, and are concerned with one's personality traits, abilities, physical features, values, goals, and social roles.

Each self-schema is characterized by distinct thoughts and beliefs.

Hazel Markus a leading researcher in this area, termed the *working self-concept* the goal is to be 'rational'

Possible selves are one's conceptions about the kind of person one might become in the future.

Vignoles et al. found that people desired possible selves that enhances their self-esteem, self-perceived effectiveness, and sense of meaning or purpose, among other motives. At the same time, however they feared developing identities wherein such desired motives would be blocked.

Individual's beliefs about themselves are not set in concrete-but neither are they easily changed.

Self-Discrepancies

Some people perceive themselves pretty much the same way they'd like to see themselves. Other experience a gap in between what they actually see and what they'd like to see.

Self-discrepancy consists of mismatch between the self-perceptions that make up the actual self, ideal self, and ought self.

Self-Discrepancies and Their Effects

The differences among one's actual, ideal, and ought selves influence how one feels about oneself and can create some particular emotional vulnerabilities.

Higgins believes when people live up to their personal standards (ideal or ought selves) they experience high self-esteem; when they don't meet their own expectations, their self-esteem suffers.

Higgins also says certain types of self-discrepancies are associated with specific emotions.

Self-discrepant thoughts may trigger more powerful feelings than just dissatisfaction or dejection.

There are two types of actual-ideal self-discrepancies and suicidal thoughts.

1. Researchers suggest that when self-discrepancies act as a form of negative self-evaluation, these perceptions can heighten a person's risk for engaging in suicidal thinking.
2. Mismatch between actual and ought selves. According to Higgins, actual/ought self-discrepancies produce agitation-related emotions,

Coping with Self Discrepancies

People can change their behavior to bring it more in line with their ideal or ought selves.

Subtle encouragement to consider ways to approach an ideal self is apt to raise your spirits in a positive way.

Less positive approach- blunt your self-awareness, or how much you focus on what you like or dislike about yourself, your self-perceived strengths and shortcomings and so on. Can be done by avoiding situations that increase self-awareness.

Some people use alcohol to blunt self-awareness.

Heightened self-awareness doesn't always make people focus on self discrepancies and negative aspects of the self.

Factors Shaping the Self- Concept

One's own observations, feedback from other, and cultural values.

One's Own Observations

Leon Festinger- social comparison theory

Social comparison theory proposes that individuals compare themselves with other in order to assess their abilities and options.

Festinger's original theory claimed that people engage in social comparison for the purpose of accurately assessing their abilities, research suggests that they also engage in social comparison to engage in social compassion to improve their skill and maintain their self-image.

Reference Group is a set of people who are used as a gauge in making social comparisons.

Upward social comparisons can motivate a person and direct their future efforts.

Downward social comparison is looking to those whom you perceive to be worse off, thereby enabling you to feel better about yourself.

Peoples observations of their own behavior are not entirely objective. The general tendency is to distort reality in a positive direction.

Garcia and Tor (2009) introduces what they call the "N-effect" in which the number of recognized or known competitors (or N, which refers to their number) appears to reduce the motivation to compete, a result of making particular social comparisons.

Feedback From Others

Individuals' self-concept is shaped significantly by the feedback they get from important people in their lives.

People filter feedback from other through their existing self-perceptions.

Individuals don't see themselves exactly as other seem then but rather as they believe other see them.

Social Context

Receiving feedback from other reveals that the self-concept does not develop isolation.

Cultural Value

The society in which one is reared defines what is desirable and undesirable in personality and behavior.

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Cross-cultural studies suggest that different cultures shape different conceptions of the self.

Individualism involves putting personal goals ahead of group goals and defining one's identity in terms of personal attributes rather than group memberships.

Collectivism involves putting group goals ahead of personal goals and defining one's identity in terms of the group one belongs to.

A variety of factors influence societies' tendencies to cherish individualism or collectivism. Among other things, increases in a culture's affluence, education, urbanization, and social mobility tend to foster more individualism.

Individuals reared in individualistic cultures usually have an independent view of the self, perceiving themselves as unique, self-contained, and distinct from others.

Self-Esteem

Self-esteem refers to one's overall assessment of one's worth as a person.

People with high self-esteem are confident, taking credit for their successes in various ways while seeking venues for demonstrating their skills.

Individuals with low self-esteem are not more negative; rather, they are more confused and tentative.

Roy Baumeister, an eminent researcher on the self, this "self-concept confusion" means that individuals with low self-esteem simply don't know themselves well enough to strongly endorse many personal attributes on self-esteem tests, which results in lower self-esteem scores.

Although self-concept confusion may resolve itself over time if people learn who they truly are, there is compelling evidence that low self-esteem is a challenge at all phases of the adult lifespan.

Self-esteem can be constructed in two primary ways: as a trait or a state.

Trait self-esteem refers to the ongoing sense of confidence people possess regarding their abilities and characteristics

State self-esteem is dynamic and changeable, referring to how individuals feel about themselves in the moment.

There is a third way to construe self-esteem; as domain specific. When self-esteem is linked to a particular area of one's life, it is best described as composed of one's self-evaluations.

Investigating self-esteem is challenging for several reasons.

The importance of Self-Esteem

Self-esteem is the key to practically all positive outcomes in life.

Self-Esteem and Adjustment

Clear advantage of self-esteem are in the emotional sphere.

Beaumeister and his colleagues are persuaded that high self-esteem actually leads to greater happiness, although they acknowledge that research has not clearly established the direction of causation.

The Interpersonal realm, Beaumeister reports that people with high self-esteem claim to be more likable and attractive, to have better relationships, and to make better impressions on other than people with low self-esteem do.

The Development of Self-Esteem

Although people's sense of self-worth emerges in early childhood, individual differences in self-esteem begin to stand out in the middle childhood and remain across the lifespan.

Two major dimensions underlie parenting behavior: acceptance and control.

Authoritative parenting uses high emotional support and firm but reasonable limits

Authoritarian parenting entails low emotional support with rigid limits

Permissive parenting uses high emotional support with few limits.

Basic Principles of Self-Perception

Cognitive Processes

People are faced with inordinate number of decisions on a daily basis.

According to Shelly Taylor, people are "cognitive misers".

In this model, cognitive resources are limited, so the mind works to "hoard" them by taking cognitive short cuts

Another way that cognitive resources are protected is through *selective attention* with high priority given to information pertaining to the self.

Another principle of self-cognition is that people strive to understand themselves.

Self-Attributions

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Self-attributions are inferences that people draw about the causes of their behavior.

Fritz Heider was the first to assert that people tend to locate the cause of a behavior either within a person, attributing it to personal factors, or outside of a person, attributing it to environmental factors.

Internal or External

Internal attributions ascribe the causes of behavior to personal dispositions, traits, abilities, and feelings.

External Attributions ascribe the causes of behavior to situation demands and environmental constraints.

Studies suggest that people who attribute their setbacks to internal, personal causes while discounting external, situation explanations may be more prone to depression than people who display opposite tendencies.

Stable Or Unstable

A stable cause is one that is more or less permanent and unlikely to change over time.

Unstable causes of behavior are variable or subject to change.