PSYCHOLOGY OF ADJUSTMENT



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Psychology 230: Psychology of Adjustment

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CHAPTER OVERVIEW

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1.1: Introduction to Theoretical History of Personality Development

1.1: Introduction to Theoretical History of Personality Development



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Learning Objectives

1. Become familiar with various perspectives of personality across history.
2. Explain the differences between theoretical perspectives of personality development.
3. Identify cultural differences that affect personality development.

Food for Thought...

Three months before William Jefferson Blythe III was born, his father died in a car accident. He was raised by his mother, Virginia Dell, and grandparents, in Hope, Arkansas. When he turned 4, his mother married Roger Clinton, Jr., an alcoholic who was physically abusive to William's mother. Six years later, Virginia gave birth to another son, Roger. William, who later took the last name Clinton from his stepfather, became the 42nd president of the United States. While Bill Clinton was making his political ascendance, his half-brother, Roger Clinton, was arrested numerous times for drug charges, including possession, conspiracy to distribute cocaine, and driving under the influence, serving time in jail. Two brothers, raised by the same people, took radically different paths in their lives. Why did they make the choices they did? What internal forces shaped their decisions? Personality psychology can help us answer these questions and more.

Personality refers to the long-standing traits and patterns that propel individuals to consistently think, feel, and behave in specific ways. Our personality is what makes us unique individuals. Each person has an idiosyncratic pattern of enduring, long-term characteristics and a manner in which they interact with other individuals and the world around them. Our personalities are thought to be long term, stable, and not easily changed. The word *personality* comes from the Latin word *persona*. In the ancient world, a persona was a mask worn by an actor. While we tend to think of a mask as being worn to conceal one's identity, the theatrical mask was originally used to either represent or project a specific personality trait of a character (Figure 11.2).



Figure Happy, sad, impatient, shy, fearful, curious, helpful. What characteristics describe your personality?

Historical Perspectives

The concept of personality has been studied for at least 2,000 years, beginning with Hippocrates in 370 BCE (Fazeli, 2012). Hippocrates theorized that personality traits and human behaviors are based on four separate temperaments associated with four fluids ("humors") of the body: choleric temperament (yellow bile from the liver), melancholic temperament (black bile from the

kidneys), sanguine temperament (red blood from the heart), and phlegmatic temperament (white phlegm from the lungs) (Clark & Watson, 2008; Eysenck & Eysenck, 1985; Lecci & Magnavita, 2013; Noga, 2007). Centuries later, the influential Greek physician and philosopher Galen built on Hippocrates's theory, suggesting that both diseases and personality differences could be explained by imbalances in the humors and that each person exhibits one of the four temperaments. For example, the choleric person is passionate, ambitious, and bold; the melancholic person is reserved, anxious, and unhappy; the sanguine person is joyful, eager, and optimistic; and the phlegmatic person is calm, reliable, and thoughtful (Clark & Watson, 2008; Stelmack & Stalikas, 1991). Galen's theory was prevalent for over 1,000 years and continued to be popular through the Middle Ages.

In 1780, Franz Gall, a German physician, proposed that the distances between bumps on the skull reveal a person's personality traits, character, and mental abilities (Figure 11.3). According to Gall, measuring these distances revealed the sizes of the brain areas underneath, providing information that could be used to determine whether a person was friendly, prideful, murderous, kind, good with languages, and so on. Initially, phrenology was very popular; however, it was soon discredited for lack of empirical support and has long been relegated to the status of pseudoscience (Fancher, 1979).



Figure The pseudoscience of measuring the areas of a person's skull is known as phrenology. (a) Gall developed a chart that depicted which areas of the skull corresponded to particular personality traits or characteristics (Hothersall, 1995). (b) An 1825 lithograph depicts Gall examining the skull of a young woman. (credit b: modification of work by Wellcome Library, London)

In the centuries after Galen, other researchers contributed to the development of his four primary temperament types, most prominently Immanuel Kant (in the 18th century) and psychologist Wilhelm Wundt (in the 19th century) (Eysenck, 2009; Stelmack & Stalikas, 1991; Wundt, 1874/1886) (Figure 11.4). Kant agreed with Galen that everyone could be sorted into one of the four temperaments and that there was no overlap between the four categories (Eysenck, 2009). He developed a list of traits that could be used to describe the personality of a person from each of the four temperaments. However, Wundt suggested that a better description of personality could be achieved using two major axes: emotional/nonemotional and changeable/unchangeable. The first axis separated strong from weak emotions (the melancholic and choleric temperaments from the phlegmatic and sanguine). The second axis divided the changeable temperaments (choleric and sanguine) from the unchangeable ones (melancholic and phlegmatic) (Eysenck, 2009).

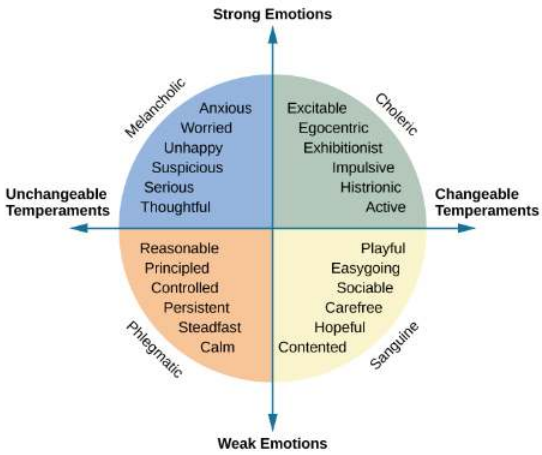


Figure Developed from Galen's theory of the four temperaments, Kant proposed trait words to describe each temperament. Wundt later suggested the arrangement of the traits on two major axes.

Sigmund Freud's psychodynamic perspective of personality was the first comprehensive theory of personality, explaining a wide variety of both normal and abnormal behaviors. According to Freud, unconscious drives influenced by sex and aggression, along

with childhood sexuality, are the forces that influence our personality. Freud attracted many followers who modified his ideas to create new theories about personality. These theorists, referred to as neo-Freudians, generally agreed with Freud that childhood experiences matter, but they reduced the emphasis on sex and focused more on the social environment and effects of culture on personality. The perspective of personality proposed by Freud and his followers was the dominant theory of personality for the first half of the 20th century.

Other major theories then emerged, including the learning, humanistic, biological, evolutionary, trait, and cultural perspectives. In this chapter, we will explore these various perspectives on personality in depth.

LINK TO LEARNING

https://youtu.be/X3CaKQWWe_U

View this video of an overview of some of the psychological perspectives on personality to learn more.



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1.2: Freud and the Psychodynamic Perspective



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Sigmund Freud (1856–1939) is probably the most controversial and misunderstood psychological theorist. When reading Freud's theories, it is important to remember that he was a medical doctor, not a psychologist. There was no such thing as a degree in psychology at the time that he received his education, which can help us understand some of the controversy over his theories today. However, Freud was the first to systematically study and theorize the workings of the unconscious mind in the manner that we associate with modern psychology.

In the early years of his career, Freud worked with Josef Breuer, a Viennese physician. During this time, Freud became intrigued by the story of one of Breuer's patients, Bertha Pappenheim, who was referred to by the pseudonym Anna O. (Launer, 2005). Anna O. had been caring for her dying father when she began to experience symptoms such as partial paralysis, headaches, blurred vision, amnesia, and hallucinations (Launer, 2005). In Freud's day, these symptoms were commonly referred to as hysteria. Anna O. turned to Breuer for help. He spent 2 years (1880–1882) treating Anna O. and discovered that allowing her to talk about her experiences seemed to bring some relief of her symptoms. Anna O. called his treatment the "talking cure" (Launer, 2005). Despite the fact that Freud never met Anna O., her story served as the basis for the 1895 book, *Studies on Hysteria*, which he co-authored with Breuer. Based on Breuer's description of Anna O.'s treatment, Freud concluded that hysteria was the result of sexual abuse in childhood and that these traumatic experiences had been hidden from consciousness. Breuer disagreed with Freud, which soon ended their work together. However, Freud continued to work to refine talk therapy and build his theory on personality.

Levels of Consciousness

To explain the concept of **conscious** versus **unconscious** experience, Freud compared the mind to an iceberg (Figure 11.5). He said that only about one-tenth of our mind is conscious, and the rest of our mind is unconscious. Our unconscious refers to that mental activity of which we are unaware and are unable to access (Freud, 1923). According to Freud, unacceptable urges and desires are kept in our unconscious through a process called repression. For example, we sometimes say things that we don't intend to say by unintentionally substituting another word for the one we meant. You've probably heard of a Freudian slip, the term used to describe this. Freud suggested that slips of the tongue are actually sexual or aggressive urges, accidentally slipping out of our unconscious. Speech errors such as this are quite common. Seeing them as a reflection of unconscious desires, linguists today have found that slips of the tongue tend to occur when we are tired, nervous, or not at our optimal level of cognitive functioning (Motley, 2002).

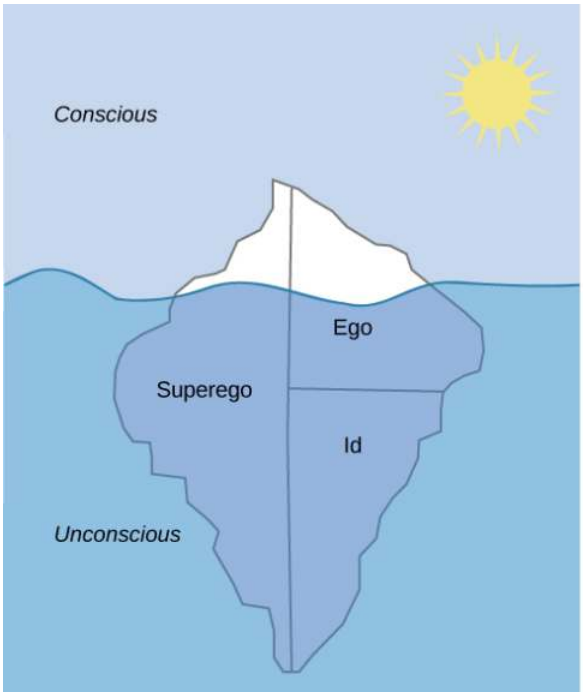


Figure Freud believed that we are only aware of a small amount of our mind's activities and that most of it remains hidden from us in our unconscious. The information in our unconscious affects our behavior, although we are unaware of it.

According to Freud, our personality develops from a conflict between two forces: our biological aggressive and pleasure-seeking drives versus our internal (socialized) control over these drives. Our personality is the result of our efforts to balance these two competing forces. Freud suggested that we can understand this by imagining three interacting systems within our minds. He called them the id, ego, and superego (Figure 11.6).

Figure The job of the ego, or self, is to balance the aggressive/pleasure-seeking drives of the id with the moral control of the superego.

The unconscious id contains our most primitive drives or urges, and is present from birth. It directs impulses for hunger, thirst, and sex. Freud believed that the id operates on what he called the "pleasure principle," in which the id seeks immediate gratification. Through social interactions with parents and others in a child's environment, the ego and superego develop to help control the id. The superego develops as a child interacts with others, learning the social rules for right and wrong. The superego acts as our conscience; it is our moral compass that tells us how we should behave. It strives for perfection and judges our behavior, leading to feelings of pride or—when we fall short of the ideal—feelings of guilt. In contrast to the instinctual id and the rule-based superego, the ego is the rational part of our personality. It's what Freud considered to be the self, and it is the part of our personality that is seen by others. Its job is to balance the demands of the id and superego in the context of reality; thus, it operates on what Freud called the "reality principle." The ego helps the id satisfy its desires in a realistic way.

The id and superego are in constant conflict, because the id wants instant gratification regardless of the consequences, but the superego tells us that we must behave in socially acceptable ways. Thus, the ego's job is to find the middle ground. It helps satisfy the id's desires in a rational way that will not lead us to feelings of guilt. According to Freud, a person who has a strong ego, which can balance the demands of the id and the superego, has a healthy personality. Freud maintained that imbalances in the system can lead to neurosis (a tendency to experience negative emotions), anxiety disorders, or unhealthy behaviors. For example, a person who is dominated by their id might be narcissistic and impulsive. A person with a dominant superego might be controlled by feelings of guilt and deny themselves even socially acceptable pleasures; conversely, if the superego is weak or absent, a person might become a psychopath. An overly dominant superego might be seen in an over-controlled individual whose rational grasp on reality is so strong that they are unaware of their emotional needs, or, in a neurotic who is overly defensive (overusing ego defense mechanisms).

Defense Mechanisms

Freud believed that feelings of anxiety result from the ego's inability to mediate the conflict between the id and superego. When this happens, Freud believed that the ego seeks to restore balance through various protective measures known as defense mechanisms (Figure 11.7). When certain events, feelings, or yearnings cause an individual anxiety, the individual wishes to reduce that anxiety. To do that, the individual's unconscious mind uses ego defense mechanisms, unconscious protective behaviors that aim to reduce anxiety. The ego, usually conscious, resorts to unconscious strivings to protect the ego from being overwhelmed by anxiety. When we use defense mechanisms, we are unaware that we are using them. Further, they operate in various ways that distort reality. According to Freud, we all use ego defense mechanisms.

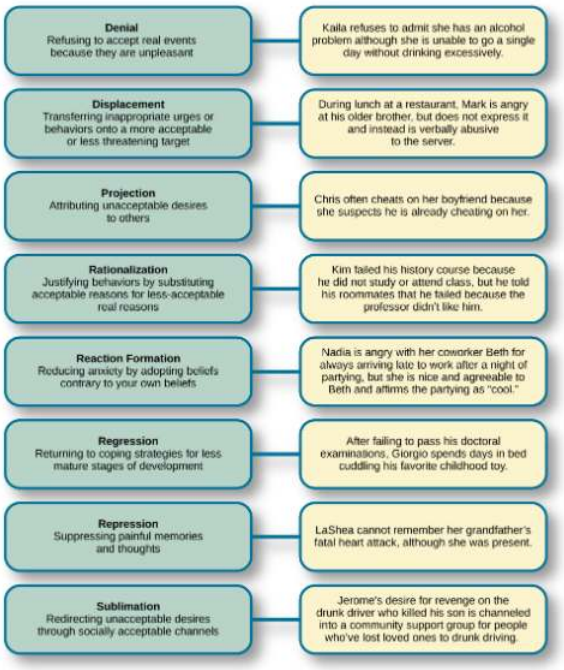


Figure 11.7 Defense mechanisms are unconscious protective behaviors that work to reduce anxiety.

work to reduce anxiety.

While everyone uses defense mechanisms, Freud believed that overuse of them may be problematic. For example, let's say Joe is a high school football player. Deep down, Joe feels sexually attracted to males. His conscious belief is that being gay is immoral and that if he were gay, his family would disown him and he would be ostracized by his peers. Therefore, there is a conflict between his conscious beliefs (being gay is wrong and will result in being ostracized) and his unconscious urges (attraction to males). The idea that he might be gay causes Joe to have feelings of anxiety. How can he decrease his anxiety? Joe may find himself acting very "macho," making gay jokes, and picking on a school peer who is gay. This way, Joe's unconscious impulses are further submerged.

There are several different types of defense mechanisms. For instance, in repression, anxiety-causing memories from consciousness are blocked. As an analogy, let's say your car is making a strange noise, but because you do not have the money to get it fixed, you just turn up the radio so that you no longer hear the strange noise. Eventually you forget about it. Similarly, in the human psyche, if a memory is too overwhelming to deal with, it might be repressed and thus removed from conscious awareness (Freud, 1920). This repressed memory might cause symptoms in other areas.

Another defense mechanism is reaction formation, in which someone expresses feelings, thoughts, and behaviors opposite to their inclinations. In the above example, Joe made fun of a gay peer while himself being attracted to males. In regression, an individual acts much younger than their age. For example, a four-year-old child who resents the arrival of a newborn sibling may act like a baby and revert to drinking out of a bottle. In projection, a person refuses to acknowledge her own unconscious feelings and instead sees those feelings in someone else. Other defense mechanisms include rationalization, displacement, and sublimation.

LINK TO LEARNING

https://youtu.be/zWpZS0WqMWs

Watch this video of Freud's defense mechanisms to review.

Stages of Psychosexual Development



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Freud believed that personality develops during early childhood: Childhood experiences shape our personalities as well as our behavior as adults. He asserted that we develop via a series of stages during childhood. Each of us must pass through these childhood stages, and if we do not have the proper nurturing and parenting during a stage, we will be stuck, or fixated, in that stage, even as adults.

In each psychosexual stage of development, the child's pleasure-seeking urges, coming from the id, are focused on a different area of the body, called an erogenous zone. The stages are oral, anal, phallic, latency, and genital (Table 11.1).

Freud's psychosexual development theory is quite controversial. To understand the origins of the theory, it is helpful to be familiar with the political, social, and cultural influences of Freud's day in Vienna at the turn of the 20th century. During this era, a climate of sexual repression, combined with limited understanding and education surrounding human sexuality, heavily influenced Freud's perspective. Given that sex was a taboo topic, Freud assumed that negative emotional states (neuroses) stemmed from suppression of unconscious sexual and aggressive urges. For Freud, his own recollections and interpretations of patients' experiences and dreams were sufficient proof that psychosexual stages were universal events in early childhood.

Freud's Stages of Psychosexual Development

Stage	Age (years)	Erogenous Zone	Major Conflict	Adult Fixation Example
Oral	0–1	Mouth	Weaning off breast or bottle	Smoking, overeating
Anal	1–3	Anus	Toilet training	Neatness, messiness
Phallic	3–6	Genitals	Oedipus/Electra complex	Vanity, overambition
Latency	6–12	None	None	None
Genital	12+	Genitals	None	None

Table 11.1

Oral Stage

In the oral stage (birth to 1 year), pleasure is focused on the mouth. Eating and the pleasure derived from sucking (nipples, pacifiers, and thumbs) play a large part in a baby's first year of life. At around 1 year of age, babies are weaned from the bottle or breast, and this process can create conflict if not handled properly by caregivers. According to Freud, an adult who smokes, drinks, overeats, or bites her nails is fixated in the oral stage of her psychosexual development; she may have been weaned too early or too late, resulting in these fixation tendencies, all of which seek to ease anxiety.

Anal Stage

After passing through the oral stage, children enter what Freud termed the anal stage (1–3 years). In this stage, children experience pleasure in their bowel and bladder movements, so it makes sense that the conflict in this stage is over toilet training. During this stage of development, children work to master control of themselves. Freud suggested that success at the anal stage depended on how parents handled toilet training. Parents who offer praise and rewards encourage positive results and can help children feel

competent. Parents who are harsh in toilet training can cause a child to become so fearful of soiling that they over-control and become fixated at the anal stage, leading to the development of an anal-retentive personality. The anal-retentive personality is stingy and stubborn, has a compulsive need for order and neatness, and might be considered a perfectionist. If parents are too lenient in toilet training, the child may fail to develop sufficient self-control, become fixated at this stage, and develop an anal-expulsive personality. The anal-expulsive personality is messy, careless, disorganized, and prone to emotional outbursts.

Phallic Stage



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Freud's third stage of psychosexual development is the phallic stage (3–6 years), corresponding to the age when children become aware of their bodies and recognize the differences between boys and girls. The erogenous zone in this stage is the genitals. Conflict arises when the child feels a desire for the opposite-sex parent, and jealousy and hatred toward the same-sex parent. For boys, this is called the Oedipus complex, involving a boy's desire for his mother and his urge to replace his father who is seen as a rival for the mother's attention. The Oedipus complex is named for the Greek myth of Oedipus, who unwittingly kills his biological father and marries his biological mother. According to Freud, the boy is afraid his father will punish him for his feelings, so he experiences *castration anxiety*. The Oedipus complex is successfully resolved when the boy begins to identify with his father as an indirect way to have the mother. Failure to resolve the Oedipus complex may result in fixation and development of a personality that might be described as vain and overly ambitious.

Freud described *penis envy*, which he alleged girls experience because they do not have a penis. Girls also experience the Electra complex. The Electra complex, while often attributed to Freud, was actually proposed by Freud's protégé, Carl Jung (Jung & Kerenyi, 1963). A girl desires the attention of her father and wishes to take her mother's place. While Freud initially embraced the Electra complex as a parallel to the Oedipus complex, he later rejected it, yet it remains as a cornerstone of Freudian theory, thanks in part to academics in the field (Freud, 1931/1968; Scott, 2005).

Latency Period

Following the phallic stage of psychosexual development is a period known as the latency period (6 years to puberty). This period is not considered a stage, because sexual feelings are dormant as children focus on other pursuits, such as school, friendships, hobbies, and sports. Children generally engage in activities with peers of the same sex, which serves to consolidate a child's gender-role identity.

Genital Stage

The final stage is the genital stage (from puberty on). In this stage, there is a sexual reawakening as the incestuous urges resurface. The young person redirects these urges to other, more socially acceptable partners (who often resemble the other-sex parent). People in this stage have mature sexual interests, which for Freud meant a strong desire for the opposite sex. Individuals who successfully completed the previous stages, reaching the genital stage with no fixations, are said to be well-balanced, healthy adults.

While most of Freud's ideas have not found support in modern research, and several contemporary researchers rejected his premises, we cannot discount the contributions that Freud has made to the field of psychology. It was Freud who pointed out that a

large part of our mental life is influenced by the experiences of early childhood and takes place outside of our conscious awareness; his theories paved the way for others.

While Freud's focus on biological drives led him to emphasize the impact of sociocultural factors on personality development, his followers quickly realized that biology alone could not account for the diversity they encountered as the practice of psychoanalysis spread during the time of the Nazi Holocaust. The antisemitism which was prevalent during this period of time may have led mainstream psychoanalysts to focus primarily on the universality of the psychological structures of the mind.

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1.3: Neo-Freudians- Adler, Erikson, Jung and Horney

Freud attracted many followers who modified his ideas to create new theories about personality. These theorists, referred to as neo-Freudians, generally agreed with Freud that childhood experiences matter, but deemphasized sex, focusing more on the social environment and effects of culture on personality. Four notable neo-Freudians include Alfred Adler, Erik Erikson, Carl Jung (pronounced “Yoong”), and Karen Horney (pronounced “HORN-eye”).

Alfred Adler

Alfred Adler, a colleague of Freud’s and the first president of the Vienna Psychoanalytical Society (Freud’s inner circle of colleagues), was the first major theorist to break away from Freud (Figure 11.8). He subsequently founded a school of psychology called individual psychology, which focuses on our drive to compensate for feelings of inferiority. Adler (1937, 1956) proposed the concept of the inferiority complex. An inferiority complex refers to a person’s feelings that they lack worth and don’t measure up to the standards of others or of society. Adler’s ideas about inferiority represent a major difference between his thinking and Freud’s. Freud believed that we are motivated by sexual and aggressive urges, but Adler (1930, 1961) believed that feelings of inferiority in childhood are what drive people to attempt to gain superiority and that this striving is the force behind all of our thoughts, emotions, and behaviors.



Figure 11.8 Alfred Adler proposed the concept of the inferiority complex.

Adler also believed in the importance of social connections, seeing childhood development emerging through social development rather than the sexual stages Freud outlined. Adler noted the inter-relatedness of humanity and the need to work together for the betterment of all. He said, “The happiness of mankind lies in working together, in living as if each individual had set himself the task of contributing to the common welfare” (Adler, 1964, p. 255) with the main goal of psychology being “to recognize the equal rights and equality of others” (Adler, 1961, p. 691).

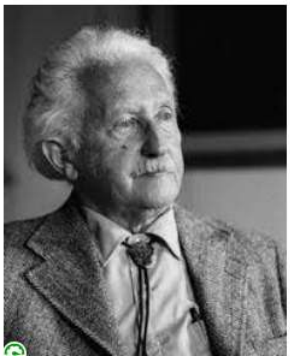
With these ideas, Adler identified three fundamental social tasks that all of us must experience: occupational tasks (careers), societal tasks (friendship), and love tasks (finding an intimate partner for a long-term relationship). Rather than focus on sexual or aggressive motives for behavior as Freud did, Adler focused on social motives. He also emphasized conscious rather than unconscious motivation, since he believed that the three fundamental social tasks are explicitly known and pursued. That is not to say that Adler did not also believe in unconscious processes—he did—but he felt that conscious processes were more important.

One of Adler’s major contributions to personality psychology was the idea that our birth order shapes our personality. He proposed that older siblings, who start out as the focus of their parents’ attention but must share that attention once a new child joins the family, compensate by becoming overachievers. The youngest children, according to Adler, may be spoiled, leaving the middle child with the opportunity to minimize the negative dynamics of the youngest and oldest children. Despite popular attention, research has not conclusively confirmed Adler’s hypotheses about birth order.

LINK TO LEARNING

One of Adler’s major contributions to personality psychology was the idea that our birth order shapes our personality. View this summary of birth order theory to learn more.

Erik Erikson



"Erik H. Erikson" by Erikson institute is licensed under CC BY-SA 4.0.

As an art school dropout with an uncertain future, young Erik Erikson met Freud's daughter, Anna Freud, while he was tutoring the children of an American couple undergoing psychoanalysis in Vienna. It was Anna Freud who encouraged Erikson to study psychoanalysis. Erikson received his diploma from the Vienna Psychoanalytic Institute in 1933, and as Nazism spread across Europe, he fled the country and immigrated to the United States that same year. As you learned when you studied lifespan development, Erikson later proposed a psychosocial theory of development, suggesting that an individual's personality develops throughout the lifespan—a departure from Freud's view that personality is fixed in early life. In his theory, Erikson emphasized the social relationships (i.e. psychosocial) that are important at each stage of personality development, in contrast to Freud's emphasis on sex. Erikson identified eight stages, each of which represents a conflict or developmental task (Table 11.2). The development of a healthy personality and a sense of competence depend on the successful completion of each task.

Erikson's Psychosocial Stages of Development

Stage	Age (years)	Developmental Task	Description
1	0–1	Trust vs. mistrust	Trust (or mistrust) that basic needs, such as nourishment and affection, will be met
2	1–3	Autonomy vs. shame/doubt	Sense of independence in many tasks develops
3	3–6	Initiative vs. guilt	Take initiative on some activities, may develop guilt when success not met or boundaries overstepped
4	7–11	Industry vs. inferiority	Develop self-confidence in abilities when competent or sense of inferiority when not
5	12–18	Identity vs. confusion	Experiment with and develop identity and roles
6	19–29	Intimacy vs. isolation	Establish intimacy and relationships with others
7	30–64	Generativity vs. stagnation	Contribute to society and be part of a family
8	65–	Integrity vs. despair	Assess and make sense of life and meaning of contributions

Table 11.2

Erik Erikson is one of the few personality theorists from a Western perspective who addressed the entire lifespan. He shifted from Freud's emphasis on psychosexual conflicts to one of psychosocial crises, which have unique manifestations through adulthood and old age. Erikson's theory has always been popular, but as our society has become increasingly older the need has grown to understand the aged individual, making Erikson's perspective even more valuable and relevant today than it was when he first

proposed it. If, indeed, Erikson's perspective on the personality changes occurring in adulthood and old age do become more relevant with time, it may result in an interesting change in Erikson's place in psychology. Although most personality textbooks devote a chapter to Erikson, and he is typically covered in lifespan developmental texts as well, he is not mentioned in most history of psychology textbooks, and those that do mention him do so only briefly. As popular as he is with students of psychology, and most psychology faculty as well, becoming a common topic in the history of his field would be a distinct honor.

It is also important to note that Erikson was first, and foremost, a psychoanalyst, and a child psychoanalyst at that. He did not neglect the importance of childhood as he pursued the psychosocial changes that accompany aging:

> *One may scan work after work on history, society, and morality and find little reference to the fact that all people start as children and that all peoples begin in their nurseries. It is human to have a long childhood; it is civilized to have an ever longer childhood. Long childhood makes a technical and mental virtuoso out of man, but it also leaves a lifelong residue of emotional immaturity in him (pg. 12; Erikson, 1950).*

Carl Jung

Carl Jung (Figure 11.9) was a Swiss psychiatrist and protégé of Freud, who later split off from Freud and developed his own theory, which he called analytical psychology. The focus of analytical psychology is on working to balance opposing forces of conscious and unconscious thought and experience within one's personality. According to Jung, this work is a continuous learning process—mainly occurring in the second half of life—of becoming aware of unconscious elements and integrating them into consciousness.



Figure 11.9 Carl Jung was interested in exploring the collective unconscious.

Jung's split from Freud was based on two major disagreements. First, Jung, like Adler and Erikson, did not accept that sexual drive was the primary motivator in a person's mental life. Second, although Jung agreed with Freud's concept of a personal unconscious, he thought it to be incomplete. In addition to the personal unconscious, Jung focused on the collective unconscious.

The collective unconscious is a universal version of the personal unconscious, holding mental patterns, or memory traces, which are common to all of us (Jung, 1928). These ancestral memories, which Jung called archetypes, are represented by universal themes in various cultures, as expressed through literature, art, and dreams (Jung). Jung said that these themes reflect common experiences of people the world over, such as facing death, becoming independent, and striving for mastery. Jung (1964) believed that through biology, each person is handed down the same themes and that the same types of symbols—such as the hero, the maiden, the sage, and the trickster—are present in the folklore and fairy tales of every culture. In Jung's view, the task of integrating these unconscious archetypal aspects of the self is part of the self-realization process in the second half of life. With this orientation toward self-realization, Jung parted ways with Freud's belief that personality is determined solely by past events and anticipated the humanistic movement with its emphasis on self-actualization and orientation toward the future.

Jung also proposed two attitudes or approaches toward life: **extroversion and introversion** (Jung, 1923) (Table 11.3). These ideas are considered Jung's most important contributions to the field of personality psychology, as almost all models of personality now include these concepts. If you are an extrovert, then you are a person who is energized by being outgoing and socially oriented: You

derive your energy from being around others. If you are an introvert, then you are a person who may be quiet and reserved, or you may be social, but your energy is derived from your inner psychic activity. Jung believed a balance between extroversion and introversion best served the goal of self-realization.

Introverts and Extroverts

Introvert	Extrovert
Energized by being alone	Energized by being with others
Avoids attention	Seeks attention
Speaks slowly and softly	Speaks quickly and loudly
Thinks before speaking	Thinks out loud
Stays on one topic	Jumps from topic to topic
Prefers written communication	Prefers verbal communication
Pays attention easily	Distractible
Cautious	Acts first, thinks later

Table 11.3

Another concept proposed by Jung was the persona, which he referred to as a mask that we adopt. According to Jung, we consciously create this persona; however, it is derived from both our conscious experiences and our collective unconscious. What is the purpose of the persona? Jung believed that it is a compromise between who we really are (our true self) and what society expects us to be. We hide those parts of ourselves that are not aligned with society's expectations.

LINK TO LEARNING

Jung's view of extroverted and introverted types serves as a basis of the Myers-Briggs Type Indicator (MBTI). This questionnaire describes a person's degree of introversion versus extroversion, thinking versus feeling, intuition versus sensation, and judging versus perceiving. Take this modified questionnaire based on the MBTI to learn more.

CONNECT THE CONCEPTS

Are Archetypes Genetically Based?

Jung proposed that human responses to archetypes are similar to instinctual responses in animals. One criticism of Jung is that there is no evidence that archetypes are biologically based or similar to animal instincts (Roesler, 2012). Jung formulated his ideas about 100 years ago, and great advances have been made in the field of genetics since that time. We've found that human babies are born with certain capacities, including the ability to acquire language. However, we've also found that symbolic information (such as archetypes) is not encoded on the genome and that babies cannot decode symbolism, refuting the idea of a biological basis to archetypes. Rather than being seen as purely biological, more recent research suggests that archetypes emerge directly from our experiences and are reflections of linguistic or cultural characteristics (Young-Eisendrath, 1995). Today, most Jungian scholars believe that the collective unconscious and archetypes are based on both innate and environmental influences, with the differences being in the role and degree of each (Sotirova-Kohli et al., 2013).

Karen Horney



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Karen Horney was one of the first women trained as a Freudian psychoanalyst. During the Great Depression, Horney moved from Germany to the United States, and subsequently moved away from Freud's teachings. Like Jung, Horney believed that each individual has the potential for self-realization and that the goal of psychoanalysis should be moving toward a healthy self rather than exploring early childhood patterns of dysfunction. Horney also disagreed with the Freudian idea that girls have penis envy and are jealous of male biological features. According to Horney, any jealousy is most likely culturally based, due to the greater privileges that men often have, meaning that the differences between men's and women's personalities are culturally based, not biologically based. She further suggested that men have womb envy, because they cannot give birth.

Horney's theories focused on the role of unconscious anxiety. She suggested that normal growth can be blocked by basic anxiety stemming from needs not being met, such as childhood experiences of loneliness and/or isolation. How do children learn to handle this anxiety? Horney suggested three styles of coping (Table 11.4). The first coping style, *moving toward people*, relies on affiliation and dependence. These children become dependent on their parents and other caregivers in an effort to receive attention and affection, which provides relief from anxiety (Burger, 2008). When these children grow up, they tend to use this same coping strategy to deal with relationships, expressing an intense need for love and acceptance (Burger, 2008). The second coping style, *moving against people*, relies on aggression and assertiveness. Children with this coping style find that fighting is the best way to deal with an unhappy home situation, and they deal with their feelings of insecurity by bullying other children (Burger, 2008). As adults, people with this coping style tend to lash out with hurtful comments and exploit others (Burger, 2008). The third coping style, *moving away from people*, centers on detachment and isolation. These children handle their anxiety by withdrawing from the world. They need privacy and tend to be self-sufficient. When these children are adults, they continue to avoid such things as love and friendship, and they also tend to gravitate toward careers that require little interaction with others (Burger, 2008).

Horney's Coping Styles

Coping Style	Description	Example
Moving toward people	Affiliation and dependence	Child seeking positive attention and affection from parent; adult needing love
Moving against people	Aggression and manipulation	Child fighting or bullying other children; adult who is abrasive and verbally hurtful, or who exploits others
Moving away from people	Detachment and isolation	Child withdrawn from the world and isolated; adult loner

Table 11.4

Horney believed these three styles are ways in which people typically cope with day-to-day problems; however, the three coping styles can become neurotic strategies if they are used rigidly and compulsively, leading a person to become alienated from others.3

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1.4: Erikson's Eight Stages of Development

Many people are familiar with Erikson's eight stages of life, but what is less well known is that each stage is tied to specific, basic social institutions and is also associated with a particular strength, which Erikson believed gave the individual a "semblance of instinctive certainty in his social ecology" (Erikson, 1968a; see also Erikson, 1950). Each stage can also be viewed as awakening a specific sense of estrangement, which can become the basis for psychopathology. As we are about to see, the first stage is basic trust vs. basic mistrust. If a child develops basic trust, they will also develop the basic strength of hope. Then, as they progress through life, they will likely encounter situations in which people cannot be trusted, but the person can remain hopeful. In contrast, hopelessness is a term closely identified with depression, and it is easy to see how a person who learns from the beginning of life that the people around them, indeed the whole world (as they perceive it), is a threatening and untrustworthy place. As each of the eight stages is introduced, the title will begin with the general age at which the stage occurs, the psychosocial crisis experienced during that stage, and finally, the primary human strength that is associated with the successful resolution of the crisis.

Infancy - Basic Trust vs. Basic Mistrust - Hope: The primary relationship (or social institution) of this first stage is the mother. The infant needs to be fed (and traditionally this was only breast-feeding), comforted, and protected. As we have seen in earlier chapters, the child does not necessarily recognize that the mother is a separate person, so the bond between them is extraordinarily intimate. It is inevitable, however, that the child will experience discomfort and pain, and that the mother will not be able to immediately attend to every need. In such times of distress, the child who mostly trusts in the care of their mother will be able to hope that the care is coming.

Figure **1.4.1**

As a young child develops a sense of autonomy, they begin to do more for themselves.

Early Childhood - Autonomy vs. Shame, Doubt - Will: At this stage, both parents become the primary social institution. As young children develop the ability to walk and talk they begin to do many things for themselves. However, their actions often lead to restrictions, as they experience the categorical rules of "yes and no," "right and wrong," or "good and bad." Shame is the consequence of being told that one is bad or wrong. Doubt arises when the child is unsure. As they develop their will power, i.e., their exercise of free will, they may not be sure what to do in a certain situation. A child who has been supported in exercising their autonomy will develop the will power to restrain themselves without experiencing shame or doubt. For example, they will learn not to run out into the busy street, and even feel good about their ability to take care of and protect themselves. It is often fascinating to watch a young child demonstrate this protectiveness when they interact with an even younger child. One can easily see the satisfaction in understanding rules and guidelines as, say, an eight-year old looks after a two-year old cousin.

Play Age - Initiative vs. Guilt - Purpose: The entire family (e.g., siblings, grandparents, etc.) provides the social context for this developmental stage. As the child of age three or four years old becomes able to do much more, and to do so more vigorously, they begin to realize something of what is expected of them as adults. So, they being to play with other children, older children, and to play games that mimic things done by adults. This helps them to develop a sense of purpose, and to pursue valued goals and skills. Excessive initiative, especially when combined with autonomy, can lead to problems such as rivalry and jealousy, especially with younger siblings. It can also lead to aggressive manipulation or coercion. Consequently, the child can begin to feel guilty about their actions, especially if they are punished.

Figure **1.4.2**

As children grow a little older, they begin to mimic what they see being done by older children and adults.

School Age - Industry vs. Inferiority - Competence: The social institutions relevant to this stage now move outside the family, including the neighborhood, community, and schools. It is one thing to play adult roles, such as in the previous stage, but in this stage the child actually begins the process of preparing to be a caretaker and provider for others, such as their own children. In all cultures, according to Erikson, at this age (beginning at 5 to 6 years old) children receive some form of systematic training, and they also learn eagerly from older children. Unfortunately, some children are not as successful as others, particularly in the restrictive learning environment of schools. Keep in mind that Erikson was trained in the Montessori style of education, which emphasizes free exploration and active learning, at each child's own pace (Lillard & Jessen, 2003; Spietz, 1991). If children are indeed successful, if they are given the freedom to learn, they will develop a sense of competence, which will help them to persevere when faced with more challenging tasks.

Adolescence - Identity vs. Role Diffusion, Confusion - Fidelity: The family finally loses its place of primacy as a social institution, as peer groups and outgroups become the most significant social institutions. According to Erikson, childhood comes to an end when a person has developed the skills and tools to proceed into adulthood. First, however, there is the period in which one's body changes from a child to an adult: **puberty**. Known psychologically as adolescence, it is a period in which each person must determine how they will fit their particular skills into the adult world of their culture. This requires forming one's identity. The fidelity that Erikson speaks of refers to the ability to remain true to oneself, and to one's significant others. This period is easiest for children who are gifted and well trained in the pursuit of clear goals, and also for children who receive a good deal of affirmation from their peers.

The pursuit of one's identity can be quite challenging, and we will examine identity in more detail in the next section. But first, one way to cope with the challenge of forming one's identity is to stop doing it for a while, something Erikson called a psychosocial **moratorium** (Erikson, 1959). A moratorium is a break that one takes in life before committing oneself to a career. Some people serve in the military or the Peace Corps before coming home and taking their place in the community. Some travel, and try to "see the world," before starting college. Erikson considered the moratorium to be a natural and, in many cases, quite productive activity. To cite one of Erikson's examples, a young Charles Darwin, who had been training for the ministry, left England on a 5-year voyage on a ship called the Beagle in order to participate in geological studies (he was also studying geology). It was during that trip that he made the initial observations of animals and fossils that ultimately led to his theory of evolution.

Young Adulthood - Intimacy vs. Isolation - Love: With the onset of adulthood, the most significant social factors become partners in friendship, sex, competition, and cooperation. Once an individual has consolidated their own identity, they are capable of the self-abandonment necessary for intimate affiliations, passionate sexual unions, or inspiring encounters. According to Erikson, sexual encounters prior to fulfilling this stage are of the identity-confirming kind, rather than the truly intimate sexual relationships based on love. Love is the mutual devotion of two people. Individuals who are unsuccessful in making intimate contacts are at risk for exaggerating their isolation, which brings with it the danger of not making any new contacts that might lead to the very intimate relationship they are lacking.

Adulthood - Generativity vs. Stagnation, Self-Absorption - Care: The family household, including divided labor and shared household duties, becomes the primary social institution of adulthood. Erikson also referred to adulthood as **maturity**, and he considered this stage to be reciprocal. A mature person needs to be needed, and it is their very maturity that guides them to care for the needs of others. So, generativity is the concern with helping to establish and guide the next generation. It is psychosocial because it includes productivity and creativity, not just procreation. When the potential enrichment to be found in generativity fails, the consequences are often seen in the estrangements of the next generation. In other words, the children of stagnant, self-absorbed parents may have great difficulty forming their own identities and achieving intimacy in their relationships.

Old Age - Integrity vs. Despair - Wisdom: The social concerns for those approaching the end of life include "Humanity" and "Family." Wisdom allows one to maintain and convey the integrity of one's lifetime of experience, despite the gradual physical decline of the body. Wise people are able to pass on an integrated heritage to the next generation. For those who have failed to integrate their life's experiences, despair arises as the fear of death, death being the time limit on their opportunity to achieve integrity. Erikson described wisdom as "a detached and yet active concern with life in the face of death" (Erikson, 1968a).

Is there a ninth stage? After Erikson died, Joan Erikson wrote a few short chapters that were added to *The Life Cycle Completed* (Erikson & Erikson, 1997). Erikson had suggested that his wife was an important contributor to all of his theories, throughout his career, so it was not surprising that she offered these additions after his death. Indeed, they are most likely the result of her observations regarding his death, something he could then no longer write about.

Very Old Age - Despair vs. Gerotranscendence: Unlike the earlier stages, Joan Erikson felt that the negative aspect of this stage should be placed first. People who make it to 90 years old, and beyond, are close to death. Their bodies are steadily deteriorating, most, if not all, of their friends have died, some of their children may have died, their spouse has likely died, and the despair they face is quite real. The despair experienced in the eighth stage involves looking back at one's life, but in the ninth stage it involves looking squarely at one's present reality, and passing once again through life's stages. People who are very old can no longer trust their own capabilities, and they may need to be cared for, thus losing some of their autonomy. Their sense of purpose is dulled, and they lose the urgency and energy necessary to be industrious. Likewise, their identity may become unclear once again, and they can become isolated and self-absorbed. However, some very old people hold a special place in their families and/or communities, and

may withdraw only by choice, in order to contemplate and be at peace with their life. Joan Erikson refers to this choice as a dance with life:

With great satisfaction I have found that “transcendence” become very much alive if it is activated into “transcen*dance*,” which speaks to soul and body and challenges it to rise above the dystonic, clinging aspects of our worldly existence that burden and distract us from true growth and aspiration.

To reach for gerotranscendance is to rise above, exceed, outdo, go beyond, independent of the universe and time. It involves surpassing all human knowledge and experience. How, for heaven’s sake, is this to be accomplished? I am persuaded that only by doing and making do we become. (pg. 127; Erikson & Erikson, 1997)

? discussion question 1.4.1

Joan Erikson proposed a ninth stage, when death is imminent. Do you agree with this stage; do you hope it is possible to achieve gerotranscendence? Have you known anyone who was very old and facing death, and what was it like for them?

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1.5: The Importance of Identity

The developmental crisis that Erikson focused much of his career on was that of developing one's identity. From the beginning of publishing his theories, he emphasized that a lot of the psychological distress and pathological symptoms seen in childhood can be interpreted as the child expressing their *right* to find an identity in the world, and neurosis typically results from the loss of one's identity (Erikson, 1950). Erikson returned to this theme repeatedly in books such as *Identity and the Life Cycle* (Erikson, 1980a; originally published in 1959), *Identity: Youth and Crisis* (Erikson, 1968b), and *Dimensions of a New Identity* (Erikson, 1974). He also published *A Memorandum on Identity and Negro Youth* at the height of the Civil Rights Movement in America (Erikson, 1964). The importance of identity, and the stage of identity vs. role-diffusion and confusion, is that only upon completion of the first four stages of life is the ego fully mature, the point at which a person is ready to be an adult. But the entire period, the entire psychosocial crisis, is a critical time of transition:

Adolescents have always been especially open to conversion or to what is now called consciousness-expansion in the direction of physical, spiritual, and social experience. Their cognitive capacities and social interests are such that they want to go to the limit of experience before they fit themselves into their culture and fit their culture to themselves. (pg. 37; Erikson cited in Evans, 1964)

A General Definition of Identity

Since Erikson labeled his fifth stage of development identity vs. role diffusion and/or confusion, it is common to think that identity formation is something that occurs during adolescence. Actually, identity formation begins at birth, and continues throughout the lifespan. It is only in adolescence that the individual finally has the material around which to form an integrated identity that can remain somewhat stable, hence the psychosocial crisis that arises during that process of integration and more stable identity formation. Thus, a child will have some sense of self, but it is not until adolescence that it becomes a crisis. So what is that sense of self that forms the identity? Erikson himself turned to two great men, whom he described as "bearded and patriarchal founding fathers of the psychologies on which our thinking on identity is based:" William James and Sigmund Freud (Erikson, 1968).

A man's character is discernible in the mental or moral attitude in which, when it came upon him, he felt himself most deeply and intensely active and alive. At such moments there is a voice inside which speaks and says: "*This* is the real me!" (pg. 19; William James in a letter to his wife, cited in Erikson, 1968)

Moving beyond James' very personal description, Freud spoke of his Jewish identity as something that provided a cultural context in which he lived his life, even though he was never religious, and openly despised religion. He felt that he shared a Jewish cultural nature, which offered an explanation for, as well as a justification for, aspects of his personality that defied any other obvious explanation.

Based on these perspectives by James and Freud, Erikson described identity as a process rooted in the core of the individual, yet also rooted in the core of their communal culture. This complicated process involves both judging oneself in light of how others judge you, as well as judging the judgments others make about you. Eventually, the interplay between psychological and social factors results in an identity based on **psychosocial relativity** (Erikson, 1968). In other words, one's identity is very much influenced by where a person sees themselves fitting into their world. Consequently, a person may develop a healthy identity, or they can just as easily develop a negative identity (see below).

The term **identity crisis** was first used by Erikson during World War II, to describe a particular psychological disorder. They encountered patients, who had been fighting in the war, who had become severely disturbed. However, they could not be described in the typical ways, such as being "shell-shocked" or just faking mental illness to escape combat. Instead, they had lost a sense of personal sameness and historical continuity. Erikson proposed that they had lost the central control over that part of their self that psychoanalysts could only describe as the ego. Thus, he described these patients as having lost their "ego identity." Since World War II, Erikson felt that he and his colleagues were observing the same fundamental disorder in many severely conflicted young patients. These disturbed individuals were, in a sense, waging a war within themselves and against society. An identity crisis of this sort can affect groups as well as individuals (Erikson, 1968). In an interesting, and somewhat amusing example of group identity crisis, we can look at the reaction of the psychoanalytic community to the theories of Carl Jung. In Erikson's view, the psychoanalytic community reacted to Jung's proposal of the collective unconscious and archetypes as a threat to scientific approach advocated by Freud. Consequently, the majority of the psychoanalytic community ignored Jung's reasonable observations as well as his somewhat less scientific interpretations (Erikson, 1980a).

Obstacles to the Development of Identity

Erikson talked about two obstacles to the development of identity: **ratio** and **negative identity**. Ratio refers to the balance between the opposite poles of each psychosocial crisis: trust vs. mistrust, autonomy vs. shame, etc. Although it may be best for the ratio to favor trust, autonomy, and so on, it is unreasonable to expect a person to develop without any experience of trust being misplaced or without any feelings of shame. This helps to ground the person in the real world, particularly as it is appropriate to the customs of their culture (see Evans, 1964). Indeed, Erikson felt that identity could be viewed as being that subsystem within the ego that is closest to social reality, based on the integrated self-representations formed during the psychosocial crises of childhood. Thus, identity:

…could be said to be characterized by the more or less *actually attained but forever-to-be-revised* sense of the reality of the self within social reality; while the imagery of the ego ideal could be said to represent a set of *to-be-strived-for but forever-not-quite-attainable ideal* goals for the self. (pg. 160; Erikson, 1980a)

Negative identity is often expressed as an angry and snobbish rejection of the roles expected by one's family, community, or even society. It is a profound reaction to the loss of identity that typically arises when identity development has lost the promise of wholeness that one expects to obtain from their identity. The consequences can be severe, for both individuals and groups of young people. Erikson worked with young people who were beginning to make choices in life that could easily lead them toward their vindictive fantasies of becoming prostitutes or drug addicts (an extreme way of rebelling against their parents). As such disturbed young people gather together, they can form gangs, drug rings, sex clubs, and the like (Erikson, 1968b, 1980a). Society, according to Erikson, often makes the mistake of enhancing this maladaptive behavior:

If, for simplicity's sake or in order to accommodate ingrown habits of law or psychiatry, they diagnose and treat as a criminal, as a constitutional misfit, as a derelict doomed by his upbringing, or indeed as a deranged patient a young person who, for reasons of personal or social marginality, is close to choosing a negative identity, that young person may well put his energy into becoming exactly what the careless and fearful community expects him to be - and make a total job of it. (pg. 196; Erikson, 1968b)

Erikson believed that women and minorities (indeed, oppressed people in any situation) face special problems in the formation of their identity. Erikson considered men and women to be fundamentally different, but more importantly, he believed that only women could ensure the future of humanity. According to Erikson, men try to solve problems with "bigger and better wars." And now, with the advent of nuclear bombs, men have nearly reached the limit of their ability to destroy each other. The future, therefore, requires the feminine aspects of personality, including realistically caring for the home, responsibly raising the children, being resourceful in peacekeeping, and devotion to healing:

The question arises whether such a potential for annihilation as now exists in the world should continue to exist without the representation of the mothers of the species in the councils of image-making and decision. (pg. 261; Erikson, 1968b)

For Blacks in America, the identity crisis has been one of being separated from their African heritage, and yet also separated from the White American heritage that surrounds them. Erikson recounts both clinical examples and folklore that emphasize the value placed on being White by Blacks themselves (Erikson, 1950, 1964, 1968, 1980a). The result is often psychological distress and depression, such as that seen in the classic study by Kenneth and Mamie Clark, in which Black children considered identification with their race as bad. Using Black and White dolls, some of the young Black children actually cried when asked to point to the doll they looked most like (Clark & Clark, 1947). Perhaps the most dramatic example of Erikson's theory in action occurred during the 1960s. Disenfranchised Blacks adopted a negative identity and opposed many aspects of the American society that had oppressed Black's for so long (Note: Negative identity is used here only as Erikson's term, not to imply that the fight for racial equality was, in any way, something negative). With Malcolm X and the Nation of Islam, and Huey Newton and the Black Panthers, some young Black men opposed both the Christianity and the Democracy that formed so much of the American national identity. Those who did not, found themselves at odds with their own people, as we will see with Brian Copeland, author of Not a Genuine Black Man (see Chapter 16; Copeland, 2006). It should be noted, however, that the seemingly contradictory perspective of rejecting a society that gives one the very right to oppose it is not alien to the African psyche:

…the African gods south of the Sahara always had at least two heads, one for evil and one for good. Now people create God in their own image, what they think He - for God is always a "He" in patriarchal societies - what He is like or should be. So the African said, in effect: I am both good and evil; good and evil are the two parts of the thing that is me… (pg. 24; Huey Newton, recorded in Kai Erikson, 1973)

The idea that Black Americans might have been adopting a negative identity was more than just an academic theory for Erikson. In 1971, both Erikson and Huey Newton (who was then known as Supreme Commander of the Black Panther Party) presented talks to the students of Yale University. A short time later, they met again for a series of conversations in Oakland, California, which also included the Black sociologist J. Herman Blake and Erikson's son, Kai Erikson, also a sociologist (see K. Erikson, 1973). Among many topics, Newton described the revolutionary actions of Black activists at that time as a process, a contradiction between old ways and new ways. Any change, he argued, might be viewed as revolutionary at a particular point in time. Newton went on to describe how the Black community expected him to hate all White people, and how the Black community rejected many of its own because they had too many Caucasian features (such as relatively light skin). He rebelled against this discrimination, just as he did against the oppression that was so inherent in American society. Erikson, for his part, talked mostly about just how difficult it is for people of different backgrounds to understand each other's perspective. Most important, however, is the act of searching for some basis for understanding one another (K. Erikson, 1973).

In his autobiographical book *Revolutionary Suicide* (the preparation of which was assisted by J. Herman Blake; Newton, 1973), Newton begins with a tribute to a comrade who was killed in a shootout with the police, while seeking nothing more than what Newton considered the right of all men: dignity and freedom. He then offers a poem, which sounds very much like Taoist philosophy, as well as a search for a greater identity:

By having no family,

I inherited the family of humanity.

By having no possessions,

I have possessed all.

By rejecting the love of one,

I received the love of all.

By surrendering my life to the revolution,

I found eternal life.

Revolutionary suicide.

Huey P. Newton, in Revolutionary Suicide (1973)

? discussion question1.5.1

Erikson described the adoption of a negative identity as a serious rejection of one's expected place in life. Has there been a time in your life when you adopted a negative identity? Do you feel that sometimes it is necessary to adopt a negative identity in order to change the world we live in?

Identity and the Role of the Family - Perspectives from Around the World

Identity is not merely a personal phenomenon, it develops within a cultural context that is passed on through the family. The most important social institutions of the first three stages of development are the mother, then both parents, and finally, the family as a whole. As adults, individuals face not only their own psychosocial crises, but they serve as the parents of the next generation, as their children face the early development crises. Thus, it is important to consider the role that the family plays in general, and the perspectives that can be offered by **family psychology**.

It is difficult to define the word **family**, since it includes nuclear families (two-generations, with married parents and their own children), extended families (three or more generations), foster and adoptive families (which may be multi-racial and/or multi-cultural), single-parent families, gay or lesbian couples with or without children, remarried/step families, and others (Kaslow, 2001). Further complicating matters is the role the family plays as a microsystem of a given culture, especially when that culture is dramatically altered. For example, when the former Soviet Union collapsed, the entire economic and political structure of countries like Russia, Poland, East Germany, and Czechoslovakia were wiped out. When Yugoslavia broke apart, ancient ethnic hatred led to

brutal, local wars. The role that women play in many cultures has changed in recent years, whereas in some cultures the patriarchal authority has aggressively retained its domination of the culture. The Nobel Peace Prize for 2006 was awarded to Muhammad Yunus and the Grameen Bank for developing micro-credit loans, most of which go to poor women in oppressive societies, in an effort to help these women and their children rise out of poverty.

Family psychology addresses issues as complex as families themselves, including male-female relationships, domestic violence, child-rearing and socialization practices, divorce, the search for identity in a dysfunctional family setting, spirituality, drug addiction, war, crime and violence, homelessness, kidnapping, immigration, etc. (Kaslow, 2001). When the members of a family face any of these problems, or perhaps a number of them, family psychologists can help the individuals to retain their own sense of identity, in part by focusing on reconstructing the social structure of the family (as opposed to focusing on diagnosing individual disorders). Unfortunately, the problems facing families are common throughout the world. However, since the family is the basic social structure within communities across all cultures, family therapy can play an important role in helping to solve these problems. For example, family therapy has been used to study and treat a variety of problems in different countries: conduct disorder in youth from the U.S. Virgin Islands (Dudley-Grant, 2001); community disasters, war stress, and the effects of immigration on Israeli families (Halpern, 2001); and the refusal of some children in Japan to attend school (Kameguchi & Murphy-Shigematsu, 2001). In each of these cultures the family is considered to play a particularly important role in identity formation.

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1.6: Learning Approaches

1.4: Learning Approaches

In contrast to the psychodynamic approaches of Freud and the neo-Freudians, which relate personality to inner (and hidden) processes, the learning approaches focus only on observable behavior. This illustrates one significant advantage of the learning approaches over psychodynamics: Because learning approaches involve observable, measurable phenomena, they can be scientifically tested.

The Behavioral Perspective

Behaviorists do not believe in biological determinism: They do not see personality traits as inborn. Instead, they view personality as significantly shaped by the reinforcements and consequences outside of the organism. In other words, people behave in a consistent manner based on prior learning. B. F. Skinner, a strict behaviorist, believed that environment was solely responsible for all behavior, including the enduring, consistent behavior patterns studied by personality theorists.

As you may recall from your study on the psychology of learning, Skinner proposed that we demonstrate consistent behavior patterns because we have developed certain response tendencies (Skinner, 1953). In other words, we *learn* to behave in particular ways. We increase the behaviors that lead to positive consequences, and we decrease the behaviors that lead to negative consequences. Skinner disagreed with Freud's idea that personality is fixed in childhood. He argued that personality develops over our entire life, not only in the first few years. Our responses can change as we come across new situations; therefore, we can expect more variability over time in personality than Freud would anticipate. For example, consider a young woman, Greta, a risk taker. She drives fast and participates in dangerous sports such as hang gliding and kiteboarding. But after she gets married and has children, the system of reinforcements and punishments in her environment changes. Speeding and extreme sports are no longer reinforced, so she no longer engages in those behaviors. In fact, Greta now describes herself as a cautious person.



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The Social-Cognitive Perspective

Albert Bandura agreed with Skinner that personality develops through learning. He disagreed, however, with Skinner's strict behaviorist approach to personality development, because he felt that thinking and reasoning are important components of learning. He presented a social-cognitive theory of personality that emphasizes both learning and cognition as sources of individual differences in personality. In social-cognitive theory, the concepts of reciprocal determinism, observational learning, and self-efficacy all play a part in personality development.

Reciprocal Determinism

In contrast to Skinner's idea that the environment alone determines behavior, Bandura (1990) proposed the concept of reciprocal determinism, in which cognitive processes, behavior, and context all interact, each factor influencing and being influenced by the

others simultaneously (Figure 11.10). *Cognitive processes* refer to all characteristics previously learned, including beliefs, expectations, and personality characteristics. *Behavior* refers to anything that we do that may be rewarded or punished. Finally, the *context* in which the behavior occurs refers to the environment or situation, which includes rewarding/punishing stimuli.

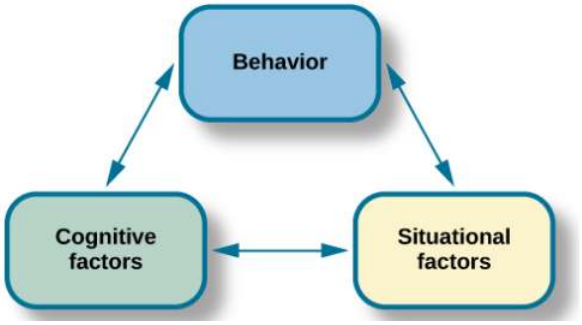


Figure 11.10 Bandura proposed the idea of reciprocal determinism: Our behavior, cognitive processes, and situational context all influence each other.

Consider, for example, that you're at a festival and one of the attractions is bungee jumping from a bridge. Do you do it? In this example, the behavior is bungee jumping. Cognitive factors that might influence this behavior include your beliefs and values, and your past experiences with similar behaviors. Finally, context refers to the reward structure for the behavior. According to reciprocal determinism, all of these factors are in play.

Observational Learning

Bandura's key contribution to learning theory was the idea that much learning is vicarious. We learn by observing someone else's behavior and its consequences, which Bandura called observational learning. He felt that this type of learning also plays a part in the development of our personality. Just as we learn individual behaviors, we learn new behavior patterns when we see them performed by other people or models. Drawing on the behaviorists' ideas about reinforcement, Bandura suggested that whether we choose to imitate a model's behavior depends on whether we see the model reinforced or punished. Through observational learning, we come to learn what behaviors are acceptable and rewarded in our culture, and we also learn to inhibit deviant or socially unacceptable behaviors by seeing what behaviors are punished.

We can see the principles of reciprocal determinism at work in observational learning. For example, personal factors determine which behaviors in the environment a person chooses to imitate, and those environmental events in turn are processed cognitively according to other personal factors. One person may experience receiving attention as reinforcing, and that person may be more inclined to imitate behaviors such as boasting when a model has been reinforced. For others, boasting may be viewed negatively, despite the attention that might result—or receiving heightened attention may be perceived as being scrutinized. In either case, the person may be less likely to imitate those behaviors even though the reasons for not doing so would be different.

Self-Efficacy

Bandura (1977, 1995) has studied a number of cognitive and personal factors that affect learning and personality development, and most recently has focused on the concept of self-efficacy. Self-efficacy is our level of confidence in our own abilities, developed through our social experiences. Self-efficacy affects how we approach challenges and reach goals. In observational learning, self-efficacy is a cognitive factor that affects which behaviors we choose to imitate as well as our success in performing those behaviors

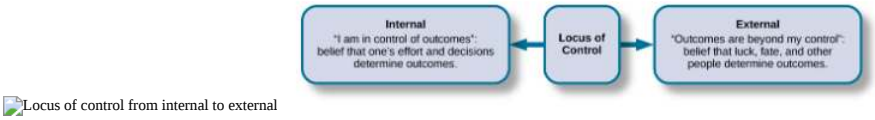


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People who have high self-efficacy believe that their goals are within reach, have a positive view of challenges seeing them as tasks to be mastered, develop a deep interest in and strong commitment to the activities in which they are involved, and quickly recover from setbacks. Conversely, people with low self-efficacy avoid challenging tasks because they doubt their ability to be successful, tend to focus on failure and negative outcomes, and lose confidence in their abilities if they experience setbacks. Feelings of self-efficacy can be specific to certain situations. For instance, a student might feel confident in her ability in English class but much less so in math class.

Julian Rotter and Locus of Control

Julian Rotter (1966) proposed the concept of locus of control, another cognitive factor that affects learning and personality development. Distinct from self-efficacy, which involves our belief in our own abilities, locus of control refers to our beliefs about the power we have over our lives. In Rotter's view, people possess either an internal or an external locus of control (Figure 11.11). Those of us with an internal locus of control ("internals") tend to believe that most of our outcomes are the direct result of our efforts. Those of us with an external locus of control ("externals") tend to believe that our outcomes are outside of our control. Externals see their lives as being controlled by other people, luck, or chance. For example, say you didn't spend much time studying for your psychology test and went out to dinner with friends instead. When you receive your test score, you see that you earned a D. If you possess an internal locus of control, you would most likely admit that you got a D because you didn't spend enough time studying and decide to study more for the next test. On the other hand, if you possess an external locus of control, you might conclude that the test was too hard and not bother studying for the next test, because you figure you will get a bad grade anyway. Researchers have found that people with an internal locus of control perform better academically, achieve more in their careers, are more independent, are healthier, are better able to cope, and are less depressed than people who have an external locus of control (Benassi, Sweeney, & Durfour, 1988; Lefcourt, 1982; Maltby, Day, & Macaskill, 2007; Whyte, 1977, 1978, 1980).



Locus of control from internal to external

Figure Locus of control occurs on a continuum from internal to external.

LINK TO LEARNING

Visit this web page describing Locus of Control to learn more.

Walter Mischel and the Person-Situation Debate

Walter Mischel was a student of Julian Rotter and taught for years at Stanford, where he was a colleague of Albert Bandura. Mischel surveyed several decades of empirical psychological literature regarding trait prediction of behavior, and his conclusion shook the foundations of personality psychology. Mischel found that the data did not support the central principle of the field—that a person's personality traits are consistent across situations. His report triggered a decades-long period of self-examination, known as the person-situation debate, among personality psychologists.

Mischel suggested that perhaps we were looking for consistency in the wrong places. He found that although behavior was inconsistent across different situations, it was much more consistent within situations—so that a person's behavior in one situation would likely be repeated in a similar one. And as you will see next regarding his famous "marshmallow test," Mischel also found that behavior is consistent in equivalent situations across time.

One of Mischel's most notable contributions to personality psychology was his ideas on self-regulation. According to Lecci & Magnavita (2013), "Self-regulation is the process of identifying a goal or set of goals and, in pursuing these goals, using both internal (e.g., thoughts and affect) and external (e.g., responses of anything or anyone in the environment) feedback to maximize goal attainment" (p. 6.3). Self-regulation is also known as will power. When we talk about will power, we tend to think of it as the ability to delay gratification. For example, Bettina's teenage son made strawberry cupcakes, and they looked delicious. However, Bettina forfeited the pleasure of eating one, because she is training for a 5K race and wants to be fit and do well in the race. Would you be able to resist getting a small reward now in order to get a larger reward later? This is the question Mischel investigated in his now-classic marshmallow test.

Mischel designed a study to assess self-regulation in young children. In the marshmallow study, Mischel and his colleagues placed a preschool child in a room with one marshmallow on the table. The children were told they could either eat the marshmallow now, or wait until the researcher returned to the room, and then they could have two marshmallows (Mischel, Ebbesen & Raskoff, 1972). This was repeated with hundreds of preschoolers. What Mischel and his team found was that young children differ in their degree of self-control. Mischel and his colleagues continued to follow this group of preschoolers through high school, and what do you think they discovered? The children who had more self-control in preschool (the ones who waited for the bigger reward) were more successful in high school. They had higher SAT scores, had positive peer relationships, and were less likely to have substance abuse issues; as adults, they also had more stable marriages (Mischel, Shoda, & Rodriguez, 1989; Mischel et al., 2010). On the other hand, those children who had poor self-control in preschool (the ones who grabbed the one marshmallow) were not as successful in high school, and they were found to have academic and behavioral problems. A more recent study using a larger and more representative sample found associations between early delay of gratification (Watts, Duncan, & Quan, 2018) and measures of achievement in adolescence. However, researchers also found that the associations were not as strong as those reported during Mischel's initial experiment and were quite sensitive to situational factors such as early measures of cognitive capacity, family background, and home environment. This research suggests that consideration of situational factors is important to better understand behavior.

LINK TO LEARNING

https://youtu.be/M0yhHKWUa0g

Watch Joachim de Posada's TEDTalk about the marshmallow test to learn more and to see the test given to children in Colombia.

Today, the debate is mostly resolved, and most psychologists consider both the situation and personal factors in understanding behavior. For Mischel (1993), people are situation processors. The children in the marshmallow test each processed, or interpreted, the rewards structure of that situation in their own way. Mischel’s approach to personality stresses the importance of both the situation and the way the person perceives the situation. Instead of behavior being determined by the situation, people use cognitive processes to interpret the situation and then behave in accordance with that interpretation.

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1.7: Behavioral Approaches

The Behavioral Perspective: A Focus on Observable Behavior

The **behavioral perspective** is the psychological approach that suggests that the keys to understanding development are observable behavior and external stimuli in the environment. Behaviorism is a theory of learning, and learning theories focus on how we respond to events or stimuli rather than emphasizing internal factors that motivate our actions. These theories provide an explanation of how experience can change what we do.

Behaviorism emerged early in the 20th century and became a major force in American psychology. Championed by psychologists such as John B. Watson (1878–1958) and B. F. Skinner (1904–1990), behaviorism rejected any reference to mind and viewed overt and observable behavior as the proper subject matter of psychology. Through the scientific study of behavior, it was hoped that laws of learning could be derived that would promote the prediction and control of behavior. Russian physiologist Ivan Pavlov (1849–1936) influenced early behaviorism in America. His work on conditioned learning, popularly referred to as classical conditioning, provided support for the notion that learning and behavior were controlled by events in the environment and could be explained with no reference to mind or consciousness.

Classical Conditioning and Emotional Responses

Classical conditioning theory helps us to understand how our responses to one situation become attached to new situations. For example, a smell might remind us of a time when we were a kid. If you went to a new cafe with the same smell as your elementary cafeteria, it might evoke the feelings you had when you were in school. Or a song on the radio might remind you of a memorable evening you spent with your first true love. Or, if you hear your entire name (Isaiah Wilmington Brewer, for instance) called as you walk across the stage to get your diploma and it makes you tense because it reminds you of how your father used to use your full name when he was mad at you, then you've been classically conditioned.



Figure 1. Ivan Pavlov

Classical conditioning explains how we develop many of our emotional responses to people or events or our "gut level" reactions to situations. New situations may bring about an old response because the two have become connected. Attachments form in this way. Addictions are affected by classical conditioning, as anyone who's tried to quit smoking can tell you. When you try to quit, everything that was associated with smoking makes you crave a cigarette.

Pavlov and Classical Conditioning

Ivan Pavlov (1849–1936) was a Russian physiologist interested in studying digestion (Figure 1). As he recorded the amount of salivation his laboratory dogs produced as they ate, he noticed that they actually began to salivate before the food arrived as the researcher walked down the hall and toward the cage. "This," he thought, "is not natural!" One would expect a dog to automatically salivate when the food hit their palate, but *before* the food comes? Of course, what happened is that the dogs knew that the food was coming because they had learned to associate the footsteps with the food. The keyword here is "learned."

A learned response is called a "conditioned" response. Pavlov began to experiment with this "psychic" reflex. He began to ring a bell, for instance, prior to introducing the food. Sure enough, after making this connection several times, the dogs could be made to salivate to the sound of a bell. Once the bell had become an event to which the dogs had learned to salivate, it was called a

conditioned stimulus. The act of salivating to a bell was a response that had also been learned, now termed in Pavlov's jargon, a conditioned response. Notice that the response, salivation, is the same whether it is conditioned or unconditioned (unlearned or natural). What changed is the stimulus to which the dog salivates. One is natural (unconditioned) and one is learned (conditioned) (Figure 2).

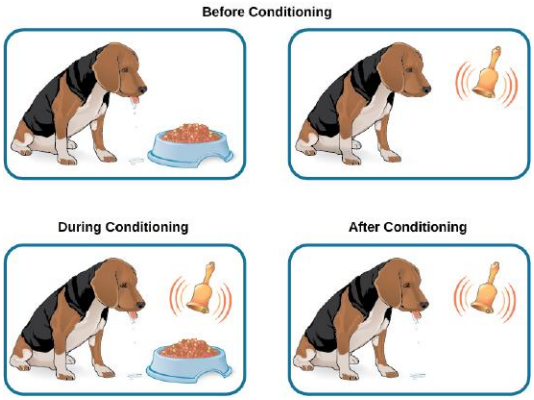


Figure 2. Before conditioning, an unconditioned stimulus (food) produces an unconditioned response (salivation), and a neutral stimulus (bell) does not produce a response. During conditioning, the unconditioned stimulus (food) is presented repeatedly just after the presentation of the neutral stimulus (bell). After conditioning, the neutral stimulus alone produces a conditioned response (salivation), thus becoming a conditioned stimulus. (Image Source: OpenStax Psychology, CC BY 4.0)

Watson and Behaviorism

Let's think about how classical conditioning is used on people, and not just with dogs. One of the most widespread applications of classical conditioning principles was brought to us by the psychologist, John B. Watson. Watson proposed that the process of classical conditioning (based on Pavlov's observations) was able to explain all aspects of human psychology. He established the psychological school of behaviorism, after doing research on animal behavior. This school was extremely influential in the middle of the 20th century when B.F. Skinner developed it further.

Watson believed that most of our fears and other emotional responses are classically conditioned. He gained a good deal of popularity in the 1920s with his expert advice on parenting offered to the public. He believed that parents could be taught to help shape their children's behavior and tried to demonstrate the power of classical conditioning with his famous experiment with an 18-month-old boy named "Little Albert." Watson sat Albert down and introduced a variety of seemingly scary objects to him: a burning piece of newspaper, a white rat, etc. But Albert remained curious and reached for all of these things. Watson knew that one of our only inborn fears is the fear of loud noises so he proceeded to make a loud noise each time he introduced one of Albert's favorites, a white rat. After hearing the loud noise several times paired with the rat, Albert soon came to fear the rat and began to cry when it was introduced.



"Gaaye Mouse - Cutest White Rat Ever!" by Gaaye Mouse is licensed under CC BY-NC-ND 2.0.

Watson filmed this experiment for posterity and used it to demonstrate that he could help parents achieve any outcomes they desired if they would only follow his advice. Watson wrote columns in newspapers and in magazines and gained a lot of popularity among parents eager to apply science to household order. Parenting advice was not the legacy Watson left us, however; where he really made his impact was in advertising. After Watson left academia, he went into the world of business and showed companies

how to tie something that brings about a natural positive feeling to their products to enhance sales. Thus the union of sex and advertising!

Operant Conditioning

Now we turn to the second type of associative learning, operant conditioning. In **operant conditioning**, organisms learn to associate a behavior and its consequence (Table 1). A pleasant consequence makes that behavior more likely to be repeated in the future. For example, Spirit, a dolphin at the National Aquarium in Baltimore, does a flip in the air when her trainer blows a whistle. The consequence is that she gets a fish.



"The Dolphin Habitat" by Cayusa is licensed under CC BY-NC 2.0.

Psychologist B. F. Skinner saw that classical conditioning is limited to existing behaviors that are reflexively elicited, and it doesn't account for new behaviors such as riding a bike. He proposed a theory about how such behaviors come about. Skinner believed that behavior is motivated by the consequences we receive for the behavior: the reinforcements and punishments. His idea that learning is the result of consequences is based on the **law of effect**, which was first proposed by psychologist Edward Thorndike. According to the law of effect, behaviors that are followed by consequences that are satisfying to the organism are more likely to be repeated, and behaviors that are followed by unpleasant consequences are less likely to be repeated.[3] Essentially, if an organism does something that brings about a desired result, the organism is more likely to do it again. If an organism does something that does not bring about a desired result, the organism is less likely to do it again. An example of the law of effect is in employment. One of the reasons (and often the main reason) we show up for work is because we get paid to do so. If we stop getting paid, we will likely stop showing up—even if we love our job.

Working with Thorndike's law of effect as his foundation, Skinner began conducting scientific experiments on animals (mainly rats and pigeons) to determine how organisms learn through operant conditioning.[4] He placed these animals inside an operant conditioning chamber, which has come to be known as a "Skinner box" (Figure 3). A Skinner box contains a lever (for rats) or disk (for pigeons) that the animal can press or peck for a food reward via the dispenser. Speakers and lights can be associated with certain behaviors. A recorder counts the number of responses made by the animal.

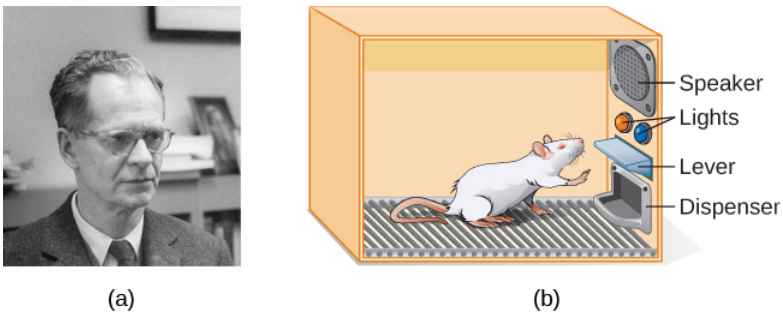


Figure 3. (a) B. F. Skinner developed operant conditioning for the systematic study of how behaviors are strengthened or weakened according to their consequences. (b) In a Skinner box, a rat presses a lever in an operant conditioning chamber to receive a food reward. (credit a: modification of work by "Silly rabbit"/Wikimedia Commons; adaptation included in OpenStax Psychology, CC BY 4.0)

Skinner believed that we learn best when our actions are reinforced. For example, a child who cleans his room and is reinforced (rewarded) with a big hug and words of praise is more likely to clean it again than a child whose deed goes unnoticed. Skinner believed that almost anything could be reinforcing. A reinforcer is anything following a behavior that makes it more likely to occur again. It can be something intrinsically rewarding (called intrinsic or primary reinforcers), such as food or praise, or it can be something that is rewarding because it can be exchanged for what one really wants (such as receiving money and using it to buy a cookie). Such reinforcers are referred to as secondary reinforcers.

Comparing Classical and Operant Conditioning

Table 1. Classical and Operant Conditioning Compared

	Classical Conditioning	Operant Conditioning
Conditioning approach	An unconditioned stimulus (such as food) is paired with a neutral stimulus (such as a bell). The neutral stimulus eventually becomes the conditioned stimulus, which brings about the conditioned response (salivation).	The target behavior is followed by reinforcement or punishment to either strengthen or weaken it so that the learner is more likely to exhibit the desired behavior in the future.
Stimulus timing	The stimulus occurs immediately before the response.	The stimulus (either reinforcement or punishment) occurs soon after the response.

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1.8: End of Chapter Wrap-Up

1.9: Chapter 1 Wrap-Up

Here are the key takeaways from Chapter 1:

- Sigmund Freud, despite being a controversial figure and not a psychologist by training, pioneered the study of the unconscious mind and developed influential theories on personality, the role of early childhood experiences, and defense mechanisms, laying foundational concepts for modern psychology.
- Neo-Freudians like Alfred Adler, Erik Erikson, Carl Jung, and Karen Horney agreed with Freud on the importance of childhood experiences but shifted the focus from sexual drives to social and cultural influences on personality development, each contributing unique perspectives such as Adler's inferiority complex, Erikson's lifespan development stages, Jung's collective unconscious, and Horney's coping styles.
- Learning approaches to personality, such as those proposed by Skinner and Bandura, emphasize observable behaviors shaped by environmental reinforcements and cognitive processes, offering a scientifically testable framework that contrasts with the inner, hidden processes focused on by psychodynamic theories.
- Humanistic psychology, championed by figures like Abraham Maslow and Carl Rogers, emphasizes the positive potential and self-directed growth of individuals, contrasting with the deterministic views of psychoanalysis and behaviorism by focusing on personal development, self-concept, and the pursuit of self-actualization.
- The biological approach to personality emphasizes that both genetic predispositions and physiological processes significantly shape our personalities, as evidenced by studies on twins and research on temperament. However, environmental factors also play a crucial role in how these traits are expressed and developed over time.
- The behavioral perspective in psychology emphasizes that observable behavior and environmental stimuli are key to understanding development, focusing on learned responses rather than internal motivations. Pioneers like John B. Watson and B. F. Skinner developed theories of classical and operant conditioning, demonstrating how behaviors can be shaped and controlled through reinforcement and punishment. This approach suggests that our actions are heavily influenced by external factors and that understanding these can help predict and modify behavior.
- Personality is influenced by both genetic and environmental factors, with culture playing a significant role. Cultural values, transmitted through language and social modeling, shape personality traits. Research shows variations in personality traits across cultures and regions, highlighting the importance of considering cultural influences. Individualist cultures value independence and personal achievement, while collectivist cultures prioritize social harmony and group needs. Three approaches to studying personality in cultural contexts—cultural-comparative, indigenous, and combined—help explore both universal and culture-specific aspects of personality.



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1.9: Biological Approaches

1.6: Biological Approaches

How much of our personality is in-born and biological, and how much is influenced by the environment and culture we are raised in? Psychologists who favor the biological approach believe that inherited predispositions as well as physiological processes can be used to explain differences in our personalities (Burger, 2008).

Evolutionary psychology relative to personality development looks at personality traits that are universal, as well as differences across individuals. In this view, adaptive differences have evolved and then provide a survival and reproductive advantage. Individual differences are important from an evolutionary viewpoint for several reasons. Certain individual differences, and the heritability of these characteristics, have been well documented. David Buss has identified several theories to explore this relationship between personality traits and evolution, such as life-history theory, which looks at how people expend their time and energy (such as on bodily growth and maintenance, reproduction, or parenting). Another example is costly signaling theory, which examines the honesty and deception in the signals people send one another about their quality as a mate or friend (Buss, 2009).



"Twins #22" by Peter Voerman photography is licensed under CC BY-NC 2.0.

In the field of behavioral genetics, the Minnesota Study of Twins Reared Apart—a well-known study of the genetic basis for personality—conducted research with twins from 1979 to 1999. In studying 350 pairs of twins, including pairs of identical and fraternal twins reared together and apart, researchers found that identical twins, whether raised together or apart, have very similar personalities (Bouchard, 1994; Bouchard, Lykken, McGue, Segal, & Tellegen, 1990; Segal, 2012). These findings suggest the heritability of some personality traits. Heritability refers to the proportion of difference among people that is attributed to genetics. Some of the traits that the study reported as having more than a 0.50 heritability ratio include leadership, obedience to authority, a sense of well-being, alienation, resistance to stress, and fearfulness. The implication is that some aspects of our personalities are largely controlled by genetics; however, it's important to point out that traits are not determined by a single gene, but by a combination of many genes, as well as by epigenetic factors that control whether the genes are expressed.

Other research that has examined the link between personality and other factors has identified and studied Type A and Type B personalities, which you will learn more about in the chapter on Stress, Health, and Lifestyle.

Temperament

Most contemporary psychologists believe temperament has a biological basis due to its appearance very early in our lives (Rothbart, 2011). As you learned when you studied lifespan development, Thomas and Chess (1977) found that babies could be categorized into one of three temperaments: easy, difficult, or slow to warm up. However, environmental factors (family interactions, for example) and maturation can affect the ways in which children's personalities are expressed (Carter et al., 2008).

Research suggests that there are two dimensions of our temperament that are important parts of our adult personality—reactivity and self-regulation (Rothbart, Ahadi, & Evans, 2000). Reactivity refers to how we respond to new or challenging environmental stimuli; self-regulation refers to our ability to control that response (Rothbart & Derryberry, 1981; Rothbart, Sheese, Rueda, & Posner, 2011). For example, one person may immediately respond to new stimuli with a high level of anxiety, while another barely notices it.



"Anxious on the boardwalk" by San Diego Shooter is licensed under CC BY-NC-ND 2.0.

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1.10: Cultural Understandings of Personality

1.8: Cultural Understandings of Personality

As you have learned in this chapter, personality is shaped by both genetic and environmental factors. The culture in which you live is one of the most important environmental factors that shapes your personality (Triandis & Suh, 2002). The term culture refers to all of the beliefs, customs, art, and traditions of a particular society. Culture is transmitted to people through language as well as through the modeling of culturally acceptable and nonacceptable behaviors that are either rewarded or punished (Triandis & Suh, 2002). With these ideas in mind, personality psychologists have become interested in the role of culture in understanding personality. They ask whether personality traits are the same across cultures or if there are variations. It appears that there are both universal and culture-specific aspects that account for variation in people's personalities.

Why might it be important to consider cultural influences on personality? Western ideas about personality may not be applicable to other cultures (Benet-Martinez & Oishi, 2008). In fact, there is evidence that the strength of personality traits varies across cultures. Let's take a look at some of the Big Five factors (conscientiousness, neuroticism, openness, and extroversion) across cultures. As you will learn when you study social psychology, Asian cultures are more collectivist, and people in these cultures tend to be less extroverted. People in Central and South American cultures tend to score higher on openness to experience, whereas Europeans score higher on neuroticism (Benet-Martinez & Karakitapoglu-Aygun, 2003).

According to a study by Rentfrow and colleagues, there also seem to be regional personality differences within the United States (Figure 11.15). Researchers analyzed responses from over 1.5 million individuals in the United States and found that there are three distinct regional personality clusters: Cluster 1, which is in the Upper Midwest and Deep South, is dominated by people who fall into the "friendly and conventional" personality; Cluster 2, which includes the West, is dominated by people who are more relaxed, emotionally stable, calm, and creative; and Cluster 3, which includes the Northeast, has more people who are stressed, irritable, and depressed. People who live in Clusters 2 and 3 are also generally more open (Rentfrow et al., 2013).

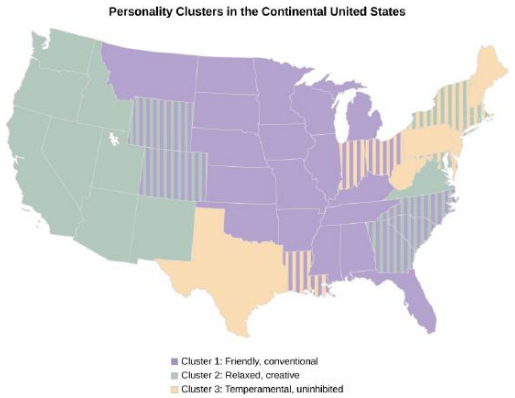


Figure 11.15 Researchers found three distinct regional personality clusters in the United States. People tend to be friendly and conventional in the Upper Midwest and Deep South; relaxed, emotionally stable, and creative in the West; and stressed, irritable, and depressed in the Northeast (Rentfrow et al., 2013).

One explanation for the regional differences is selective migration (Rentfrow et al., 2013). Selective migration is the concept that people choose to move to places that are compatible with their personalities and needs. For example, a person high on the agreeable scale would likely want to live near family and friends, and would choose to settle or remain in such an area. In contrast, someone high on openness would prefer to settle in a place that is recognized as diverse and innovative (such as California). Further, Rentfrow, Jost, Gosling, & Potter (2009) noted an overlap between geographical regions and personality characteristics that goes beyond the often-used explanations of religion, racial diversity, and education. Their research suggests that the psychological profile of a region is closely related to that of its residents. They found that levels of openness and conscientiousness in a state may predict voting patterns, indicating that there are correlations between geographic regions and personality differences between liberals and conservatives relating to political views, levels of economic vitality, and entrepreneurial rates.

Personality in Individualist and Collectivist Cultures

Individualist cultures and collectivist cultures place emphasis on different basic values. People who live in individualist cultures tend to believe that independence, competition, and personal achievement are important. Individuals in Western nations such as the

United States, England, and Australia score high on individualism (Oyserman, Coon, & Kemmelmier, 2002). People who live in collectivist cultures value social harmony, respectfulness, and group needs over individual needs. Individuals who live in countries in Asia, Africa, and South America score high on collectivism (Hofstede, 2001; Triandis, 1995). These values influence personality. For example, Yang (2006) found that people in individualist cultures displayed more personally oriented personality traits, whereas people in collectivist cultures displayed more socially oriented personality traits. Frewer and Bleus (1991) conducted a study of the Eysenck Personality Inventory in a collectivist culture using Papua New Guinean university students. They found that the results of the personality inventory were only relevant when analyzed within the context of a collectivist society. Similarly, Dana (1986) suggested that personality assessment services for Native Americans are often provided without a proper recognition of culture-specific responses and a tribe-specific frame of reference. Assessors need to have more than a general knowledge of history, tribal differences, contemporary culture on reservations, and levels of acculturation in order to interpret psychological test responses with a minimal bias.



"Native American drumming at the Century of Progress Indian Village" by UIC Library Digital Collections is licensed under CC BY-NC-ND 2.0.

Approaches to Studying Personality in a Cultural Context

There are three approaches that can be used to study personality in a cultural context, the *cultural-comparative approach*; the *indigenous approach*; and the *combined approach*, which incorporates elements of both views. Since ideas about personality have a Western basis, the cultural-comparative approach seeks to test Western ideas about personality in other cultures to determine whether they can be generalized and if they have cultural validity (Cheung van de Vijver, & Leong, 2011). For example, recall from the previous section on the trait perspective that researchers used the cultural-comparative approach to test the universality of McCrae and Costa's Five Factor Model. They found applicability in numerous cultures around the world, with the Big Five factors being stable in many cultures (McCrae & Costa, 1997; McCrae et al., 2005). The indigenous approach came about in reaction to the dominance of Western approaches to the study of personality in non-Western settings (Cheung et al., 2011). Because Western-based personality assessments cannot fully capture the personality constructs of other cultures, the indigenous model has led to the development of personality assessment instruments that are based on constructs relevant to the culture being studied (Cheung et al., 2011). The third approach to cross-cultural studies of personality is the combined approach, which serves as a bridge between Western and indigenous psychology as a way of understanding both universal and cultural variations in personality (Cheung et al., 2011).

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CHAPTER OVERVIEW

2: Carl Jung

Carl Jung brought an almost mystical approach to psychodynamic theory. An early associate and follower of Freud, Jung eventually disagreed with Freud on too many aspects of personality theory to remain within a strictly Freudian perspective. Subsequently, Jung developed his own theory, which applied concepts from natural laws (primarily in physics) to psychological functioning. Jung also introduced the concept of personality types, and began to address personality development throughout the lifespan. In his most unique contribution, at least from a Western perspective, Jung proposed that the human psyche contains within itself psychological constructs developed throughout the evolution of the human species.

2.1: Prelude to Carl Jung
2.2: A Brief Biography of Carl Jung
2.3: Basic Concepts
2.4: Personality Development
2.5: Jungian Analysis
2.6: A Final Note on Carl Jung
2.7: Personality Theory in Real Life
2.S: Chapter Summary

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2.1: Prelude to Carl Jung

Jung has always been controversial and confusing. His blending of psychology and religion, as well as his openness to different religious and spiritual philosophies, was not easy to accept for many psychiatrists and psychologists trying to pursue a purely scientific explanation of personality and mental illness. Perhaps no one was more upset than Freud, whose attitude toward Jung changed dramatically over just a few years. In 1907, Freud wrote a letter to Jung in which Freud offered high praise:

…I have already acknowledged…above all that your person has filled me with trust in the future, that I now know that I am dispensable like everyone else, and that I wish for no one other or better than you to continue and complete my work. (pg. 136; cited in Wehr, 1989)

In 1910, hoping that others would also support Jung, Freud wrote to Oskar Pfister:

I hope you will loyally support Jung, I want him to acquire the authority that will entitle him to leadership of the whole movement. (pg. 136; cited in Wehr, 1989)

However, in a dramatic shift just three years later, Freud wrote to Jung:

I suggest to you that we completely give up our private relationship. By this I lose nothing, since for a long time I have been bound to you emotionally only by the thin thread of previously experienced disappointments. … Spare me the supposed "duties of friendship." (pg. 136; cited in Wehr, 1989)

Later, in 1922, Freud thanked Oskar Pfister for his help in trying to eliminate Jung's influence on the psychoanalytic community:

With your ever more thorough and ever more clearly demonstrated dismissal of Jung and Adler, you have for a long time given me great satisfaction. (pg. 136; cited in Wehr, 1989)

Who was this man who inspired such profound confidence from Sigmund Freud, only to later inspire such contempt? And were his theories that difficult for the psychodynamic community, or psychology in general, to accept? Hopefully, this chapter will begin to answer those questions. As evidence of his character, and in contrast to Freud, Jung did not turn his back on his former mentor. Following Freud's death in 1939, and later in 1957, Jung wrote the following:

[Freud's work was]…surely the boldest attempt ever made on the apparently solid ground of empiricism to master the riddle of the unconscious psyche. For us young psychiatrists, it was a source of enlightenment… (pg. 29; cited in Wehr, 1989)

…Despite the resounding censure I suffered at the hands of Freud, I cannot, even despite my resentment toward him, fail to recognize his importance as a critical analyst of culture and as a pioneer in the field of psychology. (pg. 39; cited in Wehr, 1989)

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2.2: A Brief Biography of Carl Jung

At the beginning of his autobiography, entitled *Memories, Dreams, Reflections*, Jung (1961) described his life as "a story of the self-realization of the unconscious." Jung believed that our personality begins with a collective unconscious, developed within our species throughout time, and that we have only limited ability to control the psychic process that is our own personality. Thus, our true personality arises from within as our collective unconscious comes forth into our personal unconscious and then our consciousness. It can be helpful to view these concepts from an Eastern perspective, and it is interesting to note that "self-realization" was used in the name of the first Yoga society established in America (in 1920 by Paramahansa Yogananda).

Carl Gustav Jung was born on July 26th, 1875, in the small town of Kesswil, Switzerland, into an interesting and notable family. His grandfather of the same name had been a physician, and had established the psychiatric clinic at the University of Basel and the "Home of Good Hope" for mentally retarded children. At an early age he had been imprisoned for over a year, for the crime of having participated in a demonstration supporting democracy in Germany. Rumored to be an illegitimate son of the great Johann Wolfgang von Goethe, though there is no convincing evidence, the elder Carl Jung died before his namesake grandson ever knew him. Nonetheless, Jung was greatly influenced by stories he heard about his grandfather. His maternal grandfather, Samuel Preiswerk, was the dean of the Basel (Switzerland) clergy and pastor of a major church. He was one the first people in Europe to suggest a restoration of Palestine to the Jews, thus establishing himself as a forerunner to the Zionists. Samuel Preiswerk also believed that he was regularly surrounded by spirits (or ghosts), something that likely had quite an influence on Jung's theories (Jaffe, 1979; Wehr, 1989).

Jung's father, Johann Paul Achilles Jung, married Emilie Preiswerk in 1874. Johann Jung was a scholar of Oriental languages, studied Arabic, and was ordained a minister. In addition to being a pastor at two churches during Jung's childhood, Johann Jung was the pastor at Friedmatt, the insane asylum in Basel. During Jung's early childhood he did not always have the best of relationships with his parents. He considered his mother to be a good mother, but he felt that her true personality was always hidden. She spent some time in the hospital when he was three years old, in part due to problems in her marriage. Jung found this separation from his mother deeply troubling, and he became mistrustful of the spoken word "love." Since his father was a pastor, there were often funerals and burials, all of which was very mysterious to the young Jung. In addition, his mother was considered a spiritual medium, and often helped Jung with his later studies on the occult. Perhaps most troubling of all, was Jung's belief that his father did not really know God, but rather, had become a minister trapped in the performance of meaningless ritual (Jaffe, 1979; Jung, 1961; Wehr, 1989).

An only child until he was 9, Jung preferred to be left alone, or at least he came to accept his loneliness. Even when his parent's guests brought their children over for visits, Jung would simply play his games alone:

…I recall only that I did not want to be disturbed. I was deeply absorbed in my games and could not endure being watched or judged while I played them. (pg. 18; Jung, 1961)

He also had extraordinarily rich and meaningful dreams, many of which were quite frightening, and they often involved deeply religious themes. This is hardly surprising, since two uncles on his father's side of the family were ministers, and there were six more ministers on his mother's side. Thus, he was often engaged in religious discussions at home. He was particularly impressed with a richly illustrated book on Hinduism, with pictures of Brahma, Vishnu, and Shiva (the Hindu trinity of gods). Even at 6 years old, he felt a vague connection with the Hindu gods, something that once again would have an interesting influence on his later theories. These dreams led Jung into deep religious speculations, something he considered to be a secret that he could not share with anyone else (Jaffe, 1979; Jung, 1961; Wehr, 1989).

Jung's school-age years were a mixture of experiences. He enjoyed school, in the sense that it was easy for him and he found other children to play with. However, he also began studying Latin with his father and taking divinity classes. He found the classes on religion terribly boring, and the more he got to know his father, the less he believed that his father understood either God, religion, or spirituality. It didn't help that he was well-aware of the continued turmoil in his parent's marriage. In a cave in the garden he tended a fire that he meant to keep burning forever, and although he allowed other children to help gather the wood, only Jung himself could tend the fire. At the age of 11 he began attending the Gymnasium in Basel (something like an advanced high school). The other children were quite wealthy, and Jung became aware of how poor they were. Although this led him to feel some compassion for his father, the Gymnasium created a number of problems. Jung simply did not understand mathematics, his divinity

classes became unbearably boring, and so, school itself became boring. This led to a severe neurosis at the age of 12 (Jaffe, 1979; Jung, 1961; Wehr, 1989).

Jung had been knocked down by another boy on the way home from school. He hit his head on a rock, and was nearly knocked out. He was so dizzy that others had to help him, and he suddenly realized that he did not have to go to school if he was ill. Consequently, he began having fainting spells any time he was sent to school or to do his homework. He missed 6 months of school due his psychological problems, and Jung loved the opportunity to spend his days exploring the world in any way he wished. He was eventually diagnosed with epilepsy, though Jung himself knew the diagnosis was ridiculous. One day he heard his father expressing great fear to a friend about what would become of Jung if he were unable to earn his own living. The reality of this statement was shocking to Jung, and "From that moment on I became a serious child." He immediately went to study Latin, and began to feel faint. However, he consciously made himself aware of his neurosis, and cognitively fought it off. He soon returned to school, recognizing "That was when I learned what a neurosis is" (Jaffe, 1979; Jung, 1961; Wehr, 1989).

As he continued through school, his personal life continued to be quite strange. He began to believe that he was two people, one having lived 100 years earlier. He also had heated religious debates with his father. Fueling his courage during these debates was his belief that a vision had led to his understanding of true spirituality:

One fine summer day that same year I came out of school at noon and went to the cathedral square. The sky was gloriously blue, the day one of radiant sunshine. The roof of the cathedral glittered, the sun sparkling from the new, brightly glazed tiles. I was overwhelmed by the beauty of the sight, and thought: "The world is beautiful and the church is beautiful, and God made all this and sits above it far away in the blue sky on a golden throne and …" Here came a great hole in my thoughts, and a choking sensation. I felt numbed, and knew only: "Don't go on thinking now! Something terrible is coming, something I do not want to think, something I dare not even approach. Why not? Because I would be committing the most frightful of sins. What is the most terrible sin? Murder? No, it can't be that. The most terrible sin is the sin against the Holy Ghost, which cannot be forgiven. Anyone who commits that sin is damned to hell for all eternity. That would be very sad for my parents, if their only son, to whom they are so attached, should be doomed to eternal damnation. I cannot do that to my parents. All I need do is not go on thinking." (pg. 36; Jung, 1961)

However, Jung was not able to ignore his vision. He was tormented for days, and spent sleepless nights wondering why he would have to think something unforgivable as a result of praising God for the beauty of all creation. His mother saw how troubled he was, but Jung felt that he could not dare confide in her. Finally, he decided that it was God's will that he should face the meaning of this vision:

I thought it over again and arrived at the same conclusion. "Obviously God also desires me to show courage," I thought. "If that is so and I go through with it, then He will give me His grace and illumination."

I gathered all my courage, as though I were about to leap forthwith into hell-fire, and let the thought come. I saw before me the cathedral, the blue sky. God sits on His golden throne, high above the world - and from under the throne an enormous turd falls upon the sparkling new roof, shatters it, and breaks the walls of the cathedral asunder. (pg. 39; Jung 1961)

Jung was overjoyed by his understanding of this vision. He believed that God had shown him that what mattered in life was doing God's will, not following the rules of any man, religion, or church. This was what Jung felt his own father had never come to realize, and therefore, his father did not know the "immediate living God." This conviction that one should pursue truth, rather than dogma, was an essential lesson that returned when Jung faced his dramatic split with Sigmund Freud.

When Jung decided to enter medical school, he did not leave his interest in strange spiritual matters behind. His cousin Helene Preiswerk led séances in which she would fall into a trance and channel strange spirits. The climax of these trances was often a mandala (a mandala is a geometric figure that represents wholeness, completeness, and perfection), which she would dictate to Jung, and then attempt to translate what was told to her by the spirits. Eugen Bleuler urged Jung to publish his studies on occult phenomena (remember that Bleuler defined schizophrenia), which Jung did, under the title *On the Psychology and Pathology of So-called Occult Phenomena*. Another important event that occurred early during Jung's medical training was the death of his father. The church had no provisions for the family of a deceased minister, but one of his uncles loaned Jung the money he needed to continue his studies. Upon completing medical school, he joined Dr. Bleuler in Zurich at the Burgholzli Mental Hospital, and soon became the first assistant physician. The Burgholzli clinic was a renowned institution. Bleuler was considered one of the two most influential psychiatrists of the day, and the clinic had come to prominence under his predecessor Auguste Forel, who was the first

person to formally publish the theory that neurons communicate through synaptic junctions (though just how was not well understood at the time; Finger, 1994). Jung worked hard at Burgholzli, as Bleuler expected nothing less. He also spent some time in France, at the internationally recognized Salpetriere hospital, where he met Pierre Janet. Janet is a curious figure in the history of psychoanalysis. He claimed that he developed everything good in psychoanalysis, and that everything Freud developed was bad. Janet also apparently suggested that only the corrupt city of Vienna could be the source of a theory that traces the development of personality to sexual urges (Freud, 1914/1995). Jung spoke favorably of what he learned from Janet; Freud soundly rejected Janet's claims, but did grudgingly acknowledge that Janet did some important work on understanding neuroses (Freud, 1914/1995; Jung, 1961).

In 1906, Jung sent Freud a copy of his book *The Psychology of Dementia Praecox* (an earlier term for schizophrenia), which Freud found quite impressive. The two met in February, 1907, and talked for nearly 13 straight hours. According to Jung, "Freud was the first man of real importance I had encountered…no one else could compare with him." Very quickly, as evidenced in the letters quoted at the beginning of this chapter, Freud felt that Jung would become the leader of the psychoanalytic movement. In 1909, Jung's psychoanalytic practice was so busy that he resigned from the Burgholzli clinic, and he traveled to America with Freud. During this trip the two men spent a great deal of time together. It quickly became evident to Jung that he could not be the successor that Freud was seeking; Jung had too many differences of opinion with Freud. More importantly, however, Jung described Freud as neurotic, and wrote that the symptoms were sometimes highly troublesome (though Jung failed to identify those symptoms). Freud taught that everyone was a little neurotic, but Jung wanted to know how to cure neuroses:

Apparently neither Freud nor his disciples could understand what it meant for the theory and practice of psychoanalysis if not even the master could deal with his own neurosis. When, then, Freud announced his intention of identifying theory and method and making them into some kind of dogma, I could no longer collaborate with him; there remained no choice for me but to withdraw. (pg. 167; Jung, 1961)

Clearly Jung could not accept a dogmatic approach to psychoanalysis, since he believed that God Himself had told Jung not to follow any rigid system of rules. Even worse, this was when Jung first published his "discovery" of the collective unconscious. Freud wholly rejected this concept, and Jung felt that his creativity was being rejected. He offered to support Freud in public, while extending honest opinions in so-called "secret letters." Freud wanted none of it. Almost as quickly as their relationship had grown, it fell apart (Jaffe, 1979; Jung, 1961; Wehr, 1989).

The loss of his relationship with Freud, following the loss of his father, led Jung in a period of personal crisis. He resigned his position at the University of Zurich, and began a lengthy series of experiments in order to understand the fantasies and dreams that arose from his unconscious. The more he studied these phenomena, the more he realized they were not from his own memories, but from the collective unconscious. He was particularly curious about mandala drawings, which date back thousands of years in all cultures. He studied Christian Gnosticism, alchemy, and the *I Ching (*or*: Book of Changes)*. After meeting Richard Wilhelm, an expert on Chinese culture, Jung studied more Taoist philosophy, and he wrote a glowing foreword for Wilhelm's translation of the *I Ching* (Wilhelm, 1950). These extraordinarily diverse interests led Jung to seek more in-depth knowledge from around the world. He traveled first to North Africa, then to America (to visit Pueblo Indians in New Mexico), next came East Africa (Uganda and Kenya), and finally India. Jung made every effort to get away from civilized areas, which might have been influenced by other cultures, in order to get a more realistic impression of the local culture, and he was particularly successful in this regard in meeting gurus in India (Jaffe, 1979; Jung, 1961; Wehr, 1989).

Through it all, he continued his work in psychology. He had developed his concept of psychological types, one of his most significant contributions, and published his work shortly after the break with Freud. He continued to develop his own form of psychoanalysis. Jung's family was also an important part of his life. He had married Emma Rauschenbach in 1903. They had four daughters and one son, followed by nineteen grandchildren and many great-grandchildren. Emma Jung was very supportive of her husband, especially during the more turbulent periods of his career (including the break with Freud), and she was no stranger to his work. She had done some analytical work with Freud herself, she wrote essays on Jung's concept of *anima* and *animus*, and she was the first president of the Psychological Club of Zurich. When his wife Emma died in 1955, Jung wrote in a letter that the loss had taken a lot out of him, and that at his age (80 years old) it wasn't easy to recover. Yet two years later, he began dictating his autobiography to Aniela Jaffe. Looking ahead to the end of his life, Jung said:

The world into which we are born is brutal and cruel, and at the same time of divine beauty. Which element we think outweighs the other, whether meaninglessness or meaning is a matter of temperament. If meaninglessness were absolutely preponderant, the

meaningfulness of life would vanish to an increasing degree with each step in our development. But that is - or seems to me - not the case. Probably, as in all metaphysical questions, both are true: Life is - or has - meaning and meaninglessness. I cherish the anxious hope that meaning will preponderate and win the battle.

When Lao-tzu says: “All are clear, I alone am clouded,” he is expressing what I now feel in advanced old age. Lao-tzu is the example of a man with superior insight who has seen and experienced worth and worthlessness, and who at the end of his life desires to return into his own being, into the eternal unknowable meaning. The archetype of the old man who has seen enough is eternally true. (pp. 358-359; Jung, 1961)

Carl Jung died at home in 1961, in Kusnacht, Switzerland, at the age of 85. As psychologists today examine more deeply the relationship between Eastern and Western perspectives, it may be that Jung’s legacy has yet to be fulfilled.

? discussion question 2.2.1

Even as a child, Jung had vivid dreams that he believed were giving him insight and guidance for the future. Have you ever had dreams so vivid, dreams that left such a powerful impression on you, that you felt they must have some special meaning? How did you respond, and what consequences, if any, followed your responses?

Placing Jung in Context: A Psychodynamic Enigma

Carl Jung holds an extraordinary place in the histories of psychiatry and psychology. Having already been an assistant to the renowned psychiatrist Eugen Bleuler, he went to Vienna to learn more about the fledgling science of psychoanalysis. He became Freud’s hand-picked heir to the psychoanalytic throne, and was one of the psychiatrists who accompanied Freud to America. Later, however, as he developed his own theories, he parted ways with Freud. Freud eventually came to describe Jung’s theories as incomprehensible, and Freud praised other psychiatrists who also opposed Jung’s ideas.

The most dramatic contribution that Jung made to psychodynamic thought was his concept of the collective unconscious, a mysterious reservoir of psychological constructs common to all people. Jung traveled extensively, including trips to Africa, India, and the United States (particularly to visit the Pueblo Indians in New Mexico), and he studied the cultures in those places. He also observed many basic similarities between different cultures. Those similarities led Jung to propose the collective unconscious. How else could so many significant cultural similarities have arisen within separate and distant lands? Jung did not reject the concepts already developed by Freud and Adler, including the dynamic interaction between the conscious mind and the personal unconscious, but he extended them in order to connect them with his own theory of our underlying collective unconscious. As strange as this theory seemed to Freud, and Freud wondered whether it even made sense to Jung, such a concept is not difficult to understand from an Eastern perspective.

Initially Jung’s theories had more influence on art, literature, and anthropology than they did on psychiatry and psychology. More recently, however, cognitive-behavioral theorists have begun to explore mindfulness as an addition to more traditional aspects of cognitive-behavioral therapies. As psychologists today study concepts from Yoga and Buddhism that are thousands of years old, Jung deserves the credit for bringing such an open-minded approach to the modern world of psychotherapy. Many famous and influential people admired Jung’s work, including psychiatrist Viktor Frankl, psychologist Erich Fromm, the authors Hermann Hesse and H. G. Wells, and Nobel Laureate (Physics) Wolfgang Pauli (for a number of interesting testimonials see Wehr, 1989). In addition, Jung’s discussion of how the libido has transformed throughout the evolution of the human species sounds very much like sociobiology, which was not an established field until the 1970s. Clearly Jung did not simply dabble in a wide range of ideas, but rather, he had an extraordinary vision of the complexity of the human psyche.

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2.3: Basic Concepts

In order to distinguish his own approach to psychology from others that had come before, Jung felt that he needed a unique name. Freud, of course, had chosen the term "psychoanalysis," whereas Alfred Adler had chosen "individual psychology." Since Jung admired both men and their theories, he chose a name intended to encompass not only their approaches, but others as well. Thus, he chose to call his approach **analytical psychology** (Jung, 1933).

Analytical psychology, as presented by Jung, addresses the question of the psyche in an open-minded way. He laments the overly scientific approach of the late 1800s and efforts to explain away the psyche as a mere epiphenomenon of brain function. Curiously, that debate remains with us today, and is still unanswered in any definitive way. Jung did not accept the suggestion that the psyche must come from the activity of the brain. This allowed him to consider the possibility of a collective unconscious, and fit well with his acceptance of the wisdom of Eastern philosophers. Indeed, Jung suggests that psychology will find truth only when it accepts both Eastern and Western, as well as both scientific and spiritual, perspectives on the psyche (Jung, 1933).

Dynamic Psychic Energy

Jung believed in a dynamic interaction between the conscious and unconscious minds, in a manner quite similar to that proposed by Freud. However, as we will examine below, his concept of the psyche included elements of an unconscious mind that transcends the individual, and may be considered a combination of the spirit, or soul, and one's thoughts and sensations. This inner psychic realm is capable of affecting the brain and its functions and, therefore, can influence one's perception of external reality. In addition, Jung thought of the libido somewhat differently than Freud. Although Jung considered sexuality to be an important aspect of the libido, primarily he thought of libido as a more generalized life energy (Douglas, 1995; Jarvis, 2004). Jung believed that as the human species evolved, the nature of sexual (or survival) impulses transformed. For example, early in human evolution we needed, as do other species, to be able to attract mates for procreation. Over time, these attraction behaviors generalized to behaviors such as art or music. Thus, a Freudian might say that creating music is a sexual act, but according to Jung "it would be a poor, unaesthetic generalization if one were to include music in the category of sexuality" (Jung, 1916/1963).

An important element of Jung's conception of the psyche and libido is found in the nature of opposites. Indeed, all of nature is composed of opposites:

…The concept of energy implies that of polarity, since a current of energy necessarily presupposes two different states, or poles, without which there can be no current. Every energic phenomenon…consists of pairs of opposites: beginning and end, above and below, hot and cold, earlier and later, cause and effect, etc. The inseparability of the energy concept from that of polarity also applies to the concept of libido. (pg. 202; Jung, 1971)

…opposites are the ineradicable and indispensable preconditions of all psychic life… (pg. 170; Jung, 1970)

In accordance with this view, Jung felt that the psyche sought balance, much like the concept of **entropy** from the field of physics. Entropy, in simple terms, is a thermodynamic principle that all energy within a system (including the universe) will eventually even out. Jung applied this principle to motivation, believing that we are driven forward through our lives in such a way that we might reduce the imbalance of psychic energy between opposing pairs of emotions (such as love and hate; Jarvis, 2004; Jung, 1971). Borrowing concepts from physics was certainly not a strange thing for Jung to do. As mentioned in Chapter 3, Freud's theories were motivated in part by advancements in science and Darwin's theory of evolution. Jung was personally acquainted with the Nobel Prize winning physicist Wolfgang Pauli, and the two published essays blending psychology and physics in a book entitled *The Interpretation of Nature and the Psyche* (Jung & Pauli, 1955). However, entropy and motivation are focused forward in time. Such an orientation toward the future marks another distinction between the theories of Freud and Jung.

Jung did not simply study symbolism, such as that in dreams, to uncover evidence of past repression. Jung believed that dreams could guide our future behavior, because of their profound relationship to the past, and their profound influence on our conscious mental life. Jung proposed that dreams can tell us something about the development and structure of the human psyche, and that dreams have evolved with our species throughout time. Since consciousness is limited by our present experience, dreams help to reveal much deeper and broader elements of our psyche than we can be aware of consciously. As such, dreams cannot easily be interpreted. Jung rejected the analysis of any single dream, believing that they belong within a series. He also rejected trying to learn dream analysis from a book. When done properly, however, dream analysis can provide unparalleled realism (see Jacobi & Hull, 1970; Jung, 1933):

…I cannot prove in every case that dreams are meaningful, for there are dreams that neither doctor nor patient understands. But I must regard them as hypothetically meaningful in order to find courage to deal with them at all…We must never forget in dream-analysis, even for a moment, that we move on treacherous ground where nothing is certain but uncertainty…When we take up an obscure dream, our first task is not to understand and interpret it, but to establish the context with minute care. What I have in mind is not a boundless sweep of "free associations" starting from any and every image in the dream, but a careful and conscious illumination of those chains of associations that are directly connected with particular images. (pp. 11-12; Jung, 1933)

In the final analysis, there is a particular challenge to understanding what dreams point to, and that is the situation under which a therapist typically learns of someone's dreams: in therapy. Jung suggested that if therapists could continue to observe the journey of one's dreams after therapy was successful, then the therapist, and possibly the client as well, might begin to more clearly understand the meaning and direction of the dreams. Still, dreams themselves are about both health and sickness, in keeping with Jung's principle of opposites. As such, Jung wrote that "dreams are the natural reaction of the self-regulating psychic system." The theory of entropy allows for an imbalance of energy in a closed-system. We may think of our conscious mind as just such a closed system. When we dream, however, the ongoing effort of our psyche to balance itself takes over, and the dreams counteract what we have done to imbalance our psychological selves. Thus, it is within the context of dreams, not the details, that meaning is to be found (Jung, 1959a, 1968).

? discussion question 2.3.1

Jung believed that the source of our motivation was a psychological drive to achieve balance (the effect of entropy on the psyche). Have you ever felt that you were being pushed or pulled in the wrong direction, or in too many directions at once, and simply wanted to achieve some balance in your life? In contrast, have there been times that your life was unfulfilling, and you needed something more in order to feel whole?

The Unconscious Mind

Perhaps Jung's most unique contribution to psychology is the distinction between a **personal unconscious** and a **collective unconscious**. The personal unconscious is not entirely different than that proposed by Freud, but is more extensive. In addition to repressed memories and impulses, the personal unconscious contains undeveloped aspects of the personality and material arising from the collective unconscious that is not yet ready for admission into conscious awareness. The personal unconscious is revealed through clusters of emotions, such as those resulting in a particular attitude toward one's father or other father figures, which Jung referred to as a **complex** (Douglas, 1995; Jarvis, 2004). In this sense, a complex is not synonymous with a psychological problem, as the term is often used today, but rather any general state of mind common to certain situations. In this context, it is quite similar to the **schemas** discussed by cognitive theorists.

Jung arrived at his theory of complexes as a result of his research into schizophrenia, under the direction of Dr. Bleuler. Bleuler had assigned Jung the task of studying the **Word Association Test**, a test in which a list of 100 words is read to the patient, and the therapist watches for evidence of emotional arousal, such as pauses, failures to respond, or physical acts. In addition, Jung noticed that even with schizophrenic patients, the patterns of word association were often centered on a particular theme. That theme could then be regarded as a complex (which, again, could be either positive or negative). Sometimes, complexes remain unresolved, such as one's feelings about parents, if the parents have died. In relatively healthy individuals, these unresolved complexes could result in dreams, visions, or similar phenomena pertaining to the object(s) of the unresolved complex. These complexes might even become personified. In the extreme situation of personified complexes, such as in a person suffering from schizophrenia, the patient cannot distinguish the personification of the unresolved complex from the seeming reality of being another person. Hence, the schizophrenic "hears" voices in their head, "spoken" by someone else. As Jung further investigated the nature and themes of complexes in psychiatric patients, he found common themes that could not always be attributed to the patient's personal history. And so, he began to form his concept of the collective unconscious (Douglas, 1995; Jarvis, 2004; Jung, 1959b, 1961; Storr, 1983).

…from the standpoint of the psychology of the personality a twofold division ensures: an "extra-conscious" psyche whose contents are *personal*, and an "extra-conscious" psyche whose contents are *impersonal* and *collective*. The first group comprises contents which are integral components of the individual personality and could therefore just as well be conscious; the second group forms,

as it were, an omnipresent, unchanging, and everywhere identical *quality* or *substrate of the psyche per se*. This is, of course, no more than a hypothesis. But we are driven to it by the peculiar nature of the empirical material…

Whereas the contents of the personal unconscious are acquired during the individual's lifetime, the contents of the collective unconscious are invariably archetypes that were present from the beginning. (pp. 7-8; Jung, 1959c)

Thus, according to Jung, the collective unconscious is a reservoir of psychic resources common to all humans (something along the lines of psychological instinct). These psychic resources, known as **archetypes**, are passed down through the generations of a culture, but Jung considered them to be inherited, not learned. As generation after generation experienced similar phenomena, the archetypal images were formed. Despite cultural differences, the human experience has been similar in many ways throughout history. As such, there are certain archetypes common to all people. According to Jung, the most empirically valid archetypes, and therefore the most powerful, are the **shadow**, the **anima**, and the **animus** (Jung, 1959c).

Jung described the shadow as "the inferior and less commendable part of a person," and "a moral problem that challenges the whole ego-personality" (Jung, 1940, 1959c). It encompasses desires and feelings that are not acceptable to society or the conscious psyche. With effort the shadow can be somewhat assimilated into the conscious personality, but portions of it are highly resistant to moral control. As a result, we tend to project those thoughts, feelings, or emotions onto other people. When they have moved beyond one's control, such as when we lose our temper, these projections isolate the individual from their environment, since they are no longer approaching situations realistically. Jung described the circumstance as tragic when people continue to ruin their lives, and the lives of others, because they cannot see through the illusion of how their shadow has been projected, and consequently interfered with their ability to live a healthy life (Jung, 1959c).

The shadow is not, however, entirely evil. Rather, Jung described it as un-adapted and awkward, much like a child trying to function in the company of adults. Trying to entirely suppress the shadow is not the appropriate solution, since the shadow is driving us forward in our efforts to achieve balance between the unconscious and conscious realities. In other words, just as a child may act inappropriately while trying to grow up, the shadow may cause inappropriate behavior in opposition to the accepted rules of society. Nonetheless, it is important for us to have that driving force pushing us toward self-development (and the development of the human species), so that we don't simply live a life of passivity and/or reaction to outside events. It is the shadow that pushes us forward (Jacobi & Hull, 1970; Jung, 1961).

Although many people emphasize the differences between men and women, psychologically their common traits can readily be observed. Jung described the anima as the female aspect of the male psyche, and the animus as the male aspect of the female psyche. Jung intentionally addresses this difficult concept in mythological terms, but he also makes it clear that this is a natural phenomenon for each person, and not a substitute for one's mother (in the case of the anima) or father (in the case of the animus). While the presence of a feminine aspect within the male psyche and the presence of a masculine aspect within the female psyche have some positive benefits, such as making it possible for men and women to relate to one another, the unfortunate reality is often the opposite. In 1959(c), Jung described the difficulties that men and women have relating to family and friends of the opposite sex, due to fundamental differences in style. Although men may contain the anima, they are still primarily masculine, whereas women, despite the animus, are still primarily feminine. As with the shadow, relationship problems can arise from the anima or animus when we allow our archetypal image to be projected onto others. As Jung himself noted, many men project a desired image onto a woman that would require her to be a sexually vivacious virgin, something of a contradiction in terms. Thus, over time, such a man's relationships may suffer as a result of his learning more about the real life of his companion, even though she has done nothing but be herself (Jung, 1940, 1959c).

Jung did not place a limit on the number of possible archetypes, and he described quite a few in his writings. It did not matter to Jung whether archetypes were, in fact, real. In a perspective quite similar to cognitive theorists, he wrote that "insofar as the archetypes act upon me, they are real and actual to me, even though I do not know what their real nature is" (Jung, 1961). One of the more important archetypes is the self, which represents the integration of the whole personality. Indeed, Jung described the self as the goal of all psychic development. A special type of image often associated with the self, and with Jung himself, is the **mandala**. A mandala is a geometric figure that represents wholeness, completeness, perfection (Jung, 1958). They also tend to be symmetrical, representing the natural balance of opposites. Although they typically have religious or spiritual significance, it is not required. Jung was very interested in mandalas, and from 1916 to 1918 he draw a new one every morning (Wehr, 1989). Mandalas can appear in dreams as an image of wholeness, or in times of stress they may appear as compensatory images (Douglas, 1995).

Their potential healing ability stems from their connection between the uniqueness of our present consciousness and the depths of our primordial past:

…The psyche is not of today; its ancestry goes back many millions of years. Individual consciousness is only the flower and the fruit of a season, sprung from the perennial rhizome beneath the earth; and it would find itself in better accord with the truth if it took the existence of the rhizome into its calculations. For the root matter is the mother of all things. (pg. xxiv; Jung, 1956)

It is important to note that archetypal images are considered to be ancient. Although we talk about them as if they are still forming, and that may well be possible, the fact is that there were countless human generations long before recorded history. Jung has referred to archetypes as primordial images, “impressed upon the mind since of old” (Jung, 1940). Archetypes have been expressed as myths and fables, some of which are thousands of years old even within recorded history. As the eternal, symbolic images representing archetypes were developed, they naturally attracted and fascinated people. That, according to Jung, is why they have such profound impact, even today, in our seemingly advanced, knowledgeable, and scientific societies.

Table **2.3.1**: Common Archetypes in Jung's Theory of the Collective Unconscious*

Self	Integration and wholeness of the personality, the center of the totality of the psyche; symbolically represented by, e.g., the mandala, Christ, or by helpful animals (such as Rin Tin Tin and Lassie or the Hindu monkey god Hanuman)
Shadow	The dark, inferior, emotional, and immoral aspects of the psyche; symbolically represented by, e.g., the Devil (or an evil character such as Dracula), dragons, monsters (such as Godzilla)
Anima	Strange, wraithlike image of an idealized women, yet contrary to the masculinity of the man, draws the man into feminine (as defined by gender roles) behavior, always a supernatural element; symbolically represented by, e.g., personifications of witches, the Greek Sirens, a femme fatale, or in more positive ways as the Virgin Mary, a romanticized beauty (such as Helen of Troy) or a cherished car
Animus	A source of meaning and power for women, it can be opinionated, divisive, and create animosity toward men, but also creates a capacity for reflection, deliberation, and self-knowledge; symbolically represented by, e.g., death, murderers (such as the pirate Bluebeard, who killed all his wives), a band of outlaws, a bewitched prince (such as the beast in "Beauty and the Beast") or a romantic actor (such as Rudolph Valentino)
Persona	A protective cover, or mask, that we present to the world to make a specific impression and to conceal our inner self; symbolically represented by, e.g., a coat or mantle
Hero	One who overcomes evil, destruction, and death, often has a miraculous but humble birth; symbolically represented by, e.g., angels, Christ the Redeemer, or a god-man (such as Hercules)
Wise Old Man	Typically a personification of the self, associated with saints, sages, and prophets; symbolically represented as, e.g., the magician Merlin or an Indian guru
Trickster	A childish character with pronounced physical appetites, seeks only gratification and can be cruel and unfeeling; symbolically represented by, e.g., animals (such as Brer Rabbit, Wile E. Coyote or, often, monkeys) or a mischievous god (such as the Norse god Loki)

*For more information read *The Integration of the Personality* (Jung, 1940), *Aion: Researches Into the Phenomenology of the Self* (Jung, 1959c), and *Man and His Symbols* (Jung, et al., 1964).

? discussion question 2.3.2

What is your impression of the concept of archetypes? Think about mythic heroes and gods, or concepts of motherhood or being a father. Can you identify commonalities between different cultures, now or throughout time, which seem to suggest themes that are common to all people?

Connections Across Cultures: Symbolism Throughout Time and Around the world

Near the end of Jung's life, he was asked to write a book that might make his theories more accessible to common readers. Jung initially refused, but then he had an interesting dream, receiving advice from his unconscious psyche that he should reconsider his refusal:

…He dreamed that, instead of sitting in his study and talking to the great doctors and psychiatrists who used to call on him from all over the world, he was standing in a public place and addressing a multitude of people who were listening to him with rapt attention and *understanding what he said*… (pg. 10; John Freeman, in his introduction to *Man and His Symbols*, Jung et al., 1964)

Jung then agreed to write the book that became known as *Man and His Symbols*, but only if he could hand-pick the co-authors who would help him. Jung supervised every aspect of the book, which was nearly finished when he died. Written purposefully to be easily understood by a wide audience, the book presents an astonishingly wide variety of symbolism from art, archaeology, myth, and analysis within the context of Jung's theories. Many of the symbols were represented in dreams, and symbolic dreams are the primary means by which our unconscious psyche communicates with our conscious psyche, or ego. It is extraordinary to see how similar such symbolism has been throughout time and across cultures, even though each individual example is unique to the person having the dream or expressing themselves openly.

Symbols, according to Jung, are terms, names, images, etc. that may be familiar in everyday life, but as symbols they come to represent something vague and unknown, they take on meaning that is hidden from us. More specifically, they represent something within our unconscious psyche that cannot ever be fully explained. Exploring the meaning will not unlock the secrets of the symbol, because its meaning is beyond reason. Jung suggests that this should not seem strange, since there is nothing that we perceive fully. Our eyesight is limited, as is our hearing. Even when we use tools to enhance our senses, we still only see better, or hear better. We don't comprehend the true nature of visual objects or sounds, we only experience them differently, within our psychic realm as opposed to their physical reality. And yet, the symbols created by our unconscious psyche are very important, since the unconscious is at least half of our being, and it is infinitely broader than our conscious psyche (Jung et al., 1964).

Jung believed that the symbols created in dreams have a deeper meaning than Freud recognized. Freud believed that dreams simply represent the unconscious aspects of one's psyche. Jung believed, however, that dreams represent a psyche all their own, a vast and ancient psyche connected to the entire history of humanity (the collective unconscious). Therefore, dreams can tell a story of their own, such as Jung's dream encouraging him to write a book for a common audience. Thus, his dream did not reflect some underlying neurosis connected to childhood trauma, but rather, his unconscious psyche was pushing him forward, toward a sort of wholeness of self by making his theories more readily accessible to those who are not sufficiently educated in the wide variety of complex topics that are typically found in Jung's writings. By virtue of the same reasoning, Jung considered dreams to be quite personal. They could not be interpreted with dream manuals, since no object has any fixed symbolic meaning.

What makes the symbolism within dreams, as well as in everyday life, most fascinating, however, is how common it is throughout the world, both in ancient times and today. In their examination of symbols and archetypes, Jung and his colleagues offer visual examples from: Egypt, England, Japan, the Congo, Tibet, Germany, Belgium, the United States, Bali, Haiti, Greece, Switzerland, Spain, Italy, Cameroon, Java, France, Kenya, India, Sweden, Russia, Poland, Australia, China, Hungary, Malaysia, Borneo, Finland, the Netherlands, Rhodesia, Israel, Saudi Arabia, Scotland, Ireland, Brazil, Monaco, Burma, Bolivia, Cambodia, Denmark, Macedonia, and Peru, as well as from Mayan, Celtic, Babylonian, Persian, Navaho, and Haidu cultures. There are also many Biblical references. It would be safe to say that no one else in the history of psychology has so clearly demonstrated the cross-cultural reality of their theory as is the case with Carl Jung.

Of course, as with dreams, many of these symbols are unique to the culture in which they have arisen. Therefore, it takes a great deal of training and experience for a psychotherapist to work with patients from different cultures. Nonetheless, the patterns represent the same basic concepts, such as self, shadow, anima, animus, hero, etc. Once recognized in their cultural context, the analyst would have a starting point from which to begin working with their patient, or the artist would understand how to influence their audience. One important type of art that relies heavily on cultural images and cues is advertising. Cultural differences can create problems for companies pursuing global marketing campaigns. Jung's theory suggests that similarities in how we react to certain archetypal themes should be similar in different countries, but of course the images themselves must be recognizable, and we may still be a long way from understanding those fundamental images:

…Our actual knowledge of the unconscious shows that it is a natural phenomenon and that, like Nature herself, it is at least *neutral*. It contains all aspects of human nature – light and dark, beautiful and ugly, good and evil, profound and silly. The study of individual, as well as of collective, symbolism is an enormous task, and one that has not yet been mastered. (pg. 103; Jung et al., 1964)

Personality Types

One of Jung's most practical theories, and one that has been quite influential, is his work on **personality types**. Jung had conducted an extensive review of the available literature on personality types, including perspectives from ancient Brahmanic conceptions taken from the Indian Vedas (see below) and types described by the American psychologist William James. In keeping with one of Jung's favorite themes, James had emphasized opposing pairs as the characteristics of his personality types, such as rationalism vs. empiricism, idealism vs. materialism, or optimism vs. pessimism (see Jung, 1971). Based on his research and clinical experience, Jung proposed a system of personality types based on **attitude-types** and **function-types** (more commonly referred to simply as attitudes and functions). Once again, the attitudes and functions are based on opposing ways of interacting with one's environment.

The two attitude-types are based on one's orientation to external objects (which includes other people). The **introvert** is intent on withdrawing libido from objects, as if to ensure that the object can have no power over the person. In contrast, the **extravert** extends libido toward an object, establishing an active relationship. Jung considered introverts and extraverts to be common amongst all groups of people, from all walks of life. Today, most psychologists acknowledge that there is a clear genetic component to these temperaments (Kagan, 1984, 1994; Kagan, Kearsley, & Zelazo 1978), a suggestion proposed by Jung as well (Jung, 1971). Of course, one cannot have an orientation to objects without consciousness, and consciousness cannot exist without an **ego**. For Jung, the ego is a complex, so it is associated with both the conscious psyche and the personal unconscious. According to Jung, "it is always in the center of our attention and of our desires, and it is the absolutely indispensable centre of consciousness" (Jung, 1968).

Jung's four functions describe ways in which we orient ourselves to the external environment, given our basic tendency toward introversion or extraversion. The first opposing pair of functions is **thinking** vs. **feeling**. Thinking involves intellect, it tells you *what* a thing is, whereas feeling is values-based, it tells what a thing is *worth* to you. For example, if you are trying to choose classes for your next semester of college, perhaps you need to choose between a required general education course as opposed to a personally interesting course like *Medical First Responder* or *Interior Design*. If you are guided first by thinking, you will probably choose the course that fulfills a requirement, but if you are guided by feeling, you may choose the course that satisfies your more immediate interests. The second opposing pair of functions is **sensing** vs. **intuition**. Sensing describes paying attention to the reality of your external environment, it tells you that something *is*. In contrast, intuition incorporates a sense of time, and allows for hunches. Intuition may seem mysterious, and Jung freely acknowledges that he is particularly mystical, yet he offers an interesting perspective on this issue:

…Intuition is a function by which you see round corners, which you really cannot do; yet the fellow will do it for you and you trust him. It is a function which normally you do not use if you live a regular life within four walls and do regular routine work. But if you are on the Stock Exchange or in Central Africa, you will use your hunches like anything. You cannot, for instance, calculate whether when you turn round a corner in the bush you will meet a rhinoceros or a tiger - but you get a hunch, and it will perhaps save your life… (pg. 14; Jung, 1968)

The two attitudes and the four functions combine to form eight personality types. Jung described a so-called cross of the functions, with the ego in the center being influenced by the pairs of functions (Jung, 1968). Considering whether the ego's attitude is primarily introverted or extraverted, one could also propose a parallel pair of crosses. Jung's theory on personality types has proven quite influential, and led to the development of two well-known and very popular instruments used to measure one's personality type, so that one might then make reasoned decisions about real-life choices.



Figure 2.3.1

Jung proposed a "cross of the functions," in which the ego sits at the center of the opposing pairs of functions (Jung, 1968). When the attitudes of introversion and extraversion are included, one can represent Jung's view as parallel crosses of the functions.

? Discussion question 2.3.3

Jung described two attitudes (introversion-extraversion) and four functions (thinking-feeling, sensing-intuition) as the primary basis for psychological types. Think about yourself and/or some of your close friends and family members. Can you use the eight types described by Jung to get a reasonable impression of the people you know, or does Jung's theory seem to fall short?

In 1923, Katharine Briggs and her daughter Isabel Briggs Myers learned of Jung's personality types and became quite interested in his theory. After spending 20 years observing individuals of different types, they added one more pair of factors based on a person's preference for either a more structured lifestyle, called **judging**, or a more flexible or adaptable lifestyle, called **perceiving**. There were now, according to Briggs and Myers, sixteen possible personality types. In the 1940s, Isabel Myers began developing the **Myers-Briggs Type Indicator** (MBTI) in order to help people learn about their personality type. To provide just one example of an MBTI profile, an individual who is extraverted and prefers sensing, thinking, and judging (identified by the initials ESTJ) would be described as: "Practical, realistic, matter-of-fact. Decisive, quickly move to implement decisions. Organize projects and people to get things done…Forceful in implementing their plans" (Myers, 1993; Myers & McCaulley, 1985; see also the website for the Myers & Briggs Foundation, at www.myersbriggs.org). While it is relatively easy to find shortcut tests or variations of the MBTI online, if one plans to make any meaningful decisions based on their personality type they should consult a trained MBTI administrator. What sort of decision might one make? The MBTI has become a popular tool for looking at career choices and workplace relationships. A number of popular books, such as *Do What You Are* (Tieger & Barron-Tieger, 2001) and *Type Talk at Work* (Kroeger, Thuesen, & Rutledge, 2002), are available that provide information intended to help people choose satisfying careers and be successful in complex work environments. In addition to its use in career counseling, the MBTI has been used in individual counseling, marriage counseling, and in educational settings (Myers, 1993; Myers & McCaulley, 1985; Myers & Myers, 1980). Another popular instrument, based once again on Jung's theory and compared directly to the MBTI, is the **Keirsey Temperament Sorter**. David Keirsey uses plain language in an effort to make personality types easy to comprehend. Setting aside introversion vs. extraversion, he has identified eight character portraits: mentors, organizers, monitors, operators, advocates, engineers, conservators, and players. When Keirsey adds extraversion and introversion back into the mixture, he can identify one's personality type even more clearly: monitors become either supervisors (E) or inspectors (I), players become performers (E) or composers (I), engineers become inventors (E) or designers (I), etc. As with the MBTI, Keirsey provides concrete recommendations regarding how one might use the results of his temperament sorter to make decisions about one's choices in life (Keirsey, 1987).

Table **2.3.2**: Jung's Eight Personality Types*

Introverted Thinking	Focused on own internal thoughts and ideas, do not communicate well, can be highly conflicted and will lash out at critics, generally stubborn and do not get along well with others
Introverted Feeling	Tend to be silent, inaccessible, and melancholy, have deep emotions but hide them and appear cold and reserved on the surface, tend to be suspicious of others, most are women
Introverted Sensing	Guided by subjective impression of real-life objects, often express their sensations through artistic endeavors, the objective world may seem make-believe and comical
Introverted Intuitive	Tend to be peculiar and lack contact with reality, may be completely misunderstood even by those who are close to them, may seem like a mystical dreamer and seer on one hand but just a cranky person on the other, may have vision but lack convincing power of reason
Extraverted Thinking	Seek intellectual conclusions based on objective reality, seek to influence others, suppress emotion, can be rigid and dogmatic (tyrannical when others penetrate their power province)
Extraverted Feeling	Feelings harmonize with objective situations, can be highly emotional, will avoid thinking when it proves upsetting, most are women
Extraverted Sensing	Immersed in realism and seek new experiences, whole aim is concrete enjoyment, most are men
Extraverted Intuitive	Always seek new opportunities, may seize new opportunity with enthusiasm and just as quickly abandon it if not promising, has vision, often found among business tycoons and politicians, but have little regard for welfare of others

*For more information read *Psychological Types* (Jung, 1971).

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2.4: Personality Development

Jung believed that “everyone’s ultimate aim and strongest desire lie in developing the fullness of human existence that is called personality” (Jung, 1940). However, he lamented the misguided attempts of society to educate children into their personalities. Not only did he doubt the abilities the average parent or average teacher to lead children through the child’s personality development, given their own personal limitations, he considered it a mistake to expect children to act like young adults:

It is best not to apply to children the high ideal of education to personality. For what is generally understood by personality - namely, *a definitely shaped, psychic abundance, capable of resistance and endowed with energy* - is an adult ideal…No personality is manifested without *definiteness*, *fullness*, and *maturity.* These three characteristics do not, and should not, fit the child, for they would rob it of its childhood. (pp. 284-285; Jung, 1940)

This is not to suggest that childhood is simply a carefree time for children:

No one will deny or even underestimate the importance of childhood years; the severe injuries, often lasting through life, caused by a nonsensical upbringing at home and in school are too obvious, and the need for reasonable pedagogic methods is too urgent…But who rears children to personality? In the first and most important place we have the ordinary, incompetent parents who are often themselves, all their lives, partly or wholly children. (pg. 282; Jung, 1940)

So, if childhood is a critical time, but most adults never grow up themselves, what hope does Jung see for the future? The answer is to be found in midlife. According to Jung, the middle years of life are “a time of supreme psychological importance” and “the moment of greatest unfolding” in one’s life (cited in Jacobi & Hull, 1970). In keeping with the ancient tradition of the Vedic stages of life, from Hindu and Indian culture, the earlier stages of life are about education, developing a career, having a family, and serving one’s proper role within society:

Man has two aims: The first is the aim of nature, the begetting of children and all the business of protecting the brood; to this period belongs the gaining of money and social position. When this aim is satisfied, there begins another phase, namely, that of culture. For the attainment of the former goal we have the help of nature, and moreover of education; but little or nothing helps us toward the latter goal... (pg. 125; Jung, cited in Jacobi & Hull, 1970)

So where does one look for the answers to life? Obviously, there is no simple answer to that question, or rather, than are many answers to that question. Some pursue spiritual answers, such as meditating or devoting themselves to charitable causes. Some devote themselves to their children and grandchildren, others to gardening, painting, or woodworking. The answer for any particular individual is based on that person’s **individuation**.

Individuation is the process by which a person actually becomes an “individual,” differentiated from all other people. It is not to be confused with the ego, or with the conscious psyche, since it includes aspects of the personal unconscious, as influenced by the collective unconscious. Jung also described individuation as the process by which one becomes a “whole” person. To some extent, this process draws the individual away from society, toward being just that, an individual. However, keeping in mind the collective unconscious, Jung believed that individuation leads to more intense and broader collective relationships, rather than leading to isolation. This is what is meant by a whole person, one who successfully integrates the conscious psyche, or ego, with the unconscious psyche. Jung also addresses the Eastern approaches, such as meditation, as being misguided in their attempts to master the unconscious mind. The goal of individuation is wholeness, wholeness of ego, unconscious psyche, and community (Jung, 1940, 1971):

Consciousness and the unconscious do not make a whole when either is suppressed or damaged by the other. If they must contend, let it be a fair fight with equal right on both sides. Both are aspects of life…It is the old play of hammer and anvil: the suffering iron between them will in the end be shaped into an unbreakable whole, the individual. (pg. 27; Jung, 1940)

Figure **2.4.1**

Jimmy Carter was a successful farmer, Governor of Georgia, and President of the United States. As president he brokered a peace treaty between Egypt and Israel that earned him a Nobel Peace Prize nomination. Despite such an illustrious life to that point, he has, perhaps, done even more good since then. After devoting himself to a wide variety of social and political activities focusing on peace and justice, including personally building houses with Habitat for Humanity, the Honorable Mr. Carter received a well-earned Nobel Peace Prize in 2002.

? discussion question 2.4.1

Jung identified the first half of life as a time to take care of the biological needs of the species (e.g., raising children). It is in the second half of life, according to Jung, that one looks within oneself for the guidance and motivation to fulfill the needs of society and one's culture.

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2.5: Jungian Analysis

Jung was deeply moved by his ability to help patients, and he took the process of analysis very seriously. This is not to say, however, that he considered a specific process to be necessary. He was suspicious of theoretical assumptions, he focused on each individual in therapy, and was just as likely to adapt Adlerian techniques as he was to adapt Freudian techniques. In fact, he considered general professional experience to be an important aspect of one's ability to be a good analyst. He did consider training to be very important, and that it should include medical training. He was not opposed to lay analysts (those with a Ph.D., rather than an M.D.), but felt that they should be supervised by a psychiatrist (Jung, 1961).

He built his general system of psychotherapy on four tenets: the psyche is a self-regulating system, the unconscious has creative and compensatory components, the doctor-patient relationship is crucial, and personality growth takes place throughout the lifespan. In addition, the process of psychotherapy involves four stages: **confession, elucidation, education,** and **transformation** (see Douglas, 1995). The confession and elucidation stages involve the patient recounting elements of their personal history, dreams, and fantasies, followed by the analyst bringing attention to symptoms, transferences, and attempting to help the patient gain insight on both intellectual and emotional levels. The education stage then involves moving the patient into the realm of an individual, hopefully as an adapted social being. Education focuses mostly on the persona and the ego, whereas confession and elucidation serve the role of exploring the personal unconscious. The education stage also involves trying to provide the patient with realistic options for changing their behavior. The final stage, transformation, was described by Jung as being similar to self-actualization. Also like self-actualization, not every patient (or person) makes it to this stage. Addressing the archetypal image of the self, the image of wholeness, requires working with the whole range of the conscious, personal unconscious, and collective unconscious psyches. The final goal is to inspire the patient to become a uniquely individual self without losing a sense of responsible integrity (the collectiveness inherent in the collective unconscious; see Douglas, 1995).

Since Jung did not want to be tied to any specific technique(s), he incorporated a variety of techniques as appropriate for each patient. Like Freud, Jung experimented with hypnosis early in his career, but discarded the technique as ineffective. He used dream analysis regularly, but did not consider each dream to be necessarily important. Instead, he looked for patterns in dreams over time, particularly recurring dreams. Jung taught his patients to get in touch with their own unconscious psyche through an active imagination technique. This meditative imagery procedure is somewhat similar to that of the Buddhist mindfulness techniques taught by Gotama Buddha some 2,600 years ago, but involves much more active cognition. Jung's active imagery technique was also extended into actual physical activity. Jung found it helpful, especially with particularly withdrawn patients, to have them act out their thoughts and feeling. Jung would even mimic their movements to help himself better understand what his patients were trying to communicate (Douglas, 1995). The importance of physical states, as reflective of psychological states, was developed in more detail in the somatic psychology theories of Wilhelm Reich. In addition, Jung extended his therapeutic approach to group therapy, family and marital therapy, art therapy, child therapy, and the recurrent nightmares of patients suffering from post-traumatic stress. Through it all, Jung paid special attention to complexes, as representative of the psychic processes of the patient. Once an analyst understands both the symptoms and the complexes of the patient, Jung believed, the analyst has found the key to treatment (Douglas, 1995).

Like Freud, Jung felt that analytical psychology could serve a greater purpose beyond just helping individuals, so he turned his attention to society in several of his books. In *Modern Man in Search of a Soul* (Jung, 1933), Jung addressed the spiritual problems of our times. A modern person, according to Jung, is one who is whole, aware of their conscious psyche and their unconscious psyche (both personal and collective). Though such people are few and far between, Jung believed he saw evidence of a need for understanding the unconscious psyche. One obvious piece of evidence was the rise of psychology as a discipline at the beginning of the twentieth century. However, in contrast to Jung's personal preference, psychology has largely moved away spiritual pursuits, with its preference for a scientific evaluation of the human mind. Religion, in Jung's opinion, has also moved away from spirituality, in favor of the dogma of human rules and regulations. Jung believed that we can learn a great deal from Yoga and Buddhism in terms of blending psychology and spirituality in order to understand the whole nature of human beings. In *The Undiscovered Self* (Jung, 1957), Jung continues this argument in a more personal way. He suggests that modern psychological approaches to "self-knowledge" are at best superficial, and don't address the real psychic processes that lead to individuality. As a general condemnation of our obsession with science, he questions any theory based on statistical averages, since those averages say very little at all about the unique units being studied, whether they are people or some other object. In *Civilization in Transition*

(Jung, 1964), the tenth volume of Jung's collected works, he addresses the problems of American psychology, and what all Westerners can learn from the ancient wisdom of India about studying our own unconscious psyche. The importance of understanding the true and complete nature of our psyche is that until we do we cannot live our lives to the fullest:

Our souls as well as our bodies are composed of individual elements which were all already present in the ranks of our ancestors. The "newness" in the individual psyche is an endlessly varied recombination of age-old components…Once the past has been breached, it is usually annihilated, and there is no stopping the forward motion. But it is precisely the loss of connection with the past, our uprootedness, which has given rise to the "discontents" of civilization and to such a flurry and haste that we live more in the future and its chimerical promises of a golden age than in the present, with which our whole evolutionary background has not yet caught up. (pp. 235-236; Jung, 1961)

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2.6: A Final Note on Carl Jung

It can be something of a challenge to view Jung's work as psychological. It lends itself more readily to, perhaps, the study of the humanities, with elements of medieval pseudo-science, Asian culture, and native religions (an odd combination, to be sure). With titles such as *Aion: Researches into the Phenomenology of the Self* (Jung, 1959c) and *Mysterium Conjunctionis: An Inquiry into the Separation and Synthesis of Psychic Opposites in Alchemy* (Jung, 1970), Jung is not exactly accessible without a wide range of knowledge in areas other than psychology. **Alchemy** was of particular interest to Jung, but not in terms of turning base metals into gold (alchemy is a strange mixture of spirituality and chemistry). Rather, Jung believed that psychology could find its base in alchemy, and that it was the collective unconscious that came forth in the ongoing human effort to understand the nature of matter (Jaffe, 1979; Jung, 1961; Wehr, 1989). He even went so far as to write about flying saucers, the astrological seasons of time, and the prophesies of Nostradamus (Jung, 1959c; Storr, 1983).

And yet, Jung addressed some very important and interesting topics in psychology. His theory of psychological types is reflected in trait descriptions of personality and corresponding trait tests, such as Cattell's 16-PF and the MMPI. The value Jung placed on mid-life and beyond, based largely on the ancient Vedic stages of life, suggests that one is not doomed to the negative alternative in Erikson's final psychosocial crises. So Jung's personal interests, and his career as a whole, straddled the fence between surreal and practical. He may always be best-known for his personal relationship with Freud, brief as it was, but the blending of Eastern and Western thought is becoming more common in psychology. So perhaps Jung himself will become more accessible to the field of psychology, and we may find a great deal to be excited about in his curious approach to psychodynamic theory.

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2.7: Personality Theory in Real Life

Synchronicity - Coincidence or an Experience with Mystical Spirituality?

Many people are deeply religious and many others consider themselves to be just as deeply spiritual, though not connected to any specific religion. As important as religion and spirituality are in the lives of many people, psychology has tended to avoid these topics, primarily because they do not lend themselves readily to scientific investigation. Jung certainly did not avoid these topics, and he studied a wide range of spiritual topics. For example, he wrote the foreword for Richard Wilhelm's translation of the *I Ching* (Wilhelm, 1950), he wrote psychological commentary for a translation of *The Tibetan Book of the Great Liberation* (Evans-Wentz & Jung, 1954), he discussed the psychology of evil in *Answer to Job* (Jung, 1954), he wrote about Gnostic traditions at length (see Segal, 1992), and one of the volumes of his collected works is entitled *Psychology and Religion: West and East* (Jung, 1958). In addition to his varied spiritual interests, Jung became interested in psychological phenomena that could not be explained in scientific terms. Such phenomena do not necessarily require a spiritual explanation, but in the absence of any other way to explain them, they are often thought of in spiritual terms. One such topic is **synchronicity**.

Jung uses the term synchronicity to describe the "coincidence in time of two or more causally unrelated events which have the same or a similar meaning" (Jung & Pauli, 1955). In particular, it refers to the simultaneous occurrence of a particular psychic state with one or more external events that have a meaningful parallel to one's current experience or state of mind. I would like to share with you two experiences of synchronicity from my own life. Having a Ph.D. in physiological psychology, and having spent a number of years conducting biomedical research, it seems rather strange to be sharing experiences that can be classified as extrasensory perception, or ESP. Jung also found it difficult to address this topic:

…If I have now conquered my hesitation and at last come to grips with my theme, it is chiefly because my experiences of the phenomenon of synchronicity have multiplied themselves over the decades…As a psychiatrist and psychotherapist I have often come up against the phenomena in question and could convince myself how much these inner experiences meant to my patients. In most cases they were things which people do not talk about for fear of exposing themselves to thoughtless ridicule. I was amazed to see how many people have had experiences of this kind and how carefully the secret was guarded. So my interest in this problem has a human as well as a scientific foundation. (pp. 5-6; Jung, in Jung & Pauli, 1955)

Synchronicity Experience #1: In February, 1992, our first son, Mark David Kelland, Jr., died at birth. Later that year, I was traveling across the country, taking a whole week to get to a neuroscience convention in California, and I decided to hike up Wheeler Peak, the highest point in New Mexico (13,161 feet). I arrived a little late in the day, but decided I had enough time to make the climb and get back down off the ridge before dark. I just made it, but still had a few miles to go on the jeep trail down to the parking lot. Along the way, I stopped and looked back up at Wheeler Peak. I turned off my flashlight, and in the dark I could just make out the outline of the mountain against the night sky. I prayed to God for a sign that our son was in Heaven. The instant I said "Amen," a brilliant shooting star streaked across the sky and descended behind Wheeler Peak! I took it to be the sign I had asked for.

Synchronicity Experience #2: While growing up, we lived next door to Bill and Jackie O'Reilly, who co-owned the corner drugstore in the center of Foxborough, MA. When I was young I mowed their lawn in the summer and shoveled their driveway in the winter. When I was old enough to get a regular job, I asked Mr. O'Reilly for a letter of recommendation for a job at the local newspaper. He declined, saying he wanted me to work at their drugstore. But he didn't say anything else, until Mrs. O'Reilly told him to give me a job. So, I worked at the drugstore from the age of 15 to 20 years old. I even began college at the same school they had attended: the Massachusetts College of Pharmacy. Although I changed schools and switched my major to psychology, I was always hopeful that the O'Reilly's would be proud of me. Unfortunately, Bill O'Reilly died a week after I graduated from college. Jackie O'Reilly retired and sold their building, and the old corner drugstore in the center of town ceased to exist.

Eventually I moved away, pursued my career in psychology, got married and had children, and visits to Massachusetts became few and far between. One night, about 25 years after I had worked at the drugstore, I had a very vivid and moving dream. I was standing in the center of Foxborough, looking at the building where the drugstore had been. I was overwhelmed by a profound sense of sadness, sad that things must change with time and cannot remain the same, no matter how much we may long for the past. I awoke from that dream astonished by its sense of reality and its emotional impact. The next morning my mother called me, and told me that Jackie O'Reilly had died during the night! Was it merely a coincidence that I dreamt about O'Reilly's Pharmacy and

felt the sadness of watching time pass away, while Jackie O'Reilly was in reality passing away, or was it something more? There can be no scientific explanation. I searched my mind for anything that might have coincidentally caused me to think about the drugstore the day before, but nothing came to mind except for an alternative explanation, which was not at all scientific. Had Jackie O'Reilly's spirit passed by and said goodbye, on her way to the great beyond?

In the quote cited above, Jung wrote that he was amazed by how many people have had experiences of synchronicity. The questions I would pose to you are quite simple. Have you ever experienced synchronicity? If you have not, do you consider it possible that such events occur as something more than simple (if improbable) coincidence?

Before dismissing synchronicity as non-scientific, keep in mind the circumstances that led Jung to this theory. In addition to personally knowing Wolfgang Pauli, Jung also knew Nils Bohr and Albert Einstein (both of whom, like Pauli, had won a Nobel Prize in physics). Although these men are considered among the greatest scientists of modern times, Einstein perhaps the greatest, consider some of their theories. For instance, Einstein proposed that time isn't time, it's relative, except for the speed of light, which alone is always constant. In recent years, experimental physicists have exceeded the speed of light, broken Heisenberg's Uncertainty Principle (which, by definition, couldn't be broken), and proposed that it might be possible to get something colder than absolute zero. How can we accept things that cannot be observed or proved as scientific, while rejecting something that Jung and many others have observed time and time again? Jung was impressed by the possibility of splitting atoms, and wondered if such a thing might be possible with the psyche. As physics suggested strange new possibilities, Jung held out the same hope for humanity (Progoff, 1973).

Regardless of whether the strangest of Jung's theories are ever proven right or wrong, at the very least they provide an opportunity for interesting discussions! There also happens to be another well-known person in the history of psychology who has experienced synchronicity and who talked about many of her patients having had out-of-body and near-death experiences: Elisabeth Kubler-Ross. In her book *On Children and Death* (Kubler-Ross, 1983), Kubler-Ross describes even more serious concerns than Jung about discussing this topic, but as with Jung, she has also met many, many patients who have had these experiences:

…I have been called every possible name, from Antichrist to Satan himself; I have been labeled, reviled, and otherwise denounced…But it is impossible to ignore the thousands of stories that patients - children and adults alike - have shared with me. These illuminations cannot be explained in scientific language. Listening to these experiences and sharing many of them myself, it would seem hypocritical and dishonest to me not to mention them in my lectures and workshops. So I have shared all of what I have learned from my patients for the last two decades, and I intend to continue to do so. (pg. 106; Kubler-Ross, 1983)

? discussion question 2.7.1

Jung studied and wrote about topics as diverse as alchemy, astrology, flying saucers, ESP, the prophecies of Nostradamus, and synchronicity. Does this make it difficult for you to believe any of his theories? If you don't believe anything about any of these topics, are you still able to find value in other theories proposed by Jung?

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2.S: Chapter Summary

Review of Key Points

- As a child, Jung was introduced to a wide variety of cultural and religious perspectives from around the world. As a result of these experiences, he was open to many different perspectives throughout his career.
- Jung had extremely vivid dreams, many of which he interpreted as visions (or unconscious communications) intended to guide his actions.
- Jung called his approach “analytical psychology” in order to distinguish it from Freud’s “psychoanalysis” and Adler’s “individual psychology.”
- An important starting point for Jung’s theories was the concept of entropy, which proposes an eventual balance of all energy. Jung applied this concept to the psychic energy present in the conscious and unconscious psyches.
- Jung proposed two distinct realms within the unconscious psyche, the personal and the collective.
- According to Jung, the personal unconscious is revealed through its complexes.
- Jung advanced the Word Association Test as a means of examining the complexes contained within the personal unconscious.
- The collective unconscious communicates through archetypal images. Jung believed the most readily observed archetypes are the shadow, the anima, and the animus.
- Another important archetype is the self, the representation of wholeness and the completed development of the personality. The self is often symbolically represented by mandalas.
- Jung developed a framework for recognizing particular personality types. He proposed two attitudes, introversion and extraversion, and four functions, thinking, feeling, sensing, and intuition.
- Jung’s type theory provided the basis for some practical personality tests. The Myers-Briggs Type Indicator and the Keirsey Temperament Sorter are both well-known in the field of psychology.
- Jung believed that everyone’s ultimate goal is to fully develop the potential of their personality. Jung called this process individuation.
- Development during the first half of life involves the natural aims of survival and procreation. The second half of life offers the opportunity to seek cultural development and the fulfillment of one’s self.
- Jungian analysis follows a basic series of stages, involving confession, elucidation, education, and transformation. However, Jung suggested it was better to avoid being locked into a rigid procedure. As a result, he utilized many different techniques, based on each individual patient.
- As Freud had before him, Jung developed a grand vision of how analytical psychology might help society as a whole. One unique proposition was that the Western world had much to learn from Eastern cultures.
- Jung’s interest in topics such as alchemy and extrasensory perception did not sit well with colleagues seeking to establish psychology as a scientific discipline. This opposition to Jung remains quite strong today, though Western psychology is broadening its perspective.

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CHAPTER OVERVIEW

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3.1: Humanistic Approaches

1.5: Humanistic Approaches

As the “third force” in psychology, humanism is touted as a reaction both to the pessimistic determinism of psychoanalysis, with its emphasis on psychological disturbance, and to the behaviorists’ view of humans passively reacting to the environment, which has been criticized as making people out to be personality-less robots. It does not suggest that psychoanalytic, behaviorist, and other points of view are incorrect but argues that these perspectives do not recognize the depth and meaning of human experience, and fail to recognize the innate capacity for self-directed change and transforming personal experiences. This perspective focuses on how healthy people develop. One pioneering humanist, Abraham Maslow, studied people who he considered to be healthy, creative, and productive, including Albert Einstein, Eleanor Roosevelt, Thomas Jefferson, Abraham Lincoln, and others. Maslow (1950, 1970) found that such people share similar characteristics, such as being open, creative, loving, spontaneous, compassionate, concerned for others, and accepting of themselves. When you studied motivation, you learned about one of the best-known humanistic theories, Maslow's hierarchy of needs theory, in which Maslow proposes that human beings have certain needs in common and that these needs must be met in a certain order. The highest need is the need for self-actualization, which is the achievement of our fullest potential. Maslow differentiated between needs that motivate us to fulfill something that is missing and needs that inspire us to grow. He believed that many emotional and behavioral concerns arise as a result of failing to meet these hierarchical needs.



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Another humanistic theorist was Carl Rogers. One of Rogers’s main ideas about personality regards self-concept, our thoughts and feelings about ourselves. How would you respond to the question, “Who am I?” Your answer can show how you see yourself. If your response is primarily positive, then you tend to feel good about who you are, and you see the world as a safe and positive place. If your response is mainly negative, then you may feel unhappy with who you are. Rogers further divided the self into two categories: the ideal self and the real self. The ideal self is the person that you would like to be; the real self is the person you actually are. Rogers focused on the idea that we need to achieve consistency between these two selves. We experience congruence when our thoughts about our real self and ideal self are very similar—in other words, when our self-concept is accurate**.** High congruence leads to a greater sense of self-worth and a healthy, productive life. Parents can help their children achieve this by giving them unconditional positive regard, or unconditional love. According to Rogers (1980), “As persons are accepted and prized, they tend to develop a more caring attitude towards themselves” (p. 116). Conversely, when there is a great discrepancy between our ideal and actual selves, we experience a state Rogers called incongruence, which can lead to maladjustment. Both Rogers’s and Maslow’s theories focus on individual choices and do not believe that biology is deterministic.

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3.2: Chapter Introduction

In contrast to both the often dark, subconscious emphasis of the psychodynamic theorists and the somewhat cold, calculated perspectives of behavioral/cognitive theorists, the humanistic psychologists focus on each individual's potential for personal growth and self-actualization. Carl Rogers was influenced by strong religious experiences (both in America and in China) and his early clinical career in a children's hospital. Consequently, he developed his therapeutic techniques and the accompanying theory in accordance with a positive and hopeful perspective. Rogers also focused on the unique characteristics and viewpoint of individuals.

Abraham Maslow is best known for his extensive studies on the most salient feature of the humanistic perspective: self-actualization. He is also the one who referred to humanistic psychology as the third force, after the psychodynamic and behavioral/cognitive perspectives, and he specifically addressed the need for psychology to move beyond its study of unhealthy individuals. He was also interested in the psychology of the work place, and his recognition in the business field has perhaps made him the most famous psychologist.

Henry Murray was an enigmatic figure, who seemingly failed to properly acknowledge the woman who inspired much of his work, and who believed his life had been something of a failure. Perhaps he felt remorse as a result of maintaining an extramarital affair with the aforementioned woman, thanks in large part to the advice and help of Carl Jung! Murray extended a primarily psychodynamic perspective to the study of human needs in normal individuals. His Thematic Apperception Test was one of the first psychological tests applied outside of a therapeutic setting, and it provided the basis for studying the need for achievement (something akin to a learned form of self-actualization).

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3.3: Carl Rogers and Humanistic Psychology

Carl Rogers is the psychologist many people associate first with humanistic psychology, but he did not establish the field in the way that Freud established psychoanalysis. A few years older than Abraham Maslow, and having moved into clinical practice more directly, Rogers felt a need to develop a new theoretical perspective that fit with his clinical observations and personal beliefs. Thus, he was proposing a humanistic approach to psychology and, more specifically, psychotherapy before Maslow. It was Maslow, however, who used the term humanistic psychology as a direct contrast to behaviorism and psychoanalysis. And it was Maslow who contacted some friends, in 1954, in order to begin meetings that led to the creation of the American Association for Humanistic Psychology. Rogers was included in that group, but so were Erich Fromm and Karen Horney, both of whom had distinctly humanistic elements in their own theories, elements that shared a common connection to Alfred Adler's Individual Psychology (Stagner, 1988). In addition, the spiritual aspects of humanistic psychology, such as peak experiences and transcendence, have roots in the work of Carl Jung and William James, and go even further back in time to ancient philosophies of Yoga and Buddhism.

In at least one important way, Rogers' career was similar to that of Sigmund Freud. As he began his clinical career, he found that the techniques he had been taught were not very effective. So, he began experimenting with his own ideas, and developing his own therapeutic approach. As that approach developed, so did a unique theory of personality that aimed at explaining the effectiveness of the therapy. Rogers found it difficult to explain what he had learned, but he felt quite passionately about it:

…the real meaning of a word can never be expressed in words, because the real meaning would be the thing itself. If one wishes to give such a real meaning he should put his hand over his mouth and *point*. This is what I should most like to do. I would willingly throw away all the words of this manuscript if I could, somehow, effectively *point* to the experience which is therapy. It is a process, a thing-in-itself, an experience, a relationship, a dynamic… (pp. ix; Rogers, 1951)

Brief Biography of Carl Rogers

Carl Ransom Rogers was born on January 8, 1902, in Chicago, Illinois. His parents were well-educated, and his father was a successful civil engineer. His parents loved their six children, of whom Rogers was the fourth, but they exerted a distinct control over them. They were fundamentalist Christians, who emphasized a close-knit family and constant, productive work, but approved of little else. The Rogers household expected standards of behavior appropriate for the 'elect' of God: there was no drinking of alcohol, no dancing, no visits to the theater, no card games, and little social life at all (DeCarvalho, 1991; Thorne, 2003).

Rogers was not the healthiest of children, and his family considered him to be overly sensitive. The more his family teased him, the more he retreated into a lonely world of fantasy. He sought consolation by reading books, and he was well above his grade level for reading when he began school. In 1914 the family moved to a large farm west of Chicago, a move motivated primarily by a desire to keep the children away from the temptations of suburban city life. The result was even more isolation for Rogers, who lamented that he'd only had two dates by the end of high school. He continued to learn, however, becoming something of an expert on the large moths that lived in the area. In addition, his father encouraged the children to develop their own ventures, and Rogers and his brothers raised a variety of livestock. Given these interests, and in keeping with family tradition, Rogers enrolled in the University of Wisconsin-Madison to study scientific agriculture (DeCarvalho, 1991; Thorne, 2003).

During his first year of college, Rogers attended a Sunday morning group of students led by Professor George Humphrey. Professor Humphrey was a facilitative leader, who refused to be conventional and who encouraged the students to make their own decisions. Rogers found the intellectual freedom very stimulating, and he also began to make close friends. This increased intellectual and emotional energy led Rogers to re-examine his commitment to Christianity. Given his strong religious faith, he decided to change his major to history, in anticipation of a career as a Christian minister. He was fortunate to be chosen as one of only twelve students from America to attend a World Student Christian Federation conference in Peking, China. He traveled throughout China (also visiting Korea, Hong Kong, Japan, the Philippines, and Hawaii) for 6 months, surrounded by other intelligent and creative young people. He kept a detailed journal, and wrote lengthy letters to his family and Helen Elliott, a childhood friend whom he considered to be his "sweetheart." His mind was stretched in all directions by this profound cross-cultural experience, and the intellectual and spiritual freedom he was embracing blinded him to the fact that his fundamentalist family was deeply disturbed by what he had to say. However, by the time Rogers was aware of his family's disapproval, he had been changed, and he believed that people of very different cultures and faiths can all be sincere and honest (Kirschenbaum, 1995; Thorne, 2003). As a curious side note, Rogers'

roommate on the trip was a Black seminary professor. Rogers was vaguely aware that it was strange at that time for a Black man and a White man to room together, but he was particularly surprised at the stares they received from the Chinese people they met, who had never seen a Black person before (Rogers & Russell, 2002). After his return from China, Rogers graduated from college, and 2 months later he married Helen. Again his family disapproved, believing that the young couple should be more established first. But Rogers had been accepted to the Union Theological Seminary in New York City, and both he and Helen wanted to be together. His family may have wanted them to wait because Union Theological Seminary was, perhaps, the most liberal seminary in America at the time (DeCarvalho, 1991; Rogers & Russell, 2002; Thorne, 2003).

Rogers spent 2 years at the seminary, including a summer assignment as the pastor of a small church in Vermont. However, his desire not to impose his own beliefs on others, made it difficult for him to preach. He began taking courses at nearby Teachers' College of Columbia University, where he learned about clinical and educational psychology, as well as working with disturbed children. He then transferred to Teachers' College, and after writing a dissertation in which he developed a test for measuring personality adjustment in children, he earned his Ph.D. in Clinical Psychology. Then, in 1928, he began working at the Rochester Society for the Prevention of Cruelty to Children (DeCarvalho, 1991; Thorne, 2003).

Rogers was immersed in his work in Rochester for 12 years. He found that even the most elaborate theories made little sense when dealing with children who had suffered severe psychological damage after traveling through the courts and the social work systems. So Rogers developed his own approach, and did his best to help them. Many of his colleagues, including the director, had no particular therapeutic orientation:

When I would try to see what I could do to alter their behavior, sometimes they would refuse to see me the next time. I'd have a hard time getting them to come from the detention home to my office, and that would cause me to think, "What is it that I did that offended the child?" Well, usually it was overinterpretation, or getting too smart in analyzing the causes of behavior…So we approached every situation with much more of a question of "What can we do to help?" rather than "What is the mysterious cause of this behavior?" or "What theory does the child fit into?" It was a very good place for learning in that it was easy to be open to experience, and there was certainly no pressure to fit into any particular pattern of thought. (pg. 108; Rogers & Russell, 2002)

Eventually Rogers wrote a book outlining his work with children, *The Clinical Treatment of the Problem Child* (Rogers, 1939), which received excellent reviews. He was offered a professorship at Ohio State University. Beginning as a full professor gave Rogers a great deal of freedom, and he was frequently invited to give talks. It has been suggested that one such talk, in December 1940, at the University of Minnesota, entitled "Newer Concepts in Psychotherapy," was the official birthday of client-centered therapy. Very popular with his students, Rogers was not so welcome amongst his colleagues. Rogers believed that his work was particularly threatening to those colleagues who believed that only their own expertise could make psychotherapy effective. After only 4 years, during which he published *Counseling and Psychotherapy* (Rogers, 1942), Rogers moved on to the University of Chicago, where he established the counseling center, wrote *Client-Centered Therapy* (Rogers, 1951) and contributed several chapters to *Psychotherapy and Personality Change* (Rogers & Dymond, 1954), and in 1956 received a *Distinguished Scientific Contribution Award* from the American Psychological Association. Then, in 1957, he accepted a joint appointment in psychiatry and psychology at the University of Wisconsin to study psychotic individuals. Rogers had serious doubts about leaving Chicago, but felt that the joint appointment would allow him to make a dramatic contribution to psychotherapy. It was a serious mistake. He did not get along with his colleagues in the psychology department, whom he considered to be antagonistic, outdated, "rat-oriented," and distrustful of clinical psychology, and so he resigned. He kept his appointment in the psychiatry department, however, and in 1961 published perhaps his most influential book, *On Becoming a Person* (Rogers, 1961).

In 1963, Rogers moved to California to join the Western Behavioral Sciences Institute, at the invitation of one of his former students, Richard Farson. This was a non-profit institute dedicated to the study of humanistically-oriented interpersonal relations. Rogers was leery of making another major move, but eventually agreed. He became very active in research on encounter groups and educational theory. Five years later, when Farson left the institute, there was a change in its direction. Rogers was unhappy with the changes, so he joined some colleagues in leaving and establishing the Center for Studies of the Person, where he remained until his death. In his later years, Rogers wrote books on topics such as personal power and marriage (Rogers, 1972, 1977). In 1980, he published *A Way of Being* (Rogers, 1980), in which he changed the terminology of his perspective from "client-centered" to "person-centered." With the assistance of his daughter Natalie, who had studied with Abraham Maslow, he held many group workshops on life, family, business, education, and world peace. He traveled to regions where tension and danger were high, including Poland, Russia, South Africa, and Northern Ireland. In 1985 he brought together influential leaders of seventeen Central

American countries for a peace conference in Austria. The day he died, February 4, 1987, without knowing it, he had just been nominated for the Nobel Peace Prize (DeCarvalho, 1991; Kirschenbaum, 1995; Thorne, 2003).

Placing Rogers in Context: A Psychology 2,600 Years in the Making

Carl Rogers was an extraordinary individual whose approach to psychology emphasized individuality. Raised with a strong Christian faith, exposed to Eastern culture and spirituality in college, and then employed as a therapist for children, he came to value and respect each person he met. Because of that respect for the ability of each person to grow, and the belief that we are innately driven toward actualization, Rogers began the distinctly humanistic approach to psychotherapy that became known as client-centered therapy.

Taken together, client-centered therapy and self-actualization offer a far more positive approach to fostering the growth of each person than most other disciplines in psychology. Unlike the existing approaches of psychoanalysis, which aimed to uncover problems from the past, or behavior therapies, which aimed to identify problem behaviors and control or "fix" them, client-centered therapy grew out of Rogers' simple desire to help his clients move forward in their lives. Indeed, he had been trained as a psychoanalyst, but Rogers found the techniques unsatisfying, both in their goals and their ability to help the children he was working with at the time. The seemingly hands-off approach of client-centered therapy fit well with a Taoist perspective, something Rogers had studied, discussed, and debated during his trip to China. In *A Way of Being*, Rogers (1980) quotes what he says is perhaps his favorite saying, one which sums up many of his deeper beliefs:

If I keep from meddling with people, they take care of themselves,

If I keep from commanding people, they behave themselves,

If I keep from preaching at people, they improve themselves,

If I keep from imposing on people, they become themselves.

Lao Tsu, c600 B.C.; Note: This translation differs somewhat from the one

cited in the References. I have included the translation Rogers quoted,

since the difference likely influenced his impression of this saying.

Rogers, like Maslow, wanted to see psychology contribute far more to society than merely helping individuals with psychological distress. He extended his sincere desire to help people learn to really communicate, with empathic understanding, to efforts aimed at bringing peace to the world. On the day he died, he had just been nominated for the Nobel Peace Prize. Since a Nobel Prize cannot be awarded to someone who has died, he was not eligible to be nominated again. If he had lived a few more years, he may well have received that award. His later years were certainly committed to peace in a way that deserved such recognition.

Basic Concepts

Rogers believed that each of us lives in a constantly changing private world, which he called the **experiential field**. Everyone exists at the center of their own experiential field, and that field can only be fully understood from the perspective of the individual. This concept has a number of important implications. The individual's behavior must be understood as a reaction to their experience and perception of the field. They react to it as an organized whole, and it is their reality. The problem this presents for the therapist is that only the individual can really understand their experiential field. This is quite different than the Freudian perspective, in which only the trained and objective psychoanalyst can break through the defense mechanisms and understand the basis of the patient's unconscious impulses. One's perception of the experiential field is limited, however. Rogers believed that certain impulses, or sensations, can only enter into the conscious field of experience under certain circumstances. Thus, the experiential field is not a true reality, but rather an individual's potential reality (Rogers, 1951).

The one basic tendency and striving of the individual is to actualize, maintain, and enhance the experiencing of the individual or, in other words, an **actualizing tendency**. Rogers borrowed the term **self-actualization**, a term first used by Kurt Goldstein, to describe this basic striving.

The tendency of normal life is toward activity and progress. For the sick, the only form of self-actualization that remains is the maintenance of the existent state. That, however, is not the tendency of the normal…Under adequate conditions the normal organism seeks further activity. (pp. 162-163; Goldstein, 1934/1995).

For Rogers, self-actualization was a tendency to move forward, toward greater maturity and independence, or self-responsibility. This development occurs throughout life, both biologically (the differentiation of a fertilized egg into the many organ systems of the body) and psychologically (self-government, self-regulation, socialization, even to the point of choosing life goals). A key factor in understanding self-actualization is the experiential field. A person's needs are defined, as well as limited, by their own potential for experience. Part of this experiential field is an individual's emotions, feelings, and attitudes. Therefore, who the individual is, their actual **self**, is critical in determining the nature and course of their self-actualization (Rogers, 1951). We will examine Maslow's work on self-actualization in more detail below.

What then, is the self? In Rogers' (1951) initial description of his theory of personality, the experiential field is described in four points, the self-actualizing tendency in three points, and the remaining eleven points attempt to define the self. First and foremost, the self is a differentiated portion of the experiential field. In other words, the self is that part of our private world that we identify as "me," "myself," or "I." Beyond that, the self remains somewhat puzzling. Can the self exist in isolation, outside of relationships that provide some context for the self? Must the self be synonymous with the physical body? As Rogers' pointed out, when our foot "goes to sleep" from a lack of circulation, we view it as an object, not as a part of our self! Despite these challenging questions, Rogers tried to define and describe the self.

Rogers believed the self is formed in relation to others; it is an organized, fluid, yet consistent conceptual pattern of our experiential interactions with the environment and the values attached to those experiences. These experiences are symbolized and incorporated into the structure of the self, and our behavior is guided largely by how well new experiences fit within that structure. We may behave in ways inconsistent with the structure of our self, but when we do we will not "own" that behavior. When experiences are so inconsistent that we cannot symbolize them, or fit them into the structure of our self, the potential for psychological distress arises. On the other hand, when our concept of self is mature enough to incorporate all of our perceptions and experiences, and we can assimilate those experiences symbolically into our self, our psychological adjustment will be quite healthy. Individuals who find it difficult to assimilate new and different experiences, those experiences that threaten the structure of the self, will develop an increasingly rigid **self-structure**. Healthy individuals, in contrast, will assimilate new experiences, their self-structure will change and continue to grow, and they will become more capable of understanding and accepting others as individuals (Rogers, 1951).

The ability of individuals to make the choices necessary for actualizing their self-structure and to then fulfill those choices is what Rogers called **personal power** (Rogers, 1977). He believed there are many self-actualized individuals revolutionizing the world by trusting their own power, without feeling a need to have "power over" others. They are also willing to foster the latent actualizing tendency in others. We can easily see the influence of Alfred Adler here, both in terms of the creative power of the individual and seeking superiority within a healthy context of social interest. **Client-centered therapy** was based on making the context of personal power a clear strategy in the therapeutic relationship:

…the client-centered approach is a conscious renunciation and avoidance by the therapist of all control over, or decision-making for, the client. It is the facilitation of self-ownership by the client and the strategies by which this can be achieved…based on the premise that the human being is basically a trustworthy organism, capable of…making constructive choices as to the next steps in life, and acting on those choices. (pp. 14-15; Rogers, 1977)

Discussion Question: Rogers claimed that no one can really understand your experiential field. Would you agree, or do you sometimes find that close friends or family members seem to understand you better than you understand yourself? Are these relationships congruent?

Personality Development

Although Rogers described personality within the therapist-client relationship, the focus of his therapeutic approach was based on how he believed the person had arrived at a point in their life where they were suffering from psychological distress. Therefore, the same issues apply to personality development as in therapy. A very important aspect of personality development, according to Rogers, is the parent-child relationship. The nature of that relationship, and whether it fosters self-actualization or impedes personal growth, determines the nature of the individual's personality and, consequently, their self-structure and psychological adjustment.

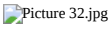
A child begins life with an actualizing tendency. As they experience life, and perceive the world around them, they may be supported in all things by those who care for them, or they may only be supported under certain conditions (e.g., if their behavior complies with strict rules). As the child becomes self-aware, it develops a need for **positive regard**. When the parents offer the

child **unconditional positive regard**, the child continues moving forward in concert with its actualizing tendency. So, when there is no discrepancy between the child's **self-regard** and its positive regard (from the parents), the child will grow up psychologically healthy and well-adjusted. However, if the parents offer only **conditional positive regard**, if they only support the child according the desires and rules of the parents, the child will develop **conditions of worth**. As a result of these conditions of worth, the child will begin to perceive their world selectively; they will avoid those experiences that do not fit with its goal of obtaining positive regard. The child will begin to live the life of those who set the conditions of worth, rather than living its own life.

As the child grows older, and more aware of its own condition in the world, their behavior will either fit within their own self-structure or not. If they have received unconditional positive regard, such that their self-regard and positive regard are closely matched, they will experience **congruence**. In other words, their sense of self and their experiences in life will fit together, and the child will be relatively happy and well-adjusted. But, if their sense of self and their ability to obtain positive regard do not match, the child will develop **incongruence**. Consider, for example, children playing sports. That alone tells us that parents have established guidelines within which the children are expected to "play." Then we have some children who are naturally athletic, and other children who are more awkward and/or clumsy. They may become quite athletic later in life, or not, but during childhood there are many different levels of ability as they grow. If a parent expects their child to be the best player on the team, but the child simply isn't athletic, how does the parent react? Do they support the child and encourage them to have fun, or do they pressure the child to perform better and belittle them when they can't? Children are very good at recognizing who the better athletes are, and they know their place in the hierarchy of athletics, i.e., their athletic self-structure. So if a parent demands dominance from a child who knows they just aren't that good, the child will develop incongruence. Rogers believed, quite understandably, that such conditions are threatening to a child, and will activate defense mechanisms. Over time, however, excessive or sudden and dramatic incongruence can lead to the breakdown and disorganization of the self-structure. As a result, the individual is likely to experience psychological distress that will continue throughout life (Rogers, 1959/1989).

Discussion Question: Conditions of worth are typically first established in childhood, based on the relationship between a child and his or her parents. Think about your relationship with your own parents and, if you have children, think about how you treat them. Are most of the examples that come to mind unconditional positive regard, or conditional positive regard? How has that affected your relationship with your parents and/or your own children?

Figure **3.3.1**



Sometimes parents create conditions of worth by overemphasizing the importance of competition. Even a trip to the pumpkin patch can be a challenge to get the biggest, best pumpkin.

Another way in which Rogers approached the idea of congruence and incongruence was based on an individual's dual concept of self. There is, of course, the actual self-structure, or **real self**. In addition, there is also an **ideal self**, much like the fictional finalism described by Adler or the idealized self-image described by Horney. Incongruence develops when the real self falls far short of the accomplishment expected of the ideal self, when experience does not match the expectations of the self-structure (Rogers, 1951, 1959/1989). Once again, the relationship between parents and their children plays an important role in this development. If parents expect too much, such as all A's every marking period in school, but the child just isn't academically talented, or if the parents expect their child to be the football team's quarterback, but the child isn't a good athlete, then the ideal self will remain out of reach. Perhaps even worse, is when a child is physically or emotionally abused. Such a child's ideal self may remain at a relatively low standard, but the real self may be so utterly depressed that incongruence is still the result. An important aspect of therapy will be to provide a relationship in which a person in this unfortunate condition can experience the unconditional positive regard necessary to begin reintegrating the self-structure, such that the gap between the real self and the ideal self can begin to close, allowing the person to experience congruence in their life.

What about individuals who have developed congruence, having received unconditional positive regard throughout development or having experienced successful client-centered therapy? They become, according to Rogers (1961), a **fully functioning person**. He also said they lead a good life. The good life is a process, not a state of being, and a direction, not a destination. It requires psychological freedom, and is the natural consequence of being psychologically free to begin with. Whether or not it develops naturally, thanks to a healthy and supportive environment in the home, or comes about as a result of successful therapy, there are certain characteristics of this process. The fully functioning person is increasingly open to new experiences, they live fully in each moment, and they trust themselves more and more. They become more able and more willing to experience all of their feelings,

they are creative, they trust human nature, and they experience the richness of life. The fully functioning person is not simply content, or happy, they are *alive*:

I believe it will become evident why, for me, adjectives such as happy, contented, blissful, enjoyable, do not seem quite appropriate to any general description of this process I have called the good life, even though the person in this process would experience each one of these feelings at appropriate times. But the adjectives which seem more generally fitting are adjectives such as enriching, exciting, rewarding, challenging, meaningful. This process…involves the courage to be. …the deeply exciting thing about human beings is that when the individual is inwardly free, he chooses as the good life this process of becoming. (pp. 195-196; Rogers, 1961)

Discussion Question: Rogers described self-actualized people as fully functioning persons who are living a good life. Do you know anyone who seems to be a fully functioning person? Are there aspects of their personality that you aspire to for yourself? Does it seem difficult to be fully functioning, or does it seem to make life both easier and more enjoyable?

✔ connections across cultures

Self-Realization as the Path to Being a Fully Functioning Person

Rogers described an innate drive toward self-actualization, he talked about an ideal self, and he said that a fully functioning person lived a good life. But what does this actually mean? In the Western world we look for specific, tangible answers to such questions. We want to know what the self-actualization drive is, we want to know which ideals, or virtues, are best or right, and we want to define a "good life." All too often, we define a good life in terms of money, power, and possessions. The Eastern world has, for thousands of years, emphasized a very different perspective. They believe there is a natural order to life, and it is important that we let go of our need to explain the universe, and it is especially important that we let go of our need to own pieces of the universe. In the Tao Te Ching, Lao Tsu (c. 600 B.C./1989) writes:

Something mysteriously formed,

Born before heaven and earth.

In the silence and the void,

Standing alone and unchanging,

Ever present and in motion.

Perhaps it is the mother of ten thousand things.

I do not know its name,

Call it Tao.

For lack of a better word, I call it great…

The greatest Virtue is to follow Tao and Tao alone…

Tao follows what is natural.

At about the same time, some 2,600 years ago, the Bhagavad Gita was also written down (Mitchell, 2000). In the second chapter one finds:

When a man gives up all desires

That emerge from the mind, and rests

Contented in the Self by the Self,

He is called a man of firm wisdom…

In the night of all beings, the wise man

Sees only the radiance of the Self;

But the sense-world where all beings wake,

For him is as dark as night.

In each of these sacred books, we are taught that there is something deeper than ourselves that permeates the universe, but it is beyond our comprehension. It is only when we stop attempting to explain it, our way of trying to control it, and be content to just be ourselves, that we can actually attain that goal. To achieve this goal seems to require the absence of conditions of worth. If someone has been given unconditional positive regard throughout their life, they will be content to live that life as it is. Rogers was well aware of this challenge, and he described the good life as a process, not something that you could actually get, but something that you had to "Be." Still, is it possible that a fully functioning person might have the insight necessary to understand the essence of the universe? Not according to Swami Sri Yukteswar:

Man possesses eternal faith and believes intuitively in the existence of a Substance, of which the objects of sense - sound, touch, sight, taste, and smell, the component parts of this visible world - are but properties. As man identifies himself with his material body, composed of the aforesaid properties, he is able to comprehend by these imperfect organs these properties only, and not the Substance to which these properties belong. The eternal Father, God, the only Substance in the universe, is therefore not comprehensible by man of this material world, unless he becomes divine by lifting his self above this creation of Darkness or Maya. See Hebrews 11:1 and John 8:28.

"Now faith is the substance of things hoped for, the evidence of things not seen."

"Then said Jesus unto them, When ye have lifted up the son of man, then shall ye know that I am he."

Jnanavatar Swami Sri Yukteswar Giri, 1894/1990

So whether we believe in God, Tao, an eternal Self, a mortal Self, or merely an actualizing tendency, for thousands of years there has been the belief, amongst many people, that our lives are about more than just being alive for a limited period of time. And it is in the recognition and acceptance, indeed the embracing, of that something more, even if we can't conceive it in our conscious mind, that we find and live a good life. When Paramahansa Yogananda, a direct disciple of Swami Yukteswar, came to the United States in 1920 to establish a permanent Yoga society, it was suggested that he name his society God-Realization. However, since he believed life is about realizing (or actualizing, in psychological terms) our selves, he established his organization as the Self-Realization Fellowship (Yogananda, 1946).

Self-realization, in the context of Yoga, refers to becoming aware of one's connection to the spark of divinity that exists within us, which may well be the source of our actualizing tendency. It is not the same as the sense of "I" or "me" that we normally think of. After all, are we our body or our mind? Consider the body. Is it the body we were born with, or the body we have now? Is our mind what we are thinking now, or what we were thinking 2 years ago? Both the body and the mind are transient, but the Self continues. It is that Self that Yogis, Buddhists, and Taoists seek to realize, and it may well be that Self which seeks its own actualization (separate from the consciousness created by the brain underlying our mind; see Feuerstein, 2003; Kabat-Zinn, 1994). This is also the Self of Being and transcendence, as described by Maslow.

Social Relationships and Marriage

Social and personal relationships were very important to Rogers, both in therapy and in everyday life. During each moment, we have our awareness (or consciousness), our experience (our perception of what is happening), and our communication (our relational behavior). For the fully functioning person, there is congruence between each of these phenomena. Unfortunately, we tend to be a poor judge of our own congruence. For example, if someone becomes angry with another person at a meeting or in a therapy group, they may remain unaware of their anger, even though it may be quite obvious to everyone else in the room. Thus, our relationship with others can reflect the true nature of our own personality, and the degree to which we are congruent. If others are congruent, and therefore are willing to talk to us openly and honestly, it will encourage us to become more congruent and, consequently, more psychologically healthy (Rogers, 1961, 1980). Curiously, the reason this became so important to Rogers was the lack of such meaningful relationships in his own life. Because his family followed strict, fundamentalist rules, they discouraged relationships with people outside their family. The consequences were rather disturbing for Rogers:

…the attitudes toward persons outside our large family can be summed up schematically in this way: "Other persons behave in dubious ways which we do not approve in our family. Many of them play cards, go to movies, smoke, dance, drink, and engage in other activities, some unmentionable. So the best thing to do is to be tolerant of them, since they may not know better, but to keep away from any close communication with them and to live your life within the family…"

I could sum up these boyhood years by saying that anything I would today regard as a close and communicative interpersonal relationship with another was completely lacking during that period…I was peculiar, a loner, with very little place or opportunity for a place in the world of persons. I was socially incompetent in any but superficial contacts. My fantasies during this period were definitely bizarre, and probably would be classed as schizoid by a diagnostician, but fortunately I never came in contact with a psychologist. (pp. 28-30; Rogers, 1980)

As noted above, the development of healthy relationships takes place whenever one person in the relationship is congruent. Their congruence encourages the other person to be more congruent, which supports the continued open communication on behalf of the first person. This interplay goes back and forth, encouraging continued and growing congruence in the relationship. As we will see below, this is basically the therapeutic situation, in which the therapist is expected to be congruent. However, it certainly does not require a trained therapist, since it occurs naturally in any situation in which one person is congruent from the beginning of the relationship.

One of the most important, and hopefully meaningful, relationships in anyone's life is marriage. Rogers was married for 55 years, and as the end of his wife's life approached he poured out his love to her with a depth that astonished him (Rogers, 1980). As relationships became more and more meaningful to him, he wanted to study the extraordinary relationships that become more than temporary. Although this is not necessarily synonymous with marriage, it most typically is. So he conducted a series of informal interviews with people who were, or had been, in lengthy relationships (at least 3 years). In comparing the relationships that seemed successful, as compared to those that were unhappy or had already come to an end, Rogers identified four factors that he believed were most important for long-term, healthy relationships: dedication or commitment, communication, the dissolution of roles, and becoming a separate self (Rogers, 1972).

Dedication, Commitment: Marriage is challenging: love seems to fade, vows are forgotten or set aside, religious rules are ignored (e.g., "What therefore God has joined together, let no man put asunder."; Matthew 19:6; Holy Bible, 1962). Rogers believed that in order for a relationship to last, each person must be dedicated to their partnership. They must commit themselves to working together throughout the changing process of their relationship, which is enriching their love and their life.

Communication: Communication encompasses much of human behavior, and it can be both subtle and complex. Communication itself is not a good thing, since many negative and hurtful things can be communicated. However, Rogers believed that we need to communicate persistent feeling, whether positive or negative, so that they don't overwhelm us and come out in inappropriate ways. It is always important to express such communication in terms of your own thoughts and feelings, rather than projecting those feelings onto others (especially in angry and/or accusatory ways). This process involves risk, but one must be willing to risk the end of a relationship in order to allow it to grow.

Dissolution of Roles: Culture provides many expectations for the nature of relationships, whether it be dating or something more permanent like marriage. According to Rogers, obeying the cultural rules seems to contradict the idea of a growing and maturing relationship, a relationship that is moving forward (toward actualization). However, when individuals make an intentional choice to fulfill cultural expectations, because they *want* to, then the relationship can certainly be actualizing for them.

Becoming a Separate Self: Rogers believed that "a *living* partnership is composed of two people, each of whom owns, respect, and develops his or her own selfhood" (pg. 206; Rogers, 1972). While it may seem contradictory that becoming an individual should enhance a relationship, as each person becomes more real and more open they can bring these qualities into the relationship. As a result, the relationship can contribute to the continued growth of each person.

Discussion Question: Consider Rogers' criteria for a successful marriage, which begins with commitment to the marriage. Given the divorce rate (which studies now place at over 60%), and ongoing political debates about what marriage is or is not, what is your opinion of the status of marriage in society today?

Client-Centered and Person-Centered Therapy

Central to Rogers' view of psychotherapy is the relationship between the therapist and the client, and we must again emphasize the distinction between a client and a patient. This involves shifting the emphasis in therapy from a psychologist/psychiatrist who can "fix" the patient to the client themselves, since only the client can truly understand their own experiential field. The therapist must provide a warm, safe environment in which the client feels free to express whatever attitude they experience in the same way that they perceive it. At the same time, the client experiences the therapist as someone temporarily divested of their own self, in their

complete desire to understand the client. The therapist can then accurately and objectively reflect the thoughts, feelings, perceptions, confusions, ambivalences, etc., of the client back to the client. In this open, congruent, and supportive environment, the client is able to begin the process of reorganizing and reintegrating their self-structure, and living congruently within that self-structure (Rogers, 1951).

In 1957, Rogers published an article entitled *The Necessary and Sufficient Conditions of Therapeutic Personality Change* (Rogers, 1957/1989). The list is fairly short and straightforward:

1. The client and the therapist must be in psychological contact.
2. The client must be in a state of incongruence, being vulnerable or anxious.
3. The therapist must be congruent in the relationship.
4. The therapist must experience unconditional positive regard for the client.
5. The therapist must experience empathic understanding of the client's frame of reference and endeavor to communicate this experience to the client.
6. The client must perceive, at least to a minimal degree, the therapist's empathic understanding and unconditional positive regard.

According to Rogers, there is nothing else that is required; if these conditions are met over a period of time, there will be constructive personality change. What Rogers considered more remarkable are those factors that do *not* seem necessary for positive therapeutic change. For example, these conditions do not apply to one type of client, but to all clients, and they are not unique to client-centered therapy, but apply in all types of therapy. The relationship between the therapist and client is also not unique, these factors hold true in any interpersonal relationship. And most surprisingly, these conditions do not require any special training on the part of therapist, or even an accurate diagnosis of the client's psychological problems! Any program designed for the purpose of encouraging constructive change in the personality structure and behavior of individuals, whether educational, military, correctional, or industrial, can benefit from these conditions and use them as a measure of the effectiveness of the program (Rogers, 1957).

Can any one of these conditions be considered more important than the others? Although they are all necessary, Rogers came to believe that the critical factor may be the therapist's **empathic understanding** of the client (Rogers, 1980). The Dalai Lama (2001) has said that empathy is an essential first step toward a compassionate heart. It brings us closer to others, and allows us to recognize the depth of their pain. According to Rogers, empathy refers to entering the private world of the client, and moving about within it without making any judgments. It is essential to set aside one's own views and values, so that the other person's world may be entered without prejudice. Not just anyone can accomplish this successfully:

In some sense it means that you lay aside your self; this can only be done by persons who are secure enough in themselves that they know they will not get lost in what may turn out to be the strange or bizarre world of the other, and that they can comfortably return to their own world when they wish. (pg. 143; Rogers, 1980)

Finally, let us consider group therapy situations. Within a group, all of the factors described above hold true. Rogers, who late in his career was becoming more and more interested in the growth of all people, including those reasonably well-adjusted and mature to begin with, became particularly interested in **T-groups** and **encounter groups**. These groups were developed following the proposition by Kurt Lewin that modern society was overlooking the importance of training in human relations skills (the "T" in T-group stands for "training"). Encounter groups were quite similar to T-groups, except that there was a greater emphasis on personal growth and improved interpersonal communication through an experiential process. Each group has a leader, or facilitator, who fosters and encourages open communication. The group serves as a reflection of the congruence, or lack thereof, in the communication of whoever is currently expressing themselves. As a result, the group hopefully moves toward congruence, and the subsequent personal growth and actualization of the each individual (Rogers, 1970).

Given the usefulness of T-groups and encounter in a variety of settings, as well as the importance of continued personal growth and actualization for the well-adjusted as well as those suffering psychological distress, Rogers shifted his focus from simply client-centered therapy to a more universal **person-centered approach**, which encompasses client-centered therapy, student-centered teaching, and group-centered leadership (Rogers, 1980; see also Rogers & Roethlisberger, 1952/1993). Rogers believed that all people have within them vast resources for self-understanding and for changing their self-concepts, attitudes, and behaviors. In all relationships, whether therapist-client, parent-child, teacher-student, leader-group, employer-employee, etc., there are three elements that can foster personal growth: genuineness or congruence, acceptance or caring, and empathic understanding. When

these elements are fostered in any setting, “there is greater freedom to be the true, whole person.” The implications go far beyond individual relationships. We live in what seems to be an increasingly dangerous world. Globalism has brought with it global tension and conflict. However, Rogers argued that a person-centered approach would help to ease intercultural tension, by helping each of us to learn to appreciate and understand others. Whether the cultural differences are political, racial, ethnic, economic, whatever, as more leaders become person-centered there is the possibility for future growth of intercultural understanding and cooperation (Rogers, 1977).

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3.4: Abraham Maslow and Holistic-Dynamic Psychology

Maslow stands alongside Rogers as one of the founders of humanistic psychology. Although he began his career working with two of the most famous experimental psychologists in America, he was profoundly influenced by the events that led into World War II. He became devoted to studying the more virtuous aspects of personality, and he may be viewed as one of the founders of positive psychology. Well-known primarily for his work on self-actualization, Maslow also had a significant impact on the field of management. His fame in both psychology and business makes him a candidate for being, perhaps, the best-known psychologist of all time (Freud is certainly more famous, but remember that he was a psychiatrist). According to Maslow, his **holistic-dynamic theory** of personality was a blend of theories that had come before his:

This theory is, I think, in the functionalist tradition of James and Dewey, and is fused with the holism of Wertheimer, Goldstein, and Gestalt psychology, and with the dynamicism of Freud, Fromm, Horney, Reich, Jung, and Adler. This integration or synthesis may be called a holistic-dynamic theory. (pg. 35; Maslow, 1970)

Brief Biography of Abraham Maslow

Abraham H. Maslow was born on April 1, 1908 in Brooklyn, New York, the first of seven children. His father, Samuel, had left Kiev, Russia at just 14 years old. When Samuel Maslow arrived in America he had no money and did not speak English. Samuel Maslow spent a few years in Philadelphia, doing odd jobs and learning the language, before moving to New York City, where he married his first cousin Rose and began a cooperage business (a cooper builds and repairs barrels). Samuel and Rose Maslow did not have a happy marriage, and Abraham Maslow was particularly sensitive to this fact. Maslow resented his father's frequent absences, and apparently hated his mother. His mother was a superstitious woman, who severely punished Maslow for even minor misbehavior by threatening him with God's wrath. Maslow developed an intense distrust of religion, and was proud to consider himself an atheist (Gabor, 2000; Hoffman, 1988; Maddi & Costa, 1972).

Maslow's childhood was no better outside the home. Anti-Semitism was rampant in New York. Many teachers were cruel, and he overheard them say nasty things about him. He had no friends, and there were anti-Semitic gangs that would find and beat up Jewish children. At one point he decided to join a Jewish gang for protection, but he didn't have the "right" attitude:

> *I wanted to be a member of the gang, but I couldn't: they rejected me because I couldn't kill cats…We'd stake out a cat on a [clothesline] and stand back so many paces and throw rocks at it and kill it.*
>
> *And the other thing was to throw rocks at the girls on the corner. Now I knew that the girls liked it, and yet I couldn't throw rocks at girls and I couldn't kill cats, so I was ruled out of the gang, and I could never be the gangster that I wanted to become. (pg. 4; Maslow, cited in Hoffman, 1988)*



Figure 3.4.1: *IGame of craps. mage Source: LC-DIG-nclc-04448 Boys Playing Hine. (2003, March 6). Retrieved from https://www.flickr.com/photos/67331818@N03/8549416650. Licensed under CC-BY-2.0.*

With six more children joining the family, one every couple of years, the family was constantly moving and, following the troubling death of one of his little sisters (Maslow blamed her illness, in part, on their mother's neglect), Maslow became a very unhappy and shy child. He also thought he was terribly ugly, something his father said openly at a large family gathering! Perhaps worst of all, he felt profoundly strange and different than other children, largely because he was so intellectual. Maslow reconciled with his father later in life. During the depression, Samuel Maslow lost his business. By that time he had divorced Maslow's mother, Rose, and he moved in with his son. The two became close, and after Samuel Maslow died, his son remembered him fondly. Maslow never forgave his mother, however. Some of the childhood stories he related were shockingly cruel. Once, he had searched through second-hand record shops for some special 78-RPM records. When he failed to put them away soon after returning home, his mother stomped them into pieces on the living room floor. Another time, Maslow brought home two abandoned kittens he had found. When his mother caught him feeding them a saucer of milk, she grabbed the kittens and smashed their heads against a wall until they were dead! Later in life, he refused to even attend her funeral.

> *What I had reacted to and totally hated and rejected was not only her physical appearance, but also her values and world view…I've always wondered where my utopianism, ethical stress, humanism, stress on kindness, love, friendship, and all the rest came from. I knew certainly of the direct consequences of having no mother-love. But the whole thrust of my life-philosophy and all my research and theorizing also has its roots in a hatred for and revulsion against everything she stood for. (pg. 9; Maslow cited in Hoffman, 1988)*

Maslow spent much of his childhood reading, and despite the treatment he received from many of his prejudiced teachers, he loved to learn. After high school Maslow won a scholarship to Cornell University, but encountered pervasive anti-Semitism throughout his first year. So he transferred to City College, where he first studied the work of behavioral scientists like John B. Watson. He was

impressed by Watson's desire to use the newly created science of behaviorism to fight social problems, such as racial and ethnic discrimination. At the same time, however, Maslow had fallen in love with his first cousin Bertha Goodman, a relationship his parents strongly opposed. So Maslow left for the University of Wisconsin (Gabor, 2000; Hoffman, 1988; Maddi & Costa, 1972). Bertha Goodman followed, and they were soon married. Marriage boosted Maslow's self-esteem, and provided him with a sense of purpose in life. He later said that "life didn't really start for me until I got married and went to Wisconsin" (pg. 128; cited in Maddi & Costa, 1972).

In Wisconsin, Maslow studied the behavior of primates under the supervision of the renowned Harry Harlow (most famous for his studies on **contact comfort**). One day, while watching some monkeys seemingly enjoy munching on peanuts and other treats, Maslow recognized that appetite and hunger are two different things. Thus, motivation must be comprised of separate elements as well. In another study, Maslow tried to address the different aspects of Freud and Adler's psychodynamic perspectives by observing dominance behavior amongst the monkeys. His colleagues and professors, however, had little interest in the psychoanalytic science that they considered to be a European endeavor. Maslow completed his Ph.D. at Wisconsin in 1934, and then returned to New York. He earned a position at Columbia University with the renowned Edward Thorndike, and began studying the relative contributions of heredity and environment on social behavior, as part of a project to study factors involved in poverty, illiteracy, and crime. As a curious side note, Thorndike had also developed an IQ test; Maslow scored 195 on this test, one of the highest scores ever recorded. During this time at Columbia University, Maslow also began relationships with many of the psychologists, sociologists, and anthropologists who had fled Nazi Germany. He was very impressed with Max Wertheimer, one of the founders of Gestalt psychology, and who helped to lay the foundation for positive psychology:

> *"Are there not tendencies in men and in children to be kind, to deal sincerely [and] justly with the other fellow? Are these nothing but internalized rules on the basis of compulsion and fear?" he asked rhetorically. (pg. 159; Wertheimer, cited in Gabor, 2000)*

Maslow was one of the first students to study with Alfred Adler in America, being particularly impressed with Adler's work helping academically-challenged children to succeed despite their low IQ scores. Maslow also studied with Erich Fromm, Karen Horney, and Ruth Benedict. Benedict was an anthropologist who encouraged Maslow to gain some field experience. She sponsored a grant application that Maslow received to study the Blackfoot Indians. During the summer of 1938, Maslow examined the dominance and emotional security of the Blackfoot Indians. He was impressed by their culture, and recognized what he believed was an innate need to experience a sense of purpose in life, a sense of meaning. A few years later, shortly after the beginning of World War II, Maslow had an epiphany regarding psychology's failure to understand the true nature of people. He devoted the rest of his life to the study of a hopeful psychology (Gabor, 2000; Hoffman, 1988; Maddi & Costa, 1972).

Maslow taught for a few years at Brooklyn College, and also served as the plant manager for the Maslow Cooperage Corporation (from 1947-1949). In 1951 he was appointed Professor and Chair of the Department of Psychology at Brandeis University, where he conducted the research and wrote the books for which he is most famous. By the late 1960s, Maslow had become disillusioned with academic life. He had suffered a heart attack in 1966, and seemed somewhat disconnected from the very department he had helped to form. In 1969, however, he accepted a four year grant from the Laughlin Foundation, primarily to study the philosophy of democracy, economics, and ethics as influenced by humanistic psychology. He had been troubled by what he viewed as a loss of faith in American values, and he was greatly enjoying his time working in California. He also attended management seminars at the Saga Corporation, urging the participants to commit themselves to humanistic management. One day in June, 1970, he was jogging slowly when he suffered a massive heart attack. He was already dead by the time his wife rushed over to him (Gabor, 2000; Hoffman, 1988; Maddi & Costa, 1972). He was only 62 years old. Shortly after his death, the *International Study Project* of Menlo Park, CA published a memorial volume in tribute to Abraham Maslow (International Study Project, 1972).

Placing Maslow in Context: Beyond Humanistic Psychology

Whereas Carl Rogers is often thought of as the founder of humanistic psychology, in large part because of his emphasis on psychotherapy, it was Maslow who studied in great detail the most significant theoretical aspect of it: self-actualization. In addition to studying self-actualization, he applied it both in psychology and beyond. His application of self-actualization to management continued the classic relationship between psychology and business (which began with John B. Watson and his application of psychological principles to advertising). Unfortunately, Maslow died just as he was beginning to study his proposed fourth force:

transpersonal psychology. Transpersonal psychology offered a connection between psychology and many of the Eastern philosophies associated with Yoga and Buddhism, and also provided a foundation for the study of positive psychology.

Maslow's interest in business and management has quite possibly led to his being the most famous psychologist of all time, since he is well-known in both psychology and business. If he had continued being a vocal advocate for transpersonal psychology (if not for his untimely death at an early age), given today's growing interest in Eastern philosophy and psychology and the establishment of positive psychology as a goal for the field of psychology by former APA President Martin Seligman, Maslow may well have become even more famous. It is interesting to note that someone so truly visionary seems to have become that way as a result of studying people whom he felt were themselves self-actualized. If positive psychology, the psychology of virtue and values, becomes the heir of Maslow's goal, it should become a significant force in the field of psychology. That will be Maslow's true legacy.

The Importance of Values in the Science of Psychology

A common criticism leveled against many personality theorists is that they have not confirmed their theories in a strict, scientific manner. When one goes so far as to consider **values**, which are typically associated with religious morality, there is even greater resistance on the part of those who would have psychology become "truly" scientific to consider such matters worthy of examination. However, Maslow felt that:

Both orthodox science and orthodox religion have been institutionalized and frozen into a mutually excluding dichotomy…One consequence is that they are both pathologized, split into sickness, ripped apart into a crippled half-science and a crippled half-religion…As a result…the student who becomes a scientist automatically gives up a great deal of life, especially its richest portions. (pg. 119; Maslow, 1966)

Consequently, Maslow urged that we need to be fully aware of our values at all times, and aware of how our values influence us in our study of psychology. Although people approach the world in common ways, they also pay selective attention to what is happening, and they reshuffle the events occurring around them according to their own interests, needs, desires, fears, etc. Consequently, Maslow believed that paying attention to human values, particularly to an individual's values, actually helps the psychological scientist achieve the goal of clearly understanding human behavior (Maslow, 1970). In a similar vein, when Maslow co-authored an abnormal psychology text early in his career, he included a chapter on normal psychology. His description of the characteristics of a healthy, normal personality provides an interesting foreshadowing of his research on self-actualization (Maslow & Mittelmann, 1941).

Maslow felt so strongly about the loss of values in our society that he helped to organize a conference and then served as editor for a book entitled *New Knowledge in Human Values* (Maslow, 1959). In the preface, Maslow laments that "…the ultimate disease of our time is valuelessness…this state is more crucially dangerous than ever before in history…" (pg. vii; Maslow, 1959). Maslow does suggest, however, that something can be done about this loss of values, if only people will try. In the book, he brought together an interesting variety of individuals, including: Kurt Goldstein, a well-known neurophysiologist who studied the holistic function of healthy vs. brain-damaged patients and who coined the term self-actualization; D. T. Suzuki, a renowned Zen Buddhist scholar; and Paul Tillich, a highly respected existential theologian (who had a direct and significant influence on the career of Rollo May). There are also chapters by Gordon Allport and Erich Fromm. In his own chapter, Maslow concludes:

If we wish to help humans to become more fully human, we must realize not only that they try to realize themselves but that they are also reluctant or afraid or unable to do so. Only by fully appreciating this dialectic between sickness and health can we help to tip the balance in favor of health. (pg. 135; Maslow, 1959)

Discussion Question: Maslow believed that values are very important, not only in the study of psychology, but in society as well. Do you agree? When politicians or religious leaders talk about values, do you think they represent meaningful, true values, or do they just support the values that are an advantage to their own goal or the goals of their political party or church?

The Hierarchy of Needs

Maslow's is undoubtedly best known for his **hierarchy of needs**. Developed within the context of a theory of human motivation, Maslow believed that human behavior is driven and guided by a set of **basic needs**: **physiological needs, safety needs, belongingness and love needs, esteem needs,** and the **need for self-actualization**. It is generally accepted that individuals must

move through the hierarchy in order, satisfying the needs at each level before one can move on to a higher level. The reason for this is that lower needs tend to occupy the mind if they remain unsatisfied. How easy is it to work or study when you are really hungry or thirsty? But Maslow did not consider the hierarchy to be rigid. For example, he encountered some people for whom self-esteem was more important than love, individuals suffering from antisocial personality disorder seem to have a permanent loss of the need for love, or if a need has been satisfied for a long time it may become less important. As lower needs are becoming satisfied, though not yet fully satisfied, higher needs may begin to present themselves. And of course there are sometimes multiple determinants of behavior, making the relationship between a given behavior and a basic need difficult to identify (Maslow, 1943/1973; Maslow, 1970).

The physiological needs are based, in part, on the concept of **homeostasis**, the natural tendency of the body to maintain critical biological levels of essential elements or conditions, such as water, salt, energy, and body temperature. Sexual activity, though not essential for the individual, is biologically necessary for the human species to survive. Maslow described the physiological needs as the most **prepotent**. In other words, if a person is lacking everything in life, having failed to satisfy physiological, safety, belongingness and love, and esteem needs, their consciousness will most like be consumed with their desire for food and water. As the lowest and most clearly biological of the needs, these are also the most animal-like of our behavior. In Western culture, however, it is rare to find someone who is actually starving. So when we talk about being hungry, we are really talking about an appetite, rather than real hunger (Maslow, 1943/1973; Maslow, 1970). Many Americans are fascinated by stories such as those of the ill-fated Donner party, trapped in the Sierra Nevada mountains during the winter of 1846-1847, and the Uruguayan soccer team whose plane crashed in the Andes mountains in 1972. In each case, either some or all of the survivors were forced to cannibalize those who had died. As shocking as such stories are, they demonstrate just how powerful our physiological needs can be.

The safety needs can easily be seen in young children. They are easily startled or frightened by loud noises, flashing lights, and rough handling. They can become quite upset when other family members are fighting, since it disrupts the feeling of safety usually associated with the home. According to Maslow, many adult neurotics are like children who do not feel safe. From another perspective, that of Erik Erikson, children and adults raised in such an environment do not trust the environment to provide for their needs. Although it can be argued that few people in America seriously suffer from a lack of satisfying physiological needs, there are many people who live unsafe lives. For example, inner city crime, abusive spouses and parents, incurable diseases like HIV/AIDS, all present life threatening dangers to many people on a daily basis.

One place where we expect our children to be safe is in school. However, as we saw in the last chapter (in the section on the martial arts), 160,000 children each day are too frightened to attend school (Nathan, 2005). Juvonen et al. (2006) looked at the effects of ethnic diversity on children's perception of safety in urban middle schools (Grade 6). They surveyed approximately 2,000 students in 99 classrooms in the greater Los Angeles area. The ethnicity of the students in this study was 46 percent Latino (primarily of Mexican origin), 29 percent African American, 9 percent Asian (primarily East Asian), 9 percent Caucasian, and 7 percent multiracial. When a given classroom, or a given school, is more ethnically diverse, both African American and Latino students felt safer, were harassed less by peers, felt less lonely, and they had higher levels of self-worth (even when the authors controlled for differences in academic engagement). Thus, it appears that ethnic diversity in schools leads toward satisfaction of the need for safety, at least in one important area of a child's life. Unfortunately, most minority students continue to be educated in schools that are largely ethnically segregated (Juvonen, et al., 2006).

Throughout the evolution of the human species we found safety primarily within our family, tribal group, or our community. It was within those groups that we shared the hunting and gathering that provided food. Once the physiological and safety needs have been fairly well satisfied, according to Maslow, "the person will feel keenly, as never before, the absence of friends, or a sweetheart, or a wife, or children" (Maslow, 1970). Although there is little scientific confirmation of the belongingness and love needs, many therapists attribute much of human suffering to society's thwarting of the need for love and affection. Most notable among personality theorists who addressed this issue was Wilhelm Reich. An important aspect of love and affection is sex. Although sex is often considered a physiological need, given its role in procreation, sex is what Maslow referred to as a multidetermined behavior. In other words, it serves both a physiological role (procreation) and a belongingness/love role (the tenderness and/or passion of the physical side of love). Maslow was also careful to point out that love needs involve both giving and receiving love in order for them to be fully satisfied (Maslow, 1943/1973; Maslow, 1970).

Maslow believed that all people desire a stable and firmly based high evaluation of themselves and others (at least the others who comprise their close relationships). This need for self-esteem, or self-respect, involves two components. First is the desire to feel

competent, strong, and successful (similar to Bandura's self-efficacy). Second is the need for prestige or status, which can range from simple recognition to fame and glory. Maslow credited Adler for addressing this human need, but felt that Freud had neglected it. Maslow also believed that the need for self-esteem was becoming a central issue in therapy for many psychotherapists. However, as we saw in Chapter 12, Albert Ellis considers self-esteem to be a sickness. Ellis' concern is that self-esteem, including efforts to boost self-esteem in therapy, requires that people rate themselves, something that Ellis felt will eventually lead to a negative evaluation (no one is perfect!). Maslow did acknowledge that the healthiest self-esteem is based on well-earned and deserved respect from others, rather than fleeting fame or celebrity status (Maslow, 1943/1973; Maslow, 1970).

When all of these lower needs (physiological, safety, belongingness and love, and esteem) have been largely satisfied, we may still feel restless and discontented unless we are doing what is right for ourselves. "What a man *can* be, he *must* be" (pg. 46; Maslow, 1970). Thus, the need for self-actualization, which Maslow described as the highest of the basic needs, can also be referred to as a **Being-need**, as opposed to the lower **deficiency-needs** (Maslow, 1968). We will examine self-actualization in more detail in the following section.

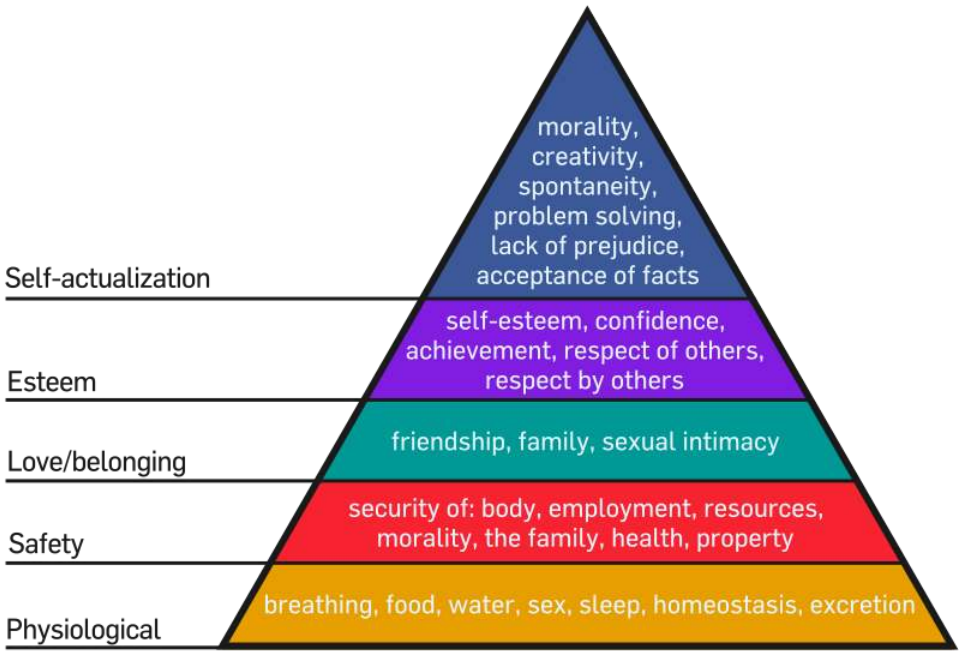


Figure 3.4.2: *Maslow's hierarchy of needs is based on a theory of motivation. Individuals must essentially satisfy the lower deficiency needs before they become focused on satisfying the higher Being needs. Beyond even the Being needs there is something more, a state of transcendence that ties all people and the whole of creation together.*(*Image Source: Mazlow's Hierarchy of Needs.svg. (2009, June 29). Retrieved from Wikimedia Commons at https://commons.wikimedia.org/wiki/F...y_of_Needs.svg. Licensed under CC-BY-SA-3.0.*)

Although Maslow recognized that humans no longer have instincts in the technical sense, we nonetheless share basic drives with other animals. We get hungry, even though how and what we eat is determined culturally. We need to be safe, like any other animal, but again we seek and maintain our safety in different ways (such as having a police force to provide safety for us). Given our fundamental similarity to other animals, therefore, Maslow referred to the basic needs as **instinctoid**. The lower the need the more animal-like it is, the higher the need, the more human it is, and self-actualization was, in Maslow's opinion, uniquely human (Maslow, 1970).

In addition to the basic needs, Maslow referred to **cognitive needs** and **aesthetic needs**. Little is known about cognitive needs, since they are seldom an important focus in clinic settings. However, he felt there were ample grounds for proposing that there are positive impulses to know, to satisfy curiosity, to understand, and to explain. The eight-fold path described by the Buddha, some 2,600 years ago, begins with right knowledge. The importance of mental stimulation for some people is described quite vividly by Maslow:

I have seen a few cases in which it seemed clear to me that the pathology (boredom, loss of zest in life, self-dislike, general depression of the bodily functions, steady deterioration of the intellectual life, of tastes, etc.) were produced in intelligent people leading stupid lives in stupid jobs. I have at least one case in which the appropriate cognitive therapy (resuming part-time studies, getting a position that was more intellectually demanding, insight) removed the symptoms.

I have seen many women, intelligent, prosperous, and unoccupied, slowly develop these same symptoms of intellectual inanition. Those who followed my recommendation to immerse themselves in something worthy of them showed improvement or cure often enough to impress me with the reality of the cognitive needs. (pg. 49; Maslow, 1970)

There are also classic studies on the importance of environmental enrichment on the structural development of the brain itself (Diamond et al., 1975; Globus, et al., 1973; Greenough & Volkmar, 1973; Rosenzweig, 1984; Spinelli & Jensen, 1979; Spinelli, Jensen, & DiPrisco, 1980). Even less is known about the aesthetic needs, but Maslow was convinced that some people need to experience, indeed they crave, beauty in their world. Ancient cave drawings have been found that seem to serve no other purpose than being art. The cognitive and aesthetic needs may very well have been fundamental to our evolution as modern humans.

Self-Actualization

Maslow began his studies on self-actualization in order to satisfy his own curiosity about people who seemed to be fulfilling their unique potential as individuals. He did not intend to undertake a formal research project, but he was so impressed by his results that he felt compelled to report his findings. Amongst people he knew personally and public and historical figures, he looked for individuals who appeared to have made full use of their talents, capacities, and potentialities. In other words, “people who have developed or are developing to the full stature of which they are capable” (Maslow, 1970). His list of those who clearly seemed self-actualized included Abraham Lincoln, Thomas Jefferson, Albert Einstein, Eleanor Roosevelt, Jane Addams, William James, Albert Schweitzer, Aldous Huxley, and Baruch Spinoza. His list of individuals who were most-likely self-actualized included Goethe (possibly the great-grandfather of Carl Jung), George Washington, Benjamin Franklin, Harriet Tubman (born into slavery, she became a conductor on the Underground Railroad prior to the Civil War), and George Washington Carver (born into slavery at the end of the Civil War, he became an agricultural chemist and prolific inventor).



Figure 3.4.3:*Harriet Tubman by Squyer, NPG, c1885. Self-actualized individuals need their privacy. This may help them put life in perspective and prepare for each day. Image Source: National Portrait Gallery. (1885). Retrieved from Wikimedia Commons at https://commons.wikimedia.org/wiki/F...NPG,_c1885.jpg. Licensed under CCO.*

In addition to the positive attributes listed above, Maslow also considered it very important that there be no evidence of psychopathology in those he chose to study. After comparing the seemingly self-actualized individuals to people who did not seem to have fulfilled their lives, Maslow identified fourteen characteristics of self-actualizing people (Maslow, 1950/1973, 1970), as follows:

More Efficient Perception of Reality and More Comfortable Relations with It: Self-actualizing people have an ability to recognize fakers, those who present a false persona. More than that, however, Maslow believed they could recognize hidden or confused realities in all aspects of life: science, politics, values and ethics, etc. They are not afraid of the unknown or people who are different, they find such differences to be a pleasant challenge. Although a high IQ may be associated with this characteristic, it is not uncommon to find those who are seemingly intelligent yet unable to be creative in their efforts to discover new phenomena. Thus, the perception of reality is not simply the same as being smart.

Acceptance (Self, Others, Nature): Similar to the approach Albert Ellis took with REBT (and his hypothesized dangers inherent in self-esteem), Maslow believed that self-actualizing people accept themselves as they are, including their faults and the differences between their personal reality and their ideal image of themselves. This is not to say that they are without guilt. They are concerned about personal faults that can be improved, any remaining habits or psychological issues that are unhealthy (e.g., prejudice, jealousy, etc.), and the shortcomings of their community and/or culture.

Spontaneity: The lives of self-actualizing people are marked by simplicity and a natural ease as they pursue their goals. Their outward behavior is relatively spontaneous, and their inner life (thoughts, drives, etc.) is particularly so. In spite of this spontaneity, they are not always unconventional, because they can easily accept the constraints of society and find their own way to fit in without being untrue to their own sense of self.

Problem-Centering: Self-actualizing individuals are highly problem-centered, not ego-centered. The problems they focus on are typically not their own, however. They focus on problems outside themselves, on important causes they would describe as necessary. Solving such problems is taken as their duty or responsibility, rather than as something they want to do for themselves.

The Quality of Detachment; the Need for Privacy: Whereas social withdrawal is often seen as psychologically unhealthy, self-actualizing people enjoy their privacy. They can remain calm as they separate themselves from problematic situations, remaining above the fray. In accordance with this healthy form of detachment, they are active, responsible, self-disciplined individuals in charge of their own lives. Maslow believed that they have more free will than the average person.

Autonomy, Independence of Culture and Environment: As an extension of the preceding characteristics, self-actualizing individuals are growth-motivated as opposed to being deficiency-motivated. They do not need the presence, companionship, or approval of others. Indeed, they may be hampered by others. The love, honor, esteem, etc., that can be bestowed by others has become less important to someone who is self-actualizing than self-development and inner growth.

Continued Freshness of Appreciation: Self-actualizing people are able to appreciate the wonders, as well as the common aspects, of life again and again. Such feelings may not occur all the time, but they can occur in the most unexpected ways and at unexpected times. Maslow offered a surprising evaluation of the importance of this characteristic of self-actualization:

> *I have also become convinced that getting used to our blessings is one of the most important nonevil generators of human evil, tragedy, and suffering. What we take for granted we undervalue, and we are therefore too apt to sell a valuable birthright for a mess of pottage, leaving behind regret, remorse, and a lowering of self-esteem. Wives, husbands, children, friends are unfortunately more apt to be loved and appreciated after they have died than while they are still available. Something similar is true for physical health, for political freedoms, for economic well-being; we learn their true value after we have lost them. (pp. 163-164; Maslow, 1970)*

The "Mystic Experience" or "Oceanic Feeling;" Peak Experiences: The difference between a **mystic experience** (also known as an **oceanic feeling**) and a **peak experience** is a matter of definition. Mystic experiences are viewed as gifts from God, something reserved for special or deserving (i.e., faithful) servants. Maslow, however, believed that this was a natural occurrence that could happen for anyone, and to some extent probably did. He assigned the psychological term of peak experiences. Such experiences tend to be sudden feelings of limitless horizons opening up to one's vision, simultaneous feelings of great power and great vulnerability, feelings of ecstasy, wonder and awe, a loss of the sense of time and place, and the feeling that something extraordinary and transformative has happened. Self-actualizers who do not typically experience these peaks, the so-called "**non-peakers**," are more likely to become direct agents of social change, the reformers, politicians, crusaders, and so on. The more transcendent "**peakers**," in contrast, become the poets, musicians, philosophers, and theologians.

Maslow devoted a great deal of attention to peak experiences, including their relationship to religion. At the core of religion, according to Maslow, is the private illumination or revelation of spiritual leaders. Such experiences seem to be very similar to peak experiences, and Maslow suggests that throughout history these peak experiences may have been mistaken for revelations from God. In his own studies, Maslow found that people who were spiritual, but not religious (i.e., not hindered by the doctrine of a specific faith or church), actually had more peak experiences than other people. Part of the explanation for this, according to Maslow, is that such people need to be more serious about their ethics, values, and philosophy of life, since their guidance and motivation must come from within. Individuals who seek such an appreciation of life may help themselves to experience an extended form of peak experience that Maslow called the **plateau experience**. Plateau experiences always have both noetic and cognitive elements, whereas peak experiences can be entirely emotional (Maslow, 1964). Put another way, plateau experiences involve serene and contemplative **Being-cognition**, as opposed to the more climactic peak experiences (Maslow, 1971).

Gemeinschaftsgefuhl: A word invented by Alfred Adler, **gemeinschatfsgefuhl** refers to the profound feelings of identification, sympathy, and affection for other people that are common in self-actualization individuals. Although self-actualizers may often feel apart from others, like a stranger in a strange land, becoming upset by the shortcomings of the average person, they nonetheless feel a sense of kinship with others. These feelings lead to a sincere desire to help the human race.

Interpersonal Relations: Maslow believed that self-actualizers have deeper and more profound personal relationships than other people. They tend to be kind to everyone, and are especially fond of children. Maslow described this characteristic as "compassion for all mankind," a perspective that would fit well with Buddhist and Christian philosophies.

The Democratic Character Structure: Self-actualizing people are typically friendly with anyone, regardless of class, race, political beliefs, or education. They can learn from anyone who has something to teach them. They respect all people, simply because they are people. They are not, however, undiscriminating:

> *The careful distinction must be made between this democratic feeling and a lack of discrimination in taste, of an undiscriminating equalizing of any one human being with any other. These individuals, themselves elite, select for their friends elite, but this is an elite of character, capacity, and talent, rather than of birth, race, blood, name, family, age, youth, fame, or power. (pg. 168; Maslow, 1970)*

Discrimination Between Means and Ends, Between Good and Evil: Self-actualizers know the difference between right and wrong. They are ethical, have high moral standards, and they do good things while avoiding doing bad things. They do not experience the average person's confusion or inconsistency in making ethical choices. They tend to focus on ends, rather than means, although they sometimes become absorbed in the means themselves, viewing the process itself as a series of ends.

Philosophical, Unhostile Sense of Humor: The sense of humor shared by self-actualizers is not typical. They do not laugh at hostile, superior, or rebellious humor. They do not tell jokes that make fun of other people. Instead, they poke fun at people in general for being foolish, or trying to claim a place in the universe that is beyond us. Such humor often takes the form of poking fun at oneself, but not in a clown-like way. Although such humor can be found in nearly every aspect of life, to non-self-actualizing people the self-actualizers seem to be somewhat sober and serious.

Creativeness: According to Maslow, self-actualizing people are universally creative. This is not the creativity associated with genius, such as that of Mozart or Thomas Edison, but rather the fresh and naive creativity of an unspoiled child. Maslow believed that this creativity was a natural potential given to all humans at their birth, but that the constraints on behavior inherent in most cultures lead to its suppression.

As desirable as self-actualization may seem, self-actualizing individuals still face problems in their lives. According to Maslow, they are typically not well adjusted. This is because they resist being enculturated. They do not stand out in grossly abnormal ways, but there is a certain inner detachment from the culture in which they live. They are not viewed as rebels in the adolescent sense, though they may be rebels while growing up, but rather they work steadily toward social change and/or the accomplishment of their goals. As a result of their immersion in some personal goal, they may lose interest in or patience with common people and common social practices. Thus, they may seem detached, insulting, absent-minded, or humorless. They can seem boring, stubborn, or irritating, particularly because they are often superficially vain and proud only of their own accomplishments and their own family, friends, and work. According to Maslow, outbursts of temper are not rare. Maslow argued that there are, in fact, people who become saints, movers and shakers, creators, and sages. However, these same people can be irritating, selfish, angry, or depressed. No one is perfect, not even those who are self-actualizing (Maslow, 1950/1973, 1970).

Discussion Question: Consider Maslow's characteristics of self-actualizing people. Which of those characteristics do you think are part of your personality? Are there any characteristics that you think may be particularly difficult for you to achieve?

Obstacles to Self-Actualization

In *The Farther Reaches of Human Nature* (Maslow, 1971), which was completed by Maslow's wife and one of his colleagues shortly after Maslow's death, Maslow described self-actualization as something that one does not obtain or fulfill at a specific point in time. Rather, it is an ongoing process of self-actualizing, characterized for some by brief periods of self-actualization (the peak experiences, for example). Maslow also described two major obstacles to achieving self-actualization: **desacralizing** and the **Jonah**

complex. The Jonah complex, a name suggested by Maslow's friend Professor Frank Manuel, refers to being afraid of one's own greatness, or evading one's destiny or calling in life. Maslow specifically described this as a non-Freudian defense mechanism in which a person is as afraid of the best aspects of their psyche as they are afraid of the worst aspects of their psyche (i.e., the socially unacceptable id impulses). He described the process of this fear as a recognition, despite how much we enjoy the godlike possibilities revealed by our finest accomplishments, of the weakness, awe, and fear we experience when we achieve those accomplishments. According to Maslow, "great emotions after all can in *fact* overwhelm us" (Maslow, 1971). Nonetheless, he encouraged people to strive for greatness, within a reasonable sense of their own limitations.

A very important defense mechanism, which affects young people in particular, is what Maslow called desacralizing. The source of this problem is usually found within the family:

> *These youngsters mistrust the possibility of values and virtues. They feel themselves swindled or thwarted in their lives. Most of them have, in fact, dopey parents whom they don't respect very much, parents who are quite confused themselves about values and who, frequently, are simply terrified of their children and never punish them or stop them from doing things that are wrong. So you have a situation where the youngsters simply despise their elders - often for good and sufficient reason. (pg. 49; Maslow, 1971)*

As a result, children grow up without respect for their elders, or for anything their elders consider important. The values of the culture itself can be called into question. While such a situation may sometimes be important for changing social conventions that unfairly discriminate against some people, can we really afford to live in a society in which *nothing* is sacred? Indeed, can such a society or culture continue to exist? Thus, Maslow emphasized a need for **resacralizing**. Maslow noted that he had to make up the words desacralizing and resacralizing "because the English language is rotten for good people. It has no decent vocabulary for the virtues" (Maslow, 1971). Resacralizing means being willing to see the sacred, the eternal, the symbolic. As an example, Maslow suggested considering a medical student dissecting a human brain. Would such a student see the brain simply as a biological organ, or would they be awed by it, also seeing the brain as a sacred object, including even its poetic aspects? This concept is particularly important for counselors working with the aged, people approaching the end of their lives, and may be critical for helping them move toward self-actualization. According to Maslow, when someone asks a counselor for help with the self-actualizing process, the counselor had better have an answer for them, "or we're not doing what it is our job to do" (Maslow, 1971).

Discussion Question: Maslow believed that desacralizing was particularly challenging for young people. Do you think our society has lost its way, have we lost sight of meaningful values? Is nothing sacred anymore? Is there anything that you do in your life to recognize something as sacred in a way that has real meaning for your community?

Maslow had something else interesting to say about self-actualization in *The Farther Reaches of Human Nature*: "What does self-actualization mean in moment-to-moment terms? What does it mean on Tuesday at four o'clock?" (pg. 41). Consequently, he offered a preliminary suggestion for an operational definition of the process by which self-actualization occurs. In other words, what are the behaviors exhibited by people on the path toward fulfilling or achieving the fourteen characteristics of self-actualized people described above? Sadly, this could only remain a preliminary description, i.e., they are "ideas that are in midstream rather than ready for formulation into a final version," because this book was published after Maslow's death (having been put together before his sudden and unexpected heart attack).

What does one do when he self-actualizes? Does he grit his teeth and squeeze? What does self-actualization mean in terms of actual behavior, actual procedure? I shall describe eight ways in which one self-actualizes. (pg. 45; Maslow, 1971)

- They experience full, vivid, and selfless *concentration* and total absorption.
- Within the ongoing process of self-actualization, they make *growth choices* (rather than fear choices; progressive choices rather than regressive choices).
- They are aware that there is a *self* to be actualized.
- When in doubt, they choose to be *honest* rather than dishonest.
- They trust their own *judgment* even if it means being different or unpopular (being courageous is another version of this behavior).

- They put in the effort necessary to improve themselves, working regularly toward *self-development* no matter how arduous or demanding .
- They embrace the occurrence of *peak experiences*, doing what they can to facilitate and enjoy more of them (as opposed to denying these experiences as many people do).
- They identify and *set aside their ego defenses* (they have "the courage to give them up"). Although this requires that they face up to painful experiences, it is more beneficial than the consequences of defenses such as repression.

Being and Transcendence

Maslow had great hope and optimism for the human race. Although self-actualization might seem to be the pinnacle of personal human achievement, he viewed Humanistic Psychology, or **Third Force Psychology**, as just another step in our progression:

I should say also that I consider Humanistic, Third Force Psychology to be transitional, a preparation for a still “higher” Fourth Psychology, transpersonal, transhuman, centered in the cosmos rather than in human needs and interest, going beyond humanness, identity, self-actualization, and the like…These new developments may very well offer a tangible, usable, effective satisfaction of the “frustrated idealism” of many quietly desperate people, especially young people. These psychologies give promise of developing into the life-philosophy, the religion-surrogate, the value-system, the life-program that these people have been missing. Without the transcendent and the transpersonal, we get sick, violent, and nihilistic, or else hopeless and apathetic. We need something “bigger than we are” to be awed by and to commit ourselves to in a new, naturalistic, empirical, non-churchly sense, perhaps as Thoreau and Whitman, William James and John Dewey did. (pp. iii-iv; Maslow, 1968)

Although Maslow wrote about this need for a **Fourth Force Psychology** in 1968, it was not until the year 1998 that APA President Martin Seligman issued his call for the pursuit of positive psychology as an active force in the field of psychology. Maslow believed that all self-actualizing people were involved in some calling or vocation, a cause outside of themselves, something that fate has called them to and that they love doing. In so doing, they devote themselves to the search for **Being-values** (or B-values; Maslow, 1964, 1967/2008, 1968). The desire to attain self-actualization results in the B-values acting like needs. Since they are higher than the basic needs, Maslow called them **metaneeds**. When individuals are unable to attain these goals, the result can be **metapathology**, a sickness of the soul. Whereas counselors may be able to help the average person with their average problems, metapathologies may require the help of a **metacounselor**, a counselor trained in philosophical and spiritual matters that go far beyond the more instinctoid training of the traditional psychoanalyst (Maslow, 1967/2008). The B-values identified by Maslow (1964) are an interesting blend of the characteristics of self-actualizing individuals and the human needs described by Henry Murray: truth, goodness, beauty, wholeness, dichotomy-transcendence, aliveness, uniqueness, perfection, necessity, completion, justice, order, simplicity, richness, effortlessness, playfulness, self-sufficiency.

Transcendence is typically associated with people who are religious, spiritual, or artistic, but Maslow said that he found transcendent individuals amongst creative people in a wide variety of vocations (including business, managers, educators, and politicians), though there are not many of them in any field. Transcendence, according to Maslow, is the very highest and most holistic level of human consciousness, which involves relating to oneself, to all others, to all species, to nature, and to the cosmos as an end rather than as a means (Maslow, 1971). It is essential that individuals not be reduced to the role they play in relation to others, transcendence can only be found within oneself (Maslow, 1964, 1968). Maslow’s idea is certainly not new. Ancient teachings in Yoga tell us that there is a single universal spirit that connects us all, and Buddhists describe this connection as **interbeing**. The Abrahamic religions teach us that the entire universe was created by, and therefore is connected through, one god. It was Maslow’s hope that a transcendent Fourth Force in psychology would help all people to become self-actualizing. In Buddhist terms, Maslow was advocating the intentional creation of psychological Bodhisattvas. Perhaps this is what Maslow meant by the term metacounselor.

✔ connections Across Cultures:

Is Nothing Sacred?

Maslow described some lofty ambitions for humanity in Toward a Psychology of Being (1968) and The Farther Reaches of Human Nature (1971), as well as some challenges we face along the way. Transcendence, according to Maslow, is a loss of our sense of Self, as we begin to feel an intimate

connection with the world around us and all other people. But transcendence is exceedingly difficult when we are hindered by the defense mechanism of desacralization. What exactly does the word "sacred" mean? It is not easily found in psychological works. William James often wrote about spiritual matters, but not about what is or is not sacred. Sigmund Freud mentioned sacred prohibitions in his final book, Moses and Monotheism (Freud, 1939/1967), but he felt that anything sacred was simply a cultural adaptation of all children's fear of challenging their father's will (and God was created as a symbol of the mythological father). A dictionary definition of sacred says that it is "connected with God (or the gods) or dedicated to a religious purpose and so deserving veneration." However, there is another definition that does not require a religious context: "regarded with great respect and reverence by a particular religion, group, or individual" (The Oxford American College Dictionary, 2002). Maslow described desacralization as a rejection of the values and virtues of one's parents. As a result, people grow up without the ability to see anything as sacred, eternal, or symbolic. In other words, they grow up without meaning in their lives.

The process of resacralization, which Maslow considered an essential task of therapists working with clients who seek help in this critical area of their life, requires that we have some concept of what is sacred. So, what is sacred? Many answers can be found, but there does seem to be at least one common thread.

Christians have long believed that forgiveness lies at the heart of faith. Psychologists have recently found that forgiveness may also lie at the heart of emotional and physical well-being.

David Myers & Malcolm Jeeves (2003)

…Compassion is the wish that others be free of suffering. It is by means of compassion that we aspire to attain enlightenment. It is compassion that inspires us to engage in the virtuous practices that lead to Buddhahood. We must therefore devote ourselves to developing compassion.

The Dalai Lama (2001)

I have been engaged in peace work for more than thirty years: combating poverty, ignorance, and disease; going to sea to help rescue boat people; evacuating the wounded from combat zones; resettling refugees; helping hungry children and orphans; opposing wars; producing and disseminating peace literature; training peace and social workers; and rebuilding villages destroyed by bombs. It is because of the practice of meditation - stopping, calming, and looking deeply - that I have been able to nourish and protect the sources of my spiritual energy and continue this work.

Thich Nhat Hanh (1995)

…Our progress is the penetrating of the present moment, living life with our feet on the ground, living in compassionate, active relationship with others, and yet living in the awareness that life has been penetrated by the eternal moment of God and unfolds in the power of that moment.

Fr. Laurence Freeman (1986)

Keep your hands busy with your duties in this world, and your heart busy with God.

Sheikh Muzaffer (cited in Essential Sufism by Fadiman & Frager, 1997)

Forgiveness is a letting go of past suffering and betrayal, a release of the burden of pain and hate that we carry.

Forgiveness honors the heart's greatest dignity. Whenever we are lost, it brings us back to the ground of love.

Jack Kornfield (2002)

And he said to him, "You shall love the Lord your God with all your heart, and with all your soul, and with all your mind. This is the great and first commandment. And a second is like it, You shall love your neighbor as yourself…"

Jesus Christ (The Holy Bible, 1962)

In examining self-actualizing people directly, I find that in all cases, at least in our culture, they are dedicated people, devoted to some task "outside themselves," some vocation, or duty, or beloved job. Generally the devotion and dedication is so marked that one can fairly use the old words vocation, calling, or mission to describe their passionate, selfless, and profound feeling for their "work."

The spiritual life is then part of the human essence. It is a defining-characteristic of human nature, without which human nature is not full human nature. It is part of the Real Self, of one's identity, of one's inner core, of one's specieshood, of full humanness.

Abraham Maslow (1971)

Christians, Buddhists, Muslims, as well as members of other religions and humanists, all have some variation of what has been called The Golden Rule: treating others as you would like to be treated. If that is sacred, then even amongst atheists, young people can evaluate the values and virtues of their parents, community, and culture, and then decide whether those values are right or wrong, whether they want to perpetuate an aspect of that society based on their own thoughts and feelings about how they, themselves, may be treated someday by others. This resacralization need not be religious or spiritual, but it commonly is, and some psychologists are comfortable embracing spirituality as such.

Kenneth Pargament and Annette Mahoney (2005) wrote a chapter entitled Spirituality: Discovering and Conserving the Sacred, which was included in the Handbook of Positive Psychology (Snyder & Lopez, 2005). First, they point out that religion is an undeniable fact in American society. Some 95 percent of Americans believe in God, and 86 percent believe that He can be reached through prayer and that He is important or very important to them. Spirituality, according to Pargament and Mahoney, is the process in which individuals seek both to discover and to conserve that which is sacred. It is interesting to note that Maslow and Rogers consider self-actualization and transcendence to be a process as well, not something that one can get and keep permanently. An important aspect of defining what is sacred is that it is imbued with divinity. God may be seen as manifest in marriage, work can be seen as a vocation to which the person is called, the environment can been seen as God's creation. In each of these situations, and in others, what is viewed as sacred has been sanctified by those who consider it sacred. Unfortunately, this can have negative results as well, such as when the

> Heaven's Gate cult followed their sanctified leader to their deaths. Thus, spirituality is not necessarily synonymous with a good and healthy lifestyle.
>
> Still, there is research that has shown that couples who sanctify their marriage experience greater marital satisfaction, less marital conflict, and more effective marital problem-solving strategies. Likewise, mothers and fathers who sanctify the role of parenting report less aggression and more consistent discipline in raising their children. For college students, spiritual striving was more highly correlated with well-being than any other form of goal-setting (see Pargament & Mahoney, 2005). So there appear to be real psychological advantages to spiritual pursuits. This may be particularly true during challenging times in our lives:
>
> …there are aspects of our lives that are beyond our control. Birth, developmental transitions, accidents, illnesses, and death are immutable elements of existence. Try as we might to affect these elements, a significant portion of our lives remains beyond our immediate control. In spirituality, however, we can find ways to understand and deal with our fundamental human insufficiency, the fact that there are limits to our control… (pg. 655; Pargament & Mahoney, 2005)

Eupsychian Management and Theory Z

It is not merely a coincidence that Maslow is well-known in the field of business. He spent 3 years as the plant manager for the Maslow Cooperage Corporation, and later he spent a summer studying at an electronics firm in California (Non-Linear Systems, Inc.) at the invitation of the company's president. He became very interested in industrial and managerial psychology, and the journal he kept in California was published as *Eupsychian Management* (Maslow, 1965). **Eupsychia** refers to real possibility and improvability, and a movement toward psychological health, as opposed to the vague fantasies of proposed Utopian societies. More precisely, though this is something of a fantasy itself, Maslow described Eupsychia as the culture that would arise if 1,000 self-actualizing people were allowed to live their own lives on a sheltered island somewhere. Maslow applied his psychological theories, including both the hierarchy of needs and self-actualization, to a management style that takes advantage of this knowledge to maximize the potential of the employees in a company (also see the collection of Maslow's unpublished papers by Hoffman, 1996).

Maslow introduced a variety of terms related to his theories on management, one of the most interesting being **synergy**. Having borrowed the term from Ruth Benedict, synergy refers to a situation in which a person pursuing their own, selfish goals is automatically helping others, and a person unselfishly helping others is, at the same time, helping themselves. According to Maslow, when selfishness and unselfishness are mutually exclusive, it is a sign of mild psychopathology. Self-actualizing individuals are above the distinction between selfishness and unselfishness; they enjoy seeing others experience pleasure. Maslow offered the personal example of feeding strawberries to his little daughter. As the child smacked her lips and thoroughly loved the strawberries, an experience that thrilled Maslow, what was he actually giving up by letting her eat the strawberries instead of eating them himself? In his experience with the Blackfoot tribe, a member named Teddy was able to buy a car. He was the only one who had one, but tradition allowed anyone in the tribe to borrow it. Teddy used his car no more often than anyone else, but he had to pay the bills, including the gas bill. And yet, everyone in the tribe was so proud of him that he was greatly admired and they elected him chief. So, he benefited in other ways by following tradition and letting everyone use his car (Maslow, 1965). In the business field, when managers encourage cooperation and communication, everyone benefits from the healthy growth and continuous improvement of the company. And this leads us to **Theory Z** (which is Eupsychian management).

Douglas McGregor, a professor of industrial relations at the Massachusetts Institute of Technology, was greatly impressed with Maslow's work, and McGregor had used *Motivation and Personality* as a textbook in his business classes. Based on Maslow's theories, McGregor published a book in 1960 in which he outlined two managerial models, **Theory X** and **Theory Y** (Gabor, 2000; Hoffman, 1996). Maslow described the two theories as follows:

…To put it succinctly, *Theory Y* assumes that if you give people responsibilities and freedom, then they will like to work and will do a better job. Theory Y also assumes that workers basically like excellence, efficiency, perfection, and the like.

Theory X, which still dominates most of the world's workplace, has a contrasting view. It assumes that people are basically stupid, lazy, hurtful, and untrustworthy and, therefore, that you have got to check everything constantly because workers will steal you blind if you don't. (pg. 187; Maslow, 1996a)

The Theory X/Theory Y strategy was intentionally put into practice at Non-Linear Systems, hence Maslow's invitation to study there. Maslow concluded, however, that even Theory Y did not go far enough in maximizing people's potential. People have metaneeds(the need for B-values), needs that go beyond simply offering higher salaries. When employees have their basic needs met, but recognize inefficiency and mismanagement in the company, they will still complain, but these higher level complaints can now be described as **metagrumbles** (as opposed to the lower level grumbles about lower level needs). Theory Z attempts to transcend Theory Y and actively facilitate the growth of a company's employees toward self-actualization (Hoffman, 1996; Maslow, 1971; Maslow 1996b).

Discussion Question: How's your job (or any job you have had)? Would you describe your supervisor or boss as someone who uses Eupsychian or Theory Z management? Does the workplace foster synergy amongst the employees? If not, can you imagine how the job would be different if they did?

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3.5: Henry Murray and Personology

Henry Murray was primarily psychodynamic in his orientation. However, the fundamental aspect of his theory is the presence of needs in our lives, and there was a distinctly humanistic aspect to his theories as well (Maddi & Costa, 1972). Thus, it seems appropriate to include Murray alongside Maslow's discussion of human needs. In addition, Murray developed a practical application of his famous test, the **Thematic Apperception Test** (or **TAT**), for screening candidates for special work assignments. Once again, this is similar to Maslow's forays into the field of industrial/organizational psychology. Although it is common to present different fields as fundamentally opposed, such as humanistic psychology **vs.** psychodynamic psychology, Murray and Maslow provide an ideal opportunity to see the commonalities that often exist between different areas in psychology. It must also be remembered that Murray was no strict adherent to the dogmatic view of psychoanalysis presented by Freud:

…psychoanalysis stands for a conceptual system which explains, it seems to me, as much as any other. But this is no reason for going in blind and swallowing the whole indigestible bolus, cannibalistically devouring the totem father in the hope of acquiring his genius, his authoritative dominance, and thus rising to power in the psychoanalytic society, that battle-ground of Little Corporals. No; I, for one, prefer to take what I please, suspend judgment, reject what I please, speak freely. (pg. 31; Murray, 1940/2008).

Brief Biography of Henry Murray

Henry Alexander Murray, Jr. was born in 1893 in New York City. He had many nicknames, and typically asked his friends to call him Harry. His family was quite wealthy, and had a noble history. He was a descendant of John Murray, the fourth Earl of Dunmore, the last Royal Governor of Virginia, and his mother's great-grandfather, Colonel Harry Babcock, had served on General George Washington's staff during the Revolutionary War. Murray lived a life of luxury, spending the summers on Long Island and often traveling throughout Europe. He was educated at exclusive private schools. However, his childhood was not without challenges. He felt abandoned by his mother, who suffered from depression much of her life, when Murray was quite young. He stuttered, and was cross-eyed. The operation to help cure his internal strabismus accidentally left him with an external strabismus. This created problems for Murray when it came to competing in athletics, but Murray worked hard to overcome his difficulties and he excelled at sports. He became the quarterback of his football team and won a featherweight boxing championship at school. In college, he made the rowing team at Harvard University (Maddi & Costa, 1972; Robinson, 1992).

In spite of his athletic success at Harvard, or perhaps because of it, he did not do well academically, receiving below average grades. Nonetheless, he earned a degree in history in 1915. While at Harvard he also married Josephine Rantoul, after a lengthy courtship. Despite his mediocre grades at Harvard, Murray was accepted into the Columbia College of Physicians and Surgeons, and graduated first in his class in 1919. He then completed a surgical internship at Presbyterian Hospital in New York, where he once treated the future president Franklin D. Roosevelt, followed by a period of research at the Rockefeller Institute for Medical Research and Cambridge University, which culminated in a Ph.D. in biochemistry in 1927. He then accepted a position as assistant to Morton Prince, and became the director of Harvard University's psychology clinic. Murray had never taken a psychology course, but he had some interesting experience (Maddi & Costa, 1972; Robinson, 1992).

Murray had a psychiatry course in medical school, and had read Freud's *Interpretation of Dreams*. He also had a research assistant from Vienna, Alma Rosenthal, who had been a long-time friend of Anna Freud. While both working together and having an intimate love affair, Rosenthal introduced Murray to the deeper dimensions of the unconscious mind. However, it was Murray's lifelong mistress, Christiana Morgan, who introduced him to Jung's book *Psychology Types*. Murray was deeply impressed by Jung's book, but even more by Jung himself. Murray was troubled by the intense love affair he had developed with Morgan, so he went to Zurich in order to be psychoanalyzed by Jung. Jung managed to help Murray understand his stuttering and accept having his affair with Morgan. After all, Jung had maintained a mistress of his own for many years. Jung also managed to convince Murray's wife and Morgan's husband to accept the affair as well, and Christiana Morgan remained a very important colleague throughout Murray's life. It has been suggested that she played a far more important role in his theories, and in the development of the TAT, than she has been given credit for (Maddi & Costa, 1972; Robinson, 1992). Partly because Jung had directly helped him with a psychological problem, and partly because of the extraordinary range of ideas that Jung was open to, Murray always spoke highly of Jung (though he believed that Jung tended toward being psychotic, just as Freud tended toward being neurotic; see Brian, 1995).

Initially, Murray's reappointment as clinic director was challenged by the experimental psychologists Edwin Boring and Karl Lashley, but he was supported by the clinical psychologists, who were led by Gordon Allport (Stagner, 1988). As his work continued he was quite productive (it was during this time that he developed the TAT), and many important clinicians passed through the clinic. Included among them was Erik Erikson, who came to the clinic after having been psychoanalyzed by Anna Freud in Vienna. Murray also spent a great deal of time traveling and studying in Europe, and enjoyed a memorable evening with Sigmund and Anna Freud. As he was preparing to return to the clinic, World War II began. Murray joined the Army Medical Corps, and eventually worked for the Office of Strategic Services (OSS). Of particular interest was his use of the TAT to screen OSS agents for sensitive missions (the OSS was the precursor to the CIA, so in peacetime these agents would be called spies). He was in China studying errors they had made in their assessments when the atomic bomb was dropped on Hiroshima. Murray was shocked, and devoted the rest of his life to seeking alternatives to war (Maddi & Costa, 1972; Robinson, 1992).

As his career and life approached their ends, Murray received the *Distinguished Scientific Contribution Award* from the American Psychological Association, and the *Gold Medal Award* from the American Psychological Foundation. He received numerous honorary degrees, and collections of papers have been published in his honor (e.g., White, 1963; Zucker, Rabin, Aronoff, & Frank, 1992). In June, 1988, Murray told his nurse that he was dead. She disagreed with him, and pinched him gently on the cheek to prove her point. He curtly disagreed with her, declaring that he was the doctor, she was the nurse, and he was dead. A few days later he was right (Robinson, 1992).

Placing Murray in Context: A Challenging Task

There does not seem to be a consensus on where Murray fits within the field of personality theory. Trained as a Freudian psychoanalyst, he is often grouped with the neo-Freudians. However, he has also been placed with the trait theorists, and he was a colleague of Gordon Allport. However, many personality theory textbooks don't consider Murray worthy of significant attention. He is included alongside Maslow in this textbook because his work focused primarily on needs. In addition, the practical application of his Thematic Apperception Test in screening candidates for OSS assignments was similar to Maslow's application of psychological principles in the business field.

The Thematic Apperception Test is certainly Murray's claim to fame. It remains one of the best-known tests in psychology, having been applied in research, business, and therapeutic settings. Since Murray used the TAT in combination with the Rorschach Inkblot Test, he maintained his ties to traditional psychoanalysis and helped to advance the fame of the other renowned projective test. As such, his practical contributions to psychology seem to outweigh his theoretical contributions.

It has been said that the value of a theory can be measured by the research that follows. David McClelland's use of the TAT to study the need for achievement is a common topic in introductory psychology textbooks. Thus, Murray's contributions have inspired classic research in psychology. That alone should ensure a place of significance for Murray in the history of personality theory.

Human Needs

In *Explorations in Personality* (Murray, 1938), Murray describes people as "today's great problem". What can we know about someone, and how can we describe it in a way that has clear meaning? Nothing is more important in the field of psychology:

The point of view adopted in this book is that personalities constitute the subject matter of psychology, the life history of a single man being a unit with which this discipline has to deal… Our guiding thought was that personality is a temporal whole and to understand a part of it one must have sense, though vague, of the totality. (pgs. 3-4; Murray, 1938)

Thus, Murray and his colleagues sought to understand the nature of personality, in order to help them understand individuals. He referred to this direct study of personality as **personology**, simply because he considered it clumsy to refer to "the psychology of personality" instead.

Murray described the very elegant process by which the Harvard Clinic group systematically approached their studies, and then presented a lengthy series of propositions regarding a theory of personality. The primary focus of these propositions came down to what Murray called a press-need combination. A **need**, according to Murray, is a hypothetical process that is imagined to occur in order to account for certain objective and subjective facts. In other words, when an organism reliably acts in a certain way to obtain some goal, we can determine that the organism had a need to achieve that goal. Needs are often recognized only after the fact, the behavior that satisfies the need may be a blind impulse, but it still leads toward satisfying the needed goal. **Press** is the term Murray

applied to environmental objects or situations that designate directional tendencies, or that guide our needs. Anything in the environment, either harmful or beneficial to the organism, exerts press. Thus, our current needs, in the context of current environmental press, determine our ongoing behavior (Murray, 1938).

Like Maslow, Murray separated needs into biological and psychology factors based on how essential they were to one's survival. The primary, or **viscerogenic needs**, include air, water, food, sex, harm-avoidance, etc. The secondary or **psychogenic needs**, which are presumed to derive from the primary needs, are common reaction systems and wishes. Although Murray organizes the psychogenic needs into groups, they are not rank-ordered as was Maslow's hierarchy, so we will not consider the groups any further. Individually, there are a total of twenty-eight human needs (Murray, 1938). A partial list, with definitions, includes the following:

- Acquisition: the need to gain possessions and property
- Retention: the need to retain possession of things, to refuse to give or lend
- Order: the need to arrange, organize, put away objects, to be tidy and clean
- Construction: the need to build things
- Achievement: the need to overcome obstacles, to exercise power, to strive to do something difficult as well and as quickly as possible
- Recognition: the need to excite praise and commendation, to demand respect
- Exhibition: the need to attract attention to oneself
- Defendance: the need to defend oneself against blame or belittlement
- Counteraction: the need to proudly overcome defeat by restriving and retaliating, to defend one's honor
- Dominance: the need to influence or control others
- Deference: the need to admire and willingly follow a superior
- Aggression: the need to assault or injure another, to harm, blame, accuse, or ridicule a person
- Abasement: the need to surrender, to comply and accept punishment
- Affiliation: the need to form friendships and associations, to greet, join, and live with others, to love
- Rejection: the need to snub, ignore, or exclude others
- Play: the need to relax, amuse oneself, seek diversion and entertainment
- Cognizance: the need to explore, to ask questions, to satisfy curiosity

According the Murray, in the course of daily life these needs are often interrelated. When a single action can satisfy more than one need, we can say that the needs are fused. However, needs can also come into conflict. For example, an individual's need for dominance may make it difficult to satisfy their need for affiliation, unless they can find someone with a powerful need for abasement. Such a situation is one of the ways in which psychologists have tried to understand abusive relationships. In other words, when someone with a strong need for affiliation and debasement becomes involved with someone with a strong need for affiliation and dominance (particularly in a pathological sense), the results can be very unfortunate.

Figure 3.5.1

Anyone who has children is often reminded of their need for playing, and most any setting can provide an opportunity for play. Here, the author's children are playing cards.

Any object, or person, that evokes a need is said to "be cathected" by the person being studied. In other words, they have invested some of their limited psychic energy (libido) into that object. Murray believed that an individual's personality is revealed by the objects to which that person is attached by the cathexis of libido, especially if you can recognize the intensity, endurance, and rigidity of the cathexis. This process not only applies to individuals, but institutions and cultures also have predictable patterns in terms of their cathected objects. Put more simply, we can strive to understand individuals, including doing so from a cross-cultural perspective, by examining the nature and pattern of needs they seek to satisfy in their daily lives (Murray, 1938).

Morris Stein, who worked with Murray in the OSS and then earned a Ph.D. at the Harvard Clinic, combined Murray's work on identifying human needs and Jung's concept of psychological types. By looking at patterns in the rank-order of needs among industrial chemists and Peace Corps volunteers, Stein was able to divide each group into separate psychological types (Stein, 1963). For example, there were five basic types of industrial chemists: Type A was achievement oriented but still worked well with others; Type B focused on pleasing others, often at the expense of their own ideas; Type C was achievement oriented, but more

driven and hostile than Type A; Type D was motivated by achievement and affiliation, but with an emphasis on order that protected them from criticism or blame; and Type E was particularly focused on relationships marked by cooperation and trust. As interesting as these types may be, they are quite different than the personality types identified amongst the Peace Corps volunteers (Stein, 1963). Thus, although Stein's investigation suggests that personality types can be identified based on patterns of need, this approach probably would not provide a general theory of personology that could be applied to anyone.

The TAT and the OSS

Murray is typically credited with the development the TAT. However, the original article has Christiana Morgan as the first author (Morgan & Murray, 1935), and in *Explorations in Personality* most of the TAT work is described by Morgan (Murray, 1938). Apparently, when the test was revised and republished in 1943, Murray did most of the revision, partly because Morgan was quite ill at the time. The TAT consists of a series of pictures depicting potentially dramatic events (although the pictures are actually rather vague). The person taking the test is asked to provide a story that relates events preceding the picture to some final outcome of the situation. It is expected that the subject will project their own thoughts and feelings into the picture as they create their story. In order for this to be possible, Morgan and Murray made sure that in most pictures there was at least one person with whom the subject could easily empathize and identify themselves. The TAT became one of the most popular projective tests ever developed, and continues to be widely used today.

The TAT has been used in two particularly interesting settings outside of clinical psychology: to study the need for achievement (see the next section), and to screen agents for the Office of Strategic Services during World War II. Murray used the TAT as part of a program to help select members of the OSS for critical, dangerous missions. Even before joining the OSS, Murray worked for the government in support of the war effort. In conjunction with Gordon Allport, he provided an analysis of the personality of Adolf Hitler, along with predictions as to how Hitler might react after Germany was defeated. He also helped to develop a series of questions for the crew of a captured German U-boat. The OSS program involved assessing candidate's responses to highly stressful situations. In addition to psychological testing, using instruments such as the TAT, the candidates were put into highly stressful situations. For example, they were told to pick two men to help them put together a five-foot cube with wooden poles, blocks, and pegs. However, the available men were all secretly on Murray's staff. One of them would act helpless and passive, whereas the other made stupid suggestions and constantly criticized the recruit. The task was, of course, never completed, but it provided Murray with the information he needed on how the candidate performed under stress (Brian, 1995; Robinson, 1992).

In the next chapter we will see that the existential psychologist Rollo May talked about our need for myths, in order to make sense out of our often senseless world. Although this was not a need included by Murray, he did have an interest in mythology. The imagination that is necessary to create a story around a picture in the TAT often involves symbolism that arises from the depths of the whole self (Murray, 1960). In this regard, Murray sounds quite similar to Jung and his theory of archetypes, and Murray discussed some classic images from our historical mythology. Of particular interest to Murray, however, is whether or not we will establish new myths in the future. There are older myths that remain oriented to our future, such as the apocalyptic myths or the myth of the Promised Land (Murray, 1960). The existential philosopher Jean-Paul Sartre lamented the demythologizing of the universe by science, and he advocated a remythologizing of the self (see McAdams, 1992). Given that Murray did include a need for cognizance, the need to explore, to ask questions, and to satisfy curiosity, perhaps there will be new myths created in our future. If so, psychologists will need to keep current with the cultural phenomena that influence people's unconscious projections onto the TAT and other projective tests.

David McClelland and the Need for Achievement

David McClelland, who joined the faculty of Harvard University a few years before Murray retired, conducted some well-known research utilizing the TAT to examine the **need for achievement**. The research began shortly after World War II, and was supported by the Office of Naval Research. McClelland and his colleagues made an interesting point, in the preface to their book *The Achievement Motive* (McClelland, Atkinson, Clark, & Lowell, 1953), about studying just one of Murray's needs: "concentration on a limited research problem is not necessarily narrowing; it may lead ultimately into the whole of psychology." Indeed, they felt that they learned a great deal about personality by studying one of the most important of human needs.

McClelland and his colleagues used the TAT and borrowed heavily from Murray's procedures and scoring system. However, they made a number of modifications. They used additional pictures of their own, they often presented the pictures on a screen to a group of subjects, those subjects were all male college students, and some of their experimental conditions were designed to evoke

achievement-oriented responses, or responses based on success or failure. An important aspect of this study was that the TAT (and similar pictures developed by McClelland) requires writing imaginative stories of what the subject projects onto the picture. Therefore, situations that stimulate achievement-oriented imagination can result in higher scores on the need for achievement, something that McClelland and his colleagues confirmed in Navaho children during the course of their research (suggesting it is a universal phenomenon). Overall, they found that individuals who are high in their need for achievement perform more tasks during timed tests, improve more quickly in their ability to perform those tasks, set higher levels of aspirations, remember more of the tasks they failed to perform, and they are more future-oriented and recognize achievement-oriented situations (McClelland et al., 1953). In addition, they found a positive correlation between the need for achievement and cultures and families in which there is an emphasis on the individual development of children, with early childhood being of particular importance. After examining eight Native American cultures (Navaho, Ciricahua-Apache, Western Apache, Hopi, Comanche, Sanpoil, Paiute, and Flatheads), McClelland and his colleagues determined that the need for achievement in each culture (measured from classic legends involving the archetypal trickster "coyote") correlates highly with both an early age onset and the severity of independence training (McClelland et al., 1953). In summary, the need for achievement is a motivational force that develops in early childhood, and which pushes individuals toward accomplishing life's tasks.

An excellent essay on the need for achievement, which addresses some of the criticism this concept has endured, was written by McClelland in a new introduction for the second printing of his book *The Achieving Society* (McClelland, 1976). This book also adds to the cross-cultural reach of McClelland's work, since as he extends his theory on the need for achievement to the societies in which individuals live he also extends his theory to other societies around the world. First, the concept itself has typically been misunderstood:

…the word "achievement" cues all sorts of surplus meanings that the technically defined *n* Achievement variable does not have. It refers specifically to the desire to do something better, faster, more efficiently, with less effort. It is not a generalized desire to succeed… (pg. A; McClelland, 1976)

In studying the role of need for achievement within societies, McClelland focused on business and economic development as one of the most easily compared aspects of different cultures. He believed that nations possess something like a "group mind," which can lead the nation in certain directions. Again using literary sources as examples of cultural perspectives on the need for achievement, McClelland found support for his theory that high need for achievement preceded dramatic societal development in ancient Greece, pre-Incan Peru, Spain in the late middle ages, England leading up to the industrial revolution, and during the development of the United States (particularly in the 1800s). Once again, McClelland cautions against over-generalizing the meaning of need for achievement:

It is a very specific, rather rare, drive which focuses on the goal of efficiency and which expresses itself in activities available in the culture which permit or encourage one to be more efficient; and across cultures the most common form such activity takes is business. (pg. B; McClelland, 1976)

The question of where the need for achievement comes from continued to perplex McClelland. Although early childhood appears to be when a lasting need for achievement develops, the need for achievement can be enhanced in adults through training seminars. More importantly, however, is the question of where need for achievement comes from in the first place, how does it develop within a society? When McClelland was working in Ethiopia with the Peace Corps, he studied the Gurage. This small tribal group was treated with disdain by both the dominant Christian Amhara and the Muslim Galla tribes. And yet the Gurage were recognized for their clever business strategies, and their children wrote stories filled with imagery indicative of a high need for achievement. Since the Gurage had developed without contact with Western Christian, Muslim, or Greco-Roman cultures, they seemed to have developed their own need for achievement. Unfortunately, so little is known about their history, that McClelland was unable to identify the source of their motivation (McClelland, 1976).

In support of the contention that studying the need for achievement could provide insights into many aspects of personality, McClelland pursued a number of interesting topics throughout his career, including how societies can motivate economic growth and identify talent (McClelland, Baldwin, Bronfenbrenner, & Strodtbeck, 1958; McClelland & Winter, 1969), the power motive (McClelland, 1975), the development of social maturity and values (McClelland, 1982a; McClelland, 1982b), and a cross-cultural study on the role of alcohol in society (McClelland, Davis, Kalin, & Wanner, 1972). Moving in a quite different direction, McClelland also wrote a book entitled *The Roots of Consciousness* (McClelland, 1964), in which he argues that Sigmund Freud's

psychoanalysis is really an expression of Jewish spiritual mysticism known as Kabbalah. We will examine Kabbalah, as well as Christian and Islamic mysticism, as a positive approach to one's lifestyle in Chapter 18.

Discussion Question

McClelland found support for his ideas on the development of the need for achievement amongst Native Americans, but he did not find that same support among the Gurage tribe in Ethiopia (they had a strong need for achievement, but the source was unclear). How important do you think it is for us to re-examine psychological theories in multiple cultures, and what would it mean for psychology if we often find contradictions?

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3.5.1: Carl Rogers and Abraham Maslow

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3.6: A Final Note- Humanistic or Existential?

In this chapter we have examined the humanistic theories of Carl Rogers and Abraham Maslow. In the next chapter we will examine the existential theories of Viktor Frankl and Rollo May. What really is the difference? The distinction is subtle, based on definition, and may seem nonexistent at first glance. Indeed, both the humanistic and existential theorists have been influenced by the likes of Adler, Horney, Fromm, and Otto Rank, and Rogers in particular often writes about existential choices in his books. Even the cognitive therapist Albert Ellis, himself profoundly influenced by Adler, considered Rational Emotive Behavior Therapy to be distinctly humanistic (see Humanistic Psychotherapy; Ellis, 1973). In 1986, the Saybrook Institute republished a series of essays, which had appeared in the Journal of Humanistic Psychology, under the title Politics and Innocence: A Humanistic Debate (May, Rogers, Maslow, et al., 1986). In this volume, Rogers refers to May as “the leading scholar of humanistic psychology.” May, for his part, concluded an open letter to Rogers in which he expressed “profound respect for you and your contribution in the past to all of us.” May also maintained a friendship and correspondence with Maslow (May, 1991). Clearly, the humanistic and existential psychologists have much in common, and the important figures here in America communicated actively and with respect for the contributions of each other.

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3.7: Personality Theory in Real Life

Seeking Self-Actualization

Carl Rogers described the actualizing tendency as something that exists within every living organism. It is a tendency to grow, develop, and realize one's full potential. It can be thwarted, but it cannot be destroyed without destroying the organism itself. His person-centered approach was based on this belief, and the resulting trust that one can place in each person. In other words, we can trust that each person is driven forward by this actualizing tendency, and that under the right conditions it will flourish (Rogers, 1977, 1986/1989).

According to Abraham Maslow, life is a process of choices. At each point, we must choose between a progression choice and a regression choice. Although many people make safe, defensive choices, self-actualizing people regularly make **growth choices**(Maslow, 1971). Each growth choice moves the person closer to self-actualization, and the process continues throughout life.

So, consider your own life. Do you feel the actualizing tendency within you? Do you aspire to accomplish something great, or simply to be a good person in whatever path you choose? Think about your educational and/or career plans. Think about your life plans, and whether they include a family or special friends. Do you feel a calling that is pulling in one direction or another? The drive to accomplish, to make a contribution to your community or society, the belief that you are meant for great things, or simply that you are meant to be a source of support for others, all of these might be aspects of your actualizing tendency. Or are you moving through life without a plan, without goals? Do you skate along from day to day, with no destination in mind?

If you do feel your actualizing tendency, consider how you are living your life. Are you pursuing the steps necessary to accomplish your goals? Have you made choices, perhaps difficult choices, which have moved you forward toward those goals?

Basically, do you feel that you are on a path toward self-actualization, and do you think you should be? Is it reasonable to expect, or hope, that everyone might become self-actualized?

What might it be like to live a fully transcendent, self-actualized life? Although there are many different, and individual, answers to that question, we can find one example in the remarkable life of Peace Pilgrim (Friends of Peace Pilgrim, 1982). No one knows her original name, or exactly where or when she was born (other than it was on a small farm in the Eastern United States in the early 1900s). Her family was poor, but happy, and she enjoyed her childhood. Her life was fruitful, but eventually she found the world's focus on self-centeredness and material goods to be unfulfilling. In 1953, she chose to leave her life behind. She adopted the name Peace Pilgrim, and began walking across America as a prayer for peace.

A pilgrim is a wanderer with a purpose…Mine is for peace, and that is why I am a Peace Pilgrim…My pilgrimage covers the entire peace picture: peace among nations, peace among groups, peace within our environment, peace among individuals, and the very, very important inner peace - which I talk about

most often because that is where peace begins…I have no money. I do not accept any money on my pilgrimage. I belong to no organization…I own only what I wear and carry. There is nothing to tie me down. I am as free as a bird soaring in the sky.

I walk until given shelter, fast until given food. I don't ask - it's given without asking. Aren't people good! There is a spark of good in everybody, no matter how deeply it may be buried, it is there. It's waiting to govern your life gloriously. (pg. 25; Peace Pilgrim cited in Friends of Peace Pilgrim, 1982)

Between 1953 and her death in 1981, she walked, and walked, and walked. By 1964, she had walked 25,000 miles, including walking across the United States twice and through every Canadian province. After that, she no longer kept track of her mileage, but she completed at least four more pilgrimages, including Alaska, Hawaii, and a pilgrimage in Mexico. Among the many friends and admirers she met along the way, there are two notable people (whom psychology students should be familiar with) who provided comments for the cover of her book: Elisabeth Kubler-Ross called her "a wonderful lady," and the popular author/counselor Wayne Dyer said "she is my hero." As for your own life, Peace Pilgrim has some simple advice:

There is no glimpse of the light without walking the path. You can't get it from anyone else, nor can you give it to anyone. Just take whatever steps seem easiest for you, and as you take a few steps it will be easier for you to take a few more. (pg. 91; Peace Pilgrim cited in Friends of Peace Pilgrim, 1982).

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3.8: Existential Psychology

Man is nothing else but what he makes of himself. Such is the first principle of Existentialism…For we mean that man first exists, that is, that man first of all is the being who hurls himself toward a future and who is conscious of imagining himself as being in the future…Thus, Existentialism's first move is to make every man aware of what he is and to make the full responsibility of his existence rest on him. (pg. 456; Jean-Paul Sartre, 1947/1996)

Existential psychology is the area within psychology most closely linked to the field of philosophy. Curiously, this provides one of the most common complaints against existential psychology. Many historians identify the establishment of Wilhelm Wundt's experimental laboratory in Germany in 1879 as the official date of the founding of psychology. Sigmund Freud, with his strong background in biomedical research, also sought to bring scientific methodology to the study of the mind and mental processes, including psychological disorders and psychotherapy. Shortly thereafter, Americans such as Edward Thorndike and John Watson were establishing behaviorism, and its rigorous methodology, as the most influential field in American psychology. So, as existential psychology arose in the 1940s and 1950s it was viewed as something of a throwback to an earlier time when psychology was not distinguished from philosophy (Lundin, 1979).

However, as with those who identify themselves as humanistic psychologists, existential psychologists are deeply concerned with individuals and the conditions of each unique human life. The detachment that seems so essential to experimental psychologists is unacceptable to existential psychologists. The difference can easily be seen in the titles of two influential books written by the leading existential psychologists: *Man's Search for Meaning* by Viktor Frankl (1946/1992) and *Man's Search for Himself* by Rollo May (1953). Existential psychology differs significantly from humanistic psychology, however, in focusing on present existence and the fear, anguish, and sorrow that are so often associated with the circumstances of our lives (Lundin, 1979).

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3.9: Understanding the Philosophy of Existentialism

The roots of **existentialism** as a philosophy began with the Danish philosopher Søren Kierkegaard (1813-1855). Kierkegaard was intensely interested in man's relationship with God, and its ultimate impossibility. Man is finite and individual, whereas God is infinite and absolute, so the two can never truly meet. In pursuing the relationship, however, man goes through three stages or modes of existence: the **aesthetic mode**, the **ethical mode**, and the **religious mode**. The aesthetic mode is concerned with the here and now, and focuses primarily on pleasure and pain. Young children live primarily in this mode. The ethical mode involves making choices and wrestling with the concept of responsibility. An individual in the ethical mode must choose whether or not to live by a code or according to the rules of society. This submission to rules and codes may prove useful in terms of making life simple, but it is a dead end. In order to break out of this dead end, one must live in the religious mode by making a firm commitment to do so. While this may lead to the recognition that each of us is a unique individual, it also brings with it the realization of our total inadequacy relative to God. As a result, we experience loneliness, anxiety, fear, and dread. All of this anguish, however, allows us to know what is really true, and for Kierkegaard truth was synonymous with faith (in God). However, as important as man's relationship to God was for Kierkegaard, he was adamantly opposed to organized religion. Kierkegaard rejected objective, so-called "**truth**" in the form of religious dogma in favor of the subjective "truth" that each person "knows" within themselves. While this subjective, personal truth brings with it the responsibility that leads to anxiety, it can also elevate a person to an authentic existence (Breisach, 1962; Frost, 1942).

Another philosopher considered essential to the foundation of existentialism was the enigmatic German philosopher Friedrich Nietzsche (1844-1900). A key element of Nietzsche's philosophy is the **will-to-power**. He believed this will-to-power is the fundamental force in the universe (Alfred Adler considered it fundamental to personality development). Ironically, according to Nietzsche, the universe has no regard for humanity. Natural forces (such as disaster and disease) destroy people, life is extremely difficult, and even those who struggle on attempting to realize their will eventually succumb to death. There is no hope to be found in an afterlife, since Nietzsche is famous for declaring that God is dead! Neither is there much hope within society for many people. Nietzsche believed that inequality was the natural state of humanity, so he considered slavery to be perfectly understandable and he felt that women (who are physically weaker than men) should never expect the same rights as men. Nonetheless, Nietzsche saw a great future for humanity, in the belief, indeed the faith, that we would create a **superman** (or superwoman, as the case may be). It is the creation of the superman that gives purpose to existence. Although the concept of the superman helped to fuel Nazi views on creating a German master race, it also made its way into American comic books as the great hero Superman (Fritzsche, 2007; Frost, 1942; Jaspers, 1965). In perhaps Nietzsche's most famous work, *Thus Spoke Zarathustra*, the would-be prophet Zarathustra encouraged people to seek a better future for humanity:

I will teach you about the superman. Man is something that should be overcome. What have you done to overcome him? (pg. 81, Nietzsche, quoted in Fritzsche, 2007)

The German existentialists Martin Heidegger (1889-1976) and Karl Jaspers (1883-1969) focused on human existence itself and our role in the world. In a sense, Heidegger trivialized the nature of God, equating God with little more than the greatest being in the world, but a being nonetheless (just as humans are). Jaspers was not an atheist, but still his existential theory focused on the human journey toward a **freedom** that has meaning only when it reveals itself in union with God (Breisach, 1962; Lescoe, 1974). Heidegger considered individuals as beings who are all connected in **Being**, thus distinguishing between mere beings (including other animals) and the nature of truth or Being. Only humans are capable of understanding this connection between all beings, and Heidegger referred to this discovery as **Dasein** ("being here," or existence). On one level, Dasein is common to all creatures, but the possibility of being aware of one's connection to Being is uniquely human. For those who ask the big questions, Dasein can become authentic existence. This experience comes in the fullness of life, but only if one adopts the mode of existence known as **being-in-the-world**. Heidegger insisted that Dasein and being-in-the-world are equal. Being-in-the-world is an odd concept, however, since Heidegger believed that Being can only arise from nothingness, and so we ourselves arise as **being-thrown-into-this-world**. Having been thrown into this mysterious world we wish to make it our own, but our desire for connection with Being leads to anxiety. This anxiety cannot be overcome, because we are aware that we will die! Surprisingly, however, Heidegger considers death to be something positive. It is only because we are going to die that some of us strive to experience life fully. If we can accept that death will come, and nothing will follow, we can be true to ourselves and live an authentic life (Breisach, 1962; Lundin, 1979).

Finally we come to the French existentialist Jean-Paul Sartre (1905-1980). Sartre was an extraordinary author and one of the most important philosophers of the twentieth century. He was awarded the Nobel Prize in Literature in 1964, but chose to reject it. More importantly for us, however, is the fact that he carried existential philosophy directly into psychology, with books such as *The Transcendence of the Ego* (Sartre, 1937/1957) and a section entitled "Existential Psychoanalysis" in his extraordinary work Being and Nothingness (Sartre, 1943). Whereas Kierkegaard believed that man could never truly be one with God, and Heidegger trivialized God, Sartre simply stated that God does not exist. But this is not inconsequential:

The Existentialist, on the contrary, thinks it very distressing that God does not exist, because all possibility of finding values in a heaven of ideas disappears along with Him; there can no longer be an a *priori* Good, since there is no infinite and perfect consciousness to think it. (pg. 459; Sartre, 1947/1996).

If one looks at the title of Sartre's most famous philosophical work, *Being and Nothingness* (Sartre, 1943), you might get the impression that Sartre followed in the footsteps of Heidegger. However, Sartre did not agree with Heidegger (see Sartre, 1943). Sartre divided the world into **en-soi** (the in-itself) and **pour-soi** (the for-itself). Pour-soi can be defined as conscious beings, of which there is only one kind: human beings. Everything else is en-soi, things (including non-human animals) that are silent and dead, and from which come no meaning, they only are (Breisach, 1962). For Sartre, there is no mystery, no Being, tying all of creation together. Man's consciousness is not a connection to God that can be realized, it is simply a unique characteristic of the human species. The nothingness to which Sartre refers is a shell around the pour-soi, the individual, which separates it from the en-soi. People who try to deny living authentically, those who try to deny the responsibility that comes with being conscious and settle into being nothing more than en-soi will have a shattering experience and be totally destroyed (since there is no Being, as described by Heidegger, beyond the shell surrounding the pour-soi; Breisach, 1962). This establishes critical ethical implications for the individual, since their life will be what they make of it, and nothing more.

Unfortunately, many people do reject their unique consciousness and desire to be en-soi, just letting life happen around them. As the en-soi closes in around them, they begin to experience nausea, forlornness, anxiety, and despair. Herein lays the need for **existential psychoanalysis**:

Existential psychoanalysis is going to reveal to man the real goal of his pursuit, which is being as a synthetic fusion of the in-itself with the for-itself; existential psychoanalysis is going to acquaint man with his passion…Many men, in fact, know that the goal of their pursuit is being; and … they refrain from appropriating things for their own sake and try to realize the symbolic appropriations of their being-in-itself…existential psychoanalysis…must reveal to the moral agent that he is *the being by whom values exist.* It is then that his freedom will become conscious of itself… (pg. 797; Sartre, 1943)

Sartre proposed that individuals become conscious, and through that consciousness create the world itself, but also that we are "condemned to despair" and "doomed to failure" when we realize that all human activities are merely equivalent. This philosophical approach leads into Sartre's criticism of the psychology of his time. Sartre believed that psychologists, and even most philosophers, stopped short of really understanding people:

For most philosophers the ego is an "inhabitant" of consciousness...Others - psychologists for the most part - claim to discover its material presence, as the center of desires and acts, in each moment of our psychic life. We should like to show here that the ego is neither formally nor materially *in* consciousness: it is outside, *in the world*. It is a being of the world, like the ego of another. (pg. 31; Sartre, 1937/1957)

So, Sartre believed that an existential psychoanalysis was needed to go beyond the limits of Freudian psychoanalysis. It is not enough, according to Sartre, to stop at describing mere patterns of desires and tendencies (Sartre, 1943). In critiquing the psychoanalytic biography of a famous author named Flaubert, Sartre asked very meaningful questions about this individual's life: why did Flaubert become a writer instead of a painter, why did he come to feel exalted and self-important instead of gloomy, why did his writing emphasize violence, or amorous adventures, etc.? Sartre's point is a common criticism of Freudian psychoanalytic theory. If most any result can come from an individual's experiences, then what does psychoanalysis really tell us about anyone? Sartre proposed a deeper form of psychoanalysis:

This comparison allows us to understand better what an existential psychoanalysis must be if it is entitled to exist. It is a method destined to bring to light, in a strictly objective form, the subjective choice by which each living person makes himself a person; that is, makes known to himself what he is. Since what the method seeks is a *choice of being* at the same time as a *being*, it must reduce particular behavior patterns to fundamental relations - not of sexuality or of the will-to-power, but of *being* - which are

expressed in this behavior. It is then guided from the start toward a comprehension of being and must not assign itself any other goal than to discover being and the mode of being of the being confronting this being. It is forbidden to stop before attaining this goal…This psychoanalysis has not yet found its Freud. (pp. 733-734; Sartre; 1943)

Placing Existential Psychology in Context: Height Psychology Goes Deeper Than Depth Psychology

The two theorists highlighted in this chapter were truly extraordinary individuals. Both Viktor Frankl (who coined the term "height psychology") and Rollo May were well immersed in existential thought and its application to psychology when they faced seemingly certain death. For Frankl, who was imprisoned in the Nazi concentration camps, death was expected. For May, who was confined to a sanitarium with tuberculosis, death was a very real possibility (and indeed many died there). But Frankl and May were intelligent, observant, and thoughtful men. They watched as many died, while some lived, and they sought answers that might explain who was destined for each group. Both men observed that for those who resigned themselves to death, death came soon. But for those who chose to live, they had a real chance to survive despite the terrible conditions in which they existed.

Frankl and May also shared their training in traditional psychoanalysis, and both had studied with Alfred Adler, at least somewhat. However, they found the so-called depth psychology as lacking, since it did not address the true potential for humans to rise above their conditions. In this regard, existential psychologists have typically been viewed as belonging within the humanistic psychology camp. However, both Frankl and May considered humanistic psychology to also be lacking, in that it neglected the true potential for humans to make bad choices, and to harm both themselves and others. So for existential psychologists, the center of their focus is on the immediate existence of the individual, in the context of their relationship to others. It is this seeming paradox, and the drive to resolve it, that provides the motivation and energy for life.

There is also a natural connection between existentialism and Eastern schools of thought, including yoga, Buddhism, and Taoism. Some of the comparisons are so striking that, shortly after discussing Taoism, May wrote "one gets the same shock of similarity in Zen Buddhism" (May, 1983). And so, this chapter should provide an interesting transition to the final section of this text, in which we will examine both Eastern and Western spiritual approaches to making positive choices in one's life.

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3.10: Viktor Frankl and Logotherapy

Viktor Frankl (1905-1997) was truly an extraordinary man. His first paper was submitted for publication by Sigmund Freud; his second paper was published at the urging of Alfred Adler. Gordon Allport was instrumental in getting Frankl's book *Man's Search for Meaning* (Frankl, 1946/1992) published in English, a book that went on to be recognized by the Library of Congress as one of the ten most influential books in America. He lectured around the world, and received some thirty honorary doctoral degrees in addition to the medical degree and the Ph.D. he had earned as a student. He was invited to a private audience with Pope Paul VI, even though Frankl was Jewish. All of this was accomplished in spite of, and partly because of, the fact that he spent several years in Nazi concentration camps during World War II, camps where his parents, brother, wife, and millions of other Jews died.

A Brief Biography of Viktor Frankl

Viktor Frankl was born in Vienna, Austria on March 26, 1905. Although his father had been forced to drop out of medical school for financial reasons, Gabriel Frankl held a series of positions with the Austrian government, working primarily with the department of child protection and youth welfare. He instilled in his son the importance of being intensely rational and having a firm sense of social justice, and Frankl became something of a perfectionist. Frankl described his mother Elsa as a kindhearted and deeply pious woman, but during his childhood she often described him as a pest, and she even changed the words of Frankl's favorite childhood lullaby to include calling him a pest. This may have been due to the fact that Frankl was often asking questions, so much so that a family friend nicknamed him "The Thinker" (Frankl, 1995/2000). From his mother, Frankl inherited a deep emotionality. One aspect of this emotionality involved a deep attachment to his childhood home, and he often felt homesick as his responsibilities kept him away. And those responsibilities began at an early age (Frankl, 1995/2000; Pattakos, 2004).

Even in high school Frankl was developing a keen interest in existential philosophy and psychology. At the age of 16 he delivered a public lecture "On the Meaning of Life" and at 18 he wrote his graduation essay "On the Psychology of Philosophical Thought." Throughout his high school years he maintained a correspondence with Sigmund Freud (letters that were later destroyed by the Gestapo when Frankl was deported to his first concentration camp). When Frankl was just 19, Freud submitted one of Frankl's papers for publication in the *International Journal of Psychoanalysis*, afterward hoping that Frankl would agree and give his belated consent. Despite having impressed Freud, Frankl himself was already impressed by Alfred Adler. Frankl became active in Adler's individual psychology group, and as he began medical school he was urged by Adler to publish a paper in the *International Journal of Individual Psychology.* It is hard to imagine that many people could have come into the favor of both Freud and Adler by such a young age, even before having begun medical school or a career in psychiatry. Despite Frankl's young age and somewhat limited experience, the paper published by Adler was dealing with difficult material, specifically the "border area that lies between psychotherapy and philosophy, with special attention to the problems of meanings and values in psychology" (Frankl, 1995/2000). Eventually, however, Frankl fell out of favor with Adler. Frankl had been impressed with two men, Allers and Schwarz, whose views were at odds with Adler. On the evening when Allers and Schwarz announced to the society that they could not agree with Adler, Adler challenged Frankl and a friend to speak up. Frankl chose to do so, and he defended Allers and Schwarz, believing that a middle ground could be found. Adler never spoke to Frankl again, even when Frankl said hello in the local coffee shop. For a few months Adler had other people suggest to Frankl that he should quit the society. When Frankl did not, he was expelled by Adler (Frankl, 1995/2000; Pattakos, 2004).

Frankl proceeded to develop his own practice and his own school of psychotherapy, known as **logotherapy** (the therapy of meaning, as in finding meaning in one's life). As early as 1929, Frankl had begun to recognize three possible ways to find meaning in life: a deed we do or a work we create; a meaningful human encounter, particularly one involving **love**; and choosing one's attitude in the face of unavoidable suffering. Logotherapy eventually became known as the third school of Viennese psychotherapy, after Freud's psychoanalysis and Adler's individual psychology. During the 1930s Frankl did much of his work with suicidal patients and teenagers. He had extensive talks with Wilhelm Reich in Berlin, who was also involved in youth counseling by that time. As the 1930s came to an end, and Austria had been taken over by the Nazis, Frankl sought a visa to emigrate to the United States, which was eventually granted. However, Frankl's parents could not get a visa, so he chose to remain in Austria with them. He also began work on his first book, eventually published in English under the title *The Doctor and the Soul* (Frankl, 1946/1986), which provided the foundation for logotherapy. He fell in love with Tilly Grosser, and they were married in 1941, the last legal Jewish marriage in Vienna under the Nazis.

Shortly thereafter, the realities of Nazi Germany overcame what little privilege Frankl had enjoyed as a doctor at a major hospital. Since it was illegal for Jews to have children, Tilly Frankl was forced to abort their first child. Frankl later dedicated *The Unheard Cry for Meaning* "To Harry or Marion an unborn child" (Frankl, 1978). Then the entire Frankl family, except for his sister who had gone to Australia, was deported to the Theresienstadt concentration camp (the same camp from which Anna Freud cared for orphans after the war). As they marched into the camp with hundreds, perhaps thousands, of other prisoners, his father tried to calm those who panicked by saying again and again: "Be of good cheer, for God is near." Frankl's parents, his only brother, and his wife Tilly died in the concentration camps. Most tragically, Frankl believed that his wife died after the war, but before the liberating Allied forces could care for all of the many, many suffering people (Frankl, 1995/2000).

When Frankl was deported, he tried to hide and save his only copy of *The Doctor and the Soul* by sewing it into the lining of his coat. However, he was forced to trade his good coat for an old one, and the manuscript was lost. While imprisoned, he managed to obtain a few scraps of paper on which to make notes. Those notes later helped him to recreate his book, and that goal gave such meaning to his life that he considered it an important factor in his will to survive the horrors of the concentration camps. It would be difficult to adequately describe the conditions of the concentration camps, or how they affected the minds of those imprisoned, especially since the effects were quite varied. Frankl describes those conditions in *Man's Search for Meaning*. The book is rather short, but its contents are deep beyond comprehension. Frankl himself, however, might take exception to referring to his book as "deep." Depth psychology was a term used for psychodynamically-oriented psychology. In 1938 Frankl coined the term "**height psychology**" in order to supplement, but not replace, depth psychology (Frankl, 1978).

After the war, Frankl's life was nothing less than amazing. He returned to his home city of Vienna, married Eleonore Katharina, née Schwindt, and raised a daughter named Gabriele, whose husband and the Frankl's grandchildren all lived in Vienna. He lectured around the world, received many honors, wrote numerous books, all while continuing to practice psychiatry and teach at the University of Vienna, Harvard, and elsewhere. He had a great interest in humor and in cartooning. Throughout his life, Frankl steadfastly refused to acknowledge the validity of collective guilt toward the German people. When asked repeatedly how he could return to Vienna, after all that happened to him and his family, Frankl replied:

…I answered with a counter-question: "Who did what to me?" There had been a Catholic baroness who risked her life by hiding my cousin for years in her apartment. There had been a Socialist attorney (Bruno Pitterman, later vice chancellor of Austria), who knew me only casually and for whom I had never done anything; and it was he who smuggled some food to me whenever he could. For what reason, then, should I turn my back on Vienna? (pp. 101-102; Frankl, 1995/2000)

Viktor Frankl died peacefully on September 2, 1997. He was 92 years old. During his life, his work influenced many people, from the ordinary to the famous and influential. "Viktor Frankl, to be sure, leaves a profound legacy" (pg. 24; Pattakos, 2004).

The Theoretical Basis for Logotherapy

While Frankl was in medical school, he considered specializing in dermatology or obstetrics. A fellow student who was aware of Frankl's wide-ranging interests, however, introduced Frankl to the works of Kierkegaard. This friend had been reminded of Kierkegaard's emphasis on living an authentic life, and he urged Frankl to pursue his interest in psychiatry. While still in medical school Frankl delivered a lecture to the Academic Society for Medical Psychology, of which Frankl was the founding vice-president, and used the term logotherapy for the first time (a few years later he first used the alternative term existential analysis; Frankl, 1995/2000). The word logos is Greek for "meaning," and this third Viennese school of psychotherapy focuses on the meaning of human existence and man's search for such a meaning. Logotherapy, therefore, focuses on man's **will-to-meaning**, in contrast to Freud's **will-to-pleasure** (the drive to satisfy the desires of the id, the pleasure principle) or Adler's **will-to-power** (the drive to overcome inferiority and attain superiority; adopted from Nietzsche) (Frankl, 1946/1986, 1946/1992).

The will-to-meaning is, according to Frankl, the primary source of one's motivation in life. It is not a secondary rationalization of the instinctual drives, and meaning and values are not simply defense mechanisms. As Frankl eloquently points out:

…as for myself, I would not be willing to live merely for the sake of my "defense mechanisms," nor would I be ready to die merely for the sake of my "reaction formations." Man, however, is able to live and even to die for the sake of his ideals and values! (pg. 105; Frankl, 1946/1992)

Unfortunately, one's search for meaning can be frustrated. This **existential frustration** can lead to what Frankl identified as a **noogenic neurosis** (a neurosis of the mind or, in other words, the specifically human dimension). Frankl suggested that when

neuroses arise from an individual's inability to find meaning in their life, what they need is logotherapy, not psychotherapy. More specifically, they need help to find some meaning in their life, some reason to be. When reading Frankl's examples of how he helps such people, and Frankl offers many of these examples in his writings, it seems so simple. But it must be remembered that it takes a great deal of experience, knowledge, and maturity, as well as an ability to put oneself in another's shoes, in order to creatively think of how another person can find meaning in their life. It would be safe to say that many of us find it difficult to find meaning in our own lives, and research has indeed shown that the will-to-meaning is a significant concern throughout the world (Frankl, 1946/1992). In order to make sense of this problem, Frankl has suggested that we should not ask what we expect from life, but rather, we should understand that life expects something from us:

A colleague, an aged general practitioner, turned to me because he could not come to terms with the loss of his wife, who had died two years before. His marriage had been very happy, and he was now extremely depressed. I asked him quite simply: "Tell me what would have happened if you had died first and your wife had survived you?" "That would have been terrible," he said. "How my wife would have suffered?" "Well, you see," I answered, "your wife has been spared that, and it was you who spared her, though of course you must now pay by surviving and mourning her." In that very moment his mourning had been given a meaning - the meaning of a sacrifice. (pg. xx; Frankl, 1946/1986)

The latter point brings us back to Frankl's discussion of how one can find meaning in life: through creating a work or doing a deed; by experiencing something or encountering someone, particularly when love is involved; or by choosing one's attitude toward unavoidable suffering. Those of us who have lost someone dear know how easily it leads to deep suffering. Frankl had already written the first version of *The Doctor and the Soul* when he entered the Theresienstadt concentration camp, so his views on how one should choose their attitude toward unavoidable suffering were put to a test that no research protocol could ever hope to achieve! His observations form the basis for much of *Man's Search for Meaning*. Both his observations of others and his own reactions in this unimaginably horrible and tragic situation are quite fascinating:

…as we stumbled on for miles, slipping on icy spots, supporting each other time and again, dragging one another up and onward, nothing was said, but we both knew: each of was thinking his wife…my mind clung to my wife's image…Real or not, her look was then more luminous than the sun…A thought transfixed me: for the first time in my life I saw the truth as it is set into song by so many poets, proclaimed as the final wisdom by so many thinkers. The truth - that love is the ultimate and the highest goal to which man can aspire. Then I grasped the meaning of the greatest secret that human poetry and human thought and belief have to impart: *The salvation of man is through love and in love*. (pp. 48-49; Frankl, 1946/1992)

…One evening, when we were already resting on the floor of our hut, dead tired, soup bowls in hand, a fellow prisoner rushed in and asked us to run out to the assembly grounds and see the wonderful sunset. Standing outside we saw sinister clouds glowing in the west and the whole sky alive with clouds of ever-changing shapes and colors, from steel blue to blood red…Then, after minutes of moving silence, one prisoner said to another, "How beautiful the world *could* be!" (pg. 51; Frankl, 1946/1992)

…The experiences of camp life show that man does have a choice of action. There were enough examples, often of a heroic nature, which proved that apathy could be overcome, irritability suppressed. Man *can* preserve a vestige of spiritual freedom, of independence of mind, even in such terrible conditions of psychic and physical stress.

We who lived in concentration camps can remember the men who walked through the huts comforting others, giving away their last piece of bread. They may have been few in number, but they offer sufficient proof that everything can be taken from a man but one thing: the last of the human freedoms - to choose one's attitude in any given set of circumstances, to choose one's own way. (pp. 74-75; Frankl, 1946/1992)

Discussion Question: Frankl considered the most important aspect of survival to be the ability to find meaning in one's life. Have you found meaning in your life? Are there goals you have that you believe might add meaning to your life? Do you know anyone personally whose life seems to be filled with meaning, and if so, how does it appear to affect them?

Logotherapy as a Technique

Unfortunately, as noted by Frankl, not everyone can successfully accomplish the will-to-meaning. Those who rapidly declined toward death itself had lost the ability to have faith in the future; they could not identify any goal that provided meaning for their future. Such individual's exist in what Frankl called an existential vacuum. We have no instincts that tell us what we have to do, fewer and fewer traditions that tell us what we should do, and we often don't even know what we want to do. Therein lays the need

for logotherapy. As a technique, logotherapy relies primarily on **paradoxical intention** and **dereflection** (Frankl, 1946/1986, 1946/1992). Paradoxical intention is based on a simple trap in which neurotic individuals often find themselves. When a person thinks about or approaches a situation that provokes a neurotic symptom, such as fear, the person experiences **anticipatory anxiety**. This anticipatory anxiety takes the form of the symptom, which reinforces their anxiety. And so on… In order to help people break out of this negative cycle, Frankl recommends having them focus intently on the very thing that evokes their symptoms, even trying to exhibit their symptoms more severely than ever before! As a result, the patient is able to separate themselves from their own neurosis, and eventually the neurosis loses its potency.

Similar to anticipatory anxiety, people often experience a compulsive inclination to observe themselves, resulting in hyper-reflection. For example, people who suffer from insomnia focus on their efforts to sleep, or people who cannot enjoy a sexual relationship often focus on their physical, sexual responses. Because of this intense focus on sleep, or having an orgasm, these very things are unattainable. In dereflection, patients are taught not to pay attention to what they desire. A person who cannot sleep might read in bed, they will eventually fall asleep. A person who cannot enjoy intimate sexuality could focus on their partner, and as a result they should experience satisfaction that they did not expect. In essence, whereas paradoxical intention teaches the patient to ridicule their symptoms, dereflection teaches the patient to ignore his or her symptoms (Frankl, 1946/1986).

Discussion Question: Logotherapy relies on paradoxical intention and dereflection to break the anticipatory anxiety that often leads to failure (and then, more anxiety). Are there situations where you find yourself getting anxious or nervous even before the situation begins? What steps, if any, have you taken to break out of that pattern?

The Search for Ultimate Meaning

Kierkegaard believed that man could never truly be in contact with the infinite and absolute God. Similarly, Frankl talked about a **super-meaning** to life, something that goes far deeper than logic. When Frankl told his daughter that the *good* Lord had cured her measles, his daughter reminded him that the good Lord had given her the measles in the first place. Since children may not benefit from the challenges of suffering as adults might, and even adults find it difficult to find meaning in truly horrible situations like the concentration camps of Nazi Germany or the gulags of the former Soviet Union, the meaning of life in the greater context of human societies is often not readily apparent. But as Frankl says:

This ultimate meaning necessarily exceeds and surpasses the finite intellectual capacities of man; in logotherapy, we speak in this context of a super-meaning. What is demanded of man is not, as some existential philosophers teach, to endure the meaninglessness of life, but rather to bear his incapacity to grasp its unconditional meaningfulness in rational terms. *Logos* is deeper than logic. (pg. 122; Frankl, 1946/1992)

In discussing the value of logotherapy, Frankl offered critiques of other popular fields in psychology and psychiatry. His most serious critique was of the deterministic nature of psychoanalysis. Frankl fervently believed in an individual's freedom to transcend their self and choose to make the best of any situation. And he had plenty of experience to back up his opinion: "…I am a survivor of four camps - concentration camps, that is - and as such I also bear witness to the unexpected extent to which man is capable of defying and braving even the worst conditions conceivable" (pg. 47; Frankl, 1978). He did not, however, reject determinism entirely. Instead, he attributed determinism to the psychological dimension, whereas freedom exists within the noölogical dimension. He acknowledged Freud and Adler for teaching us to "unmask the neurotic." As for behaviorism, Frankl acknowledged that it helped to "demythologize" neurosis, by pointing out that not every psychological problem is due to unconscious forces from early childhood, and he included Pavlov, Watson, and Skinner as great pioneers. Still, both psychoanalysis and behaviorism ignore the essential humanness of the individual.

Despite his emphasis on the individual human, Frankl did not consider logotherapy as belonging within humanistic psychology (or at least not within what he called pseudo-humanism; Frankl, 1978). He believed that humanistic psychology focused so much on the humanity of individuals, that they did not quite appreciate the uniqueness of each person. It is not enough to merely encounter another person. In order to be moved on the personal level there must be an element of love (love for another person, if not a more intimate and personal love as for a spouse or a child). As we will see below, Rollo May also considered love to be of great importance to our lives. The emphasis that Frankl placed on love may have something to do with his deep spirituality. Frankl believed in a spiritual unconscious, separate from the instinctual unconscious described by Freud (Frankl, 1948/2000). In order for an individual to experience an authentic existence, they must determine whether a given phenomenon (thoughts, feelings, impulses, etc.) is instinctual or spiritual, and then freely choose how to behave or respond. Frankl returned to Heidegger's concept of Dasein,

living according to the understanding that one is connected to Being. Although this concept may seem reminiscent of Jung's collective unconscious, nothing could be further from the truth:

…It cannot be emphasized strongly enough that not only is the unconscious neither divine nor omniscient, but above all man's unconscious relation to God is profoundly personal. The "unconscious God" must not be mistaken as an impersonal force operant in man. This understanding was the great mistake to which C. G. Jung fell prey. Jung must be credited with having discovered distinctly religious elements within the unconscious. Yet he misplaced this unconscious religiousness of man, failing to locate the unconscious God in the personal and existential region. Instead, he allotted it to the region of drives and instincts, where unconscious religiousness no longer remained a matter of choice and decision. According to Jung, something within me is religious, but it is not I who then is religious; something within me drives me to God, but it is not I who makes the choice and takes the responsibility. (pg. 70; Frankl, 1948/2000)

According to Frankl, the most human of all human phenomena is the will-to-meaning. Religion, or spirituality, seeks a **will-to-ultimate-meaning**. Once again, Frankl believed that Freudian psychoanalysis and Adlerian individual psychology had failed to sufficiently credit the self-transcendent quality of individuals who live authentic lives. It is in the study of authentic lives that "height psychology," as Frankl called it, can address the higher aspirations of the human psyche. In other words, beyond seeking pleasure and/or power, there is man's search for meaning (Frankl, 1948/2000).

Discussion Question: Frankl was a very spiritual man. He talked about super-meaning and a will-to-ultimate-meaning. Are you a spiritual and/or religious person? If yes, does your faith help to give meaning to your life?

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3.11: Rollo May and Existential Psychology

Rollo May (1909-1994) introduced existentialism to American psychologists, and has remained the best known proponent of this approach in America. Trained in a fairly traditional format as a psychoanalyst, May considered the detachment with which psychoanalysts approached their patients as a violation of social ethics. For example, if a psychoanalyst helps a patient to be the best they can be, and the person happens to earn their living in an unseemly or criminal way, it hardly seems proper (Stagner, 1988). On the other hand, who is to decide which values should be preferred in a particular society? In the pursuit of freedom, May suggested that sometimes individuals might reasonably oppose the standards or morality of their society. Politics, a wonderful topic for lively debates, is dependent on opposing viewpoints. Only when an individual lives an authentic life, however, should their opinion be considered valid, and existential psychology seeks to help individuals live authentic lives.

A Brief Biography of Rollo May

Rollo Reese May was born on April 21, 1909, in Ohio, and grew up in Marine City, Michigan. He attended Oberlin College in Ohio, graduating in 1930. Having always been interested in art and artistic creativity, he joined with a small group of artists and traveled to Europe, where they studied the local art of Poland. In order to remain in Europe, May took a teaching position with the American College at Salonika in Greece. When not teaching, he traveled widely throughout Greece, Poland, Romania, and Turkey. He attended the summer school taught by Alfred Adler. Deeply impressed by Adler (as Frankl had been), he nonetheless considered Adler's theories overly simplistic and too general. This may well have been due to his awakening awareness of the tragic side of human life, keeping in mind that much of Europe suffered greatly during the depression between World War I and World War II (Reeves, 1977).

Upon returning to the United States, May worked as a student advisor and the editor of a student magazine at Michigan State University. In 1936, he enrolled at Union Theological Seminary in New York, with the intention of asking, and most likely hoping to find answers to, the ultimate questions about human life. Despite having no particular desire to become a minister, he did serve in a parish in Montclair, New Jersey for a while. While at the seminary, he became a lifelong friend of Paul Tillich, a well-known existential theologian. Tillich, whose classes May regularly attended, introduced May to the works of Kierkegaard and Heidegger. May also met Kurt Goldstein during this time, and became acquainted with Goldstein's theories of self-actualization and anxiety as a reaction by organisms to catastrophic events. Regarding his time as a minister, May reflected that the only events which seemed to include an element of reality were the funerals (Reeves, 1977).

Shortly after graduating from the seminary, May began writing books on counseling and creative living. He worked as a counselor at the College of the City of New York, and trained as a psychoanalyst at the William Alanson White Institute of Psychiatry, Psychoanalysis, and Psychology in New York. His time at the training institute overlapped with Harry Stack Sullivan being the president of the William Alanson White Foundation, and Erich Fromm as a fellow associate. In 1946, May began a private practice in psychoanalysis, in 1948 he became a faculty member at the institute, and in 1949 he received the first Ph.D. in clinical psychology at Columbia University. His doctoral dissertation was published as *The Meaning of Anxiety* (May, 1950), a book that heavily cites the work of Freud and Kierkegaard on anxiety, as well as Fromm, Horney, and Tillich (May, 1950; Reeves, 1977).

Similar to Viktor Frankl, May's life had taken a dramatic turn during this time, an uncontrollable event that threatened his life: May contracted tuberculosis. At the time, there were no effective treatments for this contagious disease, many people died from it, and like many others May had to spend several years at a sanitarium (Saranac Sanitarium in upstate New York). It was during his time in the sanitarium that May theorized about anxiety and came to one of the most important conclusions in his career. He determined that although Freud had done a masterful job of characterizing the effects of anxiety on the individual, it was Kierkegaard who had truly identified what anxiety is: the threat of becoming nothing. From this point on May could clearly be identified as an existential psychologist. He collaborated with Abraham Maslow, Carl Rogers, and Gordon Allport to present a symposium on existential psychology, in conjunction with the 1959 annual convention of American Psychological Association, which led to the publication of a book on the subject (Reeves, 1977).

As May's career continued, he became a supervisory and training analyst at the William Alanson White Institute, and an adjunct professor of psychology in the graduate school at New York University. He gave a series of radio talks on existential psychology on a Canadian Broadcasting Corporation show, he served as a visiting professor at Harvard and Princeton, and he continued writing. His later books include works on dreams, symbolism, religion, and love. He eventually settled in California, where he died in 1994.

Anxiety

May considered **anxiety** to be the underlying cause of nearly every crisis, whether domestic, professional, economic, or political. He described the world we live in as an age of anxiety. Even though May published *The Meaning of Anxiety* in 1950, it is safe to say that his concerns are even more relevant today, particularly with the advent of the depersonalization of our world due to the computer age (Reeves, 1977). May considered a wide range of theories on anxiety, including philosophers, neurologists (Kurt Goldstein), and the major psychodynamic theorists (including Freud, Adler, Jung, Horney, Sullivan, and Fromm). He came to the conclusion that Freud had done the best job of explaining anxiety, but it was Kierkegaard who best understood anxiety. May was particularly impressed by Kierkegaard's idea that anxiety must be understood in the context of an orientation toward freedom. Freedom is the goal of personality development, and although this freedom brings with it anxiety, it is through facing this anxiety that the possibility of freedom arises (May, 1950). In praise of Kierkegaard, May wrote:

…Kierkegaard is proclaiming that "self-strength" develops out of the individual's successful confronting of anxiety-creating experiences; this is the way one becomes educated to maturity as a self. What is amazing in Kierkegaard is that despite his lack of the tools for interpreting unconscious material - which tools have been available in their most complete form only since Freud - he so keenly and profoundly anticipated modern psychoanalytic insight into anxiety; and that at the same time he placed these insights in the broad context of a poetic and philosophical understanding of human experience. (pg. 45; May, 1950)

In defining anxiety, May distinguished between anxiety and fear, and between **normal anxiety** and **neurotic anxiety**. According to May, "anxiety is the apprehension cued off by a threat to some value which the individual holds essential to his existence as a personality" (pg. 191; May, 1950). The threat may be either physical or psychological, such as facing death from tuberculosis or being imprisoned in a concentration camp (which, of course, brought the threat of death in addition to the loss of freedom), or the threat may challenge some other value that the individual identifies with their existence or personal identity (such as the loss of a career, a divorce, a challenge to patriotism in time of war, etc.). What differentiates anxiety from fear, is that fear is a reaction to a specific event, whereas anxiety is vague and diffuse. For example, during a robbery you may fear a man with a gun, but in America today many people are anxious about terrorism. No one can tell when or where terrorists may strike, or even whether they will be foreign terrorists (such as in the World Trade Center attacks) or American terrorists (such as the bombing of the federal building in Oklahoma City or the D.C. sniper killings). May carefully pointed out that using the terms "vague" and "diffuse" to describe anxiety should in no way diminish our understanding of the intensity and painfulness that anxiety can bring. Therein lies the difference between normal vs. neurotic anxiety (May, 1950).

Everyone faces challenges in life, but not everyone sees the same challenges as actual threats. Losing one's job can be an opportunity to begin a new career, perhaps to go back to school to pursue that new career. However, the transition is often difficult, especially when one is used to being the primary wage earner in the family, and also if the family has to cut back on items they can no longer afford. So anxiety would be a reasonable reaction. That anxiety is considered normal if it is 1) not disproportionate to the objective threat, 2) does not involve mechanisms of intrapsychic conflict, and 3) does not require defense mechanisms for its management (May, 1950). Normal anxiety is often overlooked in adults since it is not particularly intense, especially compared to neurotic anxiety, and it can be managed constructively. It does not show itself in panic or other dramatic symptoms. Neurotic anxiety is, simply, the opposite of normal anxiety. It is disproportionate to the objective threat, it does require intrapsychic defense mechanisms, and it results in neurotic symptoms in spite of those defense mechanisms. It is important to keep in mind that we should not consider individuals who suffer from neurotic anxiety as suffering from objective weaknesses, but rather they suffer from inner psychological patterns and conflicts that prevent them from using their powers to cope.

True to his training in psychodynamic theory, May believed that the psychological patterns resulting in the inability to cope have their origin in childhood, particularly due to poor early relations between the infant and its parents, since an infant's essential values arise from the security patterns established between the infant and its caregivers (as in Erikson's first psychosocial crisis: trust vs. mistrust, see Chapter 7). One of the most important factors seems to be the infant's subjective interpretation of rejection by its primary caregiver, and that subjectivity is influenced by expectations that form later in life (e.g., middle- and upper-class children, who expect more support from their parents, are especially prone to react to rejection with neurotic anxiety; May, 1950).

Discussion Question 3.11.1

May felt that we must understand anxiety in relation to freedom, or rather, as the fear that we will lose our freedom. He said that some of this anxiety is normal, and only in extreme cases does it become neurotic anxiety. What are some of the situations in your life that make you anxious, and how might they be a threat to your personal freedom? Do you think the level of these anxieties is normal, or is it severe enough to perhaps be considered neurotic?

Culture, Anxiety, and Hostility

May also addressed the effects of culture on anxiety, and the close interrelationship between anxiety and **hostility**. Culture affects both the kinds and the quantities of anxiety experienced by individuals. Beyond the essential relationship between infant and caregiver, the determinants of personality that each of us consider essential to our existence as a personality are largely cultural. Indeed, even the nature of the infant/caregiver relationship is subject to cultural influence. The amount of anxiety most people are likely to experience is determined, in part, by the stability of the culture. For example, if a culture is relatively stable and unified, there will be less anxiety throughout that culture (May, 1950). Today, however, many societies are in dramatic flux, due in large part to the powerful trend toward globalization.

As psychologists have begun to examine anxiety in different groups around the world, a variety of interesting, and sometimes disturbing, results have been found. Keep in mind, however, that these are generalities, and do not necessarily apply to each individual within any group. Generally, Asians are more anxious than Europeans and White Americans, who are more anxious than Black Americans and Africans, and there may be a neurological basis for these relative anxiety levels (Rushton, 1999). However, when looking at the specific form of anxiety related to taking academic tests, Black Americans and Chilean students demonstrate higher levels of test anxiety than White Americans (Clawson, Firment, & Trower, 1981; Guida & Ludlow, 1989). One suggestion for the higher levels of anxiety among Blacks in America is that our society is much less sociocentric than most African cultures. Thus, Blacks in America, even if they have lived here for generations, still experience the effects of their displacement from Africa when the culture they carried with them is at odds with Western cultural expectations (Okeke at al., 1999), and even more so when an individual seems to be at odds with most members of their own cultural group (Copeland, 2006). Indeed, the greater the discrepancy between one's individual cultural expectations and the cultural expectations of the majority of society, the greater the anxiety an individual experiences. This is particularly true during attempts at intercultural communication (Matsumoto & Juang, 2004). Any subsequent breakdown of intercultural communication, which is more likely during periods of high anxiety, can either lead to or enhance pre-existing hostility, prejudice, discrimination, and scapegoating (Whitley & Kite, 2006). One important challenge to intercultural communication in psychology is the need for clinical psychologists to recognize the growing number of anxiety disorders unique to non-Western cultures, such as: **hwa-bung** (Korea), **koro** (Malaysia and Southern China), **nervios** (Latin America), **dhat syndrome** (India), **susto** (Latin America), and **taijin kyofusho** (Japan) (Castillo, 1997).

Culture can influence individuals in a wide variety of ways. May (1950) used the example of competitive individual success in the Western world as his main example, which he considered to be *the* dominant goal in America. There are many negative effects of this competition, including the high incidences of gastric ulcers and heart disease in our society. Less than a decade later, Freidman and Rosenman (1959) published their classic study on the relationship between Type A behavior (studied in highly competitive businessmen) and cardiovascular disease. Subsequent studies have shown that the key component of Type A behavior predictive of heart disease is hostility, which we will discuss in more detail below (Dembrowski et al., 1985; Lachar, 1993; MacDougal et al., 1985). There has also been a great deal of discussion in our society about media influences on body image, the relationship between unreasonable expectations for women to be thin and the incidence of eating disorders in girls and women, and the repression of female sexuality in many cultures. Goldenberg (2005) recently presented an existential perspective on the body itself as a threat. Cultural beliefs often help to overcome fears of mortality by convincing individuals that they are of greater value than other, lower animals. However, despite the beliefs of many that only humans have a soul, our body is still a mortal animal. As a reaction to the anxiety presented by the reality of our mortal body, many people act in a hostile fashion toward their own bodies, ranging from denying themselves healthy physical relationships with others (e.g., sexual repression) to outright self-destructive behavior (e.g., anorexia nervosa). The problem reaches its extreme, however, when one powerful group directs its hostility in an organized fashion toward another group.

The relationship between anxiety and hostility, according to May, involves a vicious circle. Anxiety gives rise to hostility, and hostility gives rise to increased anxiety. But which comes first? May believed that it was anxiety that underlies hostility, and the

evidence can be found in clinical cases involving repressed hostility:

Granted the interrelation between hostility and anxiety, which affect is generally basic? There is ground for believing that, even though hostility may be the specific affect present in many situations, anxiety is often present below the hostility…For one example, in some of the psychosomatic studies of patients with hypertension…it has been found that the reason the patients repressed their hostility was that they were anxious and dependent...The hostility would not have to be repressed in the first place except that the individual is anxious and fears counter-hostility or alienation… (pg. 223; May, 1950)

In Reeves' analysis of May's theory (1977), Reeves discusses one of the most important social issues to have faced the United States: the civil rights movement of the 1960s. When an individual's sense of selfhood is challenged by dramatic changes in society, it can be a very painful experience. And one is likely to resent those responsible for those changes. While it is true that many White people in America supported the civil rights movement, White people in the Deep South (and elsewhere, of course) turned their anxiety, and its associated hostility, toward Blacks. It should not be necessary here to describe the many terrible acts of violence that followed. Suffice it to say that the federal government had to use military troops to intervene in some of the worst cases. Today, we face a similar problem in the war on terrorism. Given the often unequal and unfair manner in which globalization brings vastly different cultures into conflict, and the ease with which so many people can travel the globe, perhaps we should not be surprised at the dramatic level of terrorism in the world today.

Connections Across Cultures: Terrorists and Terrorism

Since September 11, 2001, when agents of the terrorist organization Al Qaeda destroyed the World Trade Center in New York City and killed some 3,000 people, the United States has been involved in what has been called an international war on terrorism. As the war on terrorism developed, it had two main goals: to capture Osama bin Laden, leader of Al Qaeda and mastermind of the World Trade Center bombings, and to overthrow Saddam Hussein, the dictator of Iraq (for his alleged role in supporting international terrorism). To date, this war has lasted much longer than World War II, we have spent hundreds of billions of dollars, and thousands more young American men and women have died fighting in Afghanistan and Iraq. Many Iraqi and Afghan civilians, as well as additional coalition military personnel, have also died. Saddam Hussein was removed from power in Iraq; he was also tried, convicted, and executed. It took nearly 10 years, but Osama bin Laden was finally tracked down and killed in a raid in Pakistan by U.S. Navy Seals. However, Al Qaeda is still committing acts of terrorism, Iraq is descending once again into bitter sectarian violence (rising to the level of civil war), and Americans continue to die fighting in Afghanistan as our intended date for withdrawal slowly draws near (after 13 years!). One thing that will not be addressed in this section, because it does not exist, is an easy answer to these problems.

Please allow me to share a little personal history here. When the Iranian revolution under Ayatollah Khomeini overthrew the Shah of Iran, and the revolutionaries captured the American embassy in Tehran and took sixty-six people hostage (fifty-two of those hostages were held for well over a year before being released), I was in the United States Marine Corps Reserve. I received a phone call at 2:00 a.m. on a Friday morning at my apartment in Cambridge, MA. By midnight, that same day, my reserve unit was in Camp Lejeune, NC, with full combat gear, ready to go to war in Iran. We spent the weekend preparing, though President Carter ultimately chose not to send us overseas. Approximately 10 years later, when the first Gulf War erupted after Iraq invaded Kuwait, my sister took part in Operation Desert Storm. As an Air Force nurse, she was sent to England to help prepare a hospital for wounded military personnel being evacuated from the Middle East (fortunately casualties were minimal). I considered re-enlisting in the Marine Corps at that time, since I certainly wasn't going to sit at home while my own sister "fought" for our country and our allies. Thankfully, that first Gulf War was brief and, seemingly, simple. So I have followed events in the Middle East carefully ever since, and when Al Qaeda attacked us in New York, I saw it as the latest in a continuation of events in my own life since 1979. For people in the Middle East, however, it was a continuation of events that have lasted for thousands of years.

What I believe matters most for Americans today is to begin to make an honest effort to understand terrorism, its causes, its goals, and how best to deal with it around the world. First, we must dispense with misconceptions. Terrorism and Islam are **not** one and the same. In an insightful and easily readable book entitled *Islam versus Terrorism*, Firooz Zadeh (2002) discusses how Islam opposes violence and murder, especially of innocent women and children. He also attempts to identify what is and is not terrorism, and in that effort he identifies eight types of terrorism: state terrorism, religious terrorism, criminal terrorism, terrorism by those who are mentally sick, political terrorism, oppositional terrorism, copy cat terrorism, and victim terrorism. According to Zadeh, the highest cost to society results from state terrorism. When the United States supports corrupt, terrorist governments in other parts of

the world, our credibility as a nation fighting terrorism is suspect at best. Has this been the case? Yes, and in the worst possible way: we switch sides as it serves our political and economic interests. The United States helped to train Osama bin Laden and the Taliban fighters in Afghanistan when we wanted them to fight the Russians. Now we call them enemies. We provided weapons and training to Saddam Hussein's army when they were fighting the Iranians, because of the hostages taken in Tehran. Now we have deposed Hussein. We also sold weapons to Iran, and used the money to help support the Contras (freedom fighters or terrorists, depending on your point of view) trying to overthrow the leftist Sandinista government of Nicaragua. Zadeh proposes that people in the Middle East cannot trust the United States, except in one area: our support of Israel. And since other Middle Eastern countries see Israel as the one obstacle to a Palestinian homeland, they disapprove of that support. It does not matter whether the actions of the United States were right or wrong, whether they really were in our best interests or not. What matters is how the rest of the world sees us now, and whether our top government officials are willing to consider how we are viewed globally and to act responsibly in terms of foreign policy in order to ensure what is best for all people around the world. In addressing the Middle East in particular, Fathali Moghaddam wrote:

Islamic communities in many parts of the world are experiencing a profound and historic identity crisis, one tragic manifestation of which is terrorism. In order to understand and avert this destructive trend, we must come to grips with the monumental crisis of identity that is paralyzing moderate movements but energizing fanatic forces in Islamic communities.

…Why do we need to understand how the terrorists see the world? Because this is the best way for us to find an effective means to end terrorism…Seeing the world from the terrorists' point of view does not mean condoning terrorism; rather, it means better understanding terrorism so as to end it. (pg. ix; Moghaddam, 2006)

As mentioned above, there are many different forms of terrorism, so it is difficult to define exactly what it is. Nevertheless, in an effort to do so, Moghaddam (2005) defines terrorism as "politically motivated violence, perpetrated by individuals, groups, or state-sponsored agents, intended to instill feelings of terror and helplessness in a population in order to influence decision making and to change behavior." Moghaddam suggests that psychologists need to play an important role in understanding terrorism for two main reasons: the basis for terrorist actions is typically subjectively interpreted values and beliefs, and the actions of terrorists are designed to cause specific psychological experiences, i.e., terror and helplessness. Moghaddam (2005, 2006) proposes a metaphor for how one becomes a terrorist, based on climbing a staircase, in which options are perceived to become more and more limited as one climbs the stairs. The most significant factor is the condition in which many people live on the ground floor, before they even consider climbing that staircase. Many people in this world live in abject poverty, under repressive governments that are unjust. When individuals see no hope within the system, and they lack any political means to effect change, then a path toward terrorism becomes perhaps the only reasonable possibility. Still, very few people are likely to become suicide bombers.

Individuals living in desperate conditions may move to the first floor on the staircase toward terrorism, where they evaluate their perceived options to fight unfair treatment. If there appear to be no options for justice within one's society, no opportunity to be heard, and no opportunity for personal mobility, the individual may then move to the second floor. Here the individual begins to displace their aggression. This often involves education/propaganda that identifies a clear target, for example the United States, also known as the "Great Satan." This is the important beginning of an us-versus-them mentality. On the third floor, individuals become morally engaged with the terrorist organization. While we may see terrorists as immoral, they are beginning to believe that they are fighting for a just cause, against the immoral repression of their chosen target. As they move to the fourth floor, they solidify their categorical thinking (the us-versus-them mentality) and begin to see the terrorist organization, and terrorist acts, as legitimate. At this point there is little chance that they can leave the terrorist organization alive. For specific individuals, the training necessary to carry out a terrorist act takes place, often very quickly. Not only does a terrorist need to learn about weapons and tactics, they must also be trained to sidestep the natural, biological inhibition against killing other human beings. Two factors in helping to prepare people to kill are the intense indoctrination in the belief that their actions are for a greater good and secrecy. If an attack is done suddenly and without warning, victims have no opportunity to submit or to beg for mercy. The act occurs before the terrorist might become compassionate as he or she faces their intended victims (Moghaddam, 2005, 2006). Based on this model, Moghaddam proposes four steps that are necessary to stop terrorism by interrupting the formation of new terrorists. First, there must be prevention. Unfortunately, our government has a long history of choosing short-term fixes, rather than long-term preventative measures. Case in point: America's failure in the war on drugs. Aggressive responses aimed at individuals only provide an opening for someone new to step in and continuing using and/or selling drugs, and the same is true of terrorists. We need to work toward eliminating the pathway to terrorism, so we will not need to use the military and/or FBI to track down

individuals (except, of course, in extreme cases such as terrorism that results from psychological disorder - e.g., consider the case of Theodore Kaczynski, the Unabomber). In addition, Moghaddam suggests supporting contextualized democracy, educating against categorical thinking, and promoting interobjectivity and justice. In order for there to be a long-term solution, there must be international dialogue and improved intercultural understanding (Moghaddam, 2005).

Returning to the misconception in the minds of many Americans that terrorism is synonymous with Islam, let's examine where known terrorist organizations are located around the world. Fairly notorious organizations have come from Northern Ireland (e.g., the Irish Republican Army and the Ulster Defense Association), throughout mainland Europe (e.g., the Red Army Faction in Germany, the Red Brigades in Italy, and Action Directe in France), throughout the Middle East (e.g., Hezbollah in Lebanon, the Palestinian group Hamas, the Stern Gang that fought for the establishment of Israel, and Al Qaeda), Africa, Asia, Latin America, Canada, and the United States (e.g., the Animal Liberation Front, Aryan Nations, the Black Panthers, and the Ku Klux Klan). As of 1999, at least twenty-eight well-organized terrorist groups existed, and when one takes into account factions within those groups and smaller, yet still identifiable, groups, as many as eighty-three terrorists groups have been identified around the world (Henderson, 2001). Some are primarily political, and some are primarily religious. Some are global, and some are more local. They include people and cultures of great diversity: Black, White, Asian, Latin, Catholic, Protestant, Muslim, Hindu, etc. Although terrorism appears to arise out of poverty and desperation, terrorists themselves, or at least the leaders, tend to be better educated than most and they are well versed in propaganda and well trained in weapons and tactics (Moghaddam, 2005; Zadeh, 2002). The only characteristic that all terrorists seem to share is an extreme commitment to violence, which arises out of desperation and perceived injustice, and is viewed as the only means to be heard and to effect change.

So can terrorism effect change, is terrorism effective? One can easily find authors who argue that it does indeed work (Dershowitz, 2002) or that it always fails (Carr, 2002). Alan Dershowitz (2002) argues that the very reason terrorism works is everything we have looked at so far: an effort to understand the root causes of terrorism and the terrorists themselves. Accordingly, he says:

We must take precisely the opposite approach to terrorism. We must commit ourselves *never to try to understand or eliminate its alleged root causes*, but rather to place it beyond the pale of dialogue and negotiation. Our message must be this: even if you have legitimate grievances, if you resort to terrorism as a means toward eliminating them we will simply not listen to you, we will not try to understand you, and we will certainly never change any of our policies toward you. Instead, we will hunt you down and destroy your capacity to engage in terror. (pp. 24-25; Dershowitz, 2002)

As a case in point, Dershowitz cites the awarding of observer status at the United Nations to the Palestinian Liberation Organization only after Palestinian terrorists began hijacking commercial airliners. Prior to the hijackings, 20 years of pleading their case to the United Nations had little effect. Dershowitz then offers a timeline that appears to clearly establish an effective relationship in which terrorism became more and more effective over time (from 1968-1999) in eliciting international recognition and support for the Palestinian cause. In contrast, Caleb Carr (2002) views terrorism entirely within the discipline of military history. He considers today's terrorism to be nothing more than a modern permutation of warfare against civilians in order to break their support for either leaders or policies that the terrorists oppose, the origins of which are as old as human conflict itself. Viewing terrorism as warfare has certain interesting implications. Throughout history, those who wage war against civilians ultimately defeated themselves by turning sentiment against them. On 9/11, Al Qaeda attacked civilians to a degree that has not been seen in ages:

…In so doing, the organizers, sponsors, and foot soldiers of every terrorist group involved in the September 11 attacks have unwittingly ensured that their extremist cause will be discredited among many of their sympathizers, disowned by most of their former sponsors, and finally defeated by their enemies: two thousand years of the lessons of terror dictate that this is the ultimate fate that awaits the attackers, no matter how many noncombatants they manage to kill along the way. (pp. 223-224; Carr, 2002).

Carr also addresses the other most important implication of treating terrorism as warfare: it must be met with warfare, but that warfare must not be excessive, such that it might also be viewed as terrorism. If our response to terrorism is excessive military might, then the tide of public opinion can swing back in favor of Al Qaeda, especially in Muslim countries where the United States is not trusted.

Echoing Carr's concerns about the extent and nature of our military actions in the war on terror, one way in which terrorism might work against us, without seeming to have gained what was intended (if we can even know what was intended), is if our fundamental democratic principles change. In *The Lesser Evil: Political Ethics in an Age of Terror*, Michael Ignatieff (2004) argues

that terrorism must be met with force, and that such force is a lesser evil than the terrorism that necessitated the response. The danger lies in succumbing to the greater evil of seeking revenge. Dershowitz (2002) provides a compelling case for how an amoral society could control and possibly eliminate all terrorism, but America is not an amoral society. Our responses are constrained by the constitution and by the political debate that forms the very basis of our democracy. When we respond to terrorist acts, we must consider what we want that response to accomplish:

Terrorism requires us to think carefully about who we are as free peoples and what we need to do in order to remain so. When we are confronted with terrorist violence, we cannot allow the claims of national security to trump the claims of liberty, since what we are trying to defend is our continued existence as a free people. Freedom must set a limit to the measures we employ to maintain it. (pg. 145; Ignatieff, 2004)

Finally, can the ultimate answer to terrorism be found in promoting democratic governments in every nation? The war on terror has led us to depose both Saddam Hussein in Iraq and the Taliban in Afghanistan, and to replace them with democratically elected governments. Only time will tell whether those governments will survive, but there is reason for caution. Religious turmoil continues in the Middle East. In America, our constitution provides for separation of church and state, and that separation has become an important tradition. But for Muslims, the idea of a secular democracy, one that is not guided by Allah, is simply inconceivable. They are not opposed to democracy per se, indeed it has been argued that Islam is likely to eventually lead to pluralist democracies (Aslan, 2005). But to pressure Islamic countries into accepting the secular democracy that we hold so dear is, according to Robert Shedinger (2004), equivalent to declaring war on Islam. So what appears to be essential to promoting stability in the Middle East, and elsewhere, is an effort to support contextual democracy, that is, forms of democracy that fit with the culture of the people who will create and participate in that democracy (Aslan, 2005; Moghaddam, 2005, 2006; Shedinger, 2004; Zadeh, 2002).

Integration and the Human Dilemma

In the preface to *Man's Search for Himself* (May, 1953), May presents the existential philosophy that there is meaning to be found in challenges and suffering, and that psychologists in particular may find a special opportunity in such circumstances:

When our society, in its time of upheaval in standards and values, can give us no clear picture of "what we are and what we ought to be,"…we are thrown back on the search for ourselves. The painful insecurity on all sides gives us new incentive to ask, Is there perhaps some important source of guidance and strength we have overlooked?…How can anyone undertake the long development toward self-realization in a time when practically nothing is certain, either in the present or the future?…The psychotherapist has no magic answers…But there is something in addition to his technical training and his own self-understanding…This something is the wisdom the psychotherapist gains in working with people who are striving to overcome their problems. He has the extraordinary, if often taxing, privilege of accompanying persons through their intimate and profound struggles to gain new integration. (pg. 7; May, 1953)

Integration, according to May, is similar to Heidegger's concept of Dasein (being-in-the-world). As conscious, free, and responsible beings our goal should be to separate ourselves from the conformist, automaton masses (the en-soi, according to Sartre) and progressively integrate with others in freely chosen love and creative work (May, 1953), or as Clement Reeves puts it: "To understand and elucidate the specific, distinguishing characteristics of the human being, and to grasp what it is to achieve courageous, decisive, integrated response to the challenge inherent in existence…" (Reeves, 1977). The process of integration is lifelong, and should be appropriate for whatever age each one of us happens to be right now. May suggests that a healthy child of eight, who is fulfilling his capacity of self-conscious choice for a child of eight years old, is more of a person than a neurotic adult who is 30 years old. Likewise, a person who can face death courageously at the age of thirty is more mature than someone 80 years old who "cringes and begs still to be shielded from reality" (May, 1953). Thus, it is important to live each moment with freedom, honesty, and responsibility. If each of us lives within the present moment, working to fulfill our potential, being true to whom we are and the situations within which we live, May proposes that we will experience joy and gratification:

…*Does not the uncertainty of our time teach us the most important lesson of all - that the ultimate criteria are the honesty, integrity, courage and love of a given moment of relatedness?* If we do not have that, we are not building for the future anyway; if we do have it, we can trust the future to itself. (pg. 276; May, 1953)

One of the challenges to living an integrated life is seen in what May described as the **human dilemma** (May, 1967). Are we the subject of our lives, or are we an object in our world? When we become absorbed in the details of our responsibilities and actions, when we allow ourselves to be controlled and directed in order to accomplish our assigned tasks, when we become slaves to the clock, doing this and that, going here and there, as others expect us to, we are viewing ourselves as objects. This is reminiscent of what Karen Horney called the tyranny of the should. On the other hand, when we consider our feelings, wishes, and desires, when we are true to ourselves, or living authentically, then we are viewing ourselves as subjects, as active participants in our own lives. According to May (1967), the human dilemma arises out of our capacity to experience ourselves as *both* subject and object at the same time. But how can opposite poles of the human experience both be true? It is in the process between the two poles that development of human consciousness develops, both deepening and widening that consciousness. This is essentially the same idea, though in different form, used by Heidegger and Sartre in describing the unique nature of human beings. For Heidegger this nothingness was the undefined distinction between Being and beings, for Sartre it was the shell that surrounded the pour-soi.

May believed that existential psychology occupied a space somewhere between the two extremes that existed, and continue to exist, in psychology: behaviorism vs. humanism. May rejected Skinner's arguments that all human behavior can be understood in terms of stimuli and responses, declaring that there is ample evidence in both clinical practice and everyday life of people being active participants in their view of, actions in, and reactions to their world. He was equally critical of Carl Rogers, believing that humanistic psychologists no longer recognized very real irrational behavior, as well as aggression and hostility (May, 1967). He believed that psychology had become trapped in a misguided desire to define everything scientifically, and according to rules that then determined each psychologist's view of the world and their patients. As a caution to those psychologists who cannot see beyond their theories, May wrote:

Now I am certainly aware, if I may say so without sounding patronizing, that the compelling need for honesty is one of the motives which leads psychologists to seek quantitative measures…I am also aware that research in our day has to be carefully set up so that the results are teachable and can be built upon by others. The compelling drive to get at the truth is what improves us all as psychologists, and is part and parcel of intellectual integrity. But I do urge that we not let the drive for honesty put blinders on us and cut off our range of vision so that we miss the very thing we set out to understand - namely, the living human being. (pg. 14; May, 1967)

discussion question **3.11.2**

May suggested that we need to separate ourselves from the conformist masses, and then integrate ourselves with others in free and responsible ways. Are you a follower, or a leader? Either way, do you consciously choose the role you play, thereby living an authentic life?

Love and Intentionality

Love was a very important topic for May. Simply put, "To be capable of giving and receiving mature love is as sound a criterion as we have for the fulfilled personality" (May, 1953). He was certainly not alone. Harry Harlow, best known for his studies on **contact comfort**, described love as "a wondrous state, deep, tender, and rewarding," and Abraham Maslow said "We *must* understand love; we must be able to teach it, to create it, to predict it, or else the world is lost to hostility and to suspicion" (Harlow, 1975; Maslow, 1975). However, there are "a million and one" types of relationships that people call love, so it remains a perplexing issue (May, 1953).

May talked about four types of love in Western tradition: **sex**, **eros**, **philia**, and **agape** (May, 1969). Sex and eros are closely related, but they are different. Sex is what we also call lust or libido, whereas eros is the drive of love to procreate or create. As changes in society allowed the more open study of sex, prompted by the work of people like Sigmund Freud and Wilhelm Reich, May noted three particular paradoxes. First, our so-called enlightenment has not removed the sexual problems in our culture. In the past, an individual could refrain from sexual activity using the moral guidelines of society as an explanation. As casual sex became common, even expected, individuals had to face expressing their own morality as just that: their own! This also created a new source of anxiety for some, namely the possibility that their personal relationships might carry an expectation of sexual activity, and that if they did not comply they might not be able to continue dating someone they liked. The second paradox is that "*the new*

emphasis on technique in sex and love-making backfires" (May, 1969). Emphasizing technique (or prowess) can result in a mechanistic attitude toward making love, possibly leading to alienation, feelings of loneliness, and depersonalization. This can lead to the anticipatory anxiety described by Frankl. Finally, May believed that our sexual freedom was actually a new form of Puritanism. There is a state of alienation from the body, a separation of emotion from reason, and the use of the body as a machine. Whereas in the Victorian era people tried to be in love without falling into sex, today many people try to have sex without falling in love.

Philia and agape are also related to one another, as with sex and love. Philia refers to feelings of friendship or brotherly love, whereas agape is the love devoted to caring for others. Friendship during childhood is very important, and May believed it was essential for meaningful and loving relationships as adults, including those involving eros. Indeed, the tension created by eros in terms of continuous attraction and continuous passion would be unbearable if philia did not enter into the equation and allow one to relax in the pleasant and friendly company of the object of one's desires. Harry Harlow, once again, showed that the opportunity to make friends was as essential in the development of young monkeys as it appears to be in humans (cited in May, 1969). In the West, however, given our highly individualistic and competitive society, deep, meaningful friendships seem to be something of the past, especially among men. May cautions, however, that since the evidence shows the importance of friendship during development perhaps we should remember the value of having good friends.

Finally we have agape, a selfless love beyond any hope of gain for oneself. May compared this love to the biological aspect of nature in which a parent will fight to the death in defense of their offspring. With agape, we run the risk of being like God, in the sense that we know others never act without some degree of their own interests in mind. Similarly, we don't want to be loved in an ethereal sense, or on the other hand only for our body. We want to be loved completely. So, all true
love involves some element of the other types of love, no matter how little or how obscured it may be (May, 1969).

Figure 3.11.1

Agape is exemplified in the bond between a parent and their child.

In the foreword to *Love and Will* (May, 1969) May acknowledged that some of his readers might find it odd that he combined the two topics in one book, but he felt strongly that the topics belong together. He considered both love and will to be interdependent, they are processes in which people reach out to influence others, to help to mold and create the consciousness of others. Love without will is sentimental and experimental, whereas will without love is manipulative. Only by remaining open to the influence of others can we likewise influence them, so love must have an honest purpose, and purpose must be taken with care.

Will, or **will power** as it is more commonly known, was one of the earliest subjects in American psychology, having been examined in detail by William James as early as 1890 (see James, 1892/1992) and again in 1897 in *The Will to Believe* (James, 1897/1992). May considered Sigmund Freud's greatest discovery to be the uncovering of unconscious desires and motives. Although many people may believe themselves to be acting out of higher ideals, most of us are, in reality, acting according to psychologically determined factors of which we are unaware. Nonetheless, May considered this to be one of the most unfortunate results of Freud's work. By accepting determinism, we undermine the influence of will and making decisions. As May put it, Freud's theory suggests that we are "not *driving* any more, but *driven*" (May, 1969).

The suggestion that we are no longer in charge of our own lives, that we are driven by psychological determinism, seems strange to those who believe that never before have people had such power, both in terms of individual freedom and in the collective conquest of nature. But May referred to a **contradiction in will**, the contrast between our feelings of powerlessness and self-doubt and the societal assurances that we can do anything we set our minds to. May believed that we exist in a "curious predicament," in that the technical wonders that make us feel so powerful are the very same processes that overwhelm us (May, 1969):

Thus, the crisis in will does not arise from either the presence or absence of power in the individual's world. It comes from the contradiction between the two - the result of which is a paralysis of will. (pg. 189; May, 1969)

Will alone is not the driving force that leads us to responsible and authentic lives. Underlying will is something May called **intentionality**. Intentionality is the structure that gives meaning to experience, it is both how we perceive the world and how the world can be perceived by us. In other words, through our perceptual processes we influence the world around us; we affect the very things that we perceive. Intentionality is a bridge between subject and object (May, 1969). Compare this once again to the nothingness between beings and Being (à la Heidegger), or between the en-soi and the pour-soi (à la Sartre). Still, our ability to

reach and form the very objects that we perceive, in other words, to participate actively in our lives, can be dramatically curtailed by the problem addressed by May early in his career, anxiety:

Overwhelming anxiety destroys the capacity to perceive and conceive one's world, to reach out toward it to form and re-form it. In this sense, it destroys intentionality. We cannot hope, plan, promise, or create in severe anxiety; we shrink back into a stockade of limited consciousness hoping only to preserve ourselves until the danger is past. (pp. 244; May, 1969)

discussion question 3.11.3

Consider the different loves in your life. How do they differ? How have they brought meaning to your life? Has your view of what love is changed during your life, in either good or bad ways?

The Daimonic: Source of Violence and Creativity

The **daimonic**, according to May, is "any natural function which has the power to take over the whole person" (May, 1969). It can be either destructive or creative, and is often both. In this way it is similar to Jung's concept of the shadow, and May himself made that comparison (May, 1991; see also Diamond, 1996, Reeves, 1977). In fact, it is the mixture of good and evil in the daimonic that protects us from the dangers of excess, whether excess good or the passivity of feeling powerless. When May did not know whether he would live or die from tuberculosis, he realized that his feelings of helplessness were turning into passivity, and that this was sure to lead to his death (as he had seen with others). He described this experience as the product of his innocence, and that because he was innocent he allowed the bacteria infecting his body to do violence to him. However, when he chose to fight the disease, when he asserted his will to live, he began to make steady progress and, indeed, he recovered. In this sense, May had chosen to allow the daimonic to take over his self in the interest of self preservation. In each instance, how one allows the daimonic to take over is influenced by personal responsibility (Reeves, 1977).

When the daimonic takes over without one having made a responsible choice, however, it can lead to violence toward others. Our lives often involve conflict between those who have power and those who do not. When a person feels powerless, helpless, insignificant, they can lash out under the control of the daimonic. According to May, violence is bred in impotence and apathy (May, 1972). This can be particularly important for those who have little or no advantage in our society. In *Power and Innocence* (May, 1972), May described a patient who was a young, Black woman. Being both Black and female, born before the civil rights movement, she was about as powerless as one could be in America. Her stepfather had forced her to serve as a prostitute for years. Although quite intelligent, and successful in school and college, she felt so helpless that May described her as having "no active belief that she deserved to be helped." An important aspect of therapy for this patient was to get in touch with her anger, to get in touch with the violence that had been done to her and that she wished to do to others.

In considering the case of this young woman, May concluded that we must not simply condemn all violence and try to eliminate even the possibility of it. To do so would be to take away a part of full humanity. In this context, May criticizes humanistic psychology and its emphasis on fulfilling self-actualization, an emphasis that May felt moved toward greater moral perfection. However, the recognition that we are not perfect, that each of us has good and evil within, prohibits us from moral arrogance. Recognizing this leads to the restraint necessary for making forgiveness possible.

Our ability to achieve good is dependent on who we are, and who we are is based partly on our own **creativity**. Since humans are not simply driven by instinct and fixed action patterns, in contrast to every other creature on earth we must create ourselves. This creation must take place within the world that exists around us, and must take into account all of the emotions and predispositions that we do carry with us as biological organisms.

Art - and creative activities of all kinds - can provide comparatively healthy outlets for the constructive expression of anger and rage. Creativity cannot, however, always substitute for psychotherapy. Nevertheless, creativity is at the very core of the psychotherapeutic project: The patient is encouraged to become more creative in psychologically restructuring his or her *inner* world, and then to continue this creative process in the *outer* world, not only by accepting and adjusting to reality, but, whenever possible, by reshaping it…

"Creativity" can be broadly defined as *the constructive utilization of the daimonic*. Creativity is called forth from each one of us by the inevitable conflicts and chaos inherent in human existence… (pp. 255-256; Diamond, 1996)

Pursuing this creativity is not easy, however. We live in a world that is rapidly changing. Since May's death in 1994 change in the world has probably even accelerated. May asked whether we would withdraw in anxiety and panic as our foundations where shaken, or would we actively choose to participate in forming the future (May, 1975). Choosing to live in the future requires leaping into the unknown, going where others have not been, and therefore cannot guide us. It involves what existentialists call the anxiety of nothingness (May, 1975). Making this bold choice requires **courage**. One of the reasons we need to be courageous is that we must fully commit ourselves to pursuing a responsible creation of the future, but at the same time we must recognize that sometimes we will be wrong. Those who claim they are absolutely right can be dangerous, since such an attitude can lead to dogmatism, or worse, fanaticism (May, 1975).

Finally, not only must we accept that we might make bad choices, we must also recognize that our creativity is limited. In *The Courage to Create* (May, 1975), May described having attended a conference where the introductory speaker declared that there is no limit to the possibilities of the human being. Following this statement, the discussion at the conference was a flop. May realized that if there is no limit to what we can accomplish, then there really aren't any problems any more, we only need to wait until our potentiality catches up with our situation and the problem solves itself. May offered a rather amusing example to clarify this point:

…it is like putting someone into a canoe and pushing him out into the Atlantic toward England with the cheery comment, "The sky's the limit." The canoer is only too aware of the fact that an inescapably real limit is also the bottom of the ocean. (pg. 113, May, 1975)

Another inescapable limit is our death. There is no creative act that can change the fact that we will die someday, and that we cannot know when or how it will happen. May believed, however, that these limits are valuable, that creativity itself needs limits. He proposed that consciousness arises from our awareness of these limits, and from the struggle against these limits. May compared this concept to Adler's theory that much of what we as individuals, and also society as a whole, are arises from our efforts to compensate for inferiority. Thus, our limits lead to what May called a **passion for form**. In its passion for form, the mind is actively forming and re-forming the world in which we live (May, 1975).

✔ discussion question **3.11.4**

May believed that creatively taking charge of your life required courage. Have you ever had to make a really difficult decision? Did you take the easy way out, or the safe path, or did you make a bold decision that offered great opportunity?

The Cry for Myth

As a practicing psychoanalyst I find that contemporary therapy is almost entirely concerned, when all is surveyed, with the problems of the individual's search for myths. The fact that Western society has all but lost its myths was the main reason for the birth and development of psychoanalysis in the first place. (pg. 9; May, 1991)

The preceding quote is how May began *The Cry for Myth*, the last book of his career (May, 1991). According to May, the definition of a **myth** is quite simple: it "is a way of making sense in a senseless world." In addition, myths give substance to our existence. In a healthy society the myths provide relief from neurotic guilt and excessive anxiety, and so a compassionate therapist will not discourage them. In the twentieth century, especially in Western culture, we have lost our myths, and with them we have lost our sense of existence and our direction or purpose in life. The danger in this is that people are then susceptible to cults, drugs, superstition, etc., in a vain effort to replace that purpose (May, 1991).

As we pass through the experiences of our lives, our memory is dependent mainly upon myth. It is well accepted today that human memory is constructive, and influenced by our expectations of memory. As May describes it, the formation of a memory, regardless of whether it is real or fantasy, is molded like clay. We then retain it as a myth, and rely on that myth for future guidance in similar situations. For example, an infant is fed three times a day and put to bed 365 days a year, and yet they remember only one or two of these events from their years of early childhood. For whatever reason, good or bad, these specific events take on mythic proportions and greatly influence the course of our lives. May acknowledges the contribution of Alfred Adler in recognizing the

value of these early memories, describing Adler as “a perceptive and humble man, he was gifted with unusual sensitivity for children” (May, 1991). As we have seen, Adler considered the basis for neurosis to be a lack of social interest. In therapy, Adler focused on the “guiding fiction” of a child’s life, something May considered to be synonymous with a “myth.” Since “memory is the mother of creativity,” and memory depends upon myth, May believed that the myths that form the identity of our culture are essential for the formation of our self.

May ends his final book with a chapter entitled *The Great Circle of Love*. Having covered a variety of famous myths in the book, including Dante’s *Divine Comedy*, Marlow’s *Faust*, Captain Ahab in *Moby Dick*, and Poe’s *The Raven*, May concludes:

In each of these dramas the liberation of both woman and man is possible only when each achieves a new myth of the other sex, leading to a new significant psychological relationship. They are both then liberated from their previous empty and lonely existence. The woman and the man find their true selves only when they are fully present to each other. They find they both need each other, not only physically but psychologically and spiritually as well. (pg. 288; May, 1991)

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3.12: Existential Psychotherapy

Existential psychotherapy is not so much a technique as it is an overall approach to understanding the nature of the human being. By asking deep questions about the nature of anxiety, loneliness, isolation, despair, etc., as well as about creativity and love, existential psychotherapists seek to avoid the "common error of distorting human beings in the very effort of trying to help them" (May & Yalom, 1995). May believed that American psychology has had both an affinity for and an aversion to existential psychotherapy. The affinity arises from an historical place in American psychology that was very similar to existentialism: William James' emphasis on the immediacy of experience, the importance of will, and the unity of thought and action. The aversion arises from the Western tendency to dehumanize people through strict adherence to scientific principles of research, i.e., to reform humans in the image of machines (May, 1983).

An essential aspect of existential psychotherapy is to help individuals realize their own being, their own role in choosing the form that their life will take. This is known as the **"I-Am" experience**. It is all too common for us to associate ourselves with external factors: I am a professor, I am a student, I work at a store, I run a business, etc. We repress our own sense of being. To use an example similar to a case described by May: I am a professor, but that is not really who I am. I am a father and a husband, but that isn't all that I am. I have a family and a career, but that isn't quite it either. What is left, or what is common in each of these statements? I am! And as May put it, if I am, I have a right to be (example cited in May & Yalom, 1995). This realization is not the solution to my problems, but it is a necessary precondition to finding the courage to pursue the rest of my life.

Once an individual finds the courage to recreate their life, the existential therapist will address a variety of issues. As discussed above, May placed a great deal of emphasis on anxiety. Guilt is also an important issue to be addressed, since we may feel guilty about poor ethical choices or instances when we failed to be responsible with our actions. As with anxiety, guilt can be normal (after actually doing something bad) or neurotic (when we fantasize some transgression). Both anxiety and guilt affect how we experience Kierkegaard's concept of being-in-the-world. Our world can be viewed in several different ways, however. There is the **Umwelt** (the world around), the **Mitwelt** (the with-world), and the **Eigenwelt** (the own-world). The Umwelt is the world around us, the natural environment. It encompasses our biological needs, and the unavoidable reality that we will die one day. The Eigenwelt refers to our self-awareness and our ability to relate to our selves, and it is uniquely human (May & Yalom, 1995).

The Mitwelt bears a special relationship to another important concept in existential psychotherapy: **time**. Because we tend to think about ourselves spatially, as objects within our life, we tend to focus on the past. In other words, we focus on what we have become, as opposed to what we might be. Moments when we truly encounter ourselves are rare, but it is only when we grasp the moment that we truly experience life. Those moments can be positive, such as the experience of love, or negative, such as the experience of depression, but they are real nonetheless. The Mitwelt contains the inner meaning of the events that occur in our lives. Individuals who suffer from brain damage often cannot think in terms of abstract possibilities, they become trapped in concrete time. In order to be fully healthy, and something essential to the growth of humans, is our ability to transcend time:

If we are to understand a given person as existing, dynamic, at every moment becoming, we cannot avoid the dimension of transcendence. Existing involves a continual emerging, in the sense of emergent evolution, a transcending of one's past and present in order to reach the future. (pg. 267; May & Yalom, 1995)

Although the content described above might seem very different from the type of psychoanalysis described by Freud, the general process of existential psychotherapy is similar to psychoanalysis. It is accepted that the client experiences anxiety, that some of this anxiety is unconscious, and that the client is relying on defense mechanisms in order to cope with the anxiety. A fundamental difference, however, is the focus of the therapy. Rather than digging into the deep, dark past, the existential psychotherapist strives to understand the meaning of the client's current experiences, the depth of experience in the given moment. For this reason, the therapist-client relationship remains important, but the emphasis is not on transference. Rather, the emphasis is on the relationship itself as fundamentally important (May & Yalom, 1995).

Discussion Question: Have you ever had an "I-Am" experience?

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3.13: Buddhism and Existentialism- The Completion of a Circle

Buddhism is by far the oldest theory of psychology that we will cover in this book. Applied existentialism, particularly the work of Rollo May, is one of the more recent developments in psychology. And yet, these two approaches share a great deal in common, a fact readily acknowledged by May:

…The likenesses between these Eastern philosophies and existentialism go much deeper than the chance similarity of words. Both are concerned with ontology, the study of being. Both seek a relation to reality which cuts below the cleavage between subject and object. Both would insist that the Western absorption in conquering and gaining power over nature has resulted not only in the estrangement of man from nature but also indirectly in the estrangement of man from himself. The basic reason for these similarities is that Eastern thought never suffered the radical split between subject and object that has characterized Western thought, and this dichotomy is exactly what existentialism seeks to overcome. (pp. 58-59; May, 1983)

In Japan there is a form of psychotherapy, known as **Morita**, which emphasizes the treatment of anxiety. The treatment consists of acceptance, reattribution, dereflection, and active engagement. The dereflection mentioned is the same technique developed by Viktor Frankl. The active engagement continues this effort at distracting the client from their anxiety, hopefully breaking them out of the circle of anticipatory anxiety and subsequent failure described by Frankl. This procedure has proven both successful and, consequently, influential amongst Japanese psychotherapists. A second Japanese technique, **Naikan**, combines a more traditional Buddhist approach with elements of existential psychology. The client is directed to reflect intensely on their past relationships, and then to consider what they have done for others, what others have done for them, and the difficulties they have caused for others. The goal is to help the client recognize the interdependence of humans, and to appreciate whether or not they, as well as others, have acted responsibly within the relationships. By confronting feelings of guilt and unworthiness, it is hoped that the client will realize that they have been loved and appreciated nonetheless (Walsh, 1995).

Belinda Siew Luan Khong (2003) has examined the role of responsibility in a particular form of existential psychotherapy known as **daseinsanalysis** (developed by the Swiss psychiatrist Medard Boss and grounded in the philosophy of Heidegger) and compared it to Buddhist practice in the Theravadan tradition. She found that daseinsanalysis and Buddhist practices share much in common, and that both have something to offer to each other:

…An integration of these two disciplines will make their ideas and practices more accessible to communities outside their traditional domains. The daseinsanalytic and Buddhist perspectives relating to personal and social responsibility provide us with valuable philosophical and psychological insights into this very important human phenomenon and show us practically how individuals can be assisted in taking responsibility for every moment of their existence, and to develop a sense of respond-ability to different situations. (pg. 158; Khong, 2003)

Stephen Batchelor, a former Buddhist monk turned author and teacher, has presented existentialism as an interesting approach to the primary problem facing Buddhism in America today (Batchelor, 1983). According to Batchelor, Buddhism in the west is split between those who wish to follow a traditional path (emphasizing meditation and practice) and those who insist upon an academic approach to the analysis and understanding of Buddhism. Between the two approaches lies a great chasm. As we have seen, existentialism draws its deepest and most meaningful philosophy from nothingness, be it the distinction between Being and beings (Dasein, according to Heidegger) or the shell separating the pour-soi from the en-soi (as proposed by Sartre). Drawing primarily from his Buddhist training and the philosophy of Heidegger and Tillich (see below), Batchelor contrasts **being-alone** and **being-with.** We are essentially alone at birth and at death, in that we cannot share the experience with others, and this leads to unavoidable anxiety throughout our lives (though not necessarily overwhelming anxiety for most people). As we will see in the next chapter, the first noble truth of Buddhism is that human life is suffering. But just as much as we are alone, we are unavoidably linked to others as well. What matters then, is that we experience authentic **being-with-others**, and the root of authentic being-with is concern for others (as opposed to the inauthentic distortion of self-concern; Batchelor, 1983).

The genuine welfare of man, of both oneself and others, is found in the optimum actualization of the potentialities of his being. To exist in the fullest possible way in our aloneness as well as in our relations with others is the fulfillment of the inner aim of human life…(pg. 88; Batchelor, 1983)

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3.14: Some Final Thoughts

Jean-Paul Sartre's *Being and Nothingness* (1943) is considered the defining text of modern existentialism. Sartre was an atheist, so the brief introduction to existentialism in this chapter went in the direction of atheism. However, Frankl and May were not atheists, and one of May's most influential mentors, as well as a close personal friend, was Paul Tillich. Tillich remains a well-known and respected existential philosopher in the spiritual tradition. May went so far as to say that Tillich' book *The Courage to Be* might be the best and most understandable presentation of existentialism as an approach to life that has been written in English (May, 1983).

It is also interesting to note that both Frankl and May were significantly influenced by Alfred Adler. Frankl worked closely with Adler for a time, and May took a summer course with Adler. Both cite Adler regularly in their writings. Adler's focus on the childhood struggle against one's own inferiority, his emphasis on social interest as a responsible means to superiority, and his recognition of the dangers inherent in seeking superiority at the expense of others, all fit well with the existential perspective on making responsible choices in living one's life. This point emphasizes, once again, the profound influence that Adler has had on psychology, and that he is in all probability the most under-recognized figure in the history of psychology.

In 1897, William James published an essay entitled Is *Life Worth Living?* (James, 1897/1992). James begins by describing how some people see the value in life, indeed they fully enjoy life, no matter what happens to them or around them. However, for most people this is not the case, and there is no magic way to give everyone such an optimistic point of view. So, James presents a series of arguments that one might use with suicidal people (that is the term he uses) in order to convince them that life is worth living. He relies heavily on religious faith, though not on any particular religion, but also leads into a discussion of existential thought. Approximately a decade before Frankl and May were even born, James wrote the following words:

…Suppose, however thickly evils crowd upon you, that your unconquerable subjectivity proves to be their match, and that you find a more wonderful joy than any passive pleasure can bring in trusting ever in the larger whole. Have you not now made life worth living on these terms?…This life *is* worth living, we can say, *since it is what we make it, from the moral point of view*, and we are determined to make it from that point of view, so far as we have anything to do with it, a success…These, then, are my last words to you: Be not afraid of life. Believe that life *is* worth living, and your belief will help create the fact. (pp. 501-503; James, 1897/1992)

The challenges that we all face in trying to live authentic lives, the challenges of making responsible and ethical choices that are true to who we ourselves are, can be difficult. In a fascinating book entitled *Not a Genuine Black Man*, Brian Copeland (2006) talks about his family's racial struggles during the civil rights movement and the difficulties he faces today as a Black man who has adopted many so-called "White" cultural values. Copeland insists, however, that we cannot so easily claim that any given value or personal interest belongs only to one group of people:

…When all is said and done, I AM indeed a Genuine Black Man - because I am resilient. That's what being black in America is truly about: resilience…I stayed on my feet through taunts and harassment, through police intimidation and bigoted nuns, through schoolyard bullies and Sylvester, through my mother's death and bouts of sometimes crippling depression. I am still standing.

I am black because, as my friend Mr. Wilkins once told me, people should be called what they *want* to be called. I have the right and the ability to determine my identity regardless of what other blacks or whites say. I am not an "oreo," nor am I "still a nigger." I am a man. I am a black man.

No one person or group of individuals holds the monopoly on what in this society is the "true" black experience. My world is as "black" as that of Malcolm X, Colin Powell, Snoop Dogg, Jesse Jackson, Usher, Bill Cosby, or Diddy. As their experiences in America are unique, mine is unique - yet it is the same. It is as valid as that of the poor African American living in "the 'hood," the rich black rapper balancing a lifestyle of fame and violence, and the black scholar working to better this world through academic dissertation. It is as authentic as the experiences of those who marched with Dr. King for civil rights and those who defy the black community by arguing the conservative point of view.

It is the "true" black experience because it is my experience… (pp. 243-244; Copeland, 2006)

? discussion question 3.14.1

Brian Copeland talked about how difficult it can be to live an authentic life when you don't meet the expectations of others. Have you ever gone against the advice of family or friends? Did it prove to be the right decision, or did it at least help you to feel better about your own confidence in yourself?

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3.15: Personality Theory in Real Life

The Application of Frankl's Theories to the Workplace and Everyday Life

In 1989, Stephen Covey published *The 7 Habits of Highly Effective People*. Covey's book became very popular, selling millions of copies on the way to becoming a #1 New York Times bestseller. If you were to read the first chapter of that book now, it would seem very familiar. Covey presents a very existential approach to understanding our lives, particularly with regard to the problems we experience every day. Perhaps it should not be surprising, then, that in the chapters describing the first two of these seven habits he cites and quotes Viktor Frankl numerous times. Indeed, Covey cites Frankl's first two books as being profoundly influential in his own life, and how impressed Covey was having met Frankl shortly before Frankl's death (see Covey's foreword in Pattakos, 2004).

The first two habits, according to Covey, are: 1) be proactive, and 2) begin with the end in mind. He briefly describes Frankl's experiences in the concentration camps, and refers to Frankl's most widely quoted saying, that Frankl himself could decide how his experiences would affect him, and that no one could take that freedom away from Frankl! People who choose to develop this level of personal freedom are certainly being proactive, as opposed to responding passively to events that occur around them and to them. It is not necessary, of course, to suffer such tragic circumstances in order to become proactive in one's own life:

…It is in the ordinary events of every day that we develop the proactive capacity to handle the extraordinary pressures of life. It's how we make and keep commitments, how we handle a traffic jam, how we respond to an irate customer or a disobedient child. It's how we view our problems and where we focus our energies. It's the language we use. (pg. 92; Covey, 1989)

Covey compares his habit of beginning with the end in mind to logotherapy, helping people to recognize the meaning that their life holds. Covey works primarily in business leadership training, so the value of working toward a greater goal than simply keeping a company in business from day to day is clear, especially for those who care about employee morale and quality control (see also *Principle-Centered Leadership*; Covey, 1990). When employees share a sense of purpose in their work, they are likely to have higher intrinsic motivation. Think about it for a moment. Have you ever had a job you didn't really understand, and didn't care about? Have you ever been given that sort of homework in school or college? So, how much effort did you really put into that job or assignment?

Covey's remaining habits are: 3) put first things first, 4) think win/win, 5) seek first to understand, then to be understood, 6) synergize, and 7) sharpen the saw. At first glance these principles seem reasonably straight forward, emphasizing practical and responsible actions. However, what does "sharpen the saw" mean? Sharpening the saw refers to keeping our tools in good working order, and we are our most important tool. Covey considers it essential to regularly and consistently, in wise and balanced ways, to exercise the four dimensions of our nature: physical, mental, social/emotional, and spiritual. By investing in ourselves, we are taking care to live an authentic life.

More recently, Covey has examined his principles beyond the business world. In 1997 he published *The 7 Habits of Highly Effective Families*, a book in which he applies the same 7 habits to family life. Covey certainly has solid credentials as a family man, as father of 9 and grandfather of 43 children, and he won the 2003 Fatherhood Award from the National Fatherhood Initiative. Drawing in large part on his own extensive, personal experience, Covey uses many stories, anecdotes, and examples of real-life situations to help provide context to the challenges of raising a family and how we might best work with them. But first, he introduces a simple process: have a clear vision of what you want to accomplish, have a plan of how you might accomplish it, and use a compass (your own unique gifts that enable you to be an agent of change in your family). In essence, Covey is recommending that you prepare yourself to develop the seven habits. We all know how difficult it is to establish a new habit or break a bad habit; how is your New Year's resolution going?

Just as families change, so does the world we live in. Recently, Covey addressed this change by proposing an eighth habit (Covey, 2004). He says that this was not simply an important habit he had overlooked before, but one that has risen to new significance as we have fully entered the age of information and technology in the twenty-first century. As communication has become much easier (e.g., email), it has also become less personal and meaningful. Thus the need for the eighth habit: find your voice and inspire others to find theirs. According to Covey, "voice is unique personal significance." Essentially, it is the same as finding meaning in one's life, and then helping others to find meaning in their own lives. It is through finding a mission or a purpose in life that we can move "from effectiveness to greatness" (Covey, 2004).

Whereas Covey presented an approach to personal and professional effectiveness (and later to greatness as well) that parallels the principles set forth by Viktor Frankl, Alex Pattakos very directly applies Frankl's theories to both the workplace and one's everyday life in *Prisoners of Our Thoughts: Viktor Frankl's Principles* at Work (with a foreword by Stephen Covey; Pattakos, 2004). Frankl himself urged Pattakos to publish his book during a meeting in 1996. Pattakos, like Covey, has been profoundly influenced by Frankl's writings throughout Pattakos' career. According to Pattakos, we are creatures of habit, and we prefer a life that is both predictable and within our comfort zone. As the world is changing in the twenty-first century, so the conditions under which we work are changing. Pattakos believes there is a need for humanizing work. More than just balancing one's personal life and career, humanizing work is an attempt to honor our own individuality and to fully engage our human spirit at work. Simply put, it is an effort to apply Frankl's will-to-meaning in our workplace (Pattakos, 2004).

Like Covey, Pattakos presents seven core principles. They are similar to Covey's seven habits, but in keeping with Pattakos' intentions they are aligned more directly with the principles of logotherapy and existential psychology described by Frankl. The seven core principles are: 1) exercise the freedom to choose your attitude, 2) realize your will-to-meaning, 3) detect the meaning of life's moments, 4) don't work against yourself, 5) look at yourself from a distance, 6) shift your focus of attention, and 7) extend beyond yourself. These principles include not only the ideas of personal freedom and will-to-meaning, but also dereflection (principles 4 and 6) and the will-to-ultimate-meaning (principle 7). Clearly Pattakos

has accomplished his goal of applying logotherapy to the workplace, but how well does this application work in real life?

Pattakos describes the case of a probation officer with the state department of corrections. Rick, as Pattakos identifies him, was raised in foster care and orphanages. However, rather than developing a sense of caring and concern for others who have difficulties in their lives, Rick refers to his clients as "maggots." Rick has become insensitive and unforgiving, he has also become deeply depressed and anxious. Overall, he feels lost, unhappy, and unfulfilled, and he doesn't know what to do about it. According to Pattakos, he has become a prisoner of his own thoughts, and only he has the key to his own freedom. Very simply put, he needs to find a new job or find meaning in the one he has now. One possibility is for Rick to consider his own life circumstances in relationship to his clients:

…Whenever we stop long enough to connect to ourselves, to our environment, to those with whom we work, to the task before us, to the extraordinary interdependence that is always part of our lives, we experience meaning. Meaning is who we are in this world. And it is the world that graces us with meaning. (pg. 157; Pattakos, 2004)

By making a responsible choice to seek meaning in our lives, to not work against ourselves, we can put ourselves on a path we had not seen before:

When we live and work with meaning, we can choose to make meaning, to see meaning, and to share meaning. We can choose our attitudes to life and work; we can choose how to respond to others, how to respond to our jobs, and how to make the very best of difficult circumstances. We can transcend ourselves and be transformed by meaning. We can find connection to meaning at work, in the most unusual places and with the most unexpected people. Meaning is full of surprises. (pg. 159; Pattakos, 2004)

And finally, it does not matter what sort of job we have. It is our choice, our freedom:

No matter what our specific job might be, it is the *work* we do that represents who we are. When we meet our work with enthusiasm, appreciation, generosity, and integrity, we meet it with meaning. And no matter how mundane a job might seem at the time, we can transform it with meaning. Meaning is life's legacy, and it is as available to us at work as it is available to us in our deepest spiritual quests. We breathe, therefore we are - spiritual. Life is; therefore it is - meaningful. We do, therefore we work.

Viktor Frankl's legacy was one of hope and possibility. He saw the human condition at its worst, and human beings behaving in ways intolerable to the imagination. He also saw human beings rising to heights of compassion and caring in ways that can only be described as miraculous acts of unselfishness and transcendence. There is something in us that can rise above and beyond everything we think possible… (pg. 162; Pattakos, 2004)

discussion question **3.15.1**

Stephen Covey and Alex Pattakos have applied Frankl's theories to both the workplace and our everyday lives. How well do you think the principles of existential psychology can

> address the problems that you face at work, home, school, etc.? Is it ever really as simple as applying one's will and choosing to act responsibly? Do you live an authentic life?

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3.16: Chapter Summary

Review of Key Points

- Rogers believed that each person exists in their own, unique experiential field. Only they can see that field clearly, although even they may not perceive it accurately (incongruence).
- The self is that portion of the experiential field that is recognized as “I” or “me.” It is organized into a self-structure.
- In order for a person to grow, they must fulfill a need for positive regard. This can only come from receiving unconditional positive regard from important family members and friends (typically beginning with the parents).
- When an individual’s self-regard and positive regard are closely related, the person is said to be congruent. If not, they are said to be incongruent.
- Rogers described individuals who are congruent and continuing to grow as fully functioning persons.
- Successful marriages, according to Rogers, seem to be based on dedication/commitment, communication, dissolution of roles, and maintaining each person’s separate self.
- Rogers extended his study of clinical psychology into other groups designed to help all people grow and self-actualize, such as T-groups and encounter groups. He described his shift from purely clinical work to fostering growth in all people as a person-centered approach.
- Values were very important to Maslow in his approach to psychology. He did not, however, advocate his own values. He reached beyond humanistic psychology to include areas of study such as existential psychology, existential theology, and Zen Buddhism.
- The lower needs can be described as deficiency-needs, whereas self-actualization is a Being-need.
- Maslow described fourteen characteristics of self-actualizing people. He developed his list by studying both contemporary and historical people who seemed to him to be self-actualizing.
- Maslow described two defense mechanisms that interfere with the process of self-actualizing: desacralizing and the Jonah complex.
- Some individuals experience profound peak experiences, which Maslow described as transcendent. His concept of transcendence seems very close to the Buddhist perspective of interbeing.
- When Eupsychian management does support self-actualization, the actualization of each person benefits the others around them. The process is known as synergy.
- Murray based “personology” on the study of needs. He distinguished between viscerogenic needs and psychogenic needs.
- Murray believed that a person’s ability to create a story around a picture in the TAT was based in large part on their personal mythology. He shared this interest in myth, and its role in psychology, with Carl Jung and Rollo May.
- The distinction between humanistic psychology and existential psychology is not clear, and there is significant overlap in the thinking of representatives from both fields. In addition, there is a distinct humanistic element in the psychodynamic theories of Adler, Horney, Fromm, Murray, and others

Discussion Question: Consider Murray's list of psychogenic needs. Which needs are the ones that affect you the most? Are you able to fulfill those needs?

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3.S: Chapter Summary

Review of Key Points

- Existentialism focuses on an individual's subjective "truth." The freedom and responsibility that come with personal truth lead to anxiety, but they can also elevate the individual to lead an authentic life.
- Heidegger believed that all creatures are connected, but that only humans can become aware of this connection. Dasein, the realization of this connection, allows us to connect with Being. Awareness of our impending death, however, leads to anxiety, but if we accept that truth we can live an authentic life.
- Sartre believed that humans were unique, something he called en-soi. Awareness of the nothingness that separates the en-soi from the pour-soi is what drives some individuals to make something significant of their lives. For those who cannot, Sartre expressed a need for existential psychoanalysis.
- Viktor Frankl developed his ideas for logotherapy (an existential psychoanalysis) during his impressive early career. He had an extraordinary opportunity to put his ideas to the test while imprisoned in the Nazi concentration camps.
- Recognized as the third Viennese school of psychotherapy, logotherapy focuses on one's will-to-meaning, the desire to find meaning and purpose in one's life.
- People who cannot find meaning experience existential frustration, which can lead to a noogenic neurosis.
- Logotherapy itself relies primarily on the techniques of paradoxical intention and dereflection. These techniques are designed to break the cycle of anticipatory anxiety and failure that plague individuals who suffer from existential crises.
- Going beyond ordinary, everyday life, Frankl proposed a super-meaning to life, and he suggested that there is also a will-to-ultimate-meaning that can be pursued through religion or spirituality. In this light, Frankl referred to logotherapy as "height psychology" (in contrast to depth psychology, another term for psychoanalysis).
- Rollo May believed that anxiety underlies nearly every crisis. He proposed that anxiety must be understood in terms of freedom, and he distinguished between normal anxiety and neurotic anxiety.
- Culture has significant effects on the nature and amount of anxiety that people are likely to experience in their lives. Since anxiety can lead to hostility, these cultural factors are, and have been throughout history, very important issues (e.g., opposition to the civil rights movement in the United States, and the recent dramatic rise in international terrorism).
- A critical factor in life, according to May, is our ability to integrate into our world. One of the challenges to integration is the human dilemma: whether we are the subject or the object in our lives. As self-aware beings we can know that we are both subject and object, and so, in psychological terms, we exist in a world between either behaviorism or humanistic psychology.
- There are different types of love, all of which are very important to our lives. Love can give meaning to our lives, but it must be honest and responsible love.
- Through will and intentionality we can give structure to our lives and meaning to our actions. However, overwhelming anxiety can destroy our ability to participate actively in our own lives.
- The daimonic is any function that can take over the whole person. It can be a source of violence, but also a source of creativity. We can choose how the daimonic takes over, and whether that choice is responsible or not determines whether our actions are violent or creative.
- Being creative requires that we live in the future and actively participate in shaping our lives. Such bold choices require courage, especially in light of the inescapable reality that we will die.
- May felt that myth provides an important cultural framework within which we can form our lives. Unfortunately, the Western world has lost many of its myths, making people susceptible to cults, drugs, superstition, etc.
- According to May, the primary goal of existential psychotherapy is to help the client realize their own being, to have an "I-Am" experience. Time is an important aspect of this procedure. The client must be helped to shift their focus from the past to the future, and even more so, to transcend time altogether.
- Although existential psychology is younger than most other schools of psychology, it has much in common with ancient Eastern philosophies, such as Yoga, Buddhism, and Taoism.
- Terrorism is not the result of Islam. Terrorists are found all over the world, from many different races, religions, and nationalities. Islam opposes violence and murder.
- Terrorism is based on psychological factors (a perception that there are no alternatives, and that terrorism is legitimate), and seeks to cause psychological effects (feelings of terror and helplessness). Thus, psychologists have an important role to play in

understanding and eliminating terrorism.

- One can easily find those who believe that terrorism either never works or always works. Some believe that we must respond with understanding to eliminate the root causes of terrorism, whereas others believe we must use force (but not too much force, lest we become terrorists as well). Clearly there are no easy answers for dealing with terrorists themselves or terrorism in general.

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CHAPTER OVERVIEW

4: The Self

4.1: Introduction to the Self
4.2: Self and Identity
4.3: The Cognitive Self
4.4: The Feeling Self
4.5: The Social Self
4.6: How to Foster Long-Term Life Change
4.7: End of Chapter Wrap-Up

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4.1: Introduction to the Self

2.1: Introduction to the Self

Learning Objectives

- Describe fundamental distinctions between three different perspectives on the self: the self as actor, agent, and author.
- Describe how a sense of self as a social actor emerges around the age of 2 years and how it develops going forward.
- Describe the development of the self's sense of motivated agency from the emergence of the child's theory of mind to the articulation of life goals and values in adolescence and beyond.

In this chapter, we will explore the multifaceted nature of the self, a construct that encompasses our thoughts, feelings, and behaviors as we navigate through life. The self is at the core of our identity, shaping how we perceive the world and how the world perceives us. It influences our decisions, our interactions, and our sense of purpose.

We will begin by examining various theories that have sought to define and explain the self. From the pioneering ideas of William James, who distinguished between the "I" and the "Me," to contemporary perspectives that consider the self as a dynamic and evolving entity, you will gain a comprehensive understanding of how psychologists conceptualize this central aspect of our being.

Furthermore, we will discuss the role of self-concept and self-esteem in personal development. How do our beliefs about ourselves influence our actions and mental health? What can we do to cultivate a healthier and more positive self-view? By exploring these questions, you will uncover strategies to enhance your self-awareness and self-acceptance.

Additionally, this chapter will cover the impact of culture, society, and relationships on the formation and expression of the self. You will learn how social contexts and interpersonal dynamics shape our self-identity and how we can navigate these influences to foster a more authentic and fulfilling sense of self.

Through reflective exercises, case studies, and real-life examples, you will not only learn about the self but also engage in personal reflection and self-discovery. By the end of this chapter, you will be equipped with a deeper understanding of who you are and how you can continue to grow and evolve in your personal psychology journey.

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4.2: Self and Identity

2.2: Self and Identity

Interpersonal communication is the study of how two people communicate in personal relationships (NCA, n.d.). Interpersonal communication starts with each of us. The development of our self-concept helps us to not only understand our ideas about self but also how we relate to the world around us. This module focuses on self-concept as well as theories and ideas related to our development of self-concept.

Defining self-concept



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The term **self-concept** (sometimes called identity) refers to your own ideas about who you are. Your self-concept develops and expands over time as you learn more about yourself and your motivations. While your self-concept is cultivated from early childhood, it continues to grow throughout your lifetime. At the same time, there are many dimensions to our self-concept.

If you were meeting someone for the first time, how would you introduce yourself? Maybe you would use one or more of the following phrases:

“My name is …(your name).” “I’m a …(your occupation).” “I’m from…(location).”

There are many ways you might describe yourself. Maybe you would focus on your background or experience. In another situation, you may focus on your hobbies and interests. Or maybe you would talk about something else entirely. It can be difficult to pin down who we are to a single answer. Is one answer more correct than another? Not necessarily, there are many aspects to each of us and all of these ideas may be true at the same time.

A term sometimes used to describe the various ideas we hold about ourselves is self-schema. A **schema** is a cognitive framework (idea or concept) that helps us to organize and interpret information about ourselves and the world around us. Our self-concept is made up of numerous self-schemas.

Let’s think about how this term works through social roles: You can be a son/daughter, a brother/sister, a father/mother, etc. all at the same time (each of these roles could be one aspect of your self-schema). All of these ideas can be true. Taken together, your self-schemas make up your self-concept.

Three components of self-concept

Another way to think about self-concept is through related terms. A humanistic psychologist, Carl Rogers (1959) defined self-concept using three distinct but related components: self-image, self-esteem and ideal self (Figure 1).

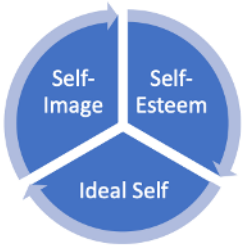


Figure 3.1.1: Rogers' Three Components of Self-Concept

Note. Observe how the three components of self mutually constitute each other.

Self-image is the way we see ourselves. This may include our physical attributes, social roles and personality traits. Unfortunately, our self-image can be inaccurate. When you were a child, did you ever think you were really good at something only to find out later that it wasn't true? This type of situation (which can happen at any time in life) is an example of how our self-image may not match reality.

Self-esteem is the way we evaluate ourselves and the importance we place on that evaluation. When we compare ourselves to others, is the result more positive or negative? For some people, the answer may be as simple as: a positive comparison equals improved self-esteem and a negative comparison equals decreased self-esteem. But for others, the answer may be more complicated. For example, a negative comparison may lead a person to work harder to improve and could actually improve self-esteem.



"working hard on the 'break'" by thomas pix is licensed under CC BY 2.0.

If you had no limitations (money, time, resources, etc.), who would you be and what would you do?

Your answer is your ideal self (at least at this moment). Our **ideal self** is who we want to be. We typically describe our ideal self in terms of our goals and ambitions in life. However, this concept is not static, meaning it can change over time as we change and grow.

The ideas we have about who we are (our self-concept) is a mixture of many things. The way we see ourselves (self-image), the way we evaluate ourselves in terms of others (self-esteem), and who we want to be (ideal self), all contribute to our understanding of self.

Self-concept theories

A variety of scholars in psychology, sociology, and communication have researched self-concept. Their task is a difficult one because our self-concept is personal, dynamic and changes as we learn more about ourselves and the world around us. In this section, we will look at a few prominent theories and ideas from this area of research.

Johari window

What do we know about ourselves? What aspects of ourselves do we share with others? What aspects of ourselves are yet to be determined? In 1955 psychologists, Joseph Luft and Harry Ingham created a model known as the Johari window to visually represent the aspects of self that are known to us versus those that are unknown to us. Their model has four quadrants (Figure 2).

In the first quadrant (upper, left-hand corner) are those ideas that are known to self and others. This quadrant is considered the *open area* and likely includes ideas like your name, hobbies and other topics about yourself that you freely share with others. If you have a social media account, the messages you post publicly would fall into this quadrant.

In the second quadrant (upper, right-hand corner) are those ideas that are unknown to self but known to others. This quadrant is considered the *blind area*. This area might be easier to think about in terms of others. Do you have a friend, co-worker or sibling who comes off abrasive but doesn't know it? Or maybe you know someone who's a pushover but doesn't see it. Do you think that their lack of recognition affects their understanding of self? Now, let's think about it in terms of ourselves. What are our blind spots? These aspects of our personality (that others readily known) but escape our notice fall into this area of the Johari window.

In the third quadrant (lower, left-hand corner) are those ideas that are known to self but unknown to others. This quadrant is considered the (it is titled 'facade' in Figure 2) *hidden area* and includes things you known about yourself that you do not share

with others (i.e., traumas you've experience, emotional insecurities, embarrassing situations, etc.).

In the fourth quadrant (lower, right-hand corner) are those ideas that are unknown to self and others. This quadrant is considered the *unknown area*. This area includes things you and others don't know (yet). How will you cope with the loss of a parent (if both your parents are living)? What type of parent will you be (if you don't have children)? How successful will your career be (if you're in school and having started your career yet)? Because these things haven't happened yet, the outcome is unknown.

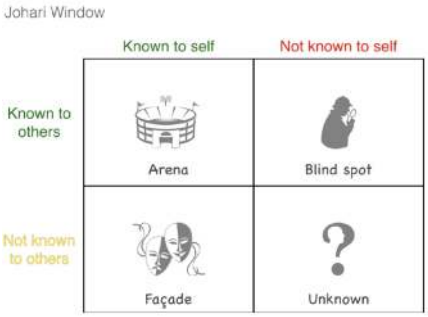


Figure 3.1.2: Johari Window

From "Johari Window," by Spaynton, 2019, *WikiMedia Commons* (https://commons.wikimedia.org/wiki/File:JohariWindow.png). Licensed under CC-BY-SA 4.0

Reflected Appraisal

How do others view you? What influence do those ideas have on your self-concept? **Reflected appraisal** is a term used to describe the process by which our self-concept is affected by what other people think of us.

In 1902, sociologist Charles H. Cooley described how reflected appraisal works in a concept he called the "looking glass self." Cooley suggested that our understanding of how others perceive us influences the development of our self-concept (Cooley, 1902). As such, social interactions (especially with those who are most important to us) play an integral role in the cultivation of our sense of self. Let's look at an example to see how this might work.

When you were a child, how did your parents or guardians describe you? If words like "smart," "athletic" or "kind" were used. You may have believed those words and worked harder to exemplify them by studying more frequently, practicing your sports more often or trying to be nice to everyone. If someone asked you to describe yourself, you may have even used those words (because they were now part of your own self-concept).

On the other hand, if your parents or guardians described you as "lazy" or "noncommunicative," you may have believed those words, too. Those words would affect your self-concept in a negative way.



"Sad Child" by Direct Media is marked with CC0 1.0.

Social comparison theory

When you think about your friends, how do you measure up? In your opinion, are you better (or worse) looking? Are you more (or less) successful? In what ways do you think you are better than your friends? In what ways are you worse off than your friends? In 1954, psychologist Leon Festinger suggested that we evaluate ourselves in comparison to others, and those judgments influence our self-concept. This concept is known as **social comparison theory**.

As with reflected appraisal, some people (those closest to us) influence our self-concept more than others. *Upward social comparison* occurs when we compare ourselves with those we see as better than us. These comparisons tend to focus on the desire to improve ourselves. *Downward social comparison* occurs when we compare ourselves with those we see as worse off than us. These comparisons often focus on making us feel better about ourselves and our abilities.

Self-fulfilling prophecy



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A **self-fulfilling prophecy** occurs when your expectation *causes* something to happen. Suppose your friends stop by your apartment to tell you that a new person moved into the apartment down the hallway. When you ask them, what they thought of your new neighbor, they describe the person as aloof and rude.

Later in the day, you run into your new neighbor by the mailboxes. Based on the description you heard from your friends, you say “excuse me” in an aggressive manner and push your way into the space. In turn, your new neighbor gives you a harsh look and leaves quickly. The next time you see your friends, you tell them that you met your new neighbor and definitely agree with their assessment.

Was your new neighbor actually aloof and rude? Or did you treat your new neighbor in a way that your preconceived notion would be fulfilled? If so, it is a self-fulfilling prophecy.

Sometimes our expectations (or the expectations of others) can influence our communication behaviors. In the example above, the information you received from your friends influenced how you interacted with your new neighbor. How might things have been different if you didn’t know anything about your new neighbor before you met at the mailboxes? Would you have communicated in a friendlier manner? If you had, would your new neighbor have reacted differently? It’s difficult to say what would have happened. But it’s important to remember that the feedback we receive about others may not be accurate. If we communicate with others based on inaccurate information, we may create a self-fulfilling prophecy.

Conclusion

Trying to pinpoint who we are can be difficult. There are many aspects to our self-concept. In some cases, the aspects of self we present will depend on a variety of factors. In this module, we learned about different ways to think about self-concept and various people and situations that may influence the development of our ideas about self. We also learned about several theories and ideas related to our development of self-concept.

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4.3: The Cognitive Self

2.3: The Cognitive Self

Some nonhuman animals, including chimpanzees, orangutans, and perhaps dolphins, have at least a primitive sense of self (Boysen & Himes, 1999). We know this because of some interesting experiments that have been done with animals. In one study (Gallup, 1970), researchers painted a red dot on the forehead of anesthetized chimpanzees and then placed the animals in a cage with a mirror. When the chimps woke up and looked in the mirror, they touched the dot on their faces, not the dot on the faces in the mirror. This action suggests that the chimps understood that they were looking at themselves and not at other animals, and thus we can assume that they are able to realize that they exist as individuals. Most other animals, including dogs, cats, and monkeys, never realize that it is themselves they see in a mirror.



A simple test of self-awareness is the ability to recognize oneself in a mirror. Humans and chimpanzees can pass the test; dogs never do.

Allen Skyy – Mirror – CC BY 2.0; 6SN7 – Reflecting Bullmatian – CC BY 2.0; Mor – There's a monkey in my mirror – CC BY-NC 2.0.

Infants who have similar red dots painted on their foreheads recognize themselves in a mirror in the same way that the chimps do, and they do this by about 18 months of age (Asendorpf, Warkentin, & Baudonnière, 1996; Povinelli, Landau, & Perilloux, 1996). The child's knowledge about the self continues to develop as the child grows. By age 2, the infant becomes aware of his or her gender as a boy or a girl. At age 4, self-descriptions are likely to be based on physical features, such as one's hair color, and by about age 6, the child is able to understand basic emotions and the concepts of traits, being able to make statements such as "I am a nice person" (Harter, 1998).

By the time they are in grade school, children have learned that they are unique individuals, and they can think about and analyze their own behavior. They also begin to show awareness of the social situation—they understand that other people are looking at and judging them the same way that they are looking at and judging others (Doherty, 2009).

Development and Characteristics of the Self-Concept



"Looking in the mirror" by Elizabeth/Table4Five is licensed under CC BY 2.0.

Part of what is developing in children as they grow is the fundamental cognitive part of the self, known as the *self-concept*. The self-concept is *a knowledge representation that contains knowledge about us, including our beliefs about our personality traits, physical characteristics, abilities, values, goals, and roles, as well as the knowledge that we exist as individuals*. Throughout childhood and adolescence, the self-concept becomes more abstract and complex and is *organized into a variety of different cognitive aspects*, known as self-schemas. Children have self-schemas about their progress in school, their appearance, their skills

at sports and other activities, and many other aspects, and these self-schemas direct and inform their processing of self-relevant information (Harter, 1999).

By the time we are adults, our sense of self has grown dramatically. In addition to possessing a wide variety of self-schemas, we can analyze our thoughts, feelings, and behaviors, and we can see that other people may have different thoughts than we do. We become aware of our own mortality. We plan for the future and consider the potential outcomes of our actions. At times, having a sense of self may seem unpleasant—when we are not proud of our appearance, actions, or relationships with others, or when we think about and become afraid of the possibility of our own death. On the other hand, the ability to think about the self is very useful. Being aware of our past and able to speculate about the future is adaptive—it allows us to modify our behavior on the basis of our mistakes and to plan for future activities. When we do poorly on an exam, for instance, we may study harder for the next one or even consider changing our major if we continue to have problems in the major we have chosen.

One way to learn about a person's self-concept and the many self-schemas that it contains is by using self-report measures. One of these is a deceptively simple fill-in-the-blank measure that has been used by many scientists to get a picture of the self-concept (Rees & Nicholson, 1994). All of the 20 items in the measure are exactly the same, but the person is asked to fill in a different response for each statement. This self-report measure, known as the Twenty Statements Test, can reveal a lot about a person because it is designed to measure the most accessible—and thus the most important—parts of one's self-concept. Try it for yourself, at least five times:

- I am (please fill in the blank) _____
- I am (please fill in the blank) _____
- I am (please fill in the blank) _____
- I am (please fill in the blank) _____
- I am (please fill in the blank) _____

Although each person has a unique self-concept, we can identify some characteristics that are common across the responses given by different people on the measure. *Physical characteristics* are an important component of the self-concept, and they are mentioned by many people when they describe themselves. If you've been concerned lately that you've been gaining weight, you might write, "I am *overweight.*" If you think you're particularly good looking ("I am *attractive*"), or if you think you're too short ("I am *too short*"), those things might have been reflected in your responses. Our physical characteristics are important to our self-concept because we realize that other people use them to judge us. People often list the physical characteristics that make them different from others in either positive or negative ways ("I am *blond*," "I am *short*"), in part because they understand that these characteristics are salient and thus likely to be used by others when judging them (McGuire, McGuire, Child, & Fujioka, 1978).

A second characteristic of the self-concept reflects our memberships in the social groups that we belong to and care about. Common responses in this regard include such ones as "I am *an artist*," "I am *Jewish*," and "I am *a student at Augsburg College*." As we will see later in this chapter, our group memberships form an important part of the self-concept because they provide us with our *social identity*—the sense of our self that involves our memberships in social groups.

The remainder of the self-concept is normally made up of *personality traits*—the specific and stable personality characteristics that describe an individual ("I am *friendly*," "I am *shy*," "I am *persistent*"). These individual differences (the person part of the person-situation interaction) are important determinants of our behavior, and this aspect of the self-concept reflects this variation across people.

Self-Complexity Provides a Buffer Against Negative Emotions



"friends and a song?" by fotovideofede is licensed under CC BY-SA 2.0.

The self-concept is a rich and complex social representation. In addition to our thoughts about who we are right now, the self-concept includes thoughts about our past self—our experiences, accomplishments, and failures—and about our future self—our hopes, plans, goals, and possibilities (Oyserman, Bybee, Terry, & Hart-Johnson, 2004). The self-concept also includes thoughts about our relationships with others. You no doubt have thoughts about your family and close friends that have become part of yourself. Indeed, if you don't see the people you really care about for a while, or if you should lose them in one way or another, you will naturally feel sad because you are in essence missing part of yourself.

Although every human being has a complex self-concept, there are nevertheless individual differences in self-complexity, *the extent to which individuals have many different and relatively independent ways of thinking about themselves* (Linville, 1987; Roccas & Brewer, 2002). Some selves are more complex than others, and these individual differences can be important in determining psychological outcomes. Having a complex self means that we have a lot of different ways of thinking about ourselves. For example, imagine a woman whose self-concept contains the social identities of *student*, *girlfriend*, *daughter*, *psychology major*, and *tennis player* and who has encountered a wide variety of life experiences. Social psychologists would say that she has high self-complexity. On the other hand, a man who perceives himself solely as a student or solely as a member of the hockey team and who has had a relatively narrow range of life experiences would be said to have low self-complexity. For those with high self-complexity, the various self-aspects of the self are separate, such that the positive and negative thoughts about a particular self-aspect do not spill over into thoughts about other aspects.

Research has found that compared with people low in self-complexity, those higher in self-complexity experience more positive outcomes. People with more complex self-concepts have been found to have lower levels of stress and illness (Kalthoff & Neimeyer, 1993), a greater tolerance for frustration (Gramzow, Sedikides, Panter, & Insko, 2000), and more positive and less negative reactions to events that they experience (Niedenthal, Setterlund, & Wherry, 1992).

The benefits of self-complexity occur because the various domains of the self help to buffer us against negative events and help us to enjoy the positive events that we experience. For people low in self-complexity, negative outcomes on one aspect of the self tend to have a big impact on their self-esteem. If the only thing that Maria cares about is getting into medical school, she may be devastated if she fails to make it. On the other hand, Marty, who is also passionate about medical school but who has a more complex self-concept, may be better able to adjust to such a blow by turning to other interests. People with high self-complexity can also take advantage of the positive outcomes that occur on any of the dimensions that are important to them.

Although having high self-complexity seems useful overall, it does not seem to help everyone equally and also does not seem to help us respond to all events equally (Rafaeli-Mor & Steinberg, 2002). The benefits of self-complexity seem to be particularly strong on reactions to positive events. People with high self-complexity seem to react more positively to the good things that happen to them but not necessarily less negatively to the bad things. And the positive effects of self-complexity are stronger for people who have other positive aspects of the self as well. This buffering effect is stronger for people with high self-esteem, whose self-complexity involves positive rather than negative characteristics (Koch & Shepperd, 2004), and for people who feel that they have control over their outcomes (McConnell et al., 2005).

Studying the Self-Concept

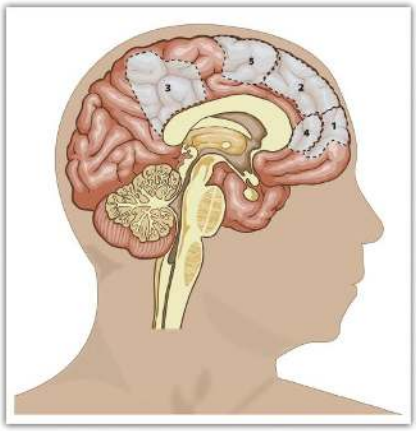


"Todo list Nov 20 2015" by Bekathwia is licensed under CC BY-SA 2.0.

Because the self-concept is a schema, it can be studied using the methods that we would use to study any other schema. As we have seen, one approach is to use self-report—for instance, by asking people to list the things that come to mind when they think about themselves. Another approach is to use neuroimaging to directly study the self in the brain. As you can see in Figure 4.1, neuroimaging studies have shown that information about the self is stored in the prefrontal cortex, the same place that other

information about people is stored (Barrios et al., 2008). This finding suggests that we store information about ourselves as people the same way we store information about others.

Figure 4.1



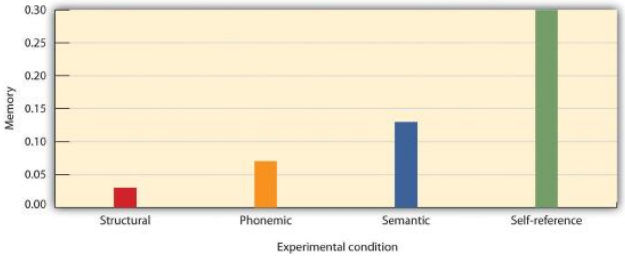
This figure shows the areas of the human brain that are known to be important in processing information about the self. They include primarily areas of the prefrontal cortex (areas 1, 2, 4, and 5). Data are from Lieberman (2010).

Still another approach to studying the self is to investigate how we attend to and remember things that relate to the self. Indeed, because the self-concept is the most important of all our schemas, it has extraordinary influence on our thoughts, feelings, and behavior. Have you ever been at a party where there was a lot of noise and bustle, and yet you were surprised to discover that you could easily hear your own name being mentioned in the background? Because our own name is such an important part of our self-concept, and because we value it highly, it is highly accessible. We are very alert for, and react quickly to, the mention of our own name.

Other research has found that information that is related to the self-schema is better remembered than information that is unrelated to it, and that information related to the self can also be processed very quickly (Lieberman, Jarcho, & Satpute, 2004). In one classic study that demonstrated the importance of the self-schema, Rogers, Kuiper, and Kirker (1977) conducted an experiment to assess how college students recalled information that they had learned under different processing conditions. All the participants were presented with the same list of 40 adjectives to process, but through the use of random assignment, the participants were given one of four different sets of instructions about how to process the adjectives.

Participants assigned to the *structural task condition* were asked to judge whether the word was printed in uppercase or lowercase letters. Participants in the *phonemic task condition* were asked whether or not the word rhymed with another given word. In the *semantic task condition*, the participants were asked if the word was a synonym of another word. And in the *self-reference task condition*, participants indicated whether or not the given adjective was or was not true of themselves. After completing the specified task, each participant was asked to recall as many adjectives as he or she could remember.

Figure 4.2 The Self-Reference Effect



The chart shows the proportion of adjectives that students were able to recall under each of four learning conditions. The same words were recalled significantly better when they were processed in relation to the self than when they were processed in other ways. Data from Rogers et al. (1977).

Rogers and his colleagues hypothesized that different types of processing would have different effects on memory. As you can see in Figure 4.2 “The Self-Reference Effect”, the students in the self-reference task condition recalled significantly more adjectives

than did students in any other condition. The finding that *information that is processed in relationship to the self is particularly well remembered*, known as the self-reference effect, is powerful evidence that the self-concept helps us organize and remember information. The next time you are studying for an exam, you might try relating the material to your own experiences—the self-reference effect suggests that doing so will help you better remember the information.

Self-Awareness

Like any other schema, the self-concept can vary in its current cognitive accessibility. Self-awareness refers to *the extent to which we are currently fixing our attention on our own self-concept*. *When the self-concept becomes highly accessible because of our concerns about being observed and potentially judged by others*, we experience the publicly induced self-awareness known as self-consciousness (Duval & Wicklund, 1972; Rochat, 2009).

I am sure that you can remember times when your self-awareness was increased and you became self-conscious—for instance, when you were giving a class presentation and you were perhaps painfully aware that everyone was looking at you, or when you did something in public that embarrassed you. Emotions such as anxiety and embarrassment occur in large part because the self-concept becomes highly accessible, and they serve as a signal to monitor and perhaps change our behavior.

Not all aspects of our self-concepts are equally accessible at all times, and these long-term differences in the accessibility of the different self-schemas help create individual differences, for instance, in terms of our current concerns and interests. You may know some people for whom the physical appearance component of the self-concept is highly accessible. They check their hair every time they see a mirror, worry whether their clothes are making them look good, and do a lot of shopping—for themselves, of course. Other people are more focused on their social group memberships—they tend to think about things in terms of their role as Christians or as members of the tennis team. Think back for a moment to the opener of this chapter and consider Dancing Matt Harding. What do you think are his most highly accessible self-schemas?

In addition to variation in long-term accessibility, the self and its various components may also be made temporarily more accessible through priming. We become more self-aware when we are in front of a mirror, when a TV camera is focused on us, when we are speaking in front of an audience, or when we are listening to our own tape-recorded voice (Kernis & Grannemann, 1988). When the knowledge contained in the self-schema becomes more accessible, it also becomes more likely to be used in information processing and more likely to influence our behavior.

Beaman, Klentz, Diener, and Svanum (1979) conducted a field experiment to see if self-awareness would influence children's honesty. The researchers expected that most children viewed stealing as wrong but that they would be more likely to act on this belief when they were more self-aware. They conducted this experiment on Halloween evening in homes within the city of Seattle. When children who were trick-or-treating came to particular houses, they were greeted by one of the experimenters, shown a large bowl of candy, and were told to take only one piece each. The researchers unobtrusively watched each child to see how many pieces he or she actually took.



"Day 303: 'Candy bowl'" by seanmfreese is licensed under CC BY 2.0.

Behind the candy bowl in some of the houses was a large mirror. In the other houses, there was no mirror. Out of the 363 children who were observed in the study, 19% disobeyed instructions and took more than one piece of candy. However, the children who were in front of a mirror were significantly less likely to steal (14.4%) than were those who did not see a mirror (28.5%). These results suggest that the mirror activated the children's self-awareness, which reminded them of their belief about the importance of being honest. Other research has shown that being self-aware has a powerful influence on other behaviors as well. For instance, people are more likely to stay on their diets, eat better foods, and act more morally overall when they are self-aware (Baumeister, Zell, & Tice, 2007; Heatherton, Polivy, Herman, & Baumeister, 1993). What this means is that when you are trying to stick to a diet, study harder, or engage in other difficult behaviors, you should try to focus on yourself and the importance of the goals you have set.

Social psychologists are interested in studying self-awareness because it has such an important influence on behavior. People lose their self-awareness and become more likely to violate acceptable social norms when, for example, they put on a Halloween mask or engage in other behaviors that hide their identities. The members of the militant White supremacist organization the Ku Klux Klan wear white robes and hats when they meet and when they engage in their racist behavior. And when people are in large crowds, such as in a mass demonstration or a riot, they may become so much a part of the group that they lose their individual self-awareness and experience deindividuation—*the loss of self-awareness and individual accountability in groups* (Festinger, Pepitone, & Newcomb, 1952; Zimbardo, 1969).



Examples of situations that may create deindividuation include wearing uniforms that hide the self and alcohol intoxication.

Craig ONeal – KKK Rally in Georgia – CC BY-NC-ND 2.0; Bart Everson – Nazis – CC BY 2.0; John Penny – Snuggie Keg Stand – CC BY-NC-ND 2.0.

Two particular types of individual differences in self-awareness have been found to be important, and they relate to self-concern and other-concern, respectively (Fenigstein, Scheier, & Buss, 1975; Lalwani, Shrum, & Chiu, 2009). Private self-consciousness refers to *the tendency to introspect about our inner thoughts and feelings*. People who are high in private self-consciousness tend to think about themselves a lot and agree with statements such as "I'm always trying to figure myself out" and "I am generally attentive to my inner feelings." People who are high on private self-consciousness are likely to base their behavior on their own inner beliefs and values—they let their inner thoughts and feelings guide their actions—and they may be particularly likely to strive to succeed on dimensions that allow them to demonstrate their own personal accomplishments (Lalwani, Shrum & Chiu, 2009).

Public self-consciousness, in contrast, refers to *the tendency to focus on our outer public image and to be particularly aware of the extent to which we are meeting the standards set by others*. Those high in public self-consciousness agree with statements such as "I'm concerned about what other people think of me," "Before I leave my house, I check how I look," and "I care a lot about how I present myself to others." These are the people who check their hair in a mirror they pass and spend a lot of time getting ready in the morning; they are more likely to let the opinions of others (rather than their own opinions) guide their behaviors and are particularly concerned with making good impressions on others.

Research has found cultural differences in public self-consciousness, such that people from East Asian collectivistic cultures have higher public self-consciousness than do people from Western individualistic cultures. Steve Heine and his colleagues (Heine, Takemoto, Moskalenko, Lasaleta, & Henrich, 2008) found that when college students from Canada (a Western culture) completed questionnaires in front of a large mirror, they subsequently became more self-critical and were less likely to cheat (much like the trick-or-treaters we discussed earlier) than were Canadian students who were not in front of a mirror. However, the presence of the mirror had no effect on college students from Japan. This person-situation interaction is consistent with the idea that people from East Asian cultures are normally already high in public self-consciousness, in comparison with people from Western cultures, and thus manipulations designed to increase public self-consciousness are less influential for them.

Overestimating How Others View Us

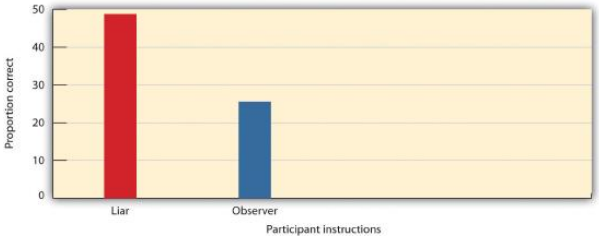
Although the self-concept is the most important of all our schemas, and although people (particularly those high in self-consciousness) are aware of their self and how they are seen by others, this does not mean that people are always thinking about themselves. In fact, people do not generally focus on their self-concept any more than they focus on the other things and other people in their environments (Csikszentmihalyi & Figurski, 1982).

On the other hand, self-awareness is more powerful for the person experiencing it than it is for others who are looking on, and the fact that self-concept is so highly accessible frequently leads people to overestimate the extent to which other people are focusing on them (Gilovich & Savitsky, 1999). Although you may be highly self-conscious about of something you've done in a particular situation, that does not mean that others are necessarily paying all that much attention to you. Research by Thomas Gilovich and his colleagues (Gilovich, Medvec, & Savitsky, 2000) found that people who were interacting with others thought that other people were paying much more attention to them than those other people reported actually doing.

Teenagers are particularly likely to be highly self-conscious, often believing that others are constantly watching them (Goossens, Beyers, Emmen, & van Aken, 2002). Because teens think so much about themselves, they are particularly likely to believe that others must be thinking about them, too (Rycek, Stuhr, McDermott, Benker, & Swartz, 1998). It is no wonder that everything a teen's parents do suddenly feels embarrassing to them when they are in public.

People also often mistakenly believe that their internal states show to others more than they really do. Gilovich, Savitsky, and Medvec (1998) asked groups of five students to work together on a "lie detection" task. One at a time, each student stood up in front of the others and answered a question that the researcher had written on a card (e.g., "I have met David Letterman"). On each round, one person's card indicated that they were to give a false answer, whereas the other four were told to tell the truth.

Figure 4.3 The Illusion of Transparency



After each round, the students who had not been asked to lie indicated which of the students they thought had actually lied in that round, and the liar was asked to estimate the number of other students who would correctly guess who had been the liar. As you can see in Figure 4.3 "The Illusion of Transparency", the liars overestimated the detectability of their lies: On average, they predicted that over 44% of their fellow players had known that they were the liar, but in fact only about 25% were able to accurately identify them. Gilovitch and his colleagues called this effect the "illusion of transparency."

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4.4: The Feeling Self

2.4: The Feeling Self

Although the self is partly determined by our thoughts about ourselves, we are also the product of our emotions. I am certain that Matt Harding dances, at least in part, because he likes dancing and because dancing makes him feel good. In fact, we all want to feel positively about ourselves, and we work hard to be able to do so.

Self-Esteem Is Our Positive or Negative Attitude Toward Ourselves

Self-esteem refers to *the positive (high self-esteem) or negative (low self-esteem) feelings that we have about ourselves*. We experience the positive feelings of high self-esteem when we believe that we are good and worthy and that others view us positively. We experience the negative feelings of low self-esteem when we believe that we are inadequate and less worthy than others.

Our self-esteem is determined by many factors, including how well we view our own performance, our own appearance, and how satisfied we are with our relationships with other people (Tafarodi & Swann, 1995). Self-esteem is in part a trait that is stable over time, such that some people have relatively high self-esteem and others have lower self-esteem. But our self-esteem is also a state that varies day to day and even hour to hour. When we have succeeded at an important task, when we have done something that we think is useful or important, or when we feel that we are accepted and valued by others, our self-concept will contain many positive thoughts and we will therefore have high self-esteem. When we have failed, done something harmful, or feel that we have been ignored or criticized, the negative aspects of the self-concept are more accessible and we experience low self-esteem.

Self-esteem can be measured using both explicit and implicit measures, and both approaches find that people tend to view themselves positively. One common self-report measure of self-esteem is the Rosenberg Self-Esteem Scale. Higher numbers on the scale indicate higher self-esteem, and the average score for college students who complete the scale is about 3 on a 1 to 4 scale, demonstrating that by and large, people have high self-esteem.

The Rosenberg Self-Esteem Scale

Please rate yourself on the following items by writing a number in the blank before each statement, where you

1 = Strongly Disagree 2 = Disagree 3 = Agree 4 = Strongly Agree

1. _____I feel that I’m a person of worth, at least on any equal base with others.
2. _____I feel that I have a number of good qualities.
3. _____All in all, I am inclined to think that I am a failure (R).
4. _____I am able to do things as well as other people.
5. _____I feel I do not have much to be proud of. (R)
6. _____I take a positive attitude towards myself.
7. _____On the whole, I am satisfied with myself.
8. _____I wish I could have more respect for myself. (R)
9. _____I certainly feel useless at times. (R)
10. _____At times I think I am no good at all. (R)

Note. (R) denotes an item that should be reverse scored. Subtract your response on these items from 5 before calculating the total. Data are from Rosenberg (1965).



"Balance scale clipart, vintage illustration" is marked with CC0 1.0.

One problem with measures such as the Rosenberg scale is that they can be influenced by the desire to portray the self positively. The observed scores on the Rosenberg scale are likely inflated because people naturally try to make themselves look as if they have very high self-esteem—maybe they fib a bit to make themselves look better than they really are to the experimenters and perhaps also to make themselves feel better.

More indirect measures of self-esteem have been created—measures that may provide a more accurate picture of the self-concept because they are less influenced by the desire to make a positive impression. Anthony Greenwald and Shelly Farnham (2000) used the Implicit Association Test to study the self-concept indirectly. Participants worked at a computer and were presented with a series of words, each of which they were to categorize in one of two ways. One categorization decision involved whether the words were related to the self (e.g., *me, myself, mine*) or to another person (*other, them, their*). A second categorization decision involved determining whether words were pleasant (*joy, smile, pleasant*) or unpleasant (*pain, death, tragedy*).

On some trials, the self words were paired with the pleasant items, and the other words with the unpleasant items. On other trials, the self words were paired with the unpleasant items, and the other words with the pleasant items. Greenwald and Farnham found that on average, participants were significantly faster at categorizing positive words that were presented with self words than they were at categorizing negative words that were presented with self words, suggesting, again, that people did have positive self-esteem. Furthermore, there were also meaningful differences among people in the speed of responding, suggesting that the measure captured individual variation in self-esteem.

Brett Pelham and his colleagues (Jones, Pelham, Mirenberg, & Hetts, 2002; Koole & Pelham, 2003; Pelham, Carvallo, & Jones, 2005) have taken still another approach to assessing self-esteem indirectly, by measuring a concept that they call *implicit egoism*. In their research, they have found that people prefer things that are associated with their own names to things that are not associated with their own names. More specifically, people prefer their own initials to the initials of other people, and prefer other people who share their initials to those who don't. And Brendl, Chattopadhyay, Pelham, and Carvallo (2005) found similar results for brand names, such that people are more likely to choose a brand when the brand name starts with letters from their names than when the brand name does not. Thus these indirect measures also came to the same conclusion that the direct measures do—most people have positive self-esteem in the sense that they regard themselves, and things associated with themselves, positively.



People value themselves and the things they own.

Fred Seibert – 321 – CC BY-NC-ND 2.0; FaceMePLS – Walking the dog – CC BY 2.0; Flazingo Photos – Individual in a Suit – CC BY-SA 2.0; Sascha Knauf – Look – CC BY-NC 2.0.

Maintaining and Enhancing Self-Esteem

Because it is so important to have self-esteem, we naturally try to get and maintain it. One way is to be successful at what we do. When we get a good grade on a test, perform well in a sports match, or get a date with someone that we really like, our self-esteem naturally rises. One reason that most people have positive self-esteem is because we are generally successful at creating positive lives. When we fail in one domain, we tend to move on until we find something that we are good at. Most of us realize that we cannot hang out with the most attractive person on campus, and so we generally don't set ourselves up for failure by trying to. We don't always expect to get the best grade on every test or to be the best player on the team. Therefore, we are not surprised or that hurt when those things don't happen. In short, we feel good about ourselves because we do a pretty good job at creating decent lives.

Research Focus

Processing Information to Enhance the Self

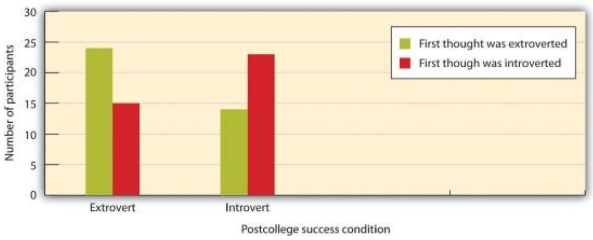
Although we are all quite good at creating positive self-esteem by doing positive things, it turns out that we do not stop there. The desire to see ourselves positively is strong enough that it leads us to seek out, process, and remember information in a way that allows us to see ourselves even more positively.

Sanitioso, Kunda, and Fong (1990) had students from Princeton University read about a study that they were told had been conducted by psychologists at Stanford University (the study was actually fictitious). The students were randomly assigned to two groups, such that one group read that the results of the research had showed that extroverts did better than introverts in academic or professional settings after graduating from college, while the other group read that introverts did better than extroverts on the same dimensions. The students then wrote explanations for why this might be true.

The experimenter then thanked the participants and led them to another room, where a second study was to be conducted (you will have guessed already that although the participants did not think so, the two experiments were really part of the same experiment). In the "second" experiment, participants were given a questionnaire that supposedly was investigating what different personality dimensions meant to people in terms of their own experience and behavior. The students were asked to list behaviors that they had performed in the past that related to the dimension of "shy" versus "outgoing"—a dimension that is very close in meaning to the introversion-extroversion dimension that they had read about in the first experiment.

The following figure shows the number of students in each condition who listed an extroverted behavior first, and the number who listed an introverted behavior first. You can see that the first memory listed by participants in both conditions tended to reflect the dimension that they had read was related to success according to the research presented in the first experiment. In fact, 62% of the students who had just learned that extroversion was related to success listed a memory about an extroverted behavior first, whereas only 38% of the students who had just learned that introversion was related to success listed an extroverted behavior first.

Figure 4.4 Enhancing the Self



Sanitioso, Kunda, and Fong (1990) found that students who had learned that extroverts did better than introverts after graduating from college tended to list extroverted memories about themselves, whereas those who learned that introverts did better than extroverts tended to list introverted memories.

It appears that the participants drew from their memories those instances of their own behavior that reflected the trait that had the most positive implications for their self-esteem—either introversion or extroversion, depending on experimental condition. The desire for positive self-esteem made events that were consistent with a positive self-perception more accessible, and thus they were listed first on the questionnaire.

Other research has confirmed this general principle—people attempt to create positive self-esteem whenever possible, even it if may involve distorting reality. We take credit for our successes, and we blame our failures on others. We remember our positive experiences, and we tend to forget the negative ones. We judge our likelihood of success and happiness as greater than our likelihood of failure and unhappiness. We think that our sense of humor and our honesty are above average, and that we are better drivers and less prejudiced than others. We also distort (in a positive way, of course) our memories of our grades, our performances on exams, and our romantic experiences. And we believe that we can control the events that we will experience to a greater extent than we really can (Crocker & Park, 2004).

We Use Self-Presentation to Increase Our Status and Self-Esteem

Although self-esteem comes in part from our personal accomplishments, it is also influenced by the social situation. Positive self-esteem occurs not only when we do well in our own eyes but also when we feel that we are positively perceived by the other people we care about. Think about Dancing Matt as an example—he may love to dance for himself, but he also seems to enjoy sharing his dancing with others. Perhaps Matt feels good about himself in part because he knows that other people like to watch him. Social status refers to *the extent to which we are viewed positively and are esteemed by others*.



We express our social status to others in a variety of ways.

Adam Howarth – Legless Beggar – CC BY-NC-ND 2.0; Aquistbe – Zack Big Limo – CC BY-NC-ND 2.0.

Because it is so important to be seen as competent and productive members of society, people naturally attempt to present themselves as positively as they can to others. We attempt to convince others that we are good and worthy people by appearing attractive, strong, intelligent, and likable and by saying positive things to others (Jones & Pittman, 1982; Leary, 1995; Schlenker, 2003). *The tendency to present a positive self-image to others, with the goal of increasing our social status*, is known as self-presentation, and it is a basic and natural part of everyday life. Again, the dynamic interplay between the person and the situation is apparent—our individual self-esteem is influenced in large part by how we think others perceive us.

One way to self-present is to display our positive physical characteristics. The reason that so many of us spend money on teeth whiteners, hair dye, face-lifts, and fashion accessories of every sort is in part the result of the desire to self-present—we want to look good to others so that they will like us. We can also earn status by collecting expensive possessions such as fancy cars and big houses and by trying to associate with high-status others. And we may also gain status by attempting to dominate or intimidate others in social interaction. People who talk more and louder and those who initiate more social interactions are afforded higher status. A businessman who greets others with a strong handshake and a smile and people who speak out strongly for their opinions in group discussions may be attempting to do so as well. In some cases, people may even resort to aggressive behavior, such as bullying, in attempts to improve their status (Baumeister, Smart, & Boden, 1996).

You might not be surprised to hear that men and women use different approaches to self-presentation. Men are more likely to present themselves in an assertive way, by speaking and interrupting others, by visually focusing on the other person when they are speaking, and by leaning their bodies into the conversation. Women, on the other hand, are more likely to be modest—they tend to create status by laughing and smiling, and by reacting more positively to the statements of others (Dovidio, Brown, Heltman, Ellyson, & Keation, 1988).

These gender differences are probably in large part socially determined as a result of the different reinforcements that men and women receive for using self-presentational strategies. Speaking out and acting assertively is more effective for men than it is for women because our stereotypes about the appropriate behavior for women do not include assertive behavior. Women who act assertively may be seen negatively because they violate our expectations about appropriate behavior. In fact, because self-presenting in an assertive way is not as effective for women, it can be difficult for women to gain power in organizations (Carli, 2001). But the observed gender differences in self-presentation are also due in part to the presence of testosterone, which is higher

in men. Both women and men with more testosterone are more assertive (Baker, Pearcey, & Dabbs, 2002; Dabbs, Hargrove, & Heusel, 1996).

Different self-presentation strategies may be used to create different emotions in other people, and the use of these strategies may be evolutionarily selected because they are successful (Kessler & Cohrs, 2008). Edward Jones and Thane Pittman (1982) described five self-presentation strategies, each of which is expected to create a resulting emotion in the other person.

1. The goal of *ingratiation* is to create **liking** by using flattery or charm.
2. The goal of *intimidation* is to create **fear** by showing that you can be aggressive.
3. The goal of *exemplification* is to create **guilt** by showing that you are a better person than the other.
4. The goal of *supplication* is to create **pity** by indicating to others that you are helpless and needy.
5. The goal of *self-promotion* is to create **respect** by persuading others that you are competent.



Attempts to impress and intimidate others to gain status are not unique to humans.

Jason Hargrove – Intimidation – CC BY 2.0; Luke Addison – Angry Mandy! – CC BY-SA 2.0; Tambako The Jaguar – Angry tigress – CC BY-NC-ND 2.0; Tambako The Jaguar – Angry wolf – CC BY-NC 2.0.

No matter who is using it, self-presentation can easily be overdone, and when it is, it backfires. People who overuse the ingratiation technique and who are seen as obviously and strategically trying to impress or get others to like them are not liked. Nor are people who exemplify or self-promote by boasting or bragging, particularly if that boasting does not appear to reflect their true characteristics (Wosinska, Dabul, Whetstone-Dion, & Cialdini, 1996). And using intimidation is also likely to backfire—acting more modestly may often be more effective. Again, the point is clear—we may want to self-promote with the goal of getting others to like us, but we must also be careful to take into consideration the point of view of the other person as well.

Figure 4.5



social status -> self-esteem

We use *self-presentation* to try to convince others that we are good and worthy people. When we are successful in our self-presentation and other people view us positively, we have high *social status*. When we perceive that we have high social status, we experience positive *self-esteem*.

In summary, although the variables of self-esteem, social status, and self-presentation are separate concepts with different meanings, they all are related, as you can see in Figure 4.5. We feel good about ourselves (we have high *self-esteem*) when we have high *social status*. And we can gain status by convincing other people that we are good people (*self-presentation*). Because these concepts are important parts of everyday life, we will return to them frequently throughout this book.

Self-Monitoring and Self-Presentation

Although the desire to present the self favorably is a natural part of everyday life, both person and situation factors influence the extent to which we do it. For one, we are more likely to self-present in some situations than in others. When we are applying for a

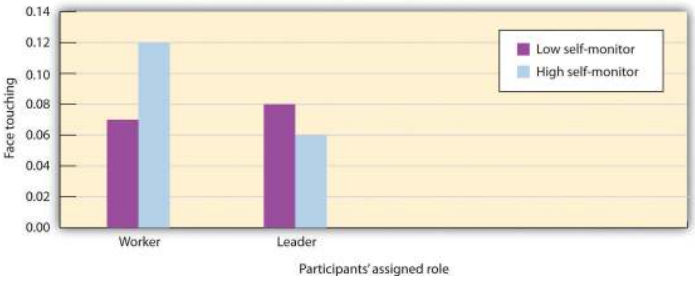
job or meeting with others whom we need to impress, we naturally become more attuned to the social aspects of the self, and our self-presentation increases.

And there are also individual differences. Some people are naturally better at self-presentation—they enjoy doing it and are good at it—whereas others find self-presentation less desirable or more difficult. An important individual-difference variable known as *self-monitoring* has been shown, in hundreds of studies, to have a major impact on self-presentation. Self-monitoring refers to *the tendency to be both motivated and capable of regulating our behavior to meet the demands of social situations* (Gangestad & Snyder, 2000). High self-monitors are particularly good at reading the emotions of others and therefore are better at fitting into social situations—they agree with statements such as "In different situations and with different people, I often act like very different persons" and "I guess I put on a show to impress or entertain people." Low self-monitors, on the other hand, generally act on their own attitudes, even when the social situation suggests that they should behave otherwise. Low self-monitors are more likely to agree with statements such as "At parties and social gatherings, I do not attempt to do or say things that others will like" and "I can only argue for ideas that I already believe." In short, high self-monitors try to get other people to like them by behaving in ways that the others find desirable (they are good self-presenters), whereas low self-monitors do not.

In one experiment that showed the importance of self-monitoring, Cheng and Chartrand (2003) had college students interact individually with another student (actually an experimental confederate) whom they thought they would be working with on an upcoming task. While they were interacting, the confederate subtly touched her own face several times, and the researchers recorded the extent to which the student participant mimicked the confederate by also touching his or her own face.

The situational variable was the status of the confederate. Before the meeting began, and according to random assignment to conditions, the students were told either that they would be the leader and that the other person would be the worker on the upcoming task, or vice versa. The person variable was self-monitoring, and each participant was classified as either high or low on self-monitoring on the basis of his or her responses to the self-monitoring scale.

Figure 4.6



High self-monitors imitated more when the person they were interacting with was of higher (versus lower) status. Low self-monitors were not sensitive to the status of the other. Data are from Cheng and Chartrand (2003).

As you can see in Figure 4.6, Cheng and Chartrand found an interaction effect: The students who had been classified as high self-monitors were more likely to mimic the behavior of the confederate when she was described as being the leader than when she was described as being the worker, indicating that they were "tuned in" to the social situation and modified their behavior to appear more positively. Although the low self-monitors did mimic the other person, they did not mimic her more when the other was high, versus low, status. This finding is quite consistent with the idea that the high self-monitors were particularly aware of the other person's status and attempted to self-present more positively to the high-status leader. The low self-monitors, on the other hand—because they feel less need to impress overall—did not pay much attention to the other person's status.

Narcissism and the Limits of Self-Enhancement

Our discussion to this point suggests that people will generally try to view themselves in the most positive possible light and to present themselves to others as favorably as they can. We emphasize our positive characteristics, and we may even in some cases distort information—all to help us maintain positive self-esteem.

There is a negative aspect to having too much self-esteem, however, at least when the esteem is unrealistic and undeserved. Narcissism is *a personality trait characterized by overly high self-esteem, self-admiration, and self-centeredness*. Narcissists agree with statements such as the following:

- "I know that I am good because everybody keeps telling me so."

- “I can usually talk my way out of anything.”
- “I like to be the center of attention.”
- “I have a natural talent for influencing people.”



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People do not normally like narcissists because they are unrealistic and think only of themselves. Narcissists make bad romantic partners—they behave selfishly and are always ready to look for someone else who they think will be a better mate, and they are likely to be unfaithful (Campbell & Foster, 2002; Campbell, Rudich, & Sedikides, 2002). Narcissists may also be obnoxious, continually interrupting and bullying others, and they may respond very negatively to criticism. Although they make positive first impressions, people eventually see narcissists less positively than narcissists see themselves, in part because they are perceived as arrogant. Perhaps surprisingly, narcissists seem to understand these things about themselves, although they engage in the behaviors anyway (Carlson, Vazire, & Oltmanns, 2011).

Social Psychology in the Public Interest

Does High Self-Esteem Cause Happiness or Other Positive Outcomes?

Teachers, parents, school counselors, and people in general frequently assume that high self-esteem causes many positive outcomes for people who have it and therefore that we should try to increase it in ourselves and others. Perhaps you agree with the idea that if you could increase your self-esteem, you would feel better about yourself and therefore be able to study harder, get better grades, or attract a more desirable mate. If you do believe that, you would not be alone. In 1986, the state of California funded a task force under the premise that raising self-esteem would help solve many of the state’s problems, including crime, teen pregnancy, drug abuse, school underachievement, and pollution.

Roy Baumeister and his colleagues (Baumeister, Campbell, Krueger, & Vohs, 2003) recently conducted an extensive review of the research literature to determine whether having high self-esteem was as helpful as many people seem to think it is. They began by assessing which variables were correlated with high self-esteem and then considered the extent to which high self-esteem caused these outcomes.

Baumeister and his colleagues found that high self-esteem does correlate with many positive outcomes. People with high self-esteem get better grades, are less depressed, feel less stress, and may even live longer than those who view themselves more negatively. The researchers also found that high self-esteem was correlated with greater initiative and activity, such that high self-esteem people just did more things. People with high self-esteem are more likely to be bullies, but they are also more likely to defend victims against bullies, compared with people with low self-esteem. People with high self-esteem are more likely to initiate interactions and relationships. They are more likely to speak up in groups and to experiment with alcohol, drugs, and sex. High self-esteem people also work harder in response to initial failure and are more willing to switch to a new line of endeavor if the present one seems unpromising. Thus having high self-esteem seems to be a valuable resource—people with high self-esteem are happier, more active, and in many ways better able to deal with their environment.

On the other hand, Baumeister and his colleagues also found that people with high self-esteem may sometimes delude themselves. High self-esteem people believe that they are more likable and attractive, have better relationships, and make better impressions on others than people with low self-esteem. But objective measures show that these beliefs are often distortions rather than facts. Furthermore, people with overly high self-esteem, particularly when it is accompanied by narcissism, defensiveness, conceit, and the unwillingness to critically assess one’s potential negative qualities, have been found to engage in a variety of negative behaviors (Baumeister, Smart, & Boden, 1996).

Todd Heatherton and Kathleen Vohs (2000) found that when people with extremely high self-esteem were forced to fail on a difficult task in front of a partner, they responded by acting more unfriendly, rudely, and arrogantly than did students with lower self-esteem. And research has found that children who inflate their social self-worth—those who think that they are more popular than they really are and who thus have unrealistically high self-esteem—are also more aggressive than the children who do not show such narcissistic tendencies (Sandstrom & Herlan, 2007; Thomaes, Bushman, Stegge, & Olthof, 2008). If you are thinking like a social psychologist, these findings may not surprise you—narcissists are all about self-concern, with little concern for others, and we have seen many times that other-concern is a necessity for satisfactory social relations.

Despite the many positive variables that relate to high self-esteem, when Baumeister and his colleagues looked at the causal role of self-esteem is they found little evidence that high self-esteem caused these positive outcomes. For instance, although high self-esteem is correlated with academic achievement, it is more the result than the cause of this achievement. Programs designed to boost the self-esteem of pupils have not been shown to improve academic performance, and laboratory studies have generally failed to find that manipulations of self-esteem cause better task performance.

In the end then, Baumeister and his colleagues concluded that programs designed to boost self-esteem should be used only in a limited way and should not be the only approach taken. Raising self-esteem will not make young people do better in school, obey the law, stay out of trouble, get along better with other people, or respect the rights of others. And these programs may even backfire, if the increased self-esteem creates narcissism or conceit. Baumeister and his colleagues suggested that attempts to boost self-esteem should only be carried out as a reward for good behavior and worthy achievements, and not simply to try to make children feel better about themselves.

Although we naturally desire to have social status and high self-esteem, we cannot always promote ourselves without any regard to the accuracy of our self-characterizations. If we consistently distort our capabilities, and particularly if we do this over a long period of time, we will just end up fooling ourselves and perhaps engaging in behaviors that are not actually beneficial to us. One of my colleagues has a son in high school who loves to think that he is an incredible golfer who could compete on the professional golf tour with the best golfers in the world. The problem, however, is that he's actually only a pretty average golfer. His parents are worried about him because although they realize that his high self-esteem might propel him to work harder at this sport, and although he certainly enjoys thinking positively about himself, he may also be setting himself up for long-term failure. How long can he continue to consider himself in this overly positive way before the reality comes crashing down on him that perhaps he really is not cut out for a life on the professional golf circuit and that he should consider doing something else? The hope is that it will not be too late to take up a more reasonable career when he does.

When we promote ourselves too much, although we may feel good about it in the short term, in the longer term the outcomes for the self may not be that positive. The goal of creating and maintaining positive self-esteem (an affective goal) must be tempered by the cognitive goal of having an *accurate* self-view (Kirkpatrick & Ellis, 2001; Swann, Chang-Schneider, & Angulo, 2007). Although we may prefer to hold highly favorable views of ourselves, more accurate views would almost certainly be more useful because accurate information is likely to lead to better decision making. Indeed, research suggests that people do not *only* self-enhance; they also desire to be known for who they believe they are, even if what they are is not all good. When people enter into relationships with others who verify their self-views, for example, they feel more intimate with the other person and more are satisfied with the interaction than they do with partners who are always positive toward them (Swann, De La Ronde, & Hixon, 1994; Swann & Pelham, 2002). The desire for self-verifying feedback is so powerful that people who have negative self-esteem may in some cases work to verify those negative views by avoiding positive feedback in favor of negative, but self-verifying, feedback (Swann, Rentfrow, & Guinn, 2002).



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In some cases, the cognitive goal of obtaining an accurate picture of ourselves and our social world and the affective goal of gaining positive self-esteem work hand in hand. Getting the best grade in the class on an important exam produces accurate knowledge about our skills in the domain as well as giving us some positive self-esteem. In other cases, the two goals are incompatible. Doing more poorly on an exam than we had hoped produces conflicting, contradictory outcomes. The poor score provides accurate information about the self—namely, that we have not mastered the subject—but at the same time makes us feel bad. It is in these cases that we must learn to reconcile our self-concept with our self-esteem. We must be able to accept our negative aspects and to work to overcome them. The ability to balance the cognitive and the affective features of the self helps us create efficient and effective behavior.

Jennifer Crocker and Lora Park (2004) have noted still another cost of our attempts to inflate our self-esteem: We may spend so much time trying to enhance our self-esteem in the eyes of others—by focusing on the clothes we are wearing, impressing others, and so forth—that we have little time left to really improve ourselves in more meaningful ways. And in some extreme cases, people experience such strong needs to improve their self-esteem and social status that they act in assertive or dominant ways in order to gain it. As in many other domains, then, having positive self-esteem is a good thing, but we must be careful to temper it with a healthy realism and a concern for others.

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4.5: The Social Self

2.5: The Social Self



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To this point, we have argued that human beings have complex and well-developed self-concepts and that they generally attempt to come to view themselves as positively as they can. In this section, we will consider in more detail the social aspects of the self by considering the many ways that the social situation determines our self-concept. Our selves are not created in isolation; we are not born with perceptions of ourselves as shy, interested in jazz, or charitable to others. Rather, these beliefs are determined by our observations of and interactions with others. Are you rich or poor? Beautiful or ugly? Smart or not? Good or poor at video games? And how do you know? These questions can be answered only by comparing ourselves with those around us. The self has meaning only within the social context, and it is not wrong to say that the social situation defines our self-concept and our self-esteem. We rely on others to provide a "social reality"—to help us determine what to think, feel, and do (Hardin & Higgins, 1996).

Social Comparison Helps Create the Self-Concept

The self-concept and self-esteem are determined in large part through the process of *social comparison* (Buunk & Gibbons, 2007; Van Lange, 2008). Social comparison *occurs when we learn about our abilities and skills, about the appropriateness and validity of our opinions, and about our relative social status by comparing our own attitudes, beliefs, and behaviors with those of others*. These comparisons can be with people that we know and interact with, with those that we read about or see on TV, or with anyone else that we view as important.

Social comparison occurs primarily on dimensions upon which there is no objectively correct answer and thus on which we can rely only on the beliefs of others for information. Answers to questions such as "What should I wear to the formal?" or "What kind of music should I have at my wedding?" are frequently determined at least in part by using the behavior of others as a basis of comparison. We also use social comparison to help us determine our skills or abilities—how good we are at performing a task or doing a job, for example. When a student looks at another student's paper to see what grade he or she got, or when we join a tennis club to compare our performance and progress with those of others, we are using social comparison to evaluate our abilities.

Research Focus

Affiliation and Social Comparison

The extent to which individuals use social comparison to determine their evaluations of events was demonstrated in a set of classic research studies conducted by Stanley Schachter (1959). Schachter's experiments tested the hypothesis that people who were

feeling anxious would prefer to affiliate with others rather than be alone because having others around would reduce their anxiety. Female college students at the University of Minnesota volunteered to participate in one of his experiments for extra credit in their introductory psychology class. They arrived at the experimental room to find a scientist dressed in a white lab coat, standing in front of a large array of electrical machinery. The scientist introduced himself as Dr. Zilstein of the Department of Neurology and Psychiatry, and he told the women that they would be serving as participants in an experiment concerning the effects of electrical shock. Dr. Zilstein stressed how important it was to learn about the effects of shocks, since electroshock therapy was being used more and more commonly and because the number of accidents due to electricity was also increasing!

At this point, the experimental manipulation occurred. One half of the participants (those in the *high-anxiety condition*) were told that the shocks would be "painful" and "intense," although they were assured that they could do no permanent damage. The other half of the participants (those in the *low-anxiety condition*) were also told that they would be receiving shocks but that they would in no way be painful—rather, the shocks were said to be mild and to resemble a "tickle" or a "tingle." Of course, the respondents were randomly assigned to conditions to assure that the women in the two conditions were, on average, equivalent except for the experimental manipulation.

Each of the women was then told that before the experiment could continue, the experimenter would have to prepare the equipment and that they would have to wait for a while until he was finished. He asked them if they would prefer to wait alone or to wait with others. The outcome of Schachter's research was clear—while only 33% of the women who were expecting mild shocks preferred to wait with others, 63% of the women expecting to get painful shocks wanted to wait with others. This was a statistically significant difference, and Schachter concluded that the women chose to affiliate with each other in order to reduce their anxiety about the upcoming shocks.



"Girls Camp 196" by znuk is licensed under CC BY 2.0.

In further studies, Schachter found that the research participants who were under stress did not want to wait with just any other people. They preferred to wait with other people who were expecting to undergo the same severe shocks that they were rather than with people who were supposedly just waiting to see their professor. Schachter concluded that this was not just because being around other people might reduce our anxiety but because we also use others who are in the same situation as we are to help us

determine how to feel about things. As Schachter (1959) put it, “Misery doesn’t just love any kind of company, it loves only miserable company” (p. 24). In this case, the participants were expecting to determine from the other participants how afraid they should be of the upcoming shocks.

In short, and as predicted by the idea of social comparison, the women in Schachter’s studies relied on each other to help them understand what was happening to them and to find out how they should feel and respond to their social situations. Again, the power of the social situation—in this case, in determining our beliefs and attitudes—is apparent.

Although Schachter’s studies were conducted in relatively artificial lab settings, similar effects have been found in field studies in more naturally occurring settings. For instance, Kulik, Mahler, and Moore (1996) found that hospital patients who were awaiting surgery preferred to talk to other individuals who were expecting to have similar procedures rather than to patients who were having different procedures, so that they could share information about what they might expect to experience. Furthermore, Kulik and his colleagues found that sharing information was helpful—people who were able to share more information had shorter hospital stays.

Upward and Downward Comparisons Influence Our Self-Esteem

Although we use social comparison in part to develop our self-concept—that is, to form accurate conclusions about our attitudes, abilities, and opinions—social comparison has perhaps an even bigger impact on our self-esteem. When we are able to compare ourselves favorably with others, we feel good about ourselves, but when the outcome of comparison suggests that others are better or better off than we are, then our self-esteem is likely to suffer. This is why good students who attend high schools in which the other students are only average may suddenly find their self-esteem threatened when they move on to more selective colleges in which they are no longer better than the other students (Marsh, Kong, & Hau, 2000). I’m sure you’ve had the experience yourself of the changes in self-esteem that occur when you have moved into a new grade in school, got a new job, or changed your circle of friends. In these cases, you may have felt much better about yourself or much worse, depending on the nature of the change. You can see that in these cases the actual characteristics of the individual person has not changed at all; only the social situation and the comparison others have changed. And yet the social situation can make a big difference in one’s self-esteem.

Because we naturally want to have positive self-esteem, we frequently attempt to compare ourselves positively with others. Downward social comparison occurs *when we attempt to create a positive image of ourselves through favorable comparisons with others who are worse off than we are.* Morse and Gergen (1970) had students apply for a job, and they also presented the students with another individual who was supposedly applying for the same job. When the other candidate was made to appear to be less qualified for the job than they were, the downward comparison with the less qualified applicant made the students feel better about their own qualifications. As a result, the students reported higher self-esteem than they did when the other applicant was seen as a highly competent job candidate. Research has also found that people who are suffering from serious diseases prefer to compare their condition with other individuals whose current condition and likely prognosis is worse than their own (Buunk, Gibbons, & Visser, 2002). These comparisons make them feel better about their own possible outcomes.

Although downward comparison provides us with positive feelings, upward social comparison, *which occurs when we compare ourselves with others who are better off than we are*, is also possible (Blanton, Buunk, Gibbons, & Kuyper, 1999; Vrugt & Koenis, 2002). Although upward comparison may lower our self-esteem by reminding us that we are not as well off as others, it is useful because it can provide information that can help us do better, help us imagine ourselves as part of the group of successful people that we want to be like (Collins, 2000), and give us hope (Snyder, Cheavens, & Sympson, 1997).

The outcomes of upward and downward social comparisons can have a substantial impact on our feelings, on our attempts to do better, and even on whether or not we want to continue performing an activity. When we compare positively with others and we feel that we are meeting our goals and living up to the expectations set by ourselves and others, we feel good about ourselves, enjoy the activity, and work harder at it. When we compare negatively with others, however, we are more likely to feel poorly about ourselves and enjoy the activity less, and we may even stop performing it entirely. When social comparisons come up poorly for us, we experience depression or anxiety, and these discrepancies are important determinants of our self-esteem (Higgins, Loeb, & Moretti, 1995; Strauman & Higgins, 1988).

Social Groups Provide Social Identity

Still another way that we use other people to create positive self-esteem is through our group memberships. We use the social situation to gain self-esteem by perceiving ourselves as members of important and valued groups that make us feel good about

ourselves. Social identity refers to *the positive emotions that we experience as a member of an important social group* (Hogg, 2003; Oakes, Haslam, & Turner, 1994; Tajfel, 1981).

Normally, our group memberships result in positive feelings, which occur because we perceive our own groups and thus ourselves in a positive light. If you are a "Midwesterner at heart," or if you live in the "best fraternity house on campus," your membership in the group becomes part of what you are, and the membership makes you feel good about yourself. The list that follows presents a measure of the strength of social identity with a group of university students, which might give you a good idea of the variable. If you complete the measure for your own university or college, I would imagine that you would agree mostly with the statements that indicate that you do identify with the group.

A Measure of Social Identity

This 10-item scale is used to measure identification with students at the University of Maryland, but it could be modified to assess identification with any group. The items marked with an "R" are reversed (such that low numbers become high numbers and vice versa) before the average of the scale is computed. The scale was originally reported by Luhtanen and Crocker (1992).

For each of the following items, please indicate your response on a scale from 1 (strongly disagree) to 7 (strongly agree) by writing a number in the blank next to the question.

1. ___ I identify with the group of University of Maryland students.
2. ___ I am glad to belong to the group of University of Maryland students.
3. ___ I make excuses for belonging to the group of University of Maryland students.
4. ___ I consider the group of University of Maryland students to be important.
5. ___ I feel held back by the group of University of Maryland students.
6. ___ I criticize the group of University of Maryland students.
7. ___ I see myself as belonging to the group of University of Maryland students.
8. ___ I try to hide belonging to the group of University of Maryland students.
9. ___ I feel strong ties with the group of University of Maryland students.
10. ___ I am annoyed to say that I am a member of the group of University of Maryland students.

Kay Deaux and her colleagues (Deaux, Reid, Mizrahi, & Ethier, 1995) asked college students to list the groups that they identified with. As you can see in Table 4.1 "Varieties of Social Identities", the students reported belonging to a wide variety of groups and claimed that many of these groups provided them with social identities. The categories that they listed included ethnic and religious groups (e.g., Asian, Jewish), political affiliations (conservative, Democratic), occupations and hobbies (gardener, tennis player), personal relationships (husband, girlfriend), and stigmatized groups (gay, homeless). You can see that these identities were likely to provide a lot of positive feelings for the individuals.

Table 4.1 Varieties of Social Identities

Relationships	Vocation/avocation	Political affiliation	Stigma	Ethnicity/religion
Widow	Intellectual	Feminist	Welfare recipient	Jewish
Divorced person	Bookworm	Political independent	Unemployed person	Christian
Woman	Military veteran	Democrat	Homeless person	Catholic
Man	Student	Republican	Retired person	Southerner
Lover	Collector		Old person	New Yorker
Friend	Musician		Fat person	American
Girlfriend	Gardener		Deaf person	Hispanic
Boyfriend	Teacher		Person with AIDS	Asian-American
Homemaker	Supervisor		Lesbian	African-American
Head of household	Secretary		Gay	
Teenager	Scientist		Smoker	
Child	Psychologist		Alcoholic	
Wife	Salesperson			
Husband	Business person			
Son	Athlete			
Daughter				
Sister				
Brother				
Grandmother				
Grandfather				
Uncle				
Aunt				
Mother Father				

This table represents some of the many social identities reported by a sample of college students. Data are from Deaux et al. (1995).

Which of our many category identities is most accessible for us will vary from day to day as a function of the particular situation we are in. Seeing a U.S. flag outside a post office may remind of us our national identity, whereas walking across campus and seeing the football stadium may remind us of our identification with our college. Identity can also be heightened when our identity is threatened by conflict with another group—such as during an important sports game with another university. Each individual has multiple potential social identities, including school and religious memberships, preferred sports and hobbies, and many other social groups, each of which is a potential source of social identity. As a result, which of the many group memberships a person emphasizes at a given time will depend on the situation as well as the person’s goals in that situation.



Social identity refers to the positive emotions we experience as a member of an important social group.

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Robert Cialdini and his colleagues (Cialdini et al., 1976) studied the idea that we can sometimes *enhance our self-esteem by "basking in the reflected glory" of our ingroups or of other people that we know*. They called this basking process BIRGing. To test this idea, they observed the clothes and clothing accessories that students at different U.S. universities wore to classes on Mondays. They found that when the university's football team had won its game on Saturday, students were likely to emphasize their university memberships by wearing clothing, such as sweatshirts and hats, with the symbols of their university on them. However, they were significantly less likely to wear university clothing on the Mondays that followed a football loss. Furthermore, in a study in which students from a university were asked to describe a victory by their university team, they frequently used the term "we," whereas when asked to describe a game in which their school lost, they used the term "we" significantly less frequently. Emphasizing that "we're a good school" and "we beat them" evidently provided a social identity for these students, allowing them to feel good about themselves.

It is not always possible to bask in the glory of others, however, because in some cases the other person's successes may create a comparison standard that leads to upward comparison and thus more negative emotions. Basking can only occur when the performance is on a dimension that is not relevant to our own self-concept because being outperformed by someone on a task that is personally important leads to upward social comparison, resulting in decreased self-esteem (Tesser, 1988).

To take an example from my own experience, I have found that although I can bask in my good friend Tom's accomplishments in his career as a lawyer, it is more difficult for me to bask in my colleague Thane's success in his career as a social psychologist. When the successes are on a dimension that I don't care about very much (such as when Tom recently won a prize from the American Bar Association), I'm happy to accept and enjoy the positive news, but it was much harder for me to bask when I found that Thane had won an important social psychology prize that I might have liked to win myself. When we are outperformed by others on a dimension that we care about, we attempt to save our self-esteem, for instance, by downplaying the importance of the task or by attributing the success to the other person's luck or other external factors (Tesser, 1988).

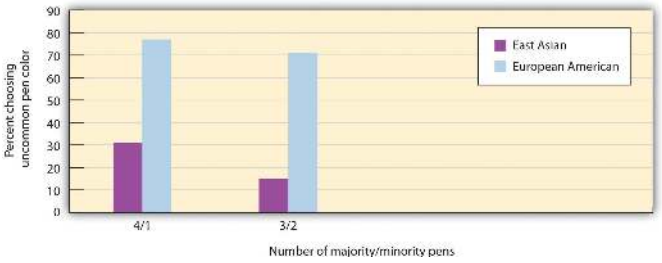
Different Cultures Create Different Selves

Because our culture is a powerful social situation, it naturally has a profound influence on our self-concept, and it influences how we think about and relate to others (Breakwell, 1993). For instance, East Asian students, who come from a collectivistic culture, are more likely to describe themselves in terms of group identities ("I am a member of a church," "I am a student at my university") and to make references to other people ("I try to make other people happy," "I cook dinner with my sister") than are European and American students, who come from an individualistic culture (Trafimow, Triandis, & Goto, 1991). And Europeans and Americans make more positive statements about themselves ("I am an excellent cook," "I am intelligent"), whereas East Asians are more likely to make positive statements about others (Markus, Kitayama, & Heiman, 1996; Smith & Bond, 1999).

One simple yet powerful demonstration of how the culture influences our self-concept is a study that was conducted by Kim and Markus (1999). In this study, participants were contacted in the waiting area of the San Francisco airport and asked to fill out a short questionnaire for the researcher. The participants were selected according to their cultural background, such that about one half of them indicated they were European Americans whose parents were born in the United States, whereas the other half indicated they were Asian Americans whose parents were born in China and who spoke Chinese at home. After completing the questionnaires (which were not used in the data analysis except to determine the cultural backgrounds), participants were asked if

they would like to take a pen with them as a token of appreciation. The experimenter extended his or her hand, which contained five pens. It was arranged such that the pens offered to the participants were either three or four of one color and either two or one of another color (the ink in the pens was always black). As shown in Figure 4.7 “Cultural Differences in Desire for Uniqueness”, and consistent with the hypothesized preference for uniqueness in Western, but not Eastern, cultures, the European Americans preferred to take a pen with the more unusual color, whereas the Asian American participants preferred one with the more common color.

Figure 4.7 Cultural Differences in Desire for Uniqueness



In this study, participants from European American and East Asian cultures were asked to choose a pen as a token of appreciation for completing a questionnaire. It was arranged such that there were either four pens of one color and one of another color or three pens of one color and two of another. European Americans were significantly more likely to choose the more uncommon pen color in both cases. Data are from Kim and Markus (1999, Experiment 3).

Culture also influences behavior, through its influence on the self-concept. Western individualistic people generally use techniques of self-presentation to stand out and express themselves as better than others, whereas Eastern collectivistic individuals are more likely to gain status and self-esteem by trying to conform to the norms of the group and be good group members (Heine, 2005; Sedikides, Gaertner, & Toguchi, 2003). Supporting the idea that people from Eastern cultures are less likely to need to self-enhance, Heine and Lehman (1999) found that Japanese students were more critical of themselves and thus had larger discrepancies between their ideal selves and actual selves than did Canadian students, and yet at the same time, the Japanese students were less distressed by these discrepancies.

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4.6: How to Foster Long-Term Life Change

2.6: How to Foster Long-Term Change in Life

Dr. James M. Olson, a psychology professor at the University of Western Ontario, London, has identified several psychological barriers that commonly prevent people from taking action, even when inaction poses a threat to their health. These barriers occur during 3 stages of behavior modification: admission of the problem, initial attempts to change, and long-term change as outlined below:

- *Barriers to Admission of the problem*
  The first step in lasting change is admitting a problem exists. People often fail to change behavior that poses a risk to their health because they deny a risk exists, trivialize their personal risk, feel invulnerable, make a faulty conceptualization, (i.e., they attribute early warning signs to a benign cause), or experience debilitating emotions when contemplating preventative measures.
- *Barriers to Initial Attempts to Change*
  At this stage, people acknowledge the need to change but struggle to accomplish their goals. This failure is a result of lack of knowledge, low self-efficacy (the belief in one's own ability to succeed at change), and dysfunctional attitudes.
- *Barriers to long-term change*
  Just because a person has experienced success in changing a behavior, that doesn't mean the change is permanent. Barriers to long-term change include cognitive and motivational drift (diminishing enthusiasm for the need to change), lack of perceived improvement, lack of social support, and lapses.

To read more about these barriers to change, including strategies for overcoming these barriers, read Dr. Olson's entire article linked below:

Psychological Barriers to Behavior Change

A presentation on overcoming barriers to change by the National Institute for Health and Clinical Excellence (NHS) is linked below:

Overcoming Barriers to Change

Fostering Wellness in Your Life

You are once again feeling motivated to eat better, exercise more, drink less caffeine or make any number of the positive lifestyle changes you have been telling yourself you want to make. You have tried before— probably declaring another attempt as a New Year's resolution—but without experiencing much success. Making a lifestyle change is challenging, especially when you want to transform many things at once. This time, think of those changes not as a resolution but as an evolution.

Lifestyle changes are a process that take time and require support. Once you are ready to make a change, the difficult part is committing and following through. So do your research and make a plan that will prepare you for success. Careful planning means setting small goals and taking things one step at a time.

Here are five tips from the American Psychological Association (APA) that will assist you in making lasting, positive lifestyle and behavior changes:

- *Make a plan that will stick.*
  Your plan is a map that will guide you on this journey of change. You can even think of it as an adventure. When making your plan, be specific. Want to exercise more? Detail the time of day when you can take walks and how long you will walk. Write everything down, and ask yourself if you are confident that these activities and goals are realistic for you. If not, start with smaller steps. Post your plan where you will most often see it as a reminder.
- *Start small*.
  After you've identified realistic short-term and long-term goals, break down your goals into small, manageable steps that are specifically defined and can be measured. Is your long-term goal to lose 20 pounds within the next five months? A good weekly goal would be to lose one pound a week. If you would like to eat healthier, consider as a goal for the week replacing dessert with a healthier option, like fruit or yogurt. At the end of the week, you will feel successful knowing you met your goal.
- *Change one behavior at a time*. Unhealthy behaviors develop over the course of time, so replacing unhealthy behaviors with healthy ones requires time. Many people run into problems when they try to change too much too fast. To improve your

success, focus on one goal or change at a time. As new healthy behaviors become a habit, try to add another goal that works toward the overall change you are striving for.

- *Involve a buddy.*
  Whether it be a friend, co-worker or family member, someone else on your journey will keep you motivated and accountable. Perhaps it can be someone who will go to the gym with you or someone who is also trying to stop smoking. Talk about what you are doing. Consider joining a support group. Having someone with whom to share your struggles and successes makes the work easier and the mission less intimidating.
- *Ask for support.*
  Accepting help from those who care about you and will listen strengthens your resilience and commitment. If you feel overwhelmed or unable to meet your goals on your own, consider seeking help from a psychologist. Psychologists are uniquely trained to understand the connection between the mind and body, as well as the factors that promote behavior change. Asking for help does not mean a lifetime of therapy; even just a few sessions can help you examine and set attainable goals or address the emotional issues that may be getting in your way.

Start with “Why?”

Making changes in habitual behavior requires a deep and abiding belief that change is needed. Your desire to change may be motivated by personal goals, or it may be the result of the impact your improved wellness will have on those you love. Nietzsche said, “He who has a strong enough *why* can bear almost any *how*.”

Once you have a compelling reason to change, develop a plan and commit to that plan. If you experience a moment of weakness, do not waste time on self- condemnation. Revisit your compelling reason and reaffirm your commitment to change. The health, peace, and sense of wellbeing inherent in the highest level of your own personal wellness is more than worth the effort required to change.

For more information about making permanent lifestyle changes, go to the APA website linked below:

LIfestyle Changes That Last

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4.7: End of Chapter Wrap-Up

2.7: Chapter 2 Wrap-Up

Here are the key takeaways from Chapter 2:

- Interpersonal communication involves the exchange of messages between individuals within personal relationships. Central to this exchange is the concept of self-concept, which encompasses our perceptions of ourselves, including self-image, self-esteem, and ideal self. Our self-concept is shaped by various factors such as reflected appraisal, social comparison, and self-fulfilling prophecies. Understanding self-concept theories and their implications can enhance our awareness of how we perceive ourselves and interact with others in personal relationships.
- The sense of self develops early in humans, as evidenced by infants recognizing themselves in mirrors by about 18 months old. As children grow, their self-concept becomes more complex and organized into various aspects, including physical characteristics, social group memberships, and personality traits. This self-awareness continues to evolve throughout adulthood, influencing behavior and perception. Self-complexity, or the extent to which individuals have many different and relatively independent ways of thinking about themselves, plays a crucial role in buffering against negative emotions and enhancing resilience. Moreover, self-awareness can be influenced by external factors such as mirrors or social situations, impacting behavior and decision-making. However, people tend to overestimate how much others focus on them, leading to the illusion of transparency.
- Our self-esteem, shaped by both our thoughts and emotions, plays a crucial role in our lives. While it's influenced by various factors such as our own performance, appearance, and social relationships, our desire for positive self-esteem leads us to seek out, process, and remember information in ways that enhance our self-perception. Self-presentation, the act of portraying ourselves positively to others, is a natural part of social interaction and significantly impacts our self-esteem. Moreover, individual differences, such as self-monitoring, influence how effectively we engage in self-presentation, with high self-monitors being particularly adept at adjusting their behavior to meet social demands and maintain positive self-esteem.
- Social comparison plays a significant role in shaping the self-concept and self-esteem. Downward social comparison, where we compare ourselves favorably to others, leads to positive feelings, while upward social comparison, where others are perceived as better or better off, triggers negative emotions. Social identity, derived from our group memberships, generates positive emotions as we perceive our groups positively. Our accessible category identities vary based on situational contexts. We may boost self-esteem by associating with successful in-groups or individuals. Culture profoundly impacts our self-concept and interpersonal dynamics.
- Dr. James M. Olson identifies psychological barriers hindering behavior change, occurring in stages: admitting the problem, initial change attempts, and long-term maintenance. These barriers include denial, lack of knowledge, and lapses. Overcoming them requires realistic planning, starting with small steps, focusing on one behavior at a time, seeking support from others, and asking for professional help if needed. Understanding the "why" behind change fosters commitment and resilience on the journey toward wellness.



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5.1: Front Matter

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SECTION OVERVIEW

5.2: Introduction to Positive Psychology

5.2.1: Introduction to Positive Psychology

5.2.2: Affective Forcasting

5.2.3: Three Key Strengths and Pursuing Positive Emotion

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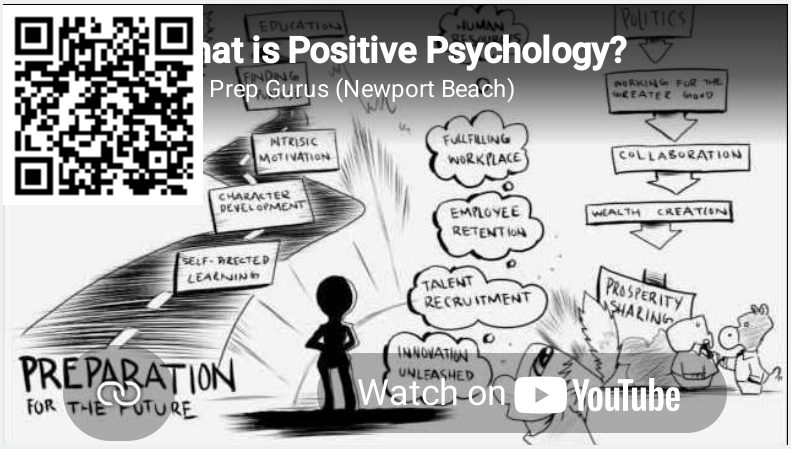
5.2.1: Introduction to Positive Psychology

- Describe what positive psychology is, who started it, and why it came into existence.
- Identify some of the most important findings from the science of positive psychology with respect to forgiveness, gratitude, and humility.
- Explore how positive psychology might make a difference in how you think about your own life, the nature of human nature, and what is really important to you.

What is Positive Psychology?

WATCH List

Watch What is Positive Psychology?[1], a video by the Test Prep Gurus introducing the concept of Positive Psychology. They will briefly cover topics of well-being, mindfulness, flow, learned optimism, and more!



In 1998, Martin Seligman, who was then president of the American Psychological Association, urged psychologists to focus more on understanding how to build human strength and psychological well-being. In deliberately setting out to create a new direction and new orientation for psychology, Seligman helped establish a growing movement and field of research called positive psychology (Compton, 2005)[2]. In a very general sense, positive psychology can be thought of as the science of happiness; it is an area of study that seeks to identify and promote those qualities that lead to greater fulfillment in our lives. This field looks at people's strengths and what helps individuals to lead happy, contented lives, and it moves away from focusing on people's pathology, faults, and problems.

According to Seligman and Csikszentmihalyi (2000)[3], positive psychology, at the subjective level is about valued subjective experiences: well-being, contentment, and satisfaction (in the past); hope and optimism (for the future); and… happiness (in the present). At the individual level, it is about positive individual traits: the capacity for love and vocation, courage, interpersonal skill, aesthetic sensibility, perseverance, forgiveness, originality, future mindedness, spirituality, high talent, and wisdom.

Some of the topics studied by positive psychologists include altruism and empathy, creativity, forgiveness and compassion, the importance of positive emotions, enhancement of immune system functioning, savoring the fleeting moments of life, and strengthening virtues as a way to increase authentic happiness (Compton, 2005)[4]. Recent efforts in the field of positive psychology have focused on extending its principles toward peace and well-being at the level of the global community. In a war-torn world in which conflict, hatred, and distrust are common, such an extended "positive peace psychology" could have important implications for understanding how to overcome oppression and work toward global peace (Cohrs, Christie, White, & Das, 2013)[5]. (Spielman et al., 2020)[28].



Throughout most of its history, psychology was concerned with identifying and remedying human ills. It has largely focused on decreasing maladaptive emotions and behaviors, while generally ignoring positive and optimal functioning. In contrast, the goal of positive psychology is to identify and enhance the human strengths and virtues that make life worth living. Unlike the positive thinking or new thought movements that are associated with people like Norman Vincent Peale or Rhonda Byrne (The Secret), positive psychology pursues scientifically informed perspectives on what makes life worth living. It is empirically based. It focuses on measuring aspects of the human condition that lead to happiness, fulfillment, and flourishing.

Moving from an exclusive focus on distress, disorder, and dysfunction, positive psychology shifts the scientific lens to a concentration on well-being, health, and optimal functioning. Positive psychology provides a different vantage point through which to understand human experience. Recent developments have produced a common framework that locates the study of positive states, strengths and virtues in relation to each other and links them to important life outcomes. Recent developments suggest that problems in psychological functioning may be more profitably dealt with as the absence, excess, or opposite of these strengths rather than traditional diagnostic categories of mental illness. The principal claim of positive psychology is that the study of health, fulfillment and well-being is as deserving of study as illness, dysfunction, and distress, and has resonated well with both the academic community and the general public.

Understanding the VIA Classification of Character Strengths

As a relatively new field of research, positive psychology lacked a common vocabulary for discussing measurable positive traits before 2004. Traditional psychology benefited from the creation of the Diagnostic and Statistical Manual of Mental Disorders (DSM), which provided researchers and clinicians with the same set of language from which they could talk about the negative. As a first step in remedying this disparity between traditional and positive psychology, Chris Peterson and Martin Seligman set out to identify, organize and measure character. The **Values in Action (VIA)** classification of strengths was an important initial step toward specifying important positive traits (Peterson & Seligman, 2004)[6]. Peterson and Seligman examined ancient cultures (including their religions, politics, education and philosophies) for information about how people in the past construed human virtue. The researchers looked for virtues that were present across cultures and time. Six core virtues emerged from their analysis: courage, justice, humanity, temperance, transcendence and wisdom. The VIA is the positive psychology counterpart to the DSM used in traditional psychology and psychiatry. Unlike the DSM, which scientifically categorizes human deficits and disorders, the VIA classifies positive human strengths. This approach vastly departs from the medical model of traditional psychology, which

focuses on fixing deficits. In contrast, positive psychologists emphasize that people should focus and build upon what they are doing well.

The VIA is a tool by which people can identify their own character strengths and learn how to capitalize on them. It consists of 240 questions that ask respondents to report the degree to which statements reflecting each of the strengths apply to themselves. For example, the character strength of hope is measured with items that include ‘‘I know that I will succeed with the goals I set for myself.’’ The strength of gratitude is measured with such items as ‘‘At least once a day, I stop and count my blessings.’’

Within the United States, the most commonly endorsed strengths are kindness, fairness, honesty, gratitude and judgment (Park, Peterson & Seligman, 2005)[7]. Worldwide, the following strengths were most associated with positive life satisfaction: hope, zest, gratitude and love. The researchers called these strengths of the heart. Moreover, strengths associated with knowledge, such as love of learning and curiosity, were least correlated with life satisfaction (Park, Peterson & Seligman, 2005)[8]. (Emmons, 2024)[29].

? Guiding Questions

1. What is Positive Psychology?
2. What led to the field of Positive Psychology
3. What is the difference between learned optimism and learned helplessness?
4. What are the pillars of positive psychology?
5. What is the problem with the disease model of psychology?
6. What is eudaimonia vs. hedonia?
7. What is learned optimism?
8. What are the different types of "lives" Dr. Seligman proposes?

Supplementary Material

- For those of you who found this too simple and need a bit more detail on the background of Positive Psychology, What (and Why) is Positive Psychology?[9] by Gable et al. may help.
- Learn more about Martin Seligman life and contribution to the field of Positive Psychology from the National Endowment for the Humanities featured article[10] (2020) and watch him discuss The new era of positive psychology[11], hosted by TED Talks (2004).
- The PERMA model, introduced by psychologist Martin Seligman, is a framework for understanding and enhancing well-being, encompassing five key elements: Positive Emotion, Engagement, Relationships, Meaning, and Accomplishment. By emphasizing these components, the PERMA model provides a holistic approach to cultivating happiness and fulfillment in individuals' lives. Read more about his PERMA Model[12].

Definition: Values in Action (VIA)

tool by which people can identify their own character strengths and learn how to capitalize on them. It consists of 240 questions that ask respondents to report the degree to which statements reflecting each of the strengths apply to themselves.

Attribution

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5.2.2: Affective Forcasting

Exploring Emotional Predicting

This Psychology Today article[13] explores the concept of affective forecasting, examining how individuals predict and anticipate their emotional reactions to future events, often with notable inaccuracies. Timothy Wison and Daniel Gilbert also discuss affective forecasting in this paper called, Knowing What to Want[14] (2005).



An important point should be considered regarding happiness.People are often poor at **affective forecasting**: predicting the intensity and duration of their future emotions (Wilson & Gilbert, 2003)[15]. In one study, nearly all newlywed spouses predicted their marital satisfaction would remain stable or improve over the following four years; despite this high level of initial optimism, their marital satisfaction actually declined during this period (Lavner, Karner, & Bradbury, 2013)[16].

In addition, we are often incorrect when estimating how our long-term happiness would change for the better or worse in response to certain life events. For example, it is easy for many of us to imagine how euphoric we would feel if we won the lottery, were asked on a date by an attractive celebrity, or were offered our dream job. It is also easy to understand how long-suffering fans of the Chicago Cubs baseball team, which had not won a World Series championship since 1908, thought they would feel permanently elated when their team finally won another World Series in 2016. Likewise, it is easy to predict that we would feel permanently miserable if we suffered a disabling accident or if a romantic relationship ended. (Spielman et al., 2020)[30].

WATCH List

Watch Dan Gilbert, a very well known affective forecasting researcher discuss The surprising science of happiness[17] in his 2012 TED Talk.



Guiding Questions

1. What is Affective Forecasting?
2. What is an impact bias and why is it important?
3. Are people good or bad at forecasting their future happiness? Why or why not?
4. What is "sense making" and how is it relevant to negative events?

Definition: Affective Forecasting

predicting the intensity and duration of their future emotions

Attribution

[13]Psychology Today. (n.d.). Affective Forecasting. https://www.psychologytoday.com/us/basics/affective-forecasting

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5.2.3: Three Key Strengths and Pursuing Positive Emotion

Forgiveness, **gratitude**, and **humility** are three key strengths that have been the focus of sustained research programs within positive psychology. What have we learned about each of these and why do these matter for human flourishing?



Forgiveness

Forgiveness is essential to harmonious long-term relationships between individuals, whether between spouses or nations, dyads or collectives. At the level of the individual, forgiveness of self can help one achieve an inner peace as well as peace with others and with God. Wrongdoing against others can result in guilt, and self-loathing. Resentment can give away to hate and intolerance. Both perpetrator and victim suffer. Conversely, forgiveness can be an avenue to healing.

It is the basic building block of loving relationships with others. When one person or nation does something to hurt another, the relationship between the two can be irrevocably damaged. Because the potential for conflict is seemingly built into human nature, the prospects for long-term peace may seem faint. Forgiveness offers another way. If the victim can forgive the perpetrator, the relationship may be restored and possibly even saved from termination. The essence of **forgiveness** is that it creates a possibility for a relationship to recover from the damage caused by the offending party's offense. Forgiveness is thus a powerful pro-social process. It can benefit human social life by helping relationships to heal. , on the social level, forgiveness may be the critical element needed for world peace. Culligan (2002)[18] wrote "Forgiveness may ultimately be the most powerful weapon for breaking the dreadful cycle of violence."

Research is answering fundamental questions about what forgiveness is and isn't, how it develops, what are its physiological correlates and physical effects, whether it is always beneficial, and how people—if they are so motivated—might be helped to forgive. Forgiveness is not excusing, condoning, tolerating, or forgetting that one has been hurt because of the actions of another. Forgiveness is letting go of negative thoughts (e.g. wishing the offender harm), negative behaviors (e.g. a desire to retaliate, and negative feelings (e.g. resentment) toward the offender (McCullough, Root, & Cohen, 2006)[19] .

There have been numerous studies looking at forgiveness interventions. The interventions involved counseling and exercises which were used to help people move from anger and resentment towards forgiveness. In one study, incest survivors who experienced the forgiveness intervention had at the end of the intervention increased abilities to forgive others, increased hopefulness and decreased levels of anxiety and depression. In another study, college students were randomized to a group that received a forgiveness education program and another group who studied human relations. The group that received the forgiveness education program

showed higher levels of hope and an increased willingness to forgive others. This greater self-forgiveness was associated with increased self-esteem, lower levels of anxiety, lower levels of depression and a more positive view of their patient.

In many of these studies, it was shown that people who are able to forgive are more likely to have better interpersonal functioning and therefore social support. The act of forgiveness can result in less anxiety and depression, better health outcomes, increased coping with stress, and increased closeness to God and others (Enright, 2001)[20]. (Emmons, 2024)[30].

Gratitude

Gratitude is a feeling of appreciation or thankfulness in response to receiving a benefit. The emerging science of gratitude has produced some important findings. From childhood to old age, accumulating evidence documents the wide array of psychological, physical, and relational benefits associated with gratitude (Wood, Froh, & Geraghty, 2010)[21]. Gratitude is important not only because it helps us feel good, but also because it inspires us to do good. Gratitude heals, energizes, and transforms lives in a myriad of ways consistent with the notion that virtue is both its own reward and produces other rewards (Emmons, 2007)[22].

To give a flavor of these research findings, dispositional gratitude has been found to be positively associated qualities such as empathy, forgiveness, and the willingness to help others. For example, people who rated themselves as having a grateful disposition perceived themselves as having more socially helpful characteristics, expressed by their empathetic behavior, and emotional support for friends within the last month (McCullough, Emmons, & Tsang, 2002)[23]. In our research, when people report feeling grateful, thankful, and appreciative in their daily lives, they also feel more loving, forgiving, joyful, and enthusiastic. Notably, the family, friends, partners and others who surround them consistently report that people who practice gratitude are viewed as more helpful, more outgoing, more optimistic, and more trustworthy (Emmons & McCullough, 2003)[24].

Expressing gratitude for life's blessings – that is, a sense of wonder, thankfulness and appreciation– is likely to elevate happiness for a number of reasons. Grateful thinking fosters the savoring of positive life experiences and situations, so that people can extract the maximum possible satisfaction and enjoyment from their circumstances. Counting one's blessings may directly counteract the effects of hedonic adaptation, the process by which our happiness level returns, again and again, to its set range, by preventing people from taking the good things in their lives for granted. If we consciously remind ourselves of our blessings, it should become harder to take them for granted and adapt to them. And the very act of viewing good things as gifts itself is likely to be beneficial for mood.

How much does it matter? Consider these eye-popping statistics. People are 25% happier if they keep gratitude journals, sleep 1/2 hour more per evening, and exercise 33% more each week compared to persons who are not keeping journals. They achieve up to a 10% reduction in systolic blood pressure, and decrease their dietary fat intake by up to 20%. Lives marked by frequent positive emotions of joy, love and gratitude are up to 7 years longer than lives bereft of these pleasant feelings.

The science of gratitude has also revealed some surprising findings. For example, students who practice gratitude increase their grade point average. Occasional gratitude journaling boosts well-being more than the regular practice of counting blessings. Remembering one's sorrows, failures, and other painful experiences is more beneficial to happiness than recalling only successes. Becoming aware that a very pleasant experience is about to end enhances feelings of gratitude for it. Thinking about the absence of something positive in your life produces more gratitude and happiness than imagining its presence. (Emmons, 2024)[31].

Humility

One aspect of humility is an awareness of the relatively little that one can really know about the world.

What is humility and why does it matter? Although the etymological roots of humility are in lowliness and self-abasement (from the Latin term humilis meaning "lowly, humble," or literally "on the ground" and from the Latin term humus meaning "earth"), the emerging consensus among scholars is that **humility** is a psychological and intellectual virtue, or a character strength.

There is no simple definition but it seems to involve the following elements: A clear and accurate (not underestimated) sense of one's abilities and achievements; the ability to acknowledge one's mistakes, imperfections, gaps in knowledge, and limitations (often with reference to a "higher power"); an openness to new ideas, contradictory information, and advice keeping one's abilities and accomplishments in perspective; relatively low self-focus or an ability to "forget the self"; appreciation of the value of all things, as well as the many different ways that people and things can contribute to our world.

In contemporary society, it is easy to overlook the merits of humility. In politics, business and sports, the egoists command our attention. In contrast, the primary message of this book is that the unassuming virtue of humility, rather than representing weakness or inferiority, as is commonly assumed, is a strength of character that produces positive, beneficial results for self and society. Successful people are humble people. They are more likely to flourish in life, in more domains, than are people who are less humble (Exline & Hill, 2012)[25].

Do you think you are you a humble person? For obvious reasons, you cannot rate your own level of humility. It's an elusive concept to get at scientifically. "I am very humble" is self-contradictory. This has not discouraged personality psychologists from developing questionnaires to get at it, albeit indirectly. For example, to what extent do you identify with each of the following statements:

1. I generally have a good idea about the things I do well or do poorly.
2. I have difficulty accepting advice from other people.
3. I try my best in things, but I realize that I have a lot of work to do in many areas.
4. I am keenly aware of what little I know about the world.

> Questions such as these tap various facets of the humble personality, including an appreciation and recognition of one's limitations, and an accurate assessment of oneself.

Humble people are more likely to flourish in life, in more domains, than are people who are less humble. Consider a handful of findings from recent research studies and surveys:

- People who say they feel humble when they are praised report that the experience made them want to be nice to people, increase their efforts, and challenge themselves
- Humble people are more admired and the trait of humility is viewed positively by most
- Humble teachers are rated as more effective and humble lawyers as more likeable by jurors
- CEO's who possessed a rare combination of extreme humility and strong professional will were catalysts for transforming a good company into a great one
- Over 80% of adults surveyed indicated that it is important that professionals demonstrate modesty/humility in their work
- Humility is positively associated with academic success in the form of higher grades (Exline & Hill, 2012)[26]. (Emmons, 2024)[32]

Pursuing Positive Emotions

In this section, we explored several strengths that can be utilized to cultivate positive emotions. However, it's worth noting, as highlighted in the The Paradoxical Effects of Pursuing Positive Emotion, When and Why Wanting to Feel Happy Backfires[27] by Ford & Mauss (2013), that there may exist some paradoxical consequences associated with the pursuit of positive emotions.

? Guided Questions

1. Why does chasing happiness sometimes have a paradoxical outcome?
2. What are some things you can do to prevent pursuing happiness from resulting in harm?
3. What are some activities tied to reduced happiness?

Definitions

Forgiveness

creates a possibility for a relationship to recover from the damage caused by the offending party's offense

Gratitude

feeling of appreciation or thankfulness in response to receiving a benefit

Humility

A clear and accurate sense of one's abilities and achievements; the ability to acknowledge one's mistakes, imperfections, gaps in knowledge, and limitations (often with reference to a "higher power"); an openness to new ideas, contradictory information,

and advice keeping one's abilities and accomplishments in perspective; relatively low self-focus or an ability to "forget the self"; appreciation of the value of all things, as well as the many different ways that people and things can contribute to our world

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SECTION OVERVIEW

5.3: Embracing Positive Emotions

5.3.1: Measurements and Concepts of Happiness and Well-being

5.3.2: Smiles

5.3.3: The Function of Positive Emotion

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5.3.1: Measurements and Concepts of Happiness and Well-being

Learning Objectives

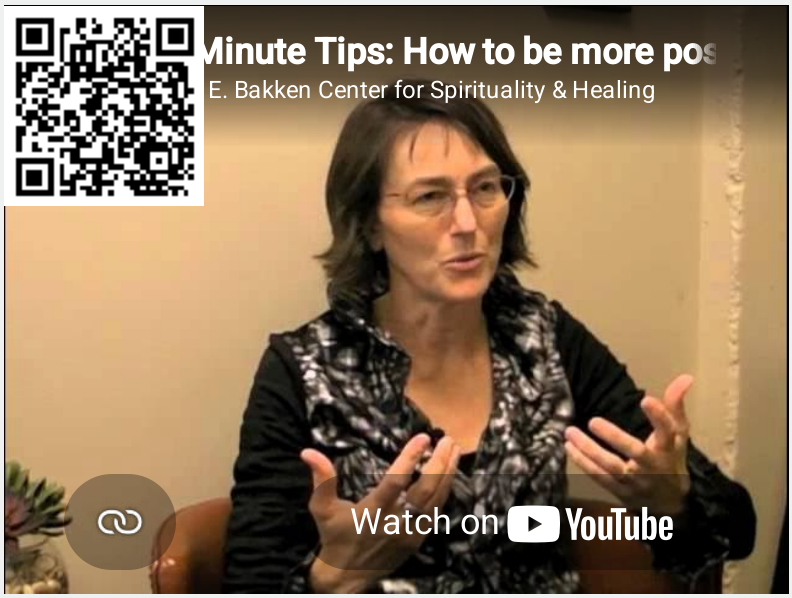
Upon reading this chapter, the reader should be able to:

- Familiarize yourself with the measurement of positive emotion and its role in the field of Positive Psychology, as well as several positive emotion theories
- Understand the value of positive emotions (e.g., what they are associated with, their function)

A Journey into Well-Being and Happiness

WATCH List

Dr. Barbara Fredrickson, a leading scholar in the field of positive psychology, explains simple ways that you can enhance positive emotions in your life in her video, 2-Minute Tips: How to be more positive[1].



Also, watch Dr. Fredrickson discuss how positive emotions open our minds[2] and broadens our awareness of the world, allowing us to become more in tune with the needs of others.

Here you can watch Sonja Lyubomirsky, a happiness researcher, shedding light on how much of our happiness is determined by our genes, and how much is within our power to control in her video, What Determines Happiness?[3]

Watch Ron Gutman reviews a collection of studies about smiling in his TED Talk titled, The hidden power of smiling[4] and note down some examples of research study findings on smiling as you watch.

READ List

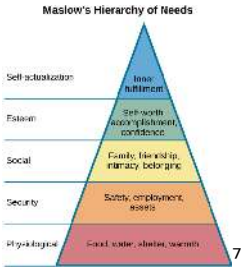
Read the following website overview on Eudaimonic Well-Being[5], including the definition, meaning, and examples, written by Arasteh Gatchpazian.

Happiness is a state of well-being characterized by emotions ranging from contentment to intense joy, typically subjectively defined by the person, characterized by more positive than negative emotions, and the sense that one is progressing towards goals (Tkach & Lyubomirsky, 2006)[6]. Note that subjective well-being is used Interchangeably with Happiness, but happiness can also simply be one of the positive emotions. Although, this is very subjective and the term is often used interchangeably with well-

being. Academic Psychologists and researchers in Psychology rarely use the term “happiness” to mean the broad characterization the public usually means. For now we will say happiness is a specific example of a “positive emotion”.

Hedonic and Eudaimonic Perspectives

Subjective often refers to emotions, leading us to examine subjective well-being. **Subjective Well-Being (SWB)** is how people experience the quality of their life in both emotional reactions (negative and positive emotions) and cognitive judgment. SWB is a **hedonic** approach of understanding emotions since there is a focus on pleasure and pain as indicators of well-being. On the contrary, the **eudaimonic** well-being approach focuses on personal meaning, growth, and positive functioning which comes from living a “good life” in line with your authentic self. Think about Maslow’s hierarchy of needs where a sense of belonging & **self-actualization** reside at the top of the pyramid.



[7]

One thing to note is the difference between terminology within hedonic measures. Positive emotion, for example, is specific to qualities that are temporary or fleeting. These can be seen as emotions that occur only in certain circumstances or for a short period of time. Positive mood is in the middle of hedonic and eudaimonic measures as it refers to a feeling of positivity or happiness that someone experiences over a period of time. Trait Positive affect is closer to Eudaimonic measures because it refers to a long lasting positive experience. People high in trait positive affect tend to have optimistic outlooks on life and bounce back more easily from setbacks or negative experiences.

Studying happiness requires understanding that positive and negative feelings are somewhat independent of one another. We must study them separately to get the full picture of emotional affect.

So, what are the causes of happiness? There are three causes that we will touch on. First, your goal and needs being satisfied. You need to have your basic needs met for pleasure. Secondly, keeping yourself active and engaging in things that are intrinsically rewarding. Doing things is what gives us joy and when we are doing things we enjoy and that we are good at, we tend to experience a state of **flow**, or being in the zone.

The most basic way to measure happiness is to simply ask people. A very simple way of doing this, often used on children, is showing different faces ranging from happy to sad. People are then asked to point to the face that expresses how they are feeling. Another way of measuring happiness is to measure positive emotions using single item happiness scales and multi item emotion scales. One example of a single item scale is asking people “how happy are you?” which is an older methodology, but still practiced today. One study showed that the single question of “how happy are you today?” predicted how long you live (Steptoe et al., 2012)[8]. A very common multi-item emotion scale is the Positive and Negative Affect Schedule (PANAS) which includes 20 items with an extended version of 60 items (PANAS –X).

In the next section, we will focus on implicit methods of measuring happiness.

? Guiding Questions

1. What are some characteristics of happy people?
2. What is the happiness pie chart (Lyubomirsky)?
3. What are some good mottos and strategies to be happy in the moment? (Fredrickson)
4. What does it mean that positive emotions "open our minds"?
5. What is the difference between hedonia and eudaimonia?
6. What is the Maslow hierarchy of needs?
7. What are the components of the Carol Ryff model of Well-Being?
8. What is self-determination theory and how does it relate to Eudaimonia?

Definitions

Happiness

state of well-being characterized by emotions ranging from contentment to intense joy, typically subjectively defined by the person, characterized by more positive than negative emotions, and the sense that one is progressing towards goals

Subjective Well-Being (SWB)

how people experience the quality of their life in both emotional reactions (negative and positive emotions) and cognitive judgment

Hedonia/Hedonism[21]

refers to the prioritization of pleasure in one's lifestyle, actions, or thoughts

Eudaimonia

living a life that is fulfilling and finding meaning in everyday life

Self-Actualization[22]

a need that essentially equates to achieving one's full potential, and it can only be realized when needs lower on the pyramid have been met

Flow[20]

being in the zone, or fully immersed in a feeling of energized focus, full involvement, and enjoyment in the process of the activity

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5.3.2: Smiles

Duchenne Smiles

Duchenne smiles are smiles that involve the whole face – including the upper cheek (zygomaticus major) and eye muscles (orbicularis oculi), not just the mouth muscles. In comparison to “polite” smiles, Duchenne smiles seem to glow, showing observers that the smiler is experiencing genuine positive emotion. Thus, people who often display Duchenne smiles are likely to be happier people, in general. Furthermore, given what we know about what causes happiness, they may even be more moral, virtuous, and eudaimonically motivated people.



The Duchenne smile is named after the French neurologist Guillaume Duchenne, who pointed out in the mid-1800s that there are two very different kinds of smiles. Non-Duchenne smiles can mean a lot of things: polite smiles used to be friendly, communicate how you are feeling, or even be "put on" for a photo. Generally, human smiles express joy or acceptance, but some cultures use smiles to show embarrassment or confusion. There are also flirtatious smiles, fear smiles, pain smiles and more.

A summary of all the types of smiles and the meanings behind them can be found in this news article[9] describing the types of smiles by science journalist, Zaria Gorvett.

We can measure lots of emotions with facial expression– it’s much easier now thanks to digital technology that can use long established coding systems rapidly. Studies use Yearbook photos, baseball cards etc. to tie smiling to interesting things like survival, divorce etc with smilers generally doing better. Researcher Ken Sheldon points out that Duchenne Smiles are honest signals that contain evolutionary value that alerts perceivers to the virtuous behaviors and motivations of the smiler, to create a sense of connection between smilers and perceivers, and to elicit more cooperation from perceivers.

Interestingly, there are major cultural differences in smiling with a possible impact on country happiness. Americans smile the most of any country with Russians smiling the least. More than 50% of people will return a smile due to powerful mimicry instincts. As a result, this can spread happiness thanks to “The Facial Feedback Hypothesis” which is the idea that faking an emotion can stimulate it. Although there has been some controversy and debate on The Facial Feedback Hypothesis, there still seems to be at least a small effect. Another interesting fact research has shown is that countries with higher immigrant populations smile more.

The **Facial Feedback hypothesis** is the theory that facial movement can influence emotional experience. For example, an individual who is forced to smile during a social event will actually come to find the event more of an enjoyable experience.

Havas and friends explore the evidence of facial movement affecting cognition and emotional reactivity, specifically in botox patients in their paper titled, Cosmetic Use of Botulinum Toxin-A Affects Processing of Emotional Language[10].

In conclusion, facial expressions can be utilized to influence and assess emotions effectively.

Smiling, as we have discussed, is an interesting and useful way to measure well-being. It has also become an interesting area of study in positive psychology as a way to trigger emotions, understand relationships, predict the future, and more.

If you enjoyed learning about Duchenne Smiles, Sheldon and colleagues discuss Duchenne Smiles as Honest Signals of Chronic Positive Mood[11] (2021).

Definition: Facial Feedback Hypothesis

theory that facial movement can influence emotional experience

Attribution

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5.3.3: The Function of Positive Emotion

Positive and Negative Emotions

Negative emotions have a lot of specific action tendencies that keep us alive.

For example:

- Fear → run away
- Disgust → spit out
- Anger → fight

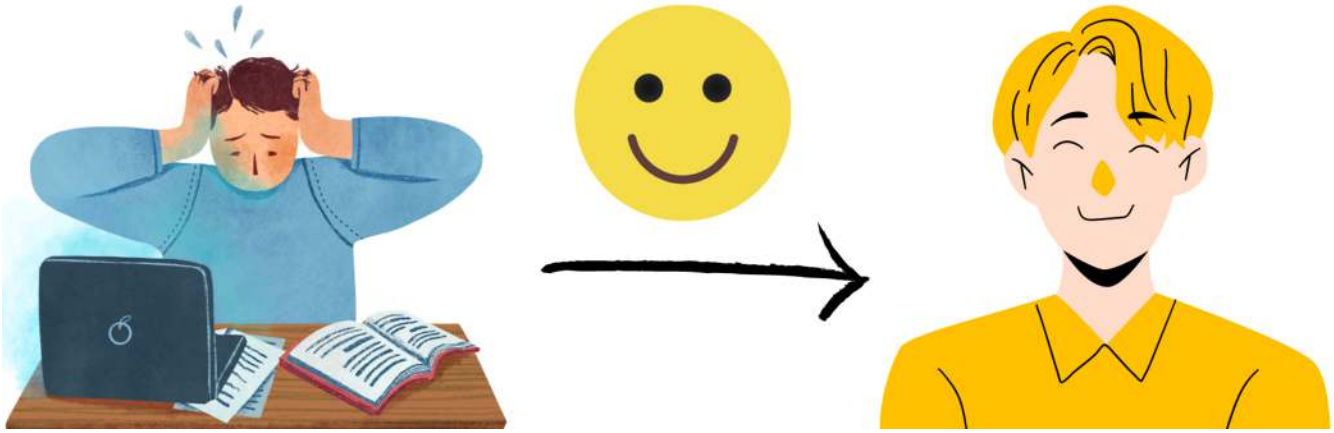


All negative emotions involve focusing and attention narrowing. So, what does feeling positive do for you?

Positive emotions help us think more creatively and creatively problem solve. They also widen our attentional scope and open us to experiences. The broaden and build theory, for example, says that positive emotions help widen our thoughts and actions.

How is this helpful to survival, do you think? Positive emotions generally communicate safety to both oneself and others, often through actions like smiling. Consequently, these emotions facilitate the formation of relationships, provide support, and contribute to the development of skills and health.

Additionally, we will explore a couple hypotheses regarding the advantages of positive emotions starting with the undoing hypothesis. In psychology, **the undoing hypothesis** suggests that experiencing positive emotions after stressful situations can help alleviate their effects (i.e., psychological arousal and negative impact of the initial experience). Similarly, **the stress buffering hypothesis** proposes that social support can help protect individuals from the negative effects of stress.



Positive emotions can change:

1. How you appraise stress
2. How you respond to stress
3. How you recover from stress

Read Does Positive Affect Influence Health?[12], by Dr. Sarah D. Pressman and Dr. Sheldon Cohen, a paper on the association of **positive affect (PA)** and physical health.

Some other benefits of positive emotions include:

- Marker that we are flourishing
- Leads to growth, wellness, and better relationships over time
- Reduces/Cancels/Offers resilience against stress
- Resource when coping with (e.g., positive affect (PA) itself can produce esteem, confidence)
- Triggers upward spirals → finding meaning in bad → triggers PA → broadens thinking → find more meaning

Dr. Barbara Fredrickson and Dr. Thomas Joiner examine how positive emotions trigger upward spirals toward emotional well-being[13] (2002) to learn about the original work on the idea of upward spiraling.



The Broaden and Build Theory

The broaden and build theory (previously mentioned) tells us that positive emotions may activate us but in broad ways (versus negative that narrows us).

- Joy: play, be creative
- Content: savor the moment
- Pride: share good news
- Interest: explore

> These positive emotions broaden our awareness and encourages novel and exploratory thoughts and actions. Over time, this builds skills and resources.

Resource building through Broaden & Building:

- Intellectual Resources:
  - Develops problem solving skills
  - Learn new information
- Social Resources:
  - Strengthen existing bonds (e.g., friends, spouse)
  - Makes new bonds
- Physical Resources
  - Develops coordination
  - Develops strengths & cardiovascular health

- Psychological Resources
  - Develops resilience & optimism
  - Develops sense of identity

Positive psych interventions (PPI) are simple positive activities that increase well-being. Although PPIs (positive psych interventions) have generally been shown to be effective (Sin & Lyubomirsky, 2009)[14], not every positive activity that a person performs will increase their well-being. To understand when a PPI will work and why it sometimes doesn't, it helps to understand the "active ingredients" that contribute to their success, i.e., the ones that need to be present to build wellbeing. A central active ingredient in PPIs is positive emotions. Recent advances in affective science provide a solid foundation to understand both the specificity and variety of positive emotions. We're beyond simple/basic positive vs. negative categories.

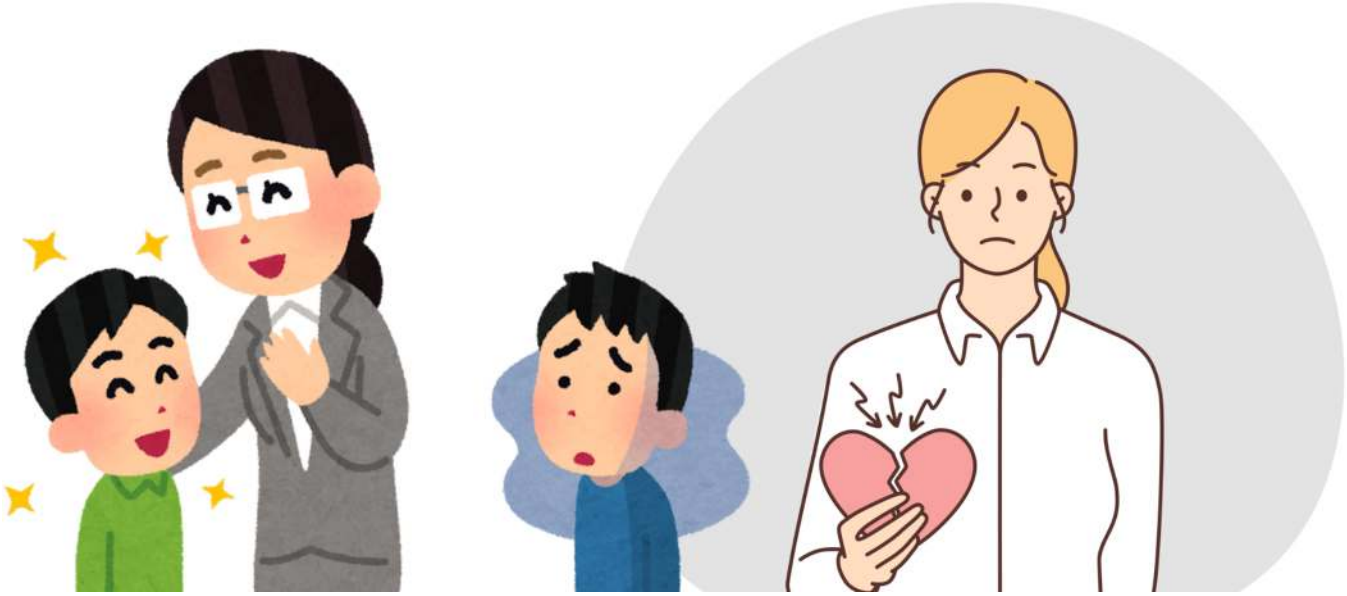
Examples of Positive Psych Interventions (PPI):

• Writing letters expressing gratitude	• Acts of kindness
• Cultivating strengths	• Visualize positive future self
• Meditate	• Count blessings
• Savoring	

The positive activity model (Layous & Lymbomirsky 2013)[15] focuses on promoting well-being through engaging in activities that generate positive emotions and foster personal growth. This explains how simple activities change well-being. Moderators play a crucial role in determining the effectiveness of activities aimed at increasing happiness. Various features of the activity, including dosage, variety, sequence, and the presence of built-in social support, can influence their success in boosting happiness levels.

For instance, greater variety is often associated with better outcomes, and certain activities may serve as better "starter" options. Moreover, different activities may have varying efficacy at different doses, and factors like whether they are outer-focused or inner-focused can interact with cultural differences, such as collectivist versus individualistic societies and time orientation. Additionally, individual characteristics, such as motivation to become happier, belief in the effectiveness of the activities, level of depression, and demographic factors, also influence the outcomes. Furthermore, the fit between the person and the activity is crucial, as enjoying an activity tends to lead to better overall results in terms of happiness enhancement.

One issue of this is that happiness is relative to your point of comparison. **The Social Comparison (SC) Theory** by Leon Festinger[16] states that individuals assess their own qualities and abilities by comparing themselves to others, which affects their self-esteem and emotions. In Social Comparison Theory, downward social comparison occurs when individuals compare themselves to others who they perceive as less fortunate, which has been linked to improved well-being in cancer patients. Conversely, upward social comparison can have both positive and negative effects, potentially serving as a source of inspiration or leading to a blow to one's self-esteem.



We generally hover around the same set point of well-being. The hedonic treadmill, also known as hedonic adaptation, is a theory positing that people repeatedly return to their baseline level of happiness, regardless of what happens to them. Changes that modify the impacts of exceptionally positive or negative events include contrast effects, where highly salient events diminish the influence of others, the introduction of new pleasures counteracted by the loss of old ones (such as gaining a large sum of money leading to new experiences but also diminishing the enjoyment of previous ones), and habituation, where the initial excitement or harm of something new gradually fades away, returning individuals to their baseline level of satisfaction.

Hedonic adaptation can be compared to a treadmill. The happiness treadmill, for example, is a concept where no matter how much running on it you do, you just stay in place (Deiner et al., 2009)[17]. We adapt pretty quickly (i.e., adapting to a bad smell). Our set point is based on our genetics and temperament.

Intentional activities matter because despite major positive or negative events or life changes, we quickly return to a relatively stable level of happiness. So, as a person makes more money, expectations and desires rise in tandem, which results in no permanent gain in happiness. Activities are the key to making lasting changes in happiness because such activities are more resistant to adaptation. We can deliberately engage in activities that make us happy while varying them enough to ward off adaptation.

> Interestingly, age matters for well-being too.

Interestingly, age matters for well-being too. The Socioemotional Selectivity Theory (Susan Charles & Laura Carstensen, 2010)[18] states that the older we age, we focus less on negative emotions, engage more deeply with emotional content of days, and especially savor the good stuff (e.g., relationships). It's important to note that older people have a positivity bias where they remember good stuff more quickly and don't remember the bad stuff as much (Mather & Carstensen, 2005)[19].

In sum, we learned that positive emotions have functions that are different from negative emotions. These positive emotions are a key ingredient of intentional activities that can change our well-being. Well-being can be hard and slow to move (genetics, circumstances), but with intentional activities, we can change our daily positive emotions which can then change our behavior, deepen our well-being, and more.

Definitions

The Undoing Hypothesis

experiencing positive emotions after stressful situations can help alleviate their effects

Stress Buffering Hypothesis

proposes that social support can help protect individuals from the negative effects of stress

Positive Affect

the experience of pleasant emotions (i.e., happiness, joy, contentment)

The Positive Activity Model

focuses on promoting well-being through engaging in activities that generate positive emotions and foster personal growth

The Social Comparison (SC) Theory

individuals assess their own qualities and abilities by comparing themselves to others, which affects their self-esteem and emotions

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SECTION OVERVIEW

5.4: Gratitude and Awe- Pathways to Happiness

5.4.1: Gratitude

5.4.2: Awe

5.4.3: Does Awe Have a Physiological Signal?

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5.4.1: Gratitude

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Understand the concepts of gratitude and awe as key positive emotions studied in Positive Psychology, including their significance and implications for well-being.
- Explore the effects of manipulating gratitude and awe in positive psychology interventions (PPIs), focusing on outcomes such as improvements in health, prosocial behavior, and overall well-being.
- Examine the well-being benefits associated with exposure to nature, particularly in relation to inducing feelings of awe, and understand its role as a powerful positive psychology intervention (PPI), with examples like the impact of green spaces on happiness.

READ List

Dr. Tara Lomas and colleagues conducted a comprehensive study on gratitude interventions, concluding that gratitude can enhance mental health, relationships, and academic performance in both children and adults. Read their paper titled, *Gratitude Interventions: A Review and Future Agenda*[1].

Afterwards, dive into this book on awe authored by Dr. Summer Allen, exploring *The Science of Awe*[2]. This short book traces the evolution of awe and outlines future research directions.

Now, explore a paper by Dr. Colin Capaldi and colleagues called, *Flourishing in nature: A review of the benefits of connecting with nature and its application as a wellbeing intervention*[3], that examines our modern disconnection from nature and its impact on our wellbeing.

Read this article by Summer Allen, published by the Greater Good Magazine on the *Eight Reasons Why Awe Makes Your Life Better*[4].

WATCH List

Watch this video by Kurzgesagt, titled *An Antidote to Dissatisfaction*[5], an overview of gratitude.



What is Gratitude?

Gratitude is an affirmation of goodness. When we regularly experience and express thankfulness we tend to not take things for granted and feel blessed in many circumstances. Another way of displaying gratitude is through causal inference, which is recognizing where the good thing is coming from. Individuals practice this by directing thanks to something/someone/the source that is outside of ourselves. This could take the form of a person, a spiritual force, etc.

One way researchers measure gratitude is through questionnaires. An example of that is The Gratitude Questionnaire. If you're interested in your gratitude score, you can complete the questionnaire[6].

Gratitude, when embraced as a form of savoring, is a widely practiced intervention that allows people to fully enjoy moments, even those as simple as indulging in a basic meal. Gratitude allows us to celebrate the present by appreciating the value of something and delaying the adaptation to positive events. Gratitude also blocks negative emotions like envy, resentment, and depression– it's almost impossible to be resentful and grateful simultaneously. Gratitude also comes with some noteworthy benefits including stress-resistance and strengthening of social ties and self-worth. If you recall from our previous chapter, the undoing hypothesis and stress-buffering hypothesis both suggest that positive emotions, such as gratitude can help "undo" the negative effects or act as a buffer against stress.

Let's talk about some ways to change your gratitude level:

- **Keep a gratitude journal**
  - Any practice that focuses our attention on grateful thinking (instead of boredom, apathy, negative thinking) is helpful.
- **Counting blessings (in your mind or on paper)**
- **Using visual reminders (especially helpful for kids)**
  - Helps overcome busyness, distraction, a good reminder.
- **Gratitude letters**
  - Writing a detailed letter to a person who has profoundly changed your life and then reading it to them.

Gratitude Interventions

The "Three Good Things" gratitude intervention entails reflecting on three positive aspects of your day and writing them down with specific reasons for gratitude. This fosters a mindset focused on the good despite daily challenges. Gratitude interventions offer benefits such as increased psychological well-being, including being more alert, attentive, and enthusiastic, as well as enhanced physical well-being, leading to better sleep, fewer physical symptoms, and improved self-care habits like exercise. Additionally, they contribute to social well-being by fostering compassion, helpfulness, and reducing feelings of loneliness.



As mentioned above, the gratitude letter is another way of expressing gratitude. Some would go as far as saying it's the more powerful version of journaling. Watch this 7-minute video of individuals participating in the gratitude letter intervention[7]. After watching the video, if you're interested in experiencing the remarkable physical and mental benefits of gratitude, you can follow these simple instructions to write your gratitude letter.

Step 1: Take a moment to think about someone who has positively impacted your life (whether in the short or long term) that you appreciate, yet may not have thanked properly.

Step 2: Write that person a letter describing how you feel about what they have done for you and why you are grateful to them. Seligman describes it as follows, it "should be concrete and about three hundred words: be specific" and mention how often you remember what they did (Seligman, 2011, p. 30)[8].

Note: Rather than a simple thank you for being there, it is best to create a narrative. It may help to reflect on the following questions (modified from Intelligent Change, n.d.)[9]:

- How and when did you both meet?
- What are your earliest memories of your relationship?
- How was your life at the time?
- What has that person done for you?
- How did that make you feel then and now?
- What do they mean to you?

Step 3: While this may not always be an option–or at times the right thing to do–Seligman suggests you take time reading the letter and watch for the other person's reactions and your own. And then, when finished, discuss the content with them (Seligman, 2011, p. 30)[10].

> While writing gratitude letters holds inherent value for both sender and receiver, shorter notes, including electronic ones or cards, can be equally impactful.

Even a simple post-it note left as a surprise on someone's desk can have profound effects. These expressions of gratitude don't need to be lengthy; they just need to be sincere and heartfelt, serving as reminders of significant impacts and emotions. Additionally, while timely appreciation is ideal, gratitude knows no expiration date.

Now, shifting our focus to the science behind gratitude, a study conducted by Seligman in 2005 compared the effectiveness of gratitude letters with various other positive psychological interventions. The findings revealed that writing gratitude letters resulted in the most substantial initial increase in happiness, with effects lasting longer than many other interventions. This prolonged impact may be attributed to its unique ability not only to evoke positive emotions but also to strengthen the "R" in PERMA - relationships. This emphasis on nurturing relationships significantly enhances its overall impact on well-being.

Interestingly, certain cultures may not fully benefit from the gratitude letter activity. For example, individuals from backgrounds such as South Korean, Indian, Thai, and Asian Americans may not experience the same advantages from gratitude letters as Anglo-Americans do. Expressing appreciation for others' help might evoke mixed emotions for them, such as feelings of indebtedness, guilt, and regret. For further insights into the cultural aspects of gratitude, consider reading *Disentangling the Effects of Gratitude and Optimism: A Cross-Cultural Investigation*[11] by Milla Titova, Audrey Wagstaff, and Acacia Parks. Researcher Acacia Parks, an expert in gratitude, has heard from some Asian-American students that expressing thanks is uncomfortable because it attracts attention to them. One student even reported that her parents were insulted by her gratitude letter– as if it implied that she didn't expect them to be so generous.

Indeed, there are numerous ways to convey appreciation to those in our lives. Verbal gratitude, for instance, is the most typical method, simply involving the expression of "thank you" in some form. Concrete gratitude extends beyond mere words to encompass actions that reflect appreciation. This might involve offering a thoughtful gift, performing a helpful task, or expressing gratitude through a specific act of kindness tailored to the individual's preferences and interests. Connective gratitude transcends polite words, aiming to reciprocate in a manner deeply meaningful to the helper.

WATCH List

Watch Christina Costa talk about *How Gratitude Rewires Your Brain*[12] in her 2022 TED Talk.



Get inspired by one of the many motivational talks on YouTube with this video by the Fearless Soul on saying *"Thank You"- A motivational video on the importance of gratitude*[13].

Guiding Questions

1. What is gratitude?
2. What are some of the consequences of gratitude?
3. How is gratitude related to humanity's success in surviving on planet earth?
4. What are some strategies to increase feelings of gratitude?
5. What are some of the downstream well-being benefits of experiencing awe?
6. What are the cognitive effects of awe?
7. How old is the science of awe and what impact does that have on the interpretation of the field?

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5.4.2: Awe

Experiencing Awe

Read this article authored by Leif Hass on *How Nature Helps Us Heal*[14] and discover why doctors recommend time outside.

Awe encompasses a profound perceptual vastness, compelling us to adjust our mental frameworks to embrace its magnitude. It arises in the face of something that defies our existing understanding of the world, often encountered amidst novelty or enormity. Though predominantly a positive emotional state, awe can also become a characteristic trait, shaping our ongoing perception and response to the world.

Experiencing awe is a profound journey that can be triggered by encounters with religion, nature, art, music, and the wonders of the natural world. It's a deeply personal and often transformative experience that is surprisingly very accessible.

Two themes tend to emerge from these encounters:

1. Feeling of being smaller in the presence of something greater than the self
2. Motivation to be good to others

The Purpose of Awe

Ever wondered about the purpose of awe? Well, it turns out, awe serves a crucial role as the ultimate collective emotion. This theory was proposed by Dr. Dacher Keltner from UC Berkeley and Dr. Jonathan Haidt from NYU. They argue that experiencing awe motivates us to engage in behaviors that contribute to the greater good, shifting our attention from personal interests to the well-being of our communities. Dr. Paul Piff and Dr. Pia Dietze also have recent work that confirms that dispositional awe is associated with more generosity in an economic game. Recent studies by Dr. Paul Piff and Dr. Pia Dietze at the University of California, Irvine further support this notion, revealing that dispositional awe correlates with increased generosity in economic games. Moreover, inducing awe has been found to enhance ethical decision-making and generosity, while simply being in an awe-inspiring environment fosters greater prosocial behavior.

Read more about Dr. Paul Piff and Dr. Pia Dietze's *Awe, the small self, and prosocial behavior*[15].

Also, if you would like to hear Dr. Paul Piff discuss his work and the art & science of *Awe*, you can watch his brief talk called: *Can Awe Combat Narcissism?*[16]



Have you ever come across a video or piece of literature that truly inspired awe within you? These kinds of experiences often share two key elements. Firstly, they create a sense of vastness, whether it's through breathtaking landscapes or remarkable displays of courage. Secondly, they have a way of reshaping our perspective on the world, making our daily concerns seem trivial or expanding our beliefs about human potential.

Guiding Questions

1. What are some of the health benefits of nature
2. What is ART (attention restoration theory)?
3. How does the topic of awe relate to nature?

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5.4.3: Does Awe Have a Physiological Signal?

Physical Signs of Experiencing Awe

The experience of awe is indeed accompanied by physiological responses. Goosebumps, for instance, are caused by the contraction of tiny muscles around hair follicles, resulting in the hair standing slightly on end. This reaction is an involuntary response of the sympathetic nervous system, shared by many animals. It serves a protective function, causing animals to appear larger in threatening situations, such as the puffing up of a puffer fish. Additionally, this response aids in retaining body heat in animals.

Goosebumps can be triggered by various stimuli, including moving music, captivating art, and moments of awe, as well as feelings of pride, excitement, and fear. In a study conducted by Schurtz et al. (2012)[17], participants reported experiencing goosebumps in response to awe more frequently than any other emotion except cold. Furthermore, the intensity of the awe experienced correlated with the frequency of goosebumps occurrence.

It's possible that our society is experiencing a deficit in awe. With technology dominating our daily routines, we find ourselves spending less time immersed in the wonders of nature and more time glued to screens. Moreover, the convenience of technology may be contributing to a decline in attendance at live art events, as people opt to experience these events through digital platforms on their phones. This shift is not only altering our relationship with art and nature but also contributing to a rise in narcissism and social disconnection. Researchers have turned to nature as a solution.

Why is Nature Beneficial to Well-Being?

1. Biophilia
2. Attention Restoration Theory (ART)
3. Stress Reduction

Biophilia is our intrinsic human tendency to seek connections with nature and other living beings. Its roots lie in the Greek words for "life" and "love or affection," giving it the literal meaning of "love of life." The Biophilia Hypothesis, proposed by Kellert and Wilson in 1993, suggests that humans depend on nature for more than just physical needs. It encompasses our desire for aesthetic, intellectual, cognitive, and spiritual fulfillment (Kellert, 1993, p. 21)[18]. Even as we increasingly inhabit urban environments, our intrinsic need to connect with nature persists, stemming from our ancestral need to engage with the natural world for survival.

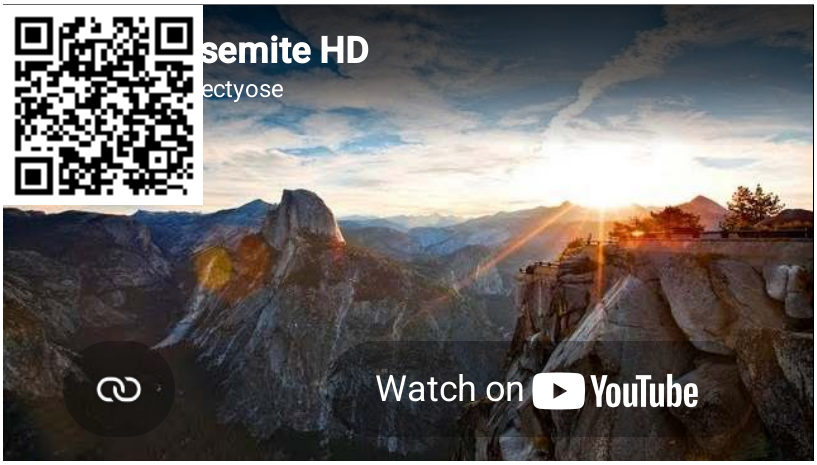
The **Attention Restoration Theory (ART)** suggests that individuals experience improved concentration following exposure to natural settings or even visual imagery of nature. Directed attention is a limited resource. Directed attention is a finite resource; when depleted, it leads to negative feelings such as irritability and diminished cognitive function. Nature offers abundant stimuli that engages involuntary attention, allowing individuals to engage without conscious effort. While philosophically, nature has been revered as a wellspring of tranquility and vitality, rigorous scientific investigation into these notions has only gained momentum in the past three decades.

For an environment to be restorative it must include:

1. ***Fascination*:** the ability of an environment to generate awe in people; the amount of awe can give the directed attention a rest as the involuntary attention appears in its place.
2. ***Being away***: a feeling that can be objective or subjective.
3. ***Extension***: the connection between each element found in an environment; the feeling of being able to travel through the environment in order to look for the information it provides.
4. ***Compatibility***: characteristics found in an environment that meet the preferences and goals of a person.

You will watch a brief 4-minute video of Yosemite.

- Ask yourself before you watch this video of Yosemite[19] – how much mental fatigue do you have right now. Then again once it’s over, see if you feel any different in fatigue, attention, restoration, mood etc.



Watch Shannon Barlow discuss the Attention Restoration Theory (ART)[20] in a 3-minute video.

Contact with Nature

Decades of research support the notion that contact with nature, including exposure to unthreatening natural environments beneficial for human wellbeing and survival as suggested by Roger Ulrich's work, triggers automatic stress reduction psychophysiological responses. This includes decreased arousal and perceived stress, essentially promoting a sense of recovery or "undoing." Elements such as running water sounds and views of trees are known to be particularly effective in this regard. Studies have shown tangible health improvements, including reductions in blood pressure and enhancements in immune function, further emphasizing the positive impact of nature on our overall well-being and stress levels.

Patients who had a window view of trees following surgery experienced shorter hospital stays compared to those with views of a brick wall, spending an average of 7.96 days versus 8.7 days, a statistically significant difference ($p = .025$). Additionally, they required fewer pain medications. Furthermore, observations revealed that patients with a view of the brick wall received more negative notes, reporting feelings of upset and crying, in contrast to those with a nature view who were noted to be in good spirits. In summary, in comparison with the wall-view group, the patients with the tree view had shorter postoperative hospital stays, had fewer negative evaluative comments from nurses, took fewer moderate and strong analgesic doses, and had slightly lower scores for minor post-surgical complications[21].

Read more about how a view through a window may influence recovery from surgery[22], a study by Roger Ulrich (1984).

There is even evidence that images of nature can be beneficial. Why Is Nature Beneficial?: The Role of Connectedness to Nature[23] by Frantz and colleagues suggests that exposure to images of nature, whether through direct experience or videos, enhances attention, positive emotions, and problem-solving abilities, with particularly pronounced benefits observed among individuals who engage in outdoor activities (2008).

Spending time in nature offers a multitude of benefits for mental and emotional well-being. It can lead to improved attention and reduced mental fatigue, lower levels of stress and anxiety, and a better overall mood, including a heightened sense of positive affect such as awe. Moreover, regular exposure to nature is associated with a reduced risk of developing psychiatric disorders and promotes higher levels of empathy and cooperation. In a study led by Kristine Engemann and her team[24], it was discovered that children benefiting from exposure to green spaces have a distinct advantage, with research indicating a decreased likelihood of developing psychiatric disorders in adulthood. Researchers analyzed data from over 900,000 residents born between 1985 and 2003, revealing that those who grew up in neighborhoods with more green space had a significantly lower risk of various psychiatric disorders later in life, such as depression, mood disorders, schizophrenia, eating disorders, and substance use disorder. In fact, individuals with the lowest levels of green space exposure during childhood faced a 55% higher risk of developing mental illness compared to those who were surrounded by abundant green space during their formative years (2019).

Nature's sights and sounds often inspire profound awe, particularly the intricate fractal patterns in trees, clouds, rain, and birdsongs. These complex shapes, quickly detected by the human brain, are absent in urban environments. Studies indicate that exposure to nature, including images, can reduce stress and fatigue. Thus, simply contemplating nature's wonders can evoke awe and enhance well-being.

Nature-Based Interventions

Despite the abundance of research demonstrating the beneficial effects of nature on our cognitive, emotional, spiritual, and physical well-being, nature-based interventions remain understudied and underutilized as a mental health strategy. Surprisingly, it's not difficult to motivate individuals to engage in these interventions, nor to maintain their participation. Despite early evidence, such as studies by Passmore[25], indicating that nature-based interventions may be more effective than other positive psychology interventions for enhancing well-being, few therapists incorporate them into their practice. Moreover, research suggests that even a single nature walk can significantly alleviate anxiety. There is a growing emphasis on nature-based interventions for children, with initiatives such as free programs to encourage kids to explore national parks gaining momentum in schools and communities.

For those intrigued by nature-based interventions, consider participating in the 30x30 Nature Challenge[26], by David Suzuki. This initiative invites individuals to dedicate 30 minutes daily to immersing themselves in nature for a continuous span of 30 days.

Determining the optimal amount of nature exposure for well-being benefits remains relatively unexplored, with limited studies addressing this question. However, one study by Mathew White and colleagues (2019)[27] discovered that individuals who had dedicated a minimum of two recreational hours to nature activities in the previous week reported heightened levels of health and well-being. Beyond mere time spent, the crucial factor lies in the emotional connection with nature. This connection surpasses the benefits of social connectedness and could particularly resonate with introverts as a valuable means of enhancing well-being.

When you want to feel some awe about the world again, take a look at this collection by TED[28] of awe-inspiring things in the world around you.

Definitions

Biophilia

our intrinsic human tendency to seek connections with nature and other living beings

Attention Restoration Theory (ART)

suggests that individuals experience improved concentration following exposure to natural settings or even visual imagery of nature

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SECTION OVERVIEW

5.5: Discovering Your Strengths

5.5.1: Discovering Your Strengths

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5.5.1: Discovering Your Strengths

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Define the term "strength" in the context of positive psychology.
- Assess the purpose and utility of strengths assessments like Gallup StrengthsFinder Assessment for personal and professional development.
- Figure out ways to use your strengths in everyday situations to make life better.

Start out this chapter by watching this general video on YouTube by Elvira Marie Chang on What is Gallup StrengthsFinder?[1]



READ List

Next, explore an insightful article about the CliftonStrengths Finder, authored by Jeremy Sutton, Ph.D., available on PositivePsychology.com entitled Understanding the CliftonStrengths Assessment: A Guide[2].

Afterward, read Chapter 10 of 'Positive Psychology: The Basics'[3] by Rona Hart. This chapter offers a comprehensive overview of Character Strengths and Virtues, providing valuable insights into this fundamental aspect of positive psychology.

Check out this insightful review by Ghielen and colleagues titled "Promoting Positive Outcomes Through Strengths Interventions: A Literature Review"[4] for a review of the benefits associated with strengths interventions.

Celebrating our Unique Strengths

Each of us possesses unique strengths that define who we are. There is no need for engaging in negative upwards comparisons that reduce our self-worth.

Consider how much research has been conducted to understand and celebrate our positive traits, rather than just pinpointing what needs improvement. By shifting our focus to what is already great about ourselves, we can channel efforts into building on those strengths.

But what exactly are these strengths? A strength can fall under several categories, from physical abilities to mental resilience and moral integrity. Strength can be found in the resilience of our bodies, the agility of our minds, and our character. By recognizing these diverse strengths, we can empower ourselves to thrive in our unique ways.

Uncovering your strengths often begins with taking a strengths test or assessment. These assessments serve multiple purposes. As you progress in your career, you'll inevitably encounter interviews where discussing your strengths and weaknesses is common. It's a common human trait to overlook our strengths while dwelling on our weaknesses. However, knowing and embracing our strengths not only boosts our overall well-being but also guides us toward personal improvement and fulfillment.



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Of course, identifying your strengths is just the start - what truly matters is putting them into action regularly and finding new ways to leverage them.

If you are interested in completing a strengths finder assessment, here are some resources:

- Gallup: CliftonStrengths[5]

Attribution

[1]Elvira Marie Chang. (2021, August 11). What is Gallup StrengthsFinder? / What is CliftonStrengths? [Video file]. Retrieved from https://youtu.be/4rITEvVDqpo?si=m5JvA8fmsakf3rJj

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SECTION OVERVIEW

5.6: Living with Purpose- Exploring Eudaimonia, Meaning, and Flow

5.6.1: Introduction to Eudaimonia

5.6.2: Meaning and Purpose

5.6.3: Finding Flow

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5.6.1: Introduction to Eudaimonia

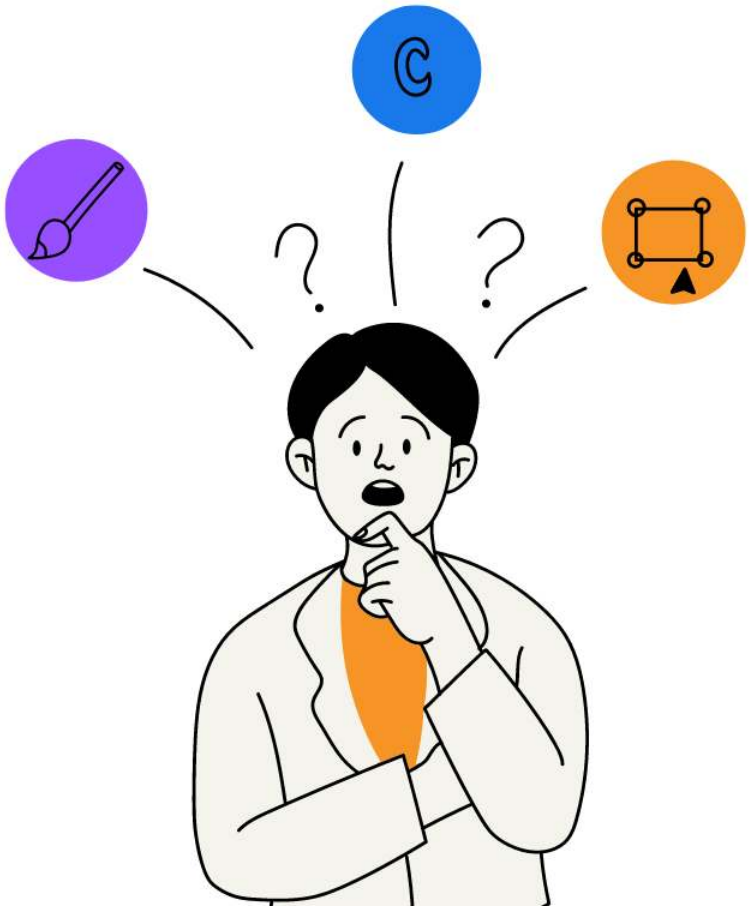
Learning Objectives

Upon reading this chapter, the reader should be able to:

- Define eudaimonia and its importance in psychology, including its components and key researchers.
- Explore the relationship between meaning in life and well-being outcomes, and apply techniques for enhancing personal meaning.
- Understand the concept of flow, its characteristics, conditions for experiencing it, and its impact on overall well-being.

What is Happiness?

In an earlier chapter, we touched on the concept of hedonia, which centers on the pursuit of pleasure. However, Aristotle challenged the notion that pleasure alone leads to a fulfilling life. He proposed the concept of **eudaimonia**, which encompasses self-discovery, realizing one's fullest potential, finding purpose and meaning, engaging deeply in activities, investing significant effort, and experiencing personal expression and profound connections in life. Interestingly, research shows a strong correlation between measures of hedonism and eudaimonia, with an average correlation coefficient of 0.8. Reflecting on this correlation offers valuable insights for future research and interventions in positive psychology.



READ List

To read more about this issue, read Todd Kashdan’s critique of Aristotle's Eudaimonic theory and his exploration of the various types of happiness in "How Many Types of Happiness Exist?[1]"

Some well-known eudaimonic researchers include Carol Ryff, Ed Deiner, Martin Seligman.

Carol Ryff developed the Psychological Well-Being Scale, which assesses six dimensions of well-being: purpose, mastery, self-acceptance, autonomy, personal growth, and positive relationships—all integral to eudaimonia. To learn more about this scale, visit Stanford University's dedicated page on the Well-being Scale[2]. You can also complete the questionnaire at this link[3].

We also touched upon Martin Seligman's PERMA model in an earlier chapter, which remains relevant here. To recap, PERMA represents **P**leasure, **E**ngagement (e.g., flow), **R**elationships, **M**eaning, and **A**chievement. You can explore the PERMA questionnaire on the University of Pennsylvania's Authentic Happiness website[4] and find more information about the measure and scoring in the PERMA Profiler, authored by Julie Butler and Margaret L. Kern.

Significance of Eudaimonia

Ed Diener, a leading researcher in the field of happiness, emphasized the significance of eudaimonic well-being, suggesting that it plays a crucial role in sustaining long-term subjective well-being. In essence, continuous pursuit of pleasure alone is insufficient for lasting happiness. Diener argued that individuals require additional factors such as long-term goals, purpose and meaning, meaningful relationships, and experiences of mastery and flow to achieve overall well-being.

Life satisfaction captures how individuals perceive their past, present, and future circumstances, focusing more on cognitive aspects than emotions. It reflects overall contentment with various life domains, including relationships, achievements, and coping abilities. Notably, cultural and individual values heavily influence how satisfaction is gauged. For instance, in collectivist societies, meeting societal expectations may impact satisfaction, while in individualistic cultures, personal esteem plays a more significant role.

Although hedonia and eudaimonia are not so separate as some would have us believe, it is useful to consider eudaimonia as valuable because it can create long-term and repeated happiness for humans. These are things we need to be happy and to make others happy.

We measure and manipulate eudaimonic constructs through various methods and interventions. For example, eudaimonia is typically measured through self-report measures that are reasonably valid. However, altering eudaimonia, like improving one's sense of purpose or relationships, might not be as simple as with hedonia. This prompts consideration of how daily measures of hedonic experiences, including positive and negative emotions, might be affected by changes in eudaimonic well-being.

Definition: Eudaimonia

theory that encompasses self-discovery, realizing one's fullest potential, finding purpose and meaning, engaging deeply in activities, investing significant effort, and experiencing personal expression and profound connections in life

Attribution

[1]Kashdan, T. B. (2015, September 3). How Many Types of Happiness Exist? Psychology Today. https://www.psychologytoday.com/us/blog/curious/201509/how-many-types-happiness-exist

[2]Stanford University. (n.d.). Psychological Wellbeing Scale. Stanford | SPARQtools. Retrieved from https://sparqtools.org/mobility-measure/psychological-wellbeing-scale/

[3]University, © Stanford (n.d.). Psychological Wellbeing Scale | SPARQtools. Retrieved from https://sparqtools.org/mobility-measure/psychological-wellbeing-scale/

[4]Seligman, M. (2005). Authentic happiness questionnaire. Positive Psychology Center, University of Pennsylvania. https://www.authentichappiness.sas.upenn.edu/testcenter

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5.6.2: Meaning and Purpose

Simple Moments Can Shape a Life of Significance

When discussing individuals who live profoundly meaningful lives, we often highlight those who achieve extraordinary feats or have a significant impact on society, like Harriet Tubman, Malala Yousafzai, or Greta Thunberg. We rarely spotlight ordinary people in this regard. Additionally, our attention tends to focus on notable achievements or remarkable contributions, and the underlying factors that shape their meaningful existence. However, it's surprising to note that many of us lead lives filled with profound significance. While we typically view meaning in life as an exceptional accomplishment, research suggests that finding meaning is a common human experience, often found in everyday aspects like relationships, positive emotions, and routine tasks.

Life meaning and other eudaimonic traits don't need to be overly complicated. This gives us hope that we can adjust life meaning, purpose, and related deep constructs in relatively simple ways. Moreover, happiness, closely correlated with eudaimonia, can also be influenced accordingly.

What is your purpose in life?

Watch as individuals share their profound insights on the question: "What is your purpose in life?"[5] in a thought-provoking video uploaded by Participant.





Firstly, a meaningful life is defined by a sense of purpose, providing a guiding force that gives direction and significance to one's existence (e.g., Baumeister, 1991[6]). Secondly, it involves feeling that one's actions and contributions matter, carrying weight and impact (e.g., Baumeister, 1991[7]). Lastly, there's a cognitive aspect: a meaningful life is one that makes sense to the individual, characterized by coherence, predictability, and meaningful connections (e.g., Antonovsky, 1993[8]; Baumeister, 1991[9]; Baumeister & Vohs, 2002[10]). While definitions of meaning in life often include these aspects, they may vary in emphasis.

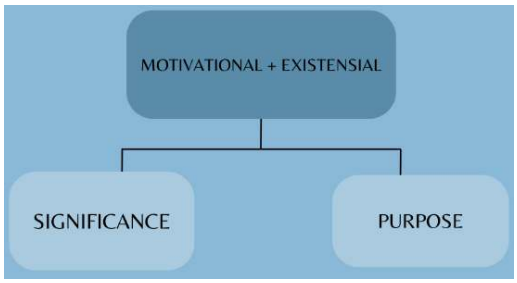


Figure **5.6.2.1**: Motivational plus Existensial parse into Significance or Purpose

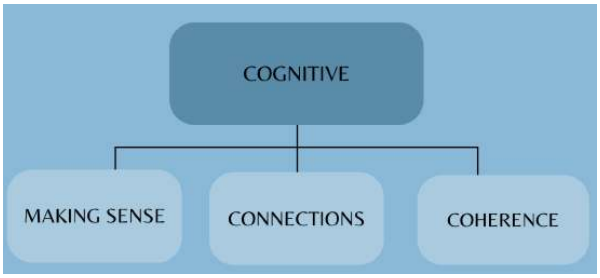


Figure **5.6.2.1**: Cognitive Flow parse into 3 areas; Motivation, Connections or Coherence

Furthermore, those who find meaning in their lives tend to report higher levels of happiness, greater satisfaction with life, increased involvement in their work, improved immune function, and a greater ability to cope with stress, leading to a longer lifespan (Steger, 2009[11]). Additionally, they experience slower cognitive decline, lower rates of depression and suicidal thoughts, and are generally perceived as more socially appealing to others.

Let's work on enhancing your meaning in life and/or help you find some purpose in a meaningful way.

Activity: The Best Possible Future Self Exercise

Step 1.

The Best Possible Future Self Exercise, by Dr Laura King. This has been shown to improve overall happiness and reduce goal conflict, plus a host of other benefits too. So firstly, for 5 minutes, without any self-editing at all, without limitation and with inhibition write a response to this prompt:

> *"Think about your life in the future you are 109 years old. Imagine that everything has gone as well as it possibly could. You have worked hard and succeeded at accomplishing all your life goals. Think of this as the realization of all your life dreams. Now, write about what you imagined"*

Step 2.

Please take a moment to jot down your response to this prompt for the next 5 minutes. Let your thoughts flow freely without holding back, without self-editing, criticism, or limitations.

> *"Imagine that your 109-year old self had access to a time machine. They jumped into that time machine and arrived to this very moment in time. They climb out, sit next to you and give you advice. What would they say?"*

Step 3.

Now take 2 minutes to take that advice and create a list of actions points from it. Simply focus on the top three action points every day.

Why does this work?

- As you pay attention to these elements, you'll begin to recognize what gives your life meaning. What's crucial is that you've outlined steps for today, ensuring that meaning isn't just a distant goal but something achievable in the present.
- **Note**: Finding purpose is a journey that unfolds over time, but these steps provide a path forward, steering you away from the feeling of "There has to be more to life than THIS."

How Engaged Are You?

> Want to know your current level of life purpose? Take the Life Engagement Test (LET)[12], created by Dr. Michael Scheier and colleagues.

Finding Meaning in Adversity

Viennese psychologist and Holocaust survivor Viktor Frankl observed that fellow prisoners who maintained a sense of purpose demonstrated remarkable resilience in the face of torture, forced labor, and starvation. Frankl's 1959 book, *Man's Search for Meaning*, solidified his beliefs regarding the paramount importance of meaning and purpose. A decade later, Frankl contributed to the creation of the first and most widely utilized standardized purpose assessment, the 21-item "Purpose in Life" test.

In a YouTube video uploaded by Callid Keefe-Perry, Victor Frankl is interviewed on the concept of Finding Meaning in Despair[13].



Meaning-making (MM), as explored by Nansook Park, proves invaluable for stress reduction and recovery. It helps individuals navigate through stressful situations, shaping their fundamental beliefs, goals, and emotions. This process can occur both automatically, through intrusive thoughts, and deliberately, via coping strategies like positive reappraisal, goal adjustment, problem-solving, or seeking solace in religion or spirituality.

Moreover, MM aids individuals in making sense of events that challenge their existing worldview. The outcomes of this meaning-making process are numerous and positive, including personal growth, the abandonment of unattainable goals in favor of new ones, a deeper understanding of events, and the restoration of life's meaning. For further insights, explore Dr. Nansook Park's[14] research at the University of Michigan.

LISTEN List

Happiness 2.0- Cultivating your purpose[15] on Hidden Brain, featuring psychologist Dr. Anthony Burrow.

Guiding Questions

1. What is languishing?
2. What is the difference between meaning and purpose?
3. What is the relation between stress and purpose? How does purpose change responses to stress and day to day life?
4. What are some examples of things purpose is related to? What types of benefits do you see in health, cognition, and relationships?
5. How do you find, cultivate, or develop purpose?

READ List

Be sure to check out Chapter 9, "Meaning in Life," in Dr. Rona Hart's book, *Positive Psychology: The Basics*[16].

Guiding Questions

1. What is meaning in life?
2. What are its 3 components?
3. How do we measure life meaning?
4. What is the connection between self-actualization and meaning?

5. What are the benefits of meaning in life? What does it predict and what is it associated with in psychology? (*for the reading & the below video)

WATCH List

Check out the video titled *Your Life Is Pretty Meaningful*[17] by Dr. Laura King, presented at the 2014 Society for Personality & Social Psychology conference.

Guiding Questions

1. What are the myths of meaning in life described in this video?
2. What does Dr. King mean when she says that people think Life Meaning is not ineffable?
3. What are some easy things that increase life meaning?

Definition: Meaning-making (MM)

interpreting experiences and assigning meaning to them based on personal beliefs and values

Attribution

[5]Participant. (2016, May 11). *What is Your Purpose in Life? | 0-100* [Video file]. Retrieved from https://www.youtube.com/watch?v=mK66az43EOI

[6],[7],[9]Baumeister, R. F. (1991). Meanings of life. New York: Guilford Press. Retrieved from http://archive.org/details/meaningsoflife0000baum

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[10]Baumeister, R. F., & Vohs, K. D. (2002). The pursuit of meaningfulness in life. In *Handbook of positive psychology* (pp. 608–618). Oxford University Press.

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[14]Nansook Park | U-M LSA Department of Psychology. (n.d.). Retrieved from https://lsa.umich.edu/psych/people/faculty/nspark.html

[15]Happiness 2.0: Cultivating Your Purpose | Hidden Brain Media. (2023, February 20). https://hiddenbrain.org/podcast/cultivating-your-purpose/

[16],[19]Hart, R. (2020). Positive Psychology: The Basics (1st ed.). Routledge. https://doi.org/10.4324/9781315147857

[17]Society for Personality and Social Psychology. (2014, February 16). Your Life is Probably Pretty Meaningful - Laura King at SPSP 2014 Austin [Video file]. Retrieved from https://youtu.be/sYHMNJ1Ucjc?si=84jphZ5140vaKhQy

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5.6.3: Finding Flow



WATCH List

Watch Youtuber, FlightMediocrity, discuss the work of flow expert and psychologist, Dr. Mihaly Csikszentmihalyi, in this animated book summary[18].



READ List

Then, read Chapter 8 of *Positive Psychology: The Basics*[19] by Rona Hart, which delves into the concept of flow.

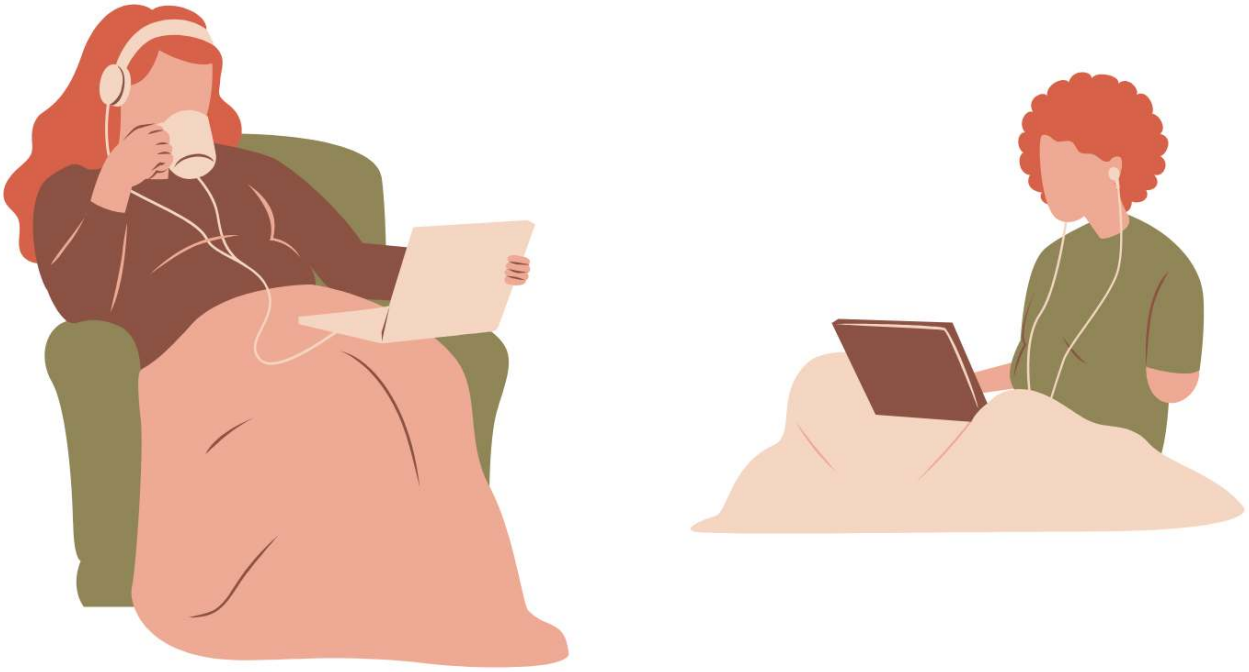
Explore further How to Measure Flow with Scales and Questionnaires[20], check out Dr. Heather S. Lonczak's article published on PositivePsychology.com.

Flow

From the perspective of flow, a fulfilling life entails being fully immersed in the present moment, much like mindfulness practices. In a world often preoccupied with the past and future, embracing the now is essential for experiencing true contentment.

Psychological **flow** embodies a state of deep absorption, focus, and involvement in activities, accompanied by a sense of enjoyment. It is characterized by complete absorption, distortion of time perception, effortless yet intense focus, and smooth transition between actions. While there's a sense of control, it's not absolute. However, it's important to note that flow can sometimes lead to neglecting basic needs like food, sleep, self-care, and the needs of others.

True or False? If you binge watch several hours of your favorite show, you are in flow.



Think about the things you do during free time –passively scrolling through Facebook or Twitter.

- Are these behaviors contributing to unhappiness? Why?
- What if we focused on the **here** and **now** instead?

In our fast-paced, future-oriented society, we find ourselves frequently shifting between dwelling on the past and fixating on the future. This perpetual state often leaves us disengaged, feeling bored, and lacking in attentiveness, contradicting the concept of flow.

Flow is an optimal experience characterized by being fully present in the moment, featuring elements of novelty, absorption, a sense of sacredness (whether spiritual or existential), and pursuit of meaningful goals. Think about the Sistine Chapel in Vatican City, for example. Michelangelo's commitment to his art was so intense that he would often go without food and sleep, enduring discomfort until he collapsed from exhaustion. His single-minded focus on his work led to neglect of basic self-care and relationships, sometimes going weeks without changing his clothes or boots.

The conditions for experiencing flow encompass two key factors. Firstly, there are perceived challenges or opportunities for action that match the individual's existing skills, neither underutilizing them nor overwhelming them. Secondly, clear proximal goals emerge during the flow state, accompanied by immediate feedback on progress.

Regions of Momentary Experiences:

- **Flow**: where challenges and skills matched
- **Boredom**: where challenges and opportunities are too easy relative to skills
- **Anxiety**: where demands increasingly exceed capacities for action

Characteristics of Flow

- Absorption in momentary experience
- Accompanies highly engaging activities
- Time passes by quickly
- Attention completely focused on task
- Sense of self is lost
- Sense of control
- Intrinsically rewarding

Initially, flow was assessed qualitatively through interviews. However, researchers now employ Ecological Momentary Assessment (EMA) to measure it more objectively. This method involves paging or beeping participants at random intervals and prompting them to describe their ongoing activities, emotional states, and cognitive experiences. For instance, participants might be asked, "How much time are you in flow?" This approach allows for real-time data collection, offering a more accurate understanding of flow experiences in individuals' daily lives.

The Flow Questionnaire, developed by Mihaly Csikszentmihalyi (1988)[21] was is designed to measure the subjective experience of flow. In the Flow questionnaire, respondents were presented with the three descriptions and asked whether they could recall similar experiences. They were then asked to describe these experiences and to rate associated feelings, e.g., level of involvement, effort, anxiety, etc. This methodology depends on respondents recognizing the flow descriptions and relating them to their own previous experiences.

> Gain a better understanding of the Flow Questionnaire, or complete it yourself with the Flow State Scale[22] developed by Dr. Susan Jackson and Dr. Herbert Marsh.

Flow can be quite difficult to generalize and manipulate in lab settings because there is so much variability in what predicts flow in a person. Solving math problems for one person is miserable and another can find great satisfaction and flow in it, for example. Cultural differences add another layer of complexity, as the conditions conducive to flow differ across societies. In Western cultures, individuals often experience flow when engaging in activities that push their boundaries, such as facing skilled opponents in games like chess. Conversely, in Hong Kong, students tend to prioritize a balance between their skills and the challenge level, adopting a more cautious approach. However, it's important to note that this preference doesn't apply universally, as evidenced by Japanese college students. Given that most studies on flow have been conducted in the United States and Western Europe, it's essential to consider the role of culture in understanding flow experiences. Surprisingly, research suggests that a significant proportion of individuals in the U.S. rarely or never experience flow, with only a minority reporting daily encounters with this optimal state of consciousness (Delle et al. 2017)[23].



Flow experiences are often associated with specific traits and characteristics. These include curiosity, persistence, low self-centeredness, and possessing an autotelic personality. An autotelic individual finds enjoyment in life itself and typically engages in activities for their intrinsic value rather than to achieve external goals. For them, the process is inherently rewarding, and they prioritize the journey over the destination. Additionally, those with an autotelic disposition tend to seek out high-action opportunities and exhibit higher levels of positive affect.

In clinical settings, harnessing the power of flow involves identifying and promoting activities and environments that facilitate optimal experiences. Therapists assist individuals in recognizing what triggers flow for them, encouraging them to invest their energy in such activities. This process involves helping clients pinpoint their passions and strengths to cultivate a sense of purpose and engagement. Additionally, therapists work on developing personal characteristics and skills that enhance the likelihood of flow experiences. By focusing on these elements, individuals can experience increased fulfillment and well-being in their daily lives.

9 Dimensions of Flow

Conditions

Challenge-Skill Balance

The balance between levels of perceived challenge and perceived skills is a central condition of a flow experience (Tse, Nakamura, & Csikszentmihalyi, 2021)[24]. When the perceived level of challenge is below a person's skill level, they are likely to feel bored and disengaged. When the perceived level of challenge is well above a person's level of skill, they are likely to feel anxious. The balance between the two, with challenges very slightly stretching a person's perceived skills, is

most conducive to experiencing flow. Note that levels of challenge and skill, and their subsequent balance, are not determined by objective criteria associated with an activity. Rather, both levels of challenge and skill are those perceived by the individual themselves.



Clear and Emergent Goals

The experience of flow occurs within a system of dynamic and open motivation. Clear goals in the context of flow experience refer to those that emerge in a person's awareness as their subjective experience unfolds (Tse, Nakamura, & Csikszentmihalyi, 2021)[25]. The immediate and momentary nature of emergent goals is in contrast to broader, more general goals that a person may have in mind while engaging in daily tasks. For example, a student may set a goal to finish a written assignment in a given amount of time. However, such goals do not represent clear and emergent goals in the case of flow. Rather, goals that emerge once a student begins writing their assignment such as selecting an idea to start their draft with, brainstorming about their response, drafting an outline, elaborating on specific points they wish to highlight in their response, reviewing their draft for logical consistencies, even just completing one sentence, and assessing whether it links logically with the next, are more representative of a flow experience. In other words, clear goals during flow emerge in the moment within a person's subjective awareness as opposed to being set before the activity even begins.

Immediate Feedback

Immediate and continuous feedback about how well one is doing helps sustain flow and can be thought of as an ongoing condition of a flow experience operating alongside clear and emergent goals (Tse, Nakamura, & Csikszentmihalyi, 2021)[26]. Similar to the balance between challenge and skill levels as well as clear emergent goals, feedback, as immediately received in the present moment, is subjectively perceived and assessed by the person themself. This is in contrast to external feedback that a person may receive later about their performance in an activity, such as that received from another person (e.g., a letter grade or score assigned to a student's assignment).

Characteristics

Focused Concentration

Completely focused concentration representative of deep absorption in the task at hand is a key characteristic of flow experience (Csikszentmihalyi, 1990[27]; Tse, Nakamura, & Csikszentmihalyi, 2021)[28]. However, unlike deliberate regulation of attention to concentrate on a particular stimulus, focused concentration in the case of flow experience emerges as a function of the flow conditions being satisfied. Focused attention within flow experience is often reported as feeling effortless, in contrast to effortful focus that may characterize other experiences of focused attention (Csikszentmihalyi & Nakamura, 2018)[29]. In other words, flow states are unlikely to occur simply because one has chosen to intentionally and effortfully concentrate. Instead, complete concentration is more often the product of a situation in which the perceived levels of challenge and skill are balanced and emergent goals and feedback are clear.

Merging of Action and Awareness

The merging of action and awareness within flow experience represents the subjective perception of feeling one with the activity. During flow, the distinction between the individual and the activity is not in the forefront of awareness. Many accounts of the flow state describe an experience in which one action flows into the next without pausing for conscious reflection (Csikszentmihalyi 1990)[30]. In other words, many people report that during flow, one action seamlessly follows the next without thinking beforehand about what to do next, because the action and the awareness of that action tend to merge into one unified experience.

Sense of Control

People often report feeling in control of their actions when experiencing flow. For example, a rock climber may report feeling in control of where to place their hand next as they climb up the face of a mountain. Although a flow experience is often accompanied by a sense of control, it is contextualized against the backdrop of feeling that control may be lost at any given moment (Csikszentmihalyi, 1990)[31]. In this sense, perceptions of control that emerge during flow experiences can be distinguished from feelings of complete control that may be more characteristic of relaxation or actions that have become automatic.

The sense of control that accompanies flow experiences exhibits a paradoxical nature (Csikszentmihalyi, 1990[32]; Logan, 1988[33]); many people report feeling completely in control, yet a true feeling of complete control is at odds with one's skills being stretched by an attainable challenge. To be completely in control would imply that one is not actually being challenged, or that one might not fall out of control at any given moment if concentration is not maintained. The allure of flow, however, is in the satisfaction of exercising control in normally difficult to control situations, or experiencing the possibility, rather than the actuality, of control (Csikszentmihalyi, 1990)[34]. Importantly, like the balance of challenge and skills, the sense of control during flow is an individual's subjective perception of control rather than an objective assessment.

Time Distortion

As attention is fully focused on the task or activity at hand during flow, little to no spare attentional resources are available to keep track of the passage of time. As a result, people often report completely losing track of time during flow. Once the flow experience ends, the passage of time tends to feel different than normal and the perception of time having passed by very quickly or rather slowly during the flow experience is a common occurrence (Csikszentmihalyi, 1990)[35].



Loss of Self-Consciousness

Attention is fully focused in the present moment during flow. Similar to losing track of time passing, spare attention is not available during flow experiences to consciously view oneself as a social actor engaged in a task or activity. Rather, a person simply acts without thinking self-consciously about themself or how others will perceive their actions. In other words, during flow, attention is fully focused on what one is doing rather than being invested in consciously monitoring oneself.

Note that the loss of self-consciousness does not mean the loss of consciousness altogether, as in the case of fainting, for instance. In addition, the loss of self-consciousness does not represent a complete lack of control and regulation of one's behavior. In fact, a person is fully conscious of their actions during flow, as in the case of rock climbing, but simply not conscious of oneself as a separate participant in one's subjective experience.

Autotelic Experience

Flow experience is autotelic in that it is pursued for its own sake. The term autotelic is derived from the Greek words auto (i.e., self) and telos (i.e., goal). In other words, experiences of flow are ends in themselves, rather than simply serving as a means to another end. Although flow is associated with beneficial outcomes such as positive mood and higher performance, such outcomes are not generally why people want to replicate flow once they experience it in a particular activity. Such benefits may best be seen as by-products of flow rather than the primary reason to pursue such an experience.

Furthermore, while one could begin a potential flow activity with an external goal in mind (e.g., rehearsing for a future performance, competition, or completing an assignment), the experience during flow makes the activity a worthwhile end in

itself regardless of the final outcome. With that said, skill development is often associated with flow since the enjoyable nature of flow itself motivates people to seek a similar quality of experience in the future. With each subsequent flow experience, skills tend to gradually improve, leading one to seek out greater challenges in order to maintain an optimal balance of challenge and skills (Csikszentmihalyi, 1990[36]; Tse, Nakamura, & Csikszentmihalyi, 2021[37]).

? Guiding Questions

1. What is flow?
2. What happens to attention and sense of time during flow?
3. How do you put yourself in a state of flow?
4. What is the "area of apathy" and how does that connect to happiness, flow, and how you spend your time each day?

Definition: Flow

embodies a state of deep absorption, focus, and involvement in activities, accompanied by a sense of enjoyment

Attribution

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SECTION OVERVIEW

5.7: Optimism, Hope, Efficacy and an Introduction to Good Relationships

5.7.1: Hope and Optimism

5.7.2: Self-Efficacy

5.7.3: Relationships and Well-Being

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5.7.1: Hope and Optimism

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Define optimism, hope, and learned optimism, and recognize the differences between them.
- Explore optimistic illusions and biases, and understand their impact on decision-making processes.
- Define hope and its significance in human well-being, including its connection to positive outcomes.
- Differentiate between hope and mere wishing, and understand their respective roles in goal pursuit.
- Learn practical strategies for utilizing hope to pursue goals and navigate obstacles effectively.

READ List

Start off this Chapter by reading Chapter 5 of *Positive Psychology: The Basics*[1] by Rona Hart, which discusses optimism and hope.

WATCH List

Watch Dr. Shane Lopez, a senior scientist at Gallup, discuss hope in this interview[2] uploaded onto YouTube by UMNCSH.

Next, watch FightMediocrity's YouTube video animation on Learned Optimism by Martin Seligman[3].

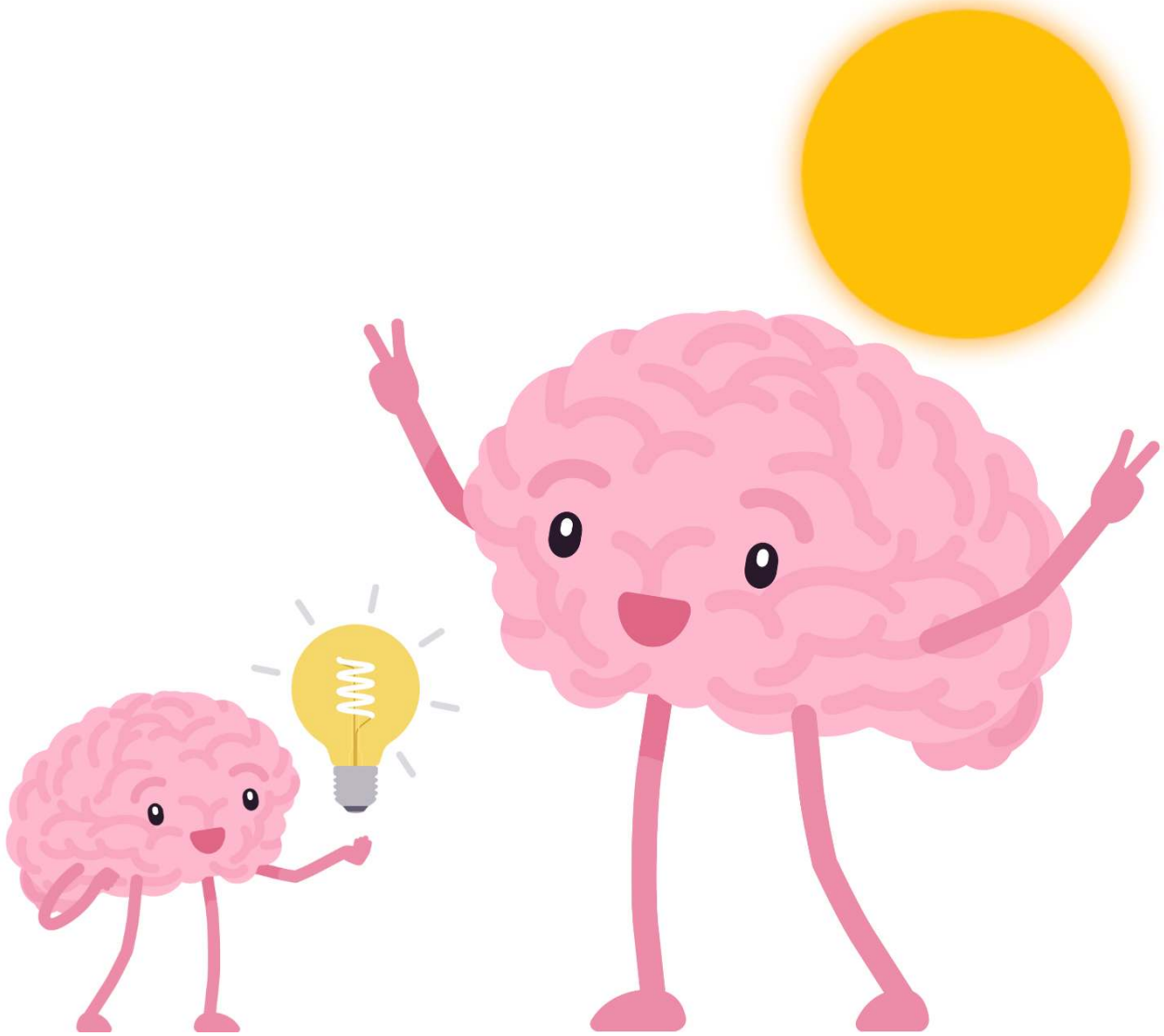


Self Assess

Utilize self-assessment tools to measure your levels of hope and optimism. Take the Learned Optimism test from the Authentic Happiness website[4] under 'Engagement Questionnaires' to assess learned optimism. Additionally, discover your trait optimism by completing the LOT-R[5]. Lastly, evaluate your hope levels using the Adult Hope Scale[6].

Perception Matters

Optimism prompts us to consider the benefits of looking on the bright side. **Optimism** means feeling hopeful about the future and believing good things will happen. It's seeing things positively (Oxford)[7]. The traditional understanding of optimism, as presented by Dr. Michael Scheier and Dr. Chuck Carver, describes it as a consistent tendency to anticipate positive outcomes over negative ones. When you have a goal in mind, your expectations about achieving it can either be positive or negative. These expectations are shaped by a combination of genetic factors and early life experiences, including positive interactions and secure attachments formed during childhood.



Researchers, led by Dr. Michael Scheier, examined the impact of optimism on patients, particularly in terms of rehospitalization. Their study involved 309 patients who had undergone bypass surgery, primarily men in their 60s. The findings revealed that optimism served as a predictor for both surgery and rehospitalization related to coronary heart disease (CHD). Additionally, optimism showed significance in relation to depression and neuroticism. When considering all personality factors together and adjusting for sex and cholesterol, optimism emerged as the sole predictor (Scheier et al., 1999)[8]. The study's findings prompted researchers to explore the underlying mechanisms by which optimism contributes to quicker post-surgery recovery in individuals. It seems that believing in the effectiveness of medications and following doctor's advice increases commitment to treatment, boosting chances of recovery. Conversely, doubting treatment efficacy may reduce motivation to adhere to prescribed regimens. Optimists handle stress better, embracing growth and effective coping strategies, leading to resilience in overcoming challenges. They also tend to pursue higher education and excel in their careers.

Dr. Suzanne Segerstrom's research on immunology highlights a concerning trend on optimism. She conducted a study among law students facing the challenges of their demanding coursework. Interestingly, those with remarkably high levels of optimism demonstrate poorer immune system function during exam periods compared to their less optimistic peers. This unexpected finding is attributed to the heightened stress and role conflict experienced by highly optimistic students. Segerstrom suggests that while optimism can typically be advantageous, excessive optimism may have adverse effects, leading to disappointment when hopeful expectations aren't realized and ignoring the reality of future events (Segerstrom, 2001)[9].

Transitioning from optimism to hope, hope shares similarities with optimism because both involve expecting good things to happen or believing that goals can be reached (Oxford)[10]. Defined by Dr. Charles R. Snyder as goal-directed thinking, hope involves **pathways thinking**, which includes the perceived capacity to identify routes toward desired goals, and **agency thinking**, involving the motivation to utilize these pathways. Importantly, for hope to be applicable, the goal must hold personal value, regardless of its duration or difficulty. The emotion of hope serves as a guiding beacon, reassuring individuals that they are progressing towards their aspirations.

It's not just about positive thinking; action is essential too. According to Snyder's model, hope involves two key components: pathways thinking and agency thinking. Pathways thinking refers to the ability to identify effective strategies to pursue goals, while agency thinking involves the motivation to use these strategies and persevere in the face of obstacles. In Snyder's view, hope is more than just an emotion; it's a dynamic interaction between these cognitive processes. Emotions serve as indicators of progress toward achieving goals rather than being the primary focus. Snyder also developed measures of hope for both adults and children, as well as a state measure to assess changes in hope over time. This model has been extensively researched worldwide and is distinct from related concepts such as optimism and self-efficacy (Snyder, 2002)[11].



How hopeful are you? Discover your level of hopefulness by completing The Trait Hope Scale[12].

Hope provides various benefits, including improved problem-solving abilities, positive self-talk during challenges, increased positive emotions and energy, and a mindset that sees obstacles as conquerable challenges. It is cultivated through learning, strong parental attachment, and the interplay of dopamine-regulated **behavioral inhibition system (BIS)/ behavioral activation system**

(BAS). Benefits of hope include better GPA, increased athletic performance, increased happiness, and social ability (Rand et al., 2020)[13].

Exploring Learned Optimism

Shifting from the traditional understanding of optimism, let's explore alternative forms such as **learned optimism**. Recall the theory of **learned helplessness** from introductory psychology, which was developed by Seligman as a counter model to the animal model of depression, based on the observation of dogs that no longer attempted to escape shock. This theory prompts an exploration into how individuals make attributions, or explanations, for both positive and negative events in their lives. This inquiry leads to the concept of explanatory style, which examines the habitual manner in which individuals interpret and explain the occurrences they encounter.

Learned Optimism

For a deeper understanding of learned optimism, watch Practical Psychology summarize *Learned Optimism*[14], a book by positive psychologist, Martin Seligman.



Individuals with high levels of learned optimism tend to respond to negative events in specific ways. For instance, when encountering setbacks like failing a midterm, they are more inclined to make external attributions, such as blaming the professor or acknowledging external factors like a busy schedule impacting their preparation, rather than internalizing the failure. They also tend to view the setback as variable, assuming that the next exam will likely be better, rather than stable, seeing the failure as a permanent aspect of their abilities. Furthermore, they may attribute the failure to specific circumstances, like the unique challenges of a particular class, rather than seeing it as a global reflection of their competence. In contrast, individuals with a pessimistic outlook are more likely to attribute failures internally, seeing themselves as inherently flawed or incapable. They also tend to view failures as stable traits, expecting similar outcomes in the future, and perceive them as global, affecting multiple aspects of their lives beyond just the immediate situation.

The origins of an optimistic explanatory style can be traced to various factors. Firstly, research suggests a genetic component, as evidenced by twin studies[15] indicating a hereditary influence on optimism levels. Additionally, a secure attachment to parents during childhood has been linked to the development of an optimistic outlook later in life. This connection is further reinforced by the theory that parental optimistic explanatory styles, where positive outcomes are emphasized, tend to shape similar attitudes in their children. Conversely, exposure to pessimistic narratives, such as those commonly portrayed in television programs, can instill a sense of helplessness and pessimism, leading to a lower learned optimism in individuals.

It's important to recognize that it's not only one's actual skill but rather their belief in their skill that significantly impacts outcomes. This concept is rooted in **perceived control**, which refers to the belief that one has the ability to make a difference in the course or the consequences of some event or experience; often helpful in dealing with stressors. By fostering a sense of perceived control, individuals can approach difficulties with greater confidence and resilience, ultimately shaping their responses and outcomes.



In their work in 1977, Dr. Ellen J. Langer and Dr. Judith Rodin investigated the effects of reintroducing control to residents in nursing homes who had experienced learned helplessness. By empowering them to make choices and be mindful of their newfound control—such as selecting movies or caring for a plant—they observed remarkable improvements. Residents showed higher health and activity levels, better mood and sociability, and notably lower mortality rates over an 18-month period (Langer & Rodin, 1977)[16].

Definitions

Optimism

feeling hopeful about the future and believing good things will happen

Pathways Thinking

Includes the perceived capacity to identify routes toward desired goals

Agency Thinking

involving the motivation to pursue goals

The Behavioral Inhibition System (BIS)

associated with responses to fear and punishment avoidance

Behavioral Activation System (BAS)

linked to responses to rewards and approach behavior

Learned Optimism

how individuals make attributions, or explanations, for both positive and negative events in their lives

Learned Helplessness

belief that one is powerless to do anything about a situation after repeated experiences of adversity

Perceived Control

the belief that one has the ability to make a difference in the course or the consequences of some event or experience

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5.7.2: Self-Efficacy

Believing in Yourself

Self-efficacy, the belief in one's ability to succeed, is influenced by past experiences, observational learning, visualization, social persuasion, and emotional state. These factors collectively shape confidence and capability in facing challenges. In the world of control, there's a fundamental belief captured in "I think I can, I think I can." This sentiment reflects an individual's confidence in their ability to influence outcomes through personal action, a concept outlined by Albert Bandura[17], a behavioral psychologist. It comprises two critical components: **Outcome Expectancy (OE)**, evaluating the task, and **Efficacy Expectancy (EE)**, assessing one's capability to achieve it. Notably, EE carries more weight, representing belief in personal abilities over external factors.



Most studies in this field are conducted in North America, using scales tailored to its culture. American values prioritize future mastery, goal-oriented activities, and individualism. However, within the U.S., individuals from Cuban, Mexican, and Puerto Rican backgrounds tend to focus more on the present. Eastern cultures view suffering differently, not always negatively. For instance, Asian Americans may exhibit higher pessimism, but it's linked to better problem-solving, unlike most US data on caucasians (Chang, 1996)[18]. This suggests that optimism doesn't benefit everyone equally. Hence, it's vital not to assume universal correlations.

1. Identify someone who possesses a trait you admire. Observe their behavior and actions related to that trait, and emulate them when appropriate. Don't hesitate to ask them for advice on how they developed that characteristic.

2. Set specific goals (HOPE). Break down larger aspirations into manageable steps. For instance, if your goal is to achieve a 4.0 average this semester, outline the actions needed to reach it. Anticipate potential obstacles and plan strategies to overcome them.

3. Focus on pursuing smaller goals one step at a time. Concentrate on completing each task before moving on to the next, maintaining steady progress towards your ultimate objective.

4. When faced with setbacks or challenges, adopt an optimistic explanatory style. Rather than dwelling on negative outcomes, seek positive explanations and constructive lessons from the experience. Whether it's a disappointing grade or a lost video game, approach setbacks with optimism and resilience.

Fostering optimism about your future goals can fuel your motivation and increase the likelihood of success. Research by Sheldon and Lyubomirsky (2006)[19] found that visualizing your best possible self boosts immediate positive emotions, with continued practice leading to sustained happiness even a month later. Stronger self-efficacy links to lower anxiety and depression, higher pain tolerance, improved academics, more political engagement, successful smoking cessation, and positive behavior changes like exercise and diet adherence, including aiding eating disorder recovery. Additionally, it's beneficial in enhancing psychotherapy effectiveness.



Even the perception of control, whether real or fake, can influence your health. In an experiment where participants were exposed to a stressful noise, those who were given a fake control option, such as a non-functioning button to mitigate the noise, showed improved health outcomes compared to those with no control option at all. This suggests that the mere belief in control, even if it's illusory, can positively impact health by reducing the stress response and bolstering immune function. Therefore, having a sense of control, even if it's not genuine, can still be beneficial for your well-being (Sieber et al., 1992)[21].

Definitions

Self-efficacy

the belief in one's ability to succeed

Outcome Expectancy (OE)

evaluating what needs to be done

Efficacy Expectancy (EE)

evaluating your capability to do something

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5.7.3: Relationships and Well-Being

Loneliness and Isolation

As a society, we are witnessing a concerning trend of increasing loneliness and isolation. Individuals are spending more time apart from one another and experiencing heightened feelings of loneliness. This shift is accompanied by a decline in social capital, characterized by weakened connections with others and a deterioration of trust and reciprocity (Lim et al., 2020)[22]. Social connection matters greatly because it is a key predictor of well-being. Quality relationships, whether with close friends, family, or weaker ties, are fundamental to both eudaimonic and hedonic well-being. Interacting with others generally leads to happiness, energy, and overall positive feelings, making it a crucial aspect of our lives.



While many believe that happiness is hard to define or relies on wealth, researchers have identified core factors essential for a happy life. These include the number of friends, the closeness of relationships with friends and family, and connections with coworkers and neighbors (Murray et al., 1996)[23].

From an evolutionary standpoint, communal living has offered crucial advantages for survival, providing protection against threats and enhancing success in activities like hunting. Additionally, collective child-rearing strategies have ensured the offspring's well-being and success within the group. Even studies such as Dr. Harry Harlow's[24] with monkeys have shown a preference for affection over sustenance, highlighting the innate need for social bonds. Our biological makeup reinforces these tendencies, with oxytocin commonly known as the "cuddle hormone," emphasizing our natural inclination towards social connection and love. When we perceive social support, we tend to respond better to stress, a phenomenon known as stress buffering. The "Tend and Befriend" hypothesis[25], proposed by Shelley Taylor at UCLA, contrasts the traditional "Fight or Flight" response by suggesting that humans, particularly females, have evolved a tendency to seek out their social group and provide care for others during stress. This hypothesis highlights the importance of social connection in our survival as a species. The hormone oxytocin is believed to play a role in facilitating this behavior.

Quality of relationships certainly plays a significant role, yet even without considering it, the quantity of regular social contacts can predict lifespan. This comparison between social isolation and integration underscores the importance of social connections in

determining longevity. You can read more about these findings by Dr. Julianne Holt-Lunstad and colleagues in *Social Relationships and Mortality Risk: A Meta-analytic Review*[26].

Researchers also investigated whether extraverted individuals were more likely to have outstanding relationships, but our findings suggest otherwise. Extraversion wasn't correlated with higher or lower relationship ratings; introverts are just as capable of fostering exceptional relationships as extraverts. Since it's these exceptional relationships that contribute to our happiness, this indicates that introverts can also find fulfillment through them. In conclusion, our analysis indicates that being more prosocial—engaging in meaningful, genuine relationships, demonstrating kindness and generosity, and being part of a supportive community—is the most promising path to sustainably enhancing our well-being. Research by GGSC fellow Brett Ford[27] supports this perspective, suggesting that prioritizing this approach to happiness may be more effective than solely pursuing continuous pleasure, success, and power.

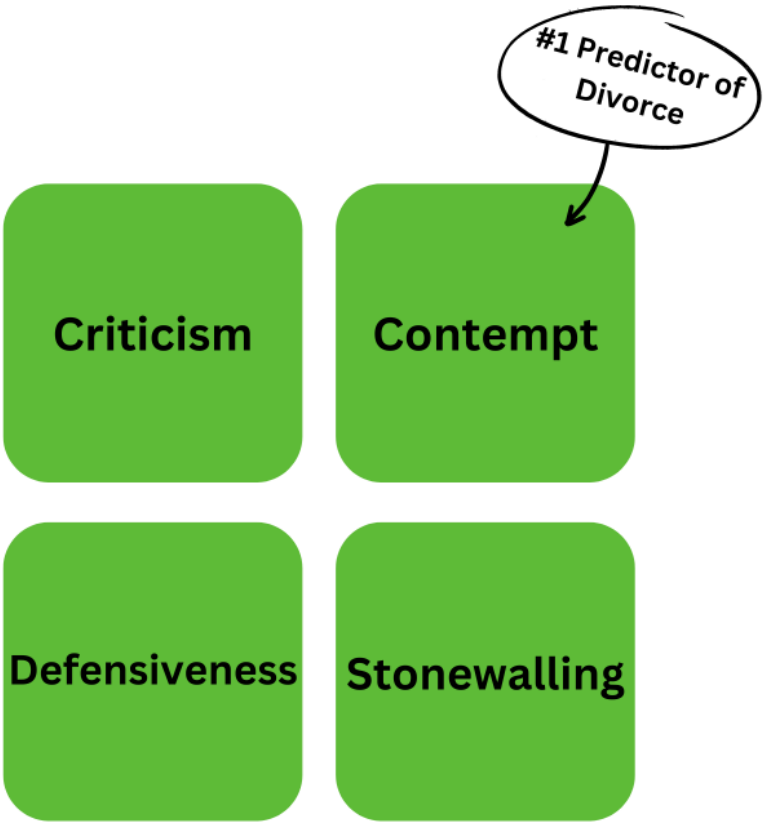
But…Do we even know how to connect anymore?

Quality connections are vital because they form the foundation of relationships. Positive micro interactions, repeated over time, build trust, openness, and belonging. These connections benefit individuals by reducing stress and enhancing well-being. At a group level, they foster collaboration, shared identity, and resilience. Ultimately, they are essential for personal fulfillment and collective success.

What the research says about making quality connections (Stephen et al., 2012)[28]:

1. Greet with respect (physically open gestures, convey positive expectations, openness).
2. Convey interest and care (ask meaningful questions that display genuine interest/curiosity/concern in and for the other person).
3. Listen well (body language, follow up questions).
4. Show appreciation and kindness (thank the other person when appropriate).
5. Demonstrate responsiveness (e.g., react to the person, repeat back what they said, offer a helpful reaction).
6. Identify shared interests/common ground.
7. Disclose vulnerability (open up about struggles, concerns).
8. Express affirmation (look for chances to offer confirmation/attention/approval).
9. Generate laughter (jokes, laughing, banter).

Positive interactions are crucial for sustaining long-term relationships, as emphasized by Dr. John Gottman[29], who also warns about the damaging impact of the 'four horsemen' on relationships.



Criticism, Contempt, Defensiveness, and Stonewalling are behaviors that can deeply harm relationships if not addressed. Criticism involves attacking someone's character or actions, while Contempt manifests as belittling or adopting a stance of superiority. Defensiveness, a natural response to criticism, often involves reverse-blaming or an unwillingness to acknowledge one's faults, hindering resolution. Stonewalling is emotional shutdown and physical withdrawal, creating a barrier to connection and resolution. To strengthen relationships, therapy or marriage counseling can provide vital support. John Gottman's research challenges common assumptions about divorce predictors. Instead of fights or anger, successful marriages navigate conflict constructively, avoiding avoidance as a long-term strategy. Traits like whining, defensiveness, and stubbornness during arguments can signal trouble down the road. Gottman's "5:1 ratio" emphasizes the importance of maintaining five positive interactions for every negative one to sustain relationship well-being.[29]

What about negative responses– Should we have none?

It's not about completely eliminating negativity but rather about maintaining a healthy ratio between positive and negative interactions, a principle emphasized by John Gottman. For a deeper understanding, watch the Gottman Institutes video upload called, *Invest in Your Relationship: The Emotional Bank Account*[30] and *How Much Negativity Can Your Relationship Stand?*[31]





While it's widely acknowledged that our partners and friends often offer support during tough times, the importance of their response to our successes is equally significant. This aspect is crucial for relationship well-being, as it communicates care and love, demonstrating genuine interest in the individual and their accomplishments.

Capitalizing in Social Relationships

To cultivate positive social bonds over time, it's crucial to respond appropriately to relationship bids. Active-constructive responses, exemplified by attentiveness and enthusiasm, are key when receiving good news from friends or partners, such as an award, a new job, or a raise.

For instance:

- Active-constructive: "That's GREAT!" (enthusiastic response)
- Active-destructive: "Do you have more to do now?" (focuses on the downside)
- Passive-constructive: "That's nice" [looks back at phone] (muted acknowledgment)
- Passive-destructive: "Did you watch the Super Bowl this weekend?" (disinterested and unengaged)

While it's not necessary to provide an active-constructive response every time, it should be the predominant type of response, ideally in a 3:1 ratio (Gable et al., 2006)[32].

Dr. Shelly Gable[33] from UCSB sheds light on building love in relationships by discussing the significance of responding well to positive events. For further insights on improving interactions, consider watching Responding Well to Others: How our response to someone's good news affects their happiness[34] by LeadershipLifestyles on YouTube. Additionally, keeping your ratios in mind is essential. Consider the balance between positivity and negativity, listening and distraction, as well as talking about yourself versus

actively listening in your interactions with others. These elements play a crucial role in fostering meaningful connections and enhancing relationship dynamics.

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SECTION OVERVIEW

5.8: Prosocial Behavior and Acts of Kindness

5.8.1: Psychological Flourishing with Prosocial Behavior

5.8.2: The Science of Giving and Receiving Support

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5.8.1: Psychological Flourishing with Prosocial Behavior

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Define prosocial behavior, explore its underlying motivations, and analyze its benefits for individual well-being.
- Implement actionable strategies to integrate more kindness into daily life for enhanced personal fulfillment and societal well-being.
- Understand how acts of kindness are influenced by psychological mechanisms like priming, and their effects on mood and perception.
- Analyze the benefits of giving social support over receiving it, based on empirical studies.

Interacting with Kindness

Explore Dr. Katherine Nelson and colleagues' paper titled *Do unto others or treat yourself? The effects of prosocial and self-focused behaviors on psychological flourishing*[1], as they discuss the significance of doing nice things for others.



Research highlights the significance of social contact for well-being. From hugs reducing stress to even brief interactions with strangers boosting happiness, the benefits are undeniable. Maintaining a wide network of "weak ties" can also offer valuable connections, advice, and inspiration, enhancing our overall happiness, and fulfillment (Van Lange et al., 2021)[2].

The widely held societal belief that treating ourselves leads to happiness may not always produce the desired outcomes. In a survey of 632 Americans, their monthly spending on bills, personal gifts, and charity was analyzed. A link was found between higher happiness and spending on others, regardless of income. On a university campus, students given money to spend on themselves or others showed that those who spent on others ended the day happier. Students who were asked to predict what would happen got it completely wrong (Dunn, Aknin & Norton, 2008)[3]. Another set of studies found that spending money on others resulted in healthier blood pressure levels than those who spent money on themselves (Whillans et al., 2016)[4].

In longitudinal studies, participants are typically randomly assigned to engage in acts of kindness either for others, for themselves, or as part of a neutral control activity, such as tracking daily routines. Over a period of four weeks, participants carry out three acts of kindness per week according to their assigned condition.Research findings reveal that individuals who perform acts of kindness for others, as opposed to themselves or engaging in neutral activities, experience significant enhancements in positive emotions,

mental well-being, and reductions in symptoms of anxiety and depression (Nelson et al., 2016[5]; Nelson-Coffey et al., 2021[6]). Moreover, a study showed that focusing on kindness towards others for four weeks led to notable improvements in immune-related gene expression compared to self-directed kindness or neutral activities, suggesting a positive impact on physical health as well (Nelson-Coffey et al., 2017)[7].

Recall the last time you performed a good deed. Whether it was assisting someone with a flat tire, tidying up their apartment, aiding in studying for a challenging exam, surprising them with a thoughtful gift, mowing the lawn for an elderly relative, or offering a ride to an important destination despite it being out of your usual route. How did that experience make you feel?

Prosocial behaviors are actions intended towards helping others, driven by a sincere concern for their rights, emotions, and welfare. These behaviors encompass a range of actions, including showing empathy, providing assistance, sharing, comforting, and cooperating with others. Prosocial acts can be proactive, reactive, or altruistic, all of which yield beneficial outcomes for both individuals and communities. Proactive prosocial behaviors involve actions taken for self-benefit. Reactive behaviors respond to individual needs, while altruistic acts are aimed at helping others without expecting personal gain.





Participating in discussion groups and sharing knowledge generates social capital, which constitutes a form of prosocial behavior. Philanthropy, such as donating to charity or establishing charitable organizations, is also considered prosocial. Social capital is essentially the value derived from positive connections among individuals. Examples at the societal level include acts like holding the door for someone, returning lost items to strangers, offering directions, lending items, and any other mutually beneficial interactions between individuals, even if they are unfamiliar with each other. For instance, Wikipedia, as a collaboratively edited encyclopedia, exemplifies how contributions enhance both social and knowledge capital.

Researchers assessed participants' helping behavior through both observation and self-report measures. The observation involved evaluating if individuals stopped to help someone in need following experimental manipulations. Meanwhile, participants completed the Helping Attitude Scale, rating their attitudes towards helping others on a spectrum from skepticism to affirmation. You can access the scale through the provided link[8].

Societal Impacts of Pro-Social Behaviors

Engaging in prosocial behavior offers numerous benefits, including social support, stress reduction, and mood enhancement. Society would fall apart without it. Prosocial behavior fosters relationships and cultivates stable communities. Its significance amplifies during crises like the COVID pandemic, where its impact extends both to individuals and society at large. Amid financial struggles, isolation, and the grief of losing loved ones, aiding others becomes paramount, serving as a cornerstone for resilience and collective well-being (Haller et al., 2022)[9].

We engage in these actions not only for our own safety but also for the well-being of others. Consider the mask mandate during the Covid-19 pandemic. Each time you wore a mask or get vaccinated, you're not just safeguarding yourself; you are also practicing prosocial behavior by protecting those you come into contact with. These actions represent social contracts with our communities,

demonstrating our commitment to keeping each other and our most vulnerable members healthy. According to Reddinger and colleagues (2022)[10], individuals who exhibit prosocial behaviors are more likely to get vaccinations. For instance, in a study conducted between April and August 2021, participants who contributed the maximum amount ($4) to public welfare were 48% more likely to voluntarily obtain a first dose compared to those who made no contributions.

Prosocial behaviors, such as volunteering, not only benefit others but also have a positive impact on one's health and well-being. For instance, individuals who engage in high levels of volunteering (in two or more organizations) experienced a significant 63% decrease in mortality compared to nonvolunteers, even after adjusting for age and sex. Further analysis revealed that this reduced mortality risk was partially attributed to factors like improved physical functioning, healthier habits, and enhanced social support. Interestingly, volunteering showed even greater protective effects among individuals with high levels of religious involvement and perceived social support. Moreover, regardless of religious affiliation, any level of volunteering was associated with a substantial 60% reduction in mortality among those who attended religious services weekly. These findings underscore the multifaceted benefits of volunteering, which extend beyond individual health habits to encompass broader aspects of social engagement and community involvement (Oman et al., 1999)[11].



Volunteering offers numerous benefits for both physical and mental health. It requires active engagement, which is inherently beneficial. Research suggests that volunteering may even counteract age-related decline in brain function, particularly among older adults who engage in activities like youth mentoring through programs such as Experience Corps (Carlson et al., 2009)[12]. Teresa Seeman[13], a faculty member at UCLA specializing in public health, has extensively studied these effects. Beyond its physiological impacts, volunteering provides individuals with a profound sense of purpose and meaning in life. By fostering social connections and a sense of belonging, it also serves as a buffer against stress and depression. Engaging in volunteering activities often leads to downward social comparisons, which can positively influence self-esteem. Furthermore, volunteering may involve travel and exposure to new experiences, enhancing overall well-being through novelty and exploration.

Explore the research of Dr. Tara Gruenwald[14], Associate Professor and Chair of Psychology at Chapman University, who delves into the concept of generativity among older adults. One notable paper she co-authored with Dr. Teresa Seeman is titled: *Contributing to others, contributing to oneself: perceptions of generativity and health in later life*[15].

Can We Make You Prosocial?

Human behavior often inclines towards kindness and selflessness, possibly driven by evolutionary factors. Both **Kin Selection Theory** and **Reciprocal Altruism Theory** propose that our evolutionary success hinges on our ability to provide resources to others. Altruistic behavior offers numerous benefits, including reduced distress, enhanced health, and a heightened sense of meaning and purpose in life. Additionally, societal norms and upbringing play a significant role in fostering altruism. Socialization

teaches us the importance of helping others, and there are often reciprocal benefits involved, such as receiving assistance from others in return.

Check out this study conducted by Dr. Alice Isen and Dr. Paula Levin, which examines the impact of positive affect on helpfulness in their paper titled, *Effect of Feeling Good on Helping: Cookies and Kindness*[16].

The “Glow of Goodwill”

Elevating individuals' moods increases the probability of them extending help to others. For instance, in the Isen & Levin Study[16], discovering a coin was associated with assisting someone in retrieving dropped papers, a trend observed across different demographics, including sexes, races, and ages.

? Guiding Questions

1. What is prosocial behavior?
2. Describe the study design and goals.
3. What are the main study findings?
4. What is the difference between prosocial behavior vs. self-compassion?

Definitions

Prosocial behaviors

actions intended towards helping others, driven by a sincere concern for their rights, emotions, and welfare

Kin Selection Theory

organisms may act altruistically towards relatives to increase the chances of passing on shared genes

Reciprocal Altruism Theory

individuals help others in expectation of future help

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5.8.2: The Science of Giving and Receiving Support

The Gift That Keeps on Giving

In this section, we will explore acts of kindness, the science behind giving and receiving support.

According to Dr. Michael Carlson and colleagues (1988)[17], there is a mechanism behind how this works. Priming involves the phenomenon where a positive mood influences perceptions, making everything appear more positive. This effect occurs because positive thoughts are more readily accessible, leading to a generally positive evaluation of one's surroundings. Furthermore, when individuals experience good fortune, they tend to focus their attention on their own advantages, which may lead to a desire to rectify perceived disadvantages in others. A positive mood also fosters a prosocial social outlook, prompting individuals to respond in ways that contribute to a more positive community and reinforce a positive view of human nature. Engaging in acts of kindness and generosity not only contributes to mood maintenance but also helps sustain a positive emotional state over time.

What is the Right Dose of Helping?



Research indicates that concentrating multiple acts of kindness into one day may be more effective than spreading them out over time. For instance, a study found that performing five acts of kindness in a single day led to greater increases in well-being compared to spreading them out over a week (Layous & Lyubomirsky, 2014[18]; Lyubomirsky, Sheldon, et al., 2005[19]). Similarly, performing positive activities too frequently within a week might diminish their benefits, suggesting the importance of dosage and timing in positive activity interventions (Lyubomirsky, Sheldon et al., 2005)[19]. Acts of kindness and volunteering are powerful interventions that foster connections and meaning, potentially mitigating adaptation (Curry et al., 2018)[20].

Social Support: Giving is Better than Receiving

Social support involves feeling supported and having people available for both emotional and tangible assistance. In a five-year study of 1,500 married couples, researchers examined various aspects of social support, including giving emotional support to spouses and helping others with practical tasks. They also looked at receiving emotional support from spouses and having access to instrumental help from others. The study also considered general social contact with others. Helping others by offering practical assistance to friends, family, and neighbors, or providing emotional support to a spouse, was linked to lower mortality rates. However, receiving support didn't affect mortality once the impact of giving support was considered. The notion that individuals who are less healthy may be less capable of providing assistance to others and consequently may have shorter lifespans was considered. However, researchers addressed this concern by measuring and statistically adjusting for participants' health status at the beginning of the study, as well as their income, education level, and susceptibility to stress. One hypothesis suggests that providing support could cultivate a more positive outlook, which in turn may offer health advantages. Conversely, receiving support might sometimes have adverse effects on well-being, especially when it becomes overly noticeable (Brown et al., 2003)[21]. We can conclude that the most effective form of support to offer is support that goes unnoticed or is less visible.

How Can You Boost Your Own Helping Habits?

Start by **keeping a journal** of your acts of kindness, whether they're small gestures like offering a smile to someone who needs it, running errands for a neighbor, or simply holding a door open. Recognize that even seemingly minor actions contribute to a greater good. Make a habit of **lending a hand**, perhaps dedicating a day each week solely to acts of kindness. Research by Dr. Sonja Lyubomirsky[22] at the University of California, Riverside, suggests that committing to five acts of kindness in a single day can have lasting benefits for weeks to come. **Visualize** yourself helping others, as studies by Mikulincer and Shaver[23] demonstrate that contemplating supportive figures in our lives can increase our willingness to assist those in need. **Draw on your unique talents when giving**, as it's easier to help when leveraging your strengths. Finally, **reflect on the ways others have supported you**, whether presently or in the past, and let that inspire your own acts of kindness.

Want to Feel More Prosocial? Loving-Kindness Meditation



Loving-Kindness Meditation is a traditional approach that is well-known for identifying successive stages of meditation during which one progressively cultivates loving-kindness towards themselves, a close friend, a "neutral" person, a difficult individual, all of these equally, and gradually, the entire universe. You can read more about this practice, and follow a step-by-step guide on the Loving-Kindness Meditation at Greater Good Action[24].

READ List

To deepen your understanding of self-compassion, read Dr. Kristin Neff's paper, *Self-Compassion: An Alternative Conceptualization of a Healthy Attitude Toward Oneself*[25].

Afterwards, read a recent, brief news article[28] with an update on the money-happiness peak, written by Michele W. Berger and published on Penn Today, a business journal from the Wharton School of the University of Pennsylvania.

WATCH List

If you're finding Dr. Kristin Neff's research valuable, explore further insights on self-compassion through her website, Self-Compassion[26].

Watch a video uploaded by PopTech on YouTube of Dr. Elizabeth Dunn discussing happiness and money[27], specifically how people can effectively use their money to promote well-being.



Guiding Questions

1. Define self-compassion
2. How is self-compassion different from self-esteem?
3. What are some examples of differences in self-compassion between groups of individuals?
4. At what level does money stop "buying" more happiness?
5. What does money have to do with savoring? How does money get in the way of happiness?
6. Understand how to spend money to maximize happiness
7. How was money spending related to job satisfaction and performance?
8. What is the updated finding discussed in this article and how does it relate to what was described in the Dunn video?
9. How does emotional well-being change trajectories of happiness-money connections?

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SECTION OVERVIEW

5.9: Culture and Applications of Positive Psychology

5.9.1: Considering Culture

5.9.2: Ideal Affect- How People Want to Feel

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5.9.1: Considering Culture

Defining Culture

How does the American Psychological Association define culture?

(n.) the distinctive customs, values, beliefs, knowledge, art, and language of a society or a community. These values and concepts are passed on from generation to generation, and they are the basis for everyday behaviors and practices.[1]



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Culture permeates every aspect of life. It influences the amounts of different strengths, the values towards different strengths, scores on different positive psychology measures, and certainly how different interventions and activities work for people. Cultural influences often support one's beliefs about what constitutes a fulfilling life and how to attain it.

Consider the concept of moderators. These elements play a pivotal role in altering the correlation between positive psychology and wellbeing. Do they elevate your wellbeing, diminish it, or have no discernible impact? Essentially, a moderator changes the relationship between two variables.

Examining cultural perspectives on leading a 'good' life reveals diversity in Western and Eastern philosophies. Western traditions provide a wealth of insights: **Aristotle**, the Athenian philosopher, outlined 11 virtues, including courage, truth, justice, and generosity. **Judeo-Christian** teachings encompass the Ten Commandments, virtues such as faith, hope, and charity from the Old Testament, and values like kindness to the poor and seeking peace from the Talmud. **Islam** emphasizes gratitude and love for Allah, kindness to parents, justice, and courage. Among the **Anishinaabe** (Ojibwe) people, the Seven Grandfathers teachings prioritize wisdom, love, respect, bravery, honesty, truth, and humility.

In contrast, Eastern philosophies offer complementary perspectives: **Confucianism** emphasizes altruism, sensitivity to others' feelings, wisdom, and truthfulness. **Taoism** advocates for living harmoniously with the universe, highlighting humanity, justice, propriety, and balance. **Buddhism** promotes compassion, love, and equanimity, urging individuals to prioritize the welfare of others.

Individualism prioritizes individual concerns over those of the group, fostering independence and self-reliance. In contrast, **collectivism** prioritizes the group, emphasizing interdependence and conformity to group norms. Individuals in collectivist cultures prioritize fulfilling cultural norms and derive happiness from goals that benefit others. They prioritize family ties and harmony in social interactions.

For example, in East Asian cultures, achieving harmony is central, and the primary value revolves around familial belonging. Seeking social support is often avoided to maintain this harmony. In Latino/Hispanic cultures, happiness perceptions are impacted by inequalities. Warmth and expressiveness within the family are cherished, with family serving as the foremost source of support.

💡 Think about it:

How do you believe this could influence the effectiveness of certain positive psychology activities? Are there specific activities you think might be affected? Have you observed firsthand how your cultural background influenced the impact of certain class activities on your well-being, whether they were successful in improving it?

Dr. Kristin Layous and colleagues[2] examined how culture influences the effectiveness of happiness-boosting activities. They found that while participants from the US benefited greatly from gratitude interventions, those from South Korea experienced fewer benefits from the same activity. However, both groups showed similar increases in well-being when engaging in acts of kindness. However, this is partially attributed to differences in effort. Americans often believe that happiness is within their control and can be achieved through sheer determination. In contrast, in Korean culture, the word for happiness translates to "fortunate" or "lucky blessing" (Oishi et al., 2012)[3]. Additionally, the cultural emphasis on maintaining a balance between negative and positive experiences may also contribute to these differences.

Although gratitude generally boosts positive emotions for everyone, Titova et al. (2017)[4] found that Asian Americans and Indians, who tend to have collectivist orientations, experienced increases in guilt and sadness after writing gratitude letters to individuals in their lives. On the other hand, optimism interventions, which concentrate on envisioning one's best future self, did not display any cultural interaction.

First Impressions

Upon meeting someone, we often find ourselves making quick judgements: How friendly is this person? How trustworthy are they? However, understanding the factors that shape these initial assessments is key.

In a study at Stanford University (Tsai et al., 2019)[5], students who preferred experiencing heightened positive emotions, such as excitement and enthusiasm, were more inclined to exhibit behaviors like sharing money, initiating conversations, placing trust, and selecting leaders who displayed similarly excited expressions in photos. Interestingly, there were cultural variations observed: European American students tended to gravitate towards individuals with excited facial expressions, while East Asian students often preferred individuals with calmer demeanors when assessing traits like trustworthiness and friendliness. This phenomenon, known as "ideal affect," significantly influences how individuals perceive friendliness and trustworthiness. Why do you think ideal affect is associated with these specific preferences and variations?

Ideal affect can shape decisions beyond preferences, impacting choices such as selecting healthcare providers and adhering to doctors orders. A study showed that individuals tend to follow medical advice more when their doctor reflects their ideal affect (Sims & Tsai, 2015)[6].

Definition: Individualism

prioritizes individual concerns over those of the group, fostering independence and self-reliance

Definition: Collectivism

prioritizes the group, emphasizing interdependence and conformity to group norms

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5.9.2: Ideal Affect- How People Want to Feel

Ideal affect refers to how people want to feel, as compared to how they actually feel. While most people seek to feel good, the specific emotional states vary, and different cultures prioritize different aspects of well-being.

The Affect Validation Index (AVI)[7], crafted in 2001 by Jeanne Tsai and Brian Knutson, serves to differentiate between two crucial emotional dimensions: **ideal affect**, representing the states individuals value or ideally aspire to feel, and **actual affect**, signifying the emotions they truly experience. When Tsai and Knutson initiated their research, the concept of "ideal affect" had been largely overlooked by scholars, prompting them to devise a method for its measurement. Cultural influence heavily shapes our responses in this regard. The role of genetics in this question is often raised, and while it remains a possibility, immigration studies suggest that culture exerts a greater influence.

Research exploring differences in ideal affect across cultures are visible in practices, institutions, and products. Notably, children's storybooks in the United States, as observed by Tsai et al. (2007)[8], feature more excited expressions compared to the bestselling children's books in Taiwan.

Fear of Happiness

Culture plays a crucial role in how happiness is perceived, as not everyone shares the same desire for happiness– not everyone wants to be happy. While Western cultures often see happiness as universally desirable, cultural beliefs shape individual views, similar to how they influence ideal affect. In some societies, there's a fear surrounding happiness. For instance, some cultures associate joy with subsequent misfortune, while others view expressing happiness as inviting envy, which can lead to hardships. Moreover, certain cultures perceive smiling as a sign of dishonesty or foolishness, contributing to reservations about embracing happiness. These cultural perspectives fuel the notion that creativity and happiness are incompatible, fostering a fear of happiness within these communities. Learn more by reading Dr. Mohsen Joshanloo and Dr. Dan Weijers paper, Aversion to Happiness Across Cultures: A Review of Where and Why People are Averse to Happiness[9].

Activity: Your Happiness

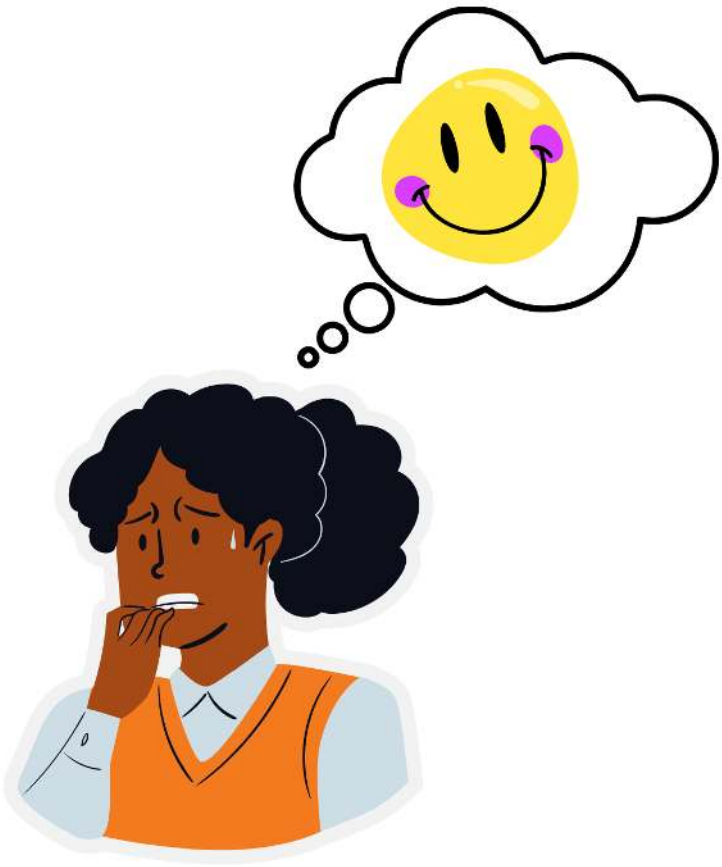
Take a moment now to jot down your specific personal definition of happiness

1. Take a moment to jot down your specific personal definition of happiness.
2. After doing so, note, is there any element of negativity in your personal definition?
3. Was your definition strictly positive or does it have other emotions mixed in?
    1. If no, how would you revise your definition to include negative emotions or feelings?
    2. Can you? (Discuss with a friend or peer briefly)

Americans tend to savor positive emotions more than Japanese, while East Asians, including Japanese individuals, are more likely to dampen enjoyment (Miyamoto & Ma, 2011[10]; Lindberg, 2004[11]). Across cultures, there's a tendency to dampen positive moods and focus on negative aspects (Bryant & Verof, 2007)[12]. Reflecting Taoist principles of balance, Chinese and Koreans often believe in the reversal of happiness, anticipating a shift from positivity to negativity over time (Suh & Koo, 2008[13]; Ji et al., 2001[14]).

Often, it's not solely a matter of cultural influence. It frequently stems from those close to us who have shaped our behavior, teaching us to conceal our joy and view gloom as a safer option. Alternatively, growing up around family members whose typical mood leaned towards negativity can also play a significant role.

Thus, feeling sad, anxious, or depressed can become ingrained as the norm — a defensive strategy for navigating life. The School of Life released a video titled *The Fear of Happiness*[15], exploring the apprehension towards happiness due to its unfamiliarity.



It is important to explore cultural differences in viewing and pursuing happiness like this while learning about Positive Psychology. It can be often assumed that everyone wants to be happy and do things to achieve happiness, although, as fear of happiness and ideal affect demonstrate, it is not always the case. This also has a very important practical implication of using activities designed to promote happiness, as they should not be applied to all without a better understanding of the cultural context in which they might be occurring. Research has shown that cultural differences in experiencing emotions and understanding of happiness lead to varied results when the same activities are performed by different cultural groups.

READ List

Read Chapter 6, *Positive Psychology within a Cultural Context*[16], in *The Oxford Handbook of Positive Psychology*.

Afterwards, read Dr. Jeanne Tsai's teachings on Culture and Emotion[17], published on NOBA.

If you would like to learn more from Dr. Jeanne Tsai, read her article in the *Perspectives on Psychological Sciences* titled, *Ideal Affect: Cultural Causes and Behavioral Consequences*[18].

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SECTION OVERVIEW

5.10: Clinical and Health Applications

5.10.1: Positive Psychology in Clinical Practice

5.10.2: Positive Psychology and Health

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5.10.1: Positive Psychology in Clinical Practice

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Understand what positive health is and how it differs from traditional notions of health.
- Explore why positive psychology is crucial for managing chronic diseases today.
- Identify specific health benefits linked to positive emotions.
- Discuss how positive factors influence health outcomes.

Approach to Mental Health

Mental illness affects a significant portion of the population, with one in five adults experiencing some form of mental health condition. Among these, nearly one in twenty-five individuals live with a serious mental illness.



Traditional clinical approaches often follow a "fix-what's-wrong" framework that centers on deficits. This approach typically involves assessing symptoms and problems, followed by treatment aimed at reducing negative thoughts, emotions, behaviors, and relational difficulties. The ultimate objective is to promote wellness by alleviating symptoms and addressing underlying issues, thus guiding the pathway from identification through intervention to improved mental health outcomes.

In positive clinical psychology, the approach shifts towards emphasizing strengths rather than deficits. It begins with a thorough assessment that considers not just symptoms and problems, but also identifies strengths and personal values. Treatment focuses on enhancing positive thoughts, emotions, behaviors, and relationships. The goal is to achieve wellness by aligning behaviors with personal values, utilizing strengths effectively, and reducing symptoms. This approach aims to empower individuals by leveraging their inherent strengths to promote growth and well-being.

Positive psychology can complement traditional psychotherapy by offering strategies that differ in focus. While traditional therapy typically focuses on reducing distress and addressing existing problems, positive psychology emphasizes building strengths and promoting success. Balancing both prevention and enhancement approaches is crucial in this context.

Shifting more focus towards primary prevention in positive psychology can be particularly impactful. By preventing issues before they arise, this approach has the potential to reach a larger number of individuals and promote overall well-being more effectively.

Dr. Nancy Sin and Dr. Sonja Lyubomirsky's 2009[1] meta-analysis of 51 studies involving 4,266 individuals found that positive therapy interventions significantly enhance well-being (r = 0.29) and decrease depressive symptoms (r = 0.31). Factors such as initial depression status, self-selection into therapy, older age, individualized sessions, and longer treatment durations were linked to greater effectiveness. Positive therapy's impact on reducing depressive symptoms was comparable to standard psychotherapy for depression. These findings highlight its potential as a valuable approach in mental health treatment.

In 2005[2], Seligman, Steen, Park, and Peterson conducted a study involving 577 participants. They utilized an online intervention to measure changes in both happiness and depression levels among the participants.

- Participants in the **Gratitude** intervention wrote and delivered a letter expressing gratitude.
- Those in the **Three good things** intervention wrote about positive experiences and their causes nightly.
- The **You at your best** intervention involved reflecting on past positive experiences and personal strengths.
- Participants in the **Using strengths** intervention identified and applied a strength daily in a new way.
- In the **Identifying strengths** intervention, participants generally used identified strengths more often.

The **Gratitude** intervention appeared to have the greatest impact on happiness, while the **Three good things** intervention likely had the most impact on reducing depression. These findings highlight the effectiveness of positive psychology practices in improving well-being and managing depressive symptoms.

Positive Psychology Includes several Effective Therapeutic Approaches

Well-Being Therapy (Fava et al., 2004)[3] is a structured method focusing on problem-solving and enhancing environment mastery, personal growth, purpose, autonomy, self-acceptance, and positive relationships.

Positive Psychotherapy (Rashid, 2008)[4], based on Seligman's happiness theory, involves 14 sessions that integrate strengths, gratitude, forgiveness, optimism, love/attachment, savoring positive experiences, and finding meaning in life.

Strengths-Centered Therapy (Wong, 2006)[5] emphasizes validating strengths (**expliticizing**), setting goals aligned with them (**envisioning**), boosting motivation (**empowering**), and facilitating ongoing application of strengths beyond therapy (**evolving**). It aligns with Seligman's framework of the pleasant life, engaged life, and meaningful life.

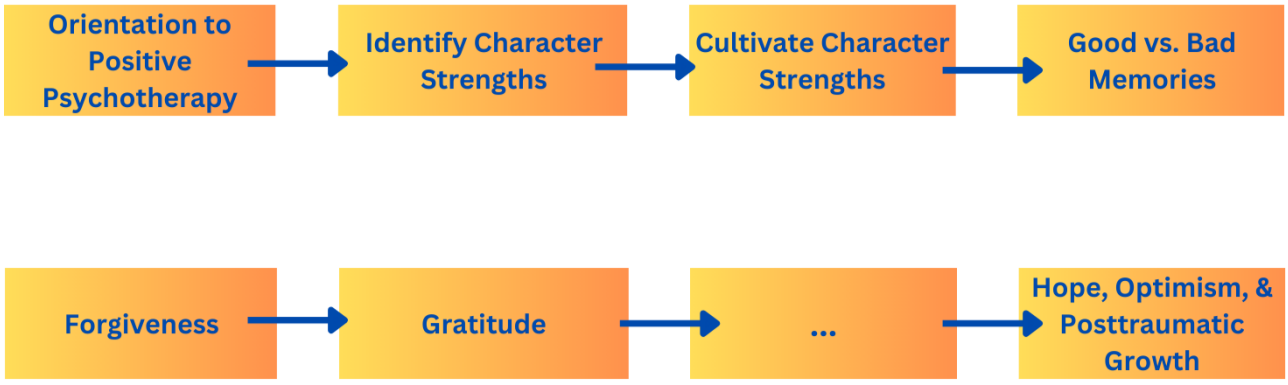
WATCH List

To gain a clear understanding of positive psychotherapy, watch Dr. Russ Curtis, a professor of counseling, demonstrate a counseling role play session[6].



Then, watch Dr. Russ Curtis demonstrate how to utilize strengths in Positive Psychotherapy in another counseling role play session[7].

Positive Psychotherapy: Session-By-Session Example:



Suicidality and Hope

Suicidality and hope are examined in the research by Beck et al. (1990)[8] involving 1,958 outpatients. They found that scores on the Beck Hopelessness Scale accurately predicted 94.2% of suicides, with patients scoring over 9 being 11 times more likely to die by suicide.

This is where hope comes into play. Clinical approaches, as discussed by Lopez, Floyd, Ulven, and Snyder (2000)[9], focus on fostering hope through various strategies:

- **Hope finding:** Helping individuals develop narratives that highlight instances of hope in their past or present.
- **Hope bonding:** Cultivating hope within the therapeutic relationship to enhance trust and collaboration.
- **Hope enhancing:** Facilitating improvements in goal-setting and behavioral strategies to achieve those goals.
- **Hope reminding:** Encouraging clients to recognize and embrace their own capacity for hope autonomously.

According to Snyder (2002)[10], hope is characterized by the ability to envision multiple pathways to achieve a goal (pathways thinking) and the motivation to utilize those pathways (agency). These approaches highlight the importance of instilling, developing, and reinforcing hope as a crucial component in therapeutic interventions aimed at reducing suicidality and promoting well-being. As we discussed in the previous, along with hope, it is also important to consider the role of culture.

Cultural Considerations

Joshanloo (2014)[11] outlines differences between Western and Eastern philosophies of well-being. Western views emphasize self-enhancement, hedonism, mastery, satisfaction, and avoiding suffering, while Eastern perspectives prioritize self-transcendence, eudaimonism, harmony, contentment, and spiritual values. Take a moment to reflect on how these cultural characteristics play a role in positive psychology- it might be a good idea to review the previous chapter on culture.

Definitions

Explicitizing
: validating and highlighting strengths

Envisioning
: identifying strengths and goal utility

Empowering
: boost motivation and empowerment, using strengths

Evolving
: termination and facilitating continued strengths use outside

Hope Finding
: helping individuals develop narratives that highlight instances of hope in their past or present

Hope Bonding
: cultivating hope within the therapeutic relationship to enhance trust and collaboration

Hope Enhancing

facilitating improvements in goal-setting and behavioral strategies to achieve those goals

Hope Reminding

encouraging clients to recognize and embrace their own capacity for hope autonomously

Attribution

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5.10.2: Positive Psychology and Health

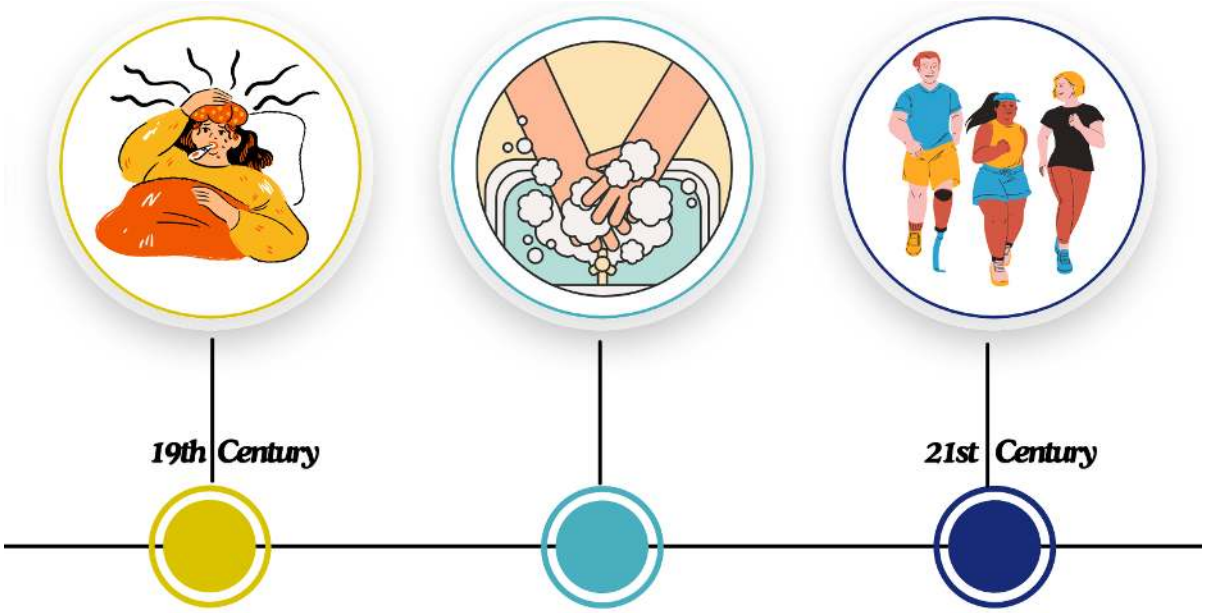
How can positive emotions improve our physical wellness?

Typically, illness manifests through general complaints (such as self-reported symptoms), specific physical symptoms, observable bodily damage, the presence of pathogenic agents (e.g., viruses, bacteria), diagnosed conditions, impaired daily activities, or a shortened lifespan.

Health is more than just not being sick, according to the World Health Organization[1][2]. It encompasses complete physical, mental, and social well-being, along with factors like spiritual health, occupational satisfaction, safety, and life balance. Interestingly, these broader aspects of wellness are often overlooked in health outcome studies.

Superior health can be recognized by several indicators, such as experiencing fewer and shorter bouts of illness, quicker healing of wounds, enhanced ability to recover from physical challenges, and possessing greater physiological capacity.

History of Illness



Throughout history, the approach to illness has evolved through three major eras. Initially, the focus was primarily on treating individuals once they became ill. This approach lasted until the mid 19th century.

The introduction of Germ Theory marked a shift towards prevention. This era saw the implementation of practices such as surgeon handwashing, food inspection, and advancement in medicine aimed at eliminating disease-causing pathogens.

In more recent times, there has been a growing emphasis on health promotion. Recognizing that health encompasses more than just avoiding germs, peple are encouraged to take proactive steps to maintain well-being. This includes engaging in fitness activities, monitoring blood pressure, enhancing resilience to stress, and building overall physical and mental health.

An important aspect to consider is the shift in causes of death from the past to the present. Today, our leading causes of death include heart disease, cancer, stroke, diabetes, and chronic respiratory diseases — conditions that typically progress slowly compared to infectious diseases like influenza, pneumonia, and plague, which historically led to quicker mortality. The chronic nature of these illnesses prompts important questions about quality of life. As a result, psychologists are studying whether attitudes and health behaviors can significantly impact the management and potential alleviation of these conditions. Dr. Sarah Pressman and Dr. Sheldon Cohen discuss positive affect and its relationship to disease in their paper titled *Does positive affect influence health?*[3]

Health Practices

Maintaining a positive outlook enhances the likelihood of adopting healthy habits like regular exercise and a nutritious diet rich in fruits and vegetables. It also reduces the tendency to engage in risky behaviors. On the other hand, stress and anxiety often lead to behaviors such as consuming junk food, smoking, and experiencing difficulty sleeping.



The mind-body connection has been debated for centuries. Aristotle viewed the mind and body as interconnected, whereas Descartes proposed they are separate entities. Recent research confirms that the brain and body communicate extensively, highlighting their intertwined influence on health and well-being.

There are entire fields dedicated to exploring this topic. Health Psychology applies psychological theories to physical health. Behavioral Medicine expands medical approaches to include psychological factors in health and illness. Psychoneuroimmunology/Psychoneuroendocrinology investigates how psychological, neurological, and immunological/hormonal factors interact with each other.

In 1975, Dr. Ader and Dr. Cohen[14] conducted a study where they trained rats to drink sugar water paired with an immune-suppressing drug. After conditioning, even when the rats drank sugar water without the drug, their immune systems remained suppressed. This study demonstrated that learning can impact the immune system. Consider how these findings relate to the placebo effect.

In an experiment led by Dr. Mark Schaller and colleagues (2010)[15], researchers found that observing the symptoms of a sick individual leads to a more aggressive immune response in their own immune system.

Is there Evidence that Happiness Improves Immunity?

Numerous studies demonstrate connections between positive emotions and the immune system. These studies have shown immune changes resulting from activities such as watching funny movies, listening to happy music, undergoing hypnosis to induce

happiness, and self-reporting feelings of happiness. These immune-related outcomes include effects on allergy responses, vaccine responses, and changes in immune cell levels in blood and saliva samples.

Positive emotion has been linked to accelerated wound healing. Research conducted by Robles, Brooks, and Pressman (2009)[16] revealed that for every unit increase in positive affect (PA), there was approximately a 1% increase in wound recovery within the first hour ($p = .04$). Interestingly, there was no significant relationship observed between negative affect (NA) and skin barrier recovery. Additionally, these effects were not attributed to baseline differences in skin function, as neither positive nor negative affect were associated with basal skin function.

In another study examining happiness and its impact on susceptibility to colds, participants were exposed to cold viruses and interviewed regularly. Researchers sought to determine whether individuals reporting higher levels of positive emotions were less likely to develop cold symptoms compared to those reporting lower levels of positivity. The findings indicated that individuals with higher levels of positive emotions had a reduced risk of catching a cold (Cohen et al., 2003)[17].

Changes in immunity occur through the action of stress hormones such as cortisol and adrenaline. These hormones increase during periods of stress and can suppress the immune system. The reason behind this suppression is that elevated levels of stress hormones can hinder the immune system's ability to function effectively.

When you experience positive emotions, the levels of these stress hormones tend to decrease. This reduction in stress hormones allows your immune system to operate more efficiently. Similarly, positive emotions not only impact immune function but also have the potential to influence cardiovascular function.

Cardiovascular Function

You can easily influence your own heart rate. While exercise is known to raise your heart rate, what may surprise you is that positive emotions can also have a similar effect.

Activity: Let's see how this works:

1. What is your pulse?
    1. Each heartbeat generates a wave of pressure as blood moves through the arteries. This pressure wave can be felt as a pulse where arteries are closest to the skin's surface. In adults, a normal resting pulse ranges from **60 to 100 beats per minute**.
    2. Tip: **Use your fingers when finding a pulse**. Don't use your thumb, as it has its own pulse. For more detailed information on finding your pulse, check out this wikiHow article on How to Check Your Pulse[18].
    3. Record the rate, strength, and rhythm of your pulse.
2. Now, watch and follow this Gratitude Meditation with Deepak Chopra[19].
3. As soon as the meditation is over, take your heart rate again.
4. Compare the difference in heart rate.

Laughter

Laughter Yoga, also known as Hasyayoga, involves self-induced laughter that is purely physical and does not depend on humor or comedy. This practice was developed by Indian guru Jiten Kohi.

Laughter is often called "the best medicine". It relaxes the entire body by relieving physical tension and stress, with its effects lasting up to 45 minutes afterward. Studies have shown that laughter can even open up arteries and reduce blood pressure.

Furthermore, laughter boosts the immune system by decreasing stress hormones and increasing immune cells and infection-fighting antibodies, thereby enhancing resistance to disease. It also triggers the release of endorphins, the body's natural feel-good chemicals, promoting an overall sense of well-being and offering temporary pain relief.

In terms of cardiovascular health, laughter improves the function of blood vessels and enhances blood flow. These effects can contribute to protecting the heart against conditions like heart attacks and other cardiovascular issues.

Take a look at this article by U.S. News on how Laughter Can Boost Heart Health[20].

These changes in heart rate are significant because they can predict your future health. The way your heart functions when you are young can predict your risk of developing conditions like hypertension (high blood pressure) and heart disease later in life. Studies

have shown that even the way your heart responds to stress in a controlled laboratory setting can predict these health outcomes approximately 20 years later.

Morbidity

Positive emotions are linked to improved health outcomes, reducing the likelihood of various morbidities such as stroke, accidents among teenagers, falls in the elderly, re-hospitalization after heart surgery, and even susceptibility to the common cold.

In a study by Dr. Danner, Dr. Snowden, and Dr. Friesen (2001)[21], 180 Catholic nuns wrote autobiographies at age 22, which were later analyzed for positive emotion content. Over the next six decades, they were monitored to study mortality rates and other life outcomes, with the autobiographies coded for the frequency and variety of positive emotion words used. The study found that positive emotions expressed in autobiographies written in early life were strongly linked to longer life spans six decades later.

In a similar study, Dr. Sarah Pressman and Dr. Sheldon Cohen (2012)[22] examined the use of positive emotion words and longevity among renowned deceased psychologists. Their findings indicated that using more activated positive emotional words (such as lively, vigorous, attentive, humorous) was linked to longer lifespans.

Limitations in the Field

There are certain challenges in the field regarding the directionality of associations. It's debated whether positive emotions lead to better health or if good health leads to greater happiness. The likely answer is that both relationships exist simultaneously.

To address this in research, experimental studies and longitudinal prospective research designs are used. These methods help to understand the complex interactions between positive emotions, health outcomes, and happiness over time.

Positive emotions do not always guarantee life-saving benefits, especially when considering survival outcomes in deadly diseases. Existing studies on survival outcomes lack consistency, making it difficult to draw definitive conclusions. Overall, positive emotions have shown varying effects: diseases with longer prognoses tend to correlate with increased survival rates, while diseases with high short-term mortality rates do not consistently benefit from positive emotions.

When tumor cells are already replicating at a high rate or when a kidney has failed, it's crucial to be realistic. At these advanced stages, while happiness may enhance quality of life, it typically does not affect life expectancy.

Culture in Positive Health

The role of culture in the positive health connection has largely been overlooked in health psychology, but there is a growing awareness of its importance. For example, research has shown that not all positive variables impact health in different cultures (Wiley et al., 2022)[23]. In the cited study, we found that among African Americans (AA), there was a slight increase (0.08) in the incidence of colds compared to European Americans (EA) when positive emotional style (PES) was kept constant. This means PES had less impact on preventing colds for AA compared to EA individuals. However, we did not find a significant effect between race and negative emotional style (NES) in relation to cold incidence. Furthermore, among AAs, there was a 0.60 increase in the incidence of colds compared to EAs when self-esteem was held constant. This means that higher self-esteem was associated with a greater likelihood of getting sick for AAs, whereas for EAs, higher self-esteem was linked to a lower likelihood of getting sick.

WATCH List

Watch Dr. Sarah Pressman share research on why doctors should care about happiness in their patients[24], a video uploaded by TEDx Talks on YouTube.



READ List

Read this brief article by Dr. Sarah Pressman and Dr. Sheldon Cohen on Positive Affect and Health[25], published in the Current Directions in Psychological Science Journal

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SECTION OVERVIEW

5.11: Reducing Stress with Positive Psychology

5.11.1: Stress and Positive Psychology

5.11.2: Mindfulness

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5.11.1: Stress and Positive Psychology

Learning Objectives

Upon reading this chapter, the reader should be able to:

- Understand the role of positive psychology in stress management, including its emphasis on resilience, positive emotions, and social support as buffers against stress.
- Describe the principles and applications of mindfulness-based interventions, such as Mindfulness-Based Stress Reduction (MBSR), in preventing and managing stress, including its mechanisms and effectiveness based on current research.

READ List

Read the article *Loss, Trauma, and Human Resilience: Have We Underestimated the Human* (2004)[1] by George Bonnano which explores the concept of resilience.

We will be going over concepts discussed in earlier chapters, so read this brief article on the *Undoing Effect of Positive Emotions*[2] by Penn State University.

Afterwards, review the positive effects of social support on stress in *The Stress-Buffering Hypothesis* (2004)[3], a paper written by Dr. Sarah Pressman and Dr. Sheldon Cohen.

Read this brief article *Mindfulness meditation: A research-proven way to reduce stress* (2019)[4] to learn what mindfulness is and why it is beneficial for stress and well-being.

Also, read *The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions*[5] by Dr. Barbara Fredrickson.

WATCH List

Watch Dr. Richard Davidson discuss Mindfulness and its potential to enhance resilience to stress in this video uploaded by NourFoundation on YouTube called *Can Mindfulness Increase Our Resilience to Stress*[6].



Guiding Questions

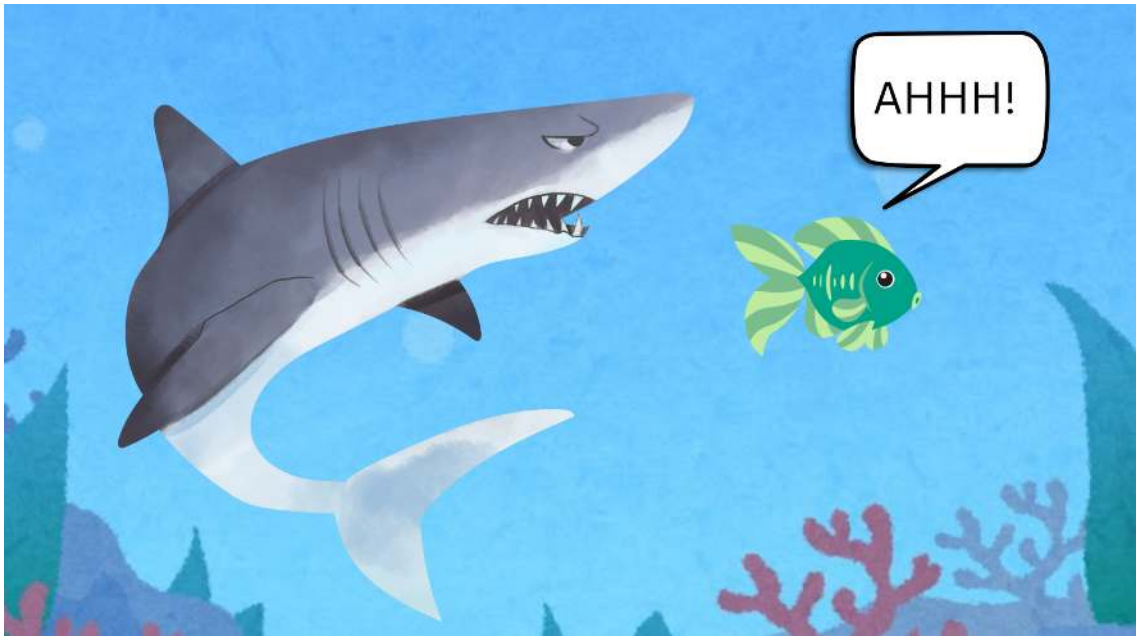
1. What are the definitions of resilience and recovery?
2. What is the evidence that resilience is a common experience?
3. What are some characteristics tied to greater resilience to stress?

Stress is a certainty. Your stress response, however, is much more variable and malleable. While challenging situations occur, your response to stress doesn't have to be negative.

In life, expecting no setbacks guarantees disappointment. The key lies in effectively managing our responses to these challenges and equipping ourselves with a robust set of tools to combat them. As humans, we inevitably face daily hassles, major life events, and more. While adversity is unavoidable, enduring suffering is not our only option.

What is Psychological Stress?

Psychological stress is a state of mental or emotional strain caused by challenging circumstances. It encompasses the emotional and physiological reactions that occur when an individual confronts situations that exceed their coping abilities. It occurs when perceived demands surpass one's perceived or actual ability to cope.



Psychological stress manifests as mental or emotional strain resulting from challenging circumstances. It involves both emotional and physiological reactions triggered when individuals face situations beyond their coping capabilities. This state activates the body, increasing arousal and mobilizing energy through physiological changes such as heightened heart rate. It enhances focus and allocates resources to prepare for a potential fight-or-flight responses.

The fight-or-flight response is a rapid physiological reaction triggered by sympathetic nervous system activation. It increases blood flow to muscles, heart rate, and blood pressure, dilates pupils, and enhances airway function while inhibiting digestive and urinary activities. Stress hormones like epinephrine, norepinephrine, and cortisol are released, mobilizing energy and suppressing non-essential functions for immediate survival. While beneficial in the short term, chronic activation of these systems due to prolonged stress can lead to physiological and psychological exhaustion, impacting overall health.

The "rest and digest" response involves parasympathetic nervous system activation. During this phase, digestion is enhanced, facilitating nutrient absorption and supporting growth and repair processes within the body. Additionally, activities associated with the "fight-flight" response, such as heart rate, are decreased, promoting a state of relaxation and recuperation.

Positive Psychology offers significant insights into how we make **appraisals**—evaluating situations for their potential impact, significance, and threat. It examines the nature of these appraisals, how they influence our response to stressors, and our ability to recover from them. Primary appraisal assesses the meaning of the situation. Secondary appraisal is our assessment of the resources we have that are available for coping. Positive psychology can make a difference on stress if we do have the resources to cope.

According to the stress buffering hypothesis, the undoing hypothesis suggests a mechanism through which positive emotions can mitigate stress. It proposes that positive emotions have an "undoing effect," accelerating recovery from stress. For instance, in a study where participants watched a sad film, researchers observed whether participants spontaneously smiled. Those who smiled during the film returned to their normal cardiovascular state more rapidly compared to those who did not smile, providing support for the undoing hypothesis (Fredrickson & Levinson, 1998)[7].

Recovery strategies are likely familiar to you when feeling overwhelmed by stress. If you find yourself in such a situation, it's important to calm down and consider what actions you can take.

One effective approach is meditation, such as Mindfulness-Based Stress Reduction. This practice involves focusing on the present moment, being non-judgmental, letting go of negative thoughts, concentrating on your breathing, and accepting whatever is happening.

Other effective strategies include engaging in breathing exercises, finding distractions, releasing pent-up energy through physical activity like exercise, ensuring sufficient rest to restore your energy levels, and consciously focusing on the positive aspects of your situation—perhaps even something as simple as a smile.

In a study by Dr. Kraft and Pressman (2012)[8], researchers examined the impact of covertly manipulating positive facial expressions on cardiovascular and emotional responses to stress. They found that participants who smiled, regardless of awareness, exhibited lower heart rates during stress recovery compared to those with neutral expressions, indicating both physiological and psychological benefits from maintaining positive facial expressions during stress.

The Broaden-and-Build theory suggests that positive emotions, like gratitude, expand the range of thoughts, actions, and attention. This process, as proposed by Fredrickson and Branigan (2005)[9] and Le Nguyen and Fredrickson (2017)[10], contributes to the accumulation of long-term resources across physical, psychological, social, and intellectual domains, potentially aiding individuals during times of stress.

Positive emotions can play a crucial role in managing stress. In primary appraisals, we may either disregard stressors as irrelevant, reinterpret threats as opportunities or challenges that can be overcome, or reassess the severity of negative situations. In secondary appraisals, we adjust our perceptions of coping abilities and strategies to reduce stress more effectively and promote quicker recovery. For instance, seeking support from friends to discuss stressors rather than turning to substance abuse, or utilizing knowledge to actively solve problems rather than avoiding them due to uncertainty.

Positive emotions are also important in the coping process. The revised stress and coping model includes positive emotions in the stress process and highlights how positive emotions help restore physiological and psychosocial coping resources. You can take a look at the model by Dr. Susan Folkman in a paper titled *Positive psychological states and coping with severe stress*[11].

WATCH List

Our ability to leverage our mindset is profound: by reinterpreting stressors, we can change how our bodies respond (stress re-appraisal). For example, viewing stress as not inherently harmful can alter its physiological effects. Kelly McGonigal explores this concept in her TED talk *How to make stress your friend*[12], emphasizing how our attitude towards stress can redefine its impact.

Alia Crum's[13] research further underscores this idea, demonstrating that our beliefs about stress significantly influence its effects on us. Embracing stress as potentially enhancing rather than purely negative can lead to distinct physiological and psychological outcomes.



Dr. Alia Crum explains the power of mindsets in this video uploaded by the World Economic Forum titled *The science of how mindset transforms the human experience*[14].

Challenge vs. Threat Appraisals

The Biopsychosocial Model of Threat explains how various physiological signals impact health and performance, influenced by our interpretation of stressors. When perceiving a situation as a threat—for example, feeling overwhelmed due to inadequate preparation—the typical response might involve giving up or avoiding the challenge. This perception triggers the release of cortisol, a stress hormone. Conversely, interpreting a situation as a challenge—anticipating the opportunity to demonstrate knowledge or skill—typically leads to proactive responses such as preparation and approaching the problem directly. For instance, viewing a challenge as an opportunity to learn something new, show knowledge gained through hard work, and demonstrate competence versus viewing it pessimistically as inevitable failure with no potential for improvement.

What Does it Mean to be Resilient?

Resilience refers to our ability to adapt effectively to difficult situations. It's often described as the capacity to "bounce back" from challenges and adversity. This trait is fundamental, essential for navigating life's stressful events and circumstances successfully. It helps individuals cope and thrive in the face of various trials they encounter.

In the short term, effective stress responses involve becoming less reactive to stress, recovering quickly from stressful situations, not perceiving certain events as stressful initially, and avoiding long-term mental or physical harm caused by stress. Viewing stress as a challenge rather than a threat is also crucial for maintaining a healthy stress response over time.

Coping

Utilizing effective coping skills can significantly enhance resilience by aiming to mitigate the harmful psychological and physiological impacts of stress. Coping strategies encompass a wide array of cognitive and behavioral methods that individuals employ to manage stressful situations. It's important to recognize that there are both healthy and unhealthy ways of coping with stress. Negative examples include behaviors such as insufficient or excessive sleep, alcohol and drug use, excessive social media consumption (doomscrolling), avoidance, and unhealthy eating habits.

Activity: Improve your Coping with Positive Psychology

Think about the last time that you faced a major stressor? One that really did make you feel overwhelmed, aroused, and/or it took a while to get over.

1. Please list the coping strategies you used. Describe how each strategy affected your emotions and outcomes.
    - Some examples of coping: active coping, planning, positive reframing, acceptance, humor, religion, using emotional support, using instrumental support, self-distraction, denial, venting, substance use, behavioral disengagement, and self-blame.
2. Think of a time when you were **resilient** to stress. Maybe you didn't have a strong reaction to the stressor, you were able to believe you could conquer it, or you were just able to handle it it really well and get over it quickly.
    - What types of coping strategies did you use this time? How did it feel? What happened?
3. Based on what you just learned, what strategies will you use next time you face a major stressor?
    - What new strategies could you try (e.g., things you learned from this textbook) that would help you become more resilient to stress?

10 Healthy Coping Strategies

1. Positive reappraisal/benefit finding
2. Problem-solving
3. Acceptance
4. Humor/laughter
5. Practicing Gratitude

6. Meditation & mindfulness
7. Self-compassion
8. Seeking social support
9. Exercising
10. Engaging in a fun hobby

Research has identified several coping strategies empirically linked to resilience. One effective approach is positive reappraisal or benefit finding, where individuals seek out the positive aspects or silver linings in negative events. It's important to remember that this list isn't comprehensive, as different strategies work better for different people. Factors such as cultural background, specific circumstances, socioeconomic status, and individual personality traits can all influence how effective these coping strategies are in promoting resilience.

Definition: Appraisals

evaluating situations for their potential impact, significance, and threat

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5.11.2: Mindfulness

The Power of Observation

The mind includes all our experiences—sensations, feelings, thoughts, intellect, and emotions—arising from specific conditions. Understanding the mind is essentially understanding our experiences.

Meditation comprises a family of self-regulation practices aimed at training attention and awareness to enhance voluntary control over mental processes. It promotes overall mental well-being and fosters specific abilities like calmness, clarity, and concentration. There are numerous types of meditation techniques available.Mindfulness meditation being one that we will go over.

Mindfulness involves paying close attention. It is a deliberate observation of both internal thoughts and external surroundings in the present moment. It promotes a flexible mindset, encouraging openness to new perspectives and the active process of making distinctions. Practicing mindfulness helps us stay attuned to our current context and perspective, originating from Eastern meditation practices and now widely adapted for secular use in Western mental health settings.

Mindfulness encompasses cognitive ability, reflecting how people differ in their capacity to think in a mindful way. It also includes disposition, comparable to stable personality traits like extraversion or neuroticism. Additionally, mindfulness is considered a cognitive style, indicating one's preferred approach to thinking and processing information.

The facets of mindfulness involve overcoming the desire to reduce uncertainty in daily life, overriding the tendency to engage in automatic behavior, and reducing the frequency of evaluating oneself, others, and situations.

Mindfulness is beneficial because it teaches us to see thoughts as passing events, reducing rumination and negative thought patterns. It helps us become less reactive to unpleasant experiences by gradually exposing us to them. Mindfulness encourages acceptance of the present moment without getting caught up in craving or aversion. Additionally, it has positive effects on both mental and physical health, reducing stress and allowing us to allocate more resources to our overall wellness.

Can Mindfulness Help with Negative Emotion?

Can mindfulness help with negative emotions? As society has evolved, our minds haven't necessarily kept pace with these changes. When we experience negative emotions, our bodies often react with a fight-or-flight response. Mindfulness interventions have shown promise in reducing this stress response. They operate through mechanisms like social support and prevention of reactive responses.

Mindfulness and emotion regulation strategies encompass cognitive reappraisal, where individuals alter their perspective on emotional stimuli. Expressive suppression involves allowing emotions to arise internally while concealing them outwardly. Meta-cognitive awareness fosters a de-centered view of oneself in relation to thoughts and feelings, enabling a neutral observation of personal experiences. Mindfulness enhances emotion regulation by boosting cognitive reappraisal, decreasing the use of suppression, and promoting metacognitive abilities.

Mindfulness-Based Stress Reduction (MBSR)

Meditation is a method for cultivating mindfulness. One prominent approach is Mindfulness-Based Stress Reduction (MBSR), particularly aimed at populations experiencing stress, such as those with anxiety disorders, chronic illnesses, or chronic pain. Developed by Jon Kabat-Zinn[15], MBSR is an 8-week program designed to promote hardiness by reframing challenges as manageable situations where individuals can take control. It also encourages coherence by helping participants find meaning and manageability in their experiences.

MBSR is widely recognized as the leading clinical practice of mindfulness and has been extensively researched. Studies indicate that its benefits can endure long after the program ends. Research, such as that by Chiesa and Serretti (2009)[16], suggests MBSR's effectiveness in reducing stress and anxiety, making it a valuable tool in stress management and emotional well-being.

Why do they Teach Mindfulness Meditation?

Mindfulness teaches individuals to cultivate a heightened state of awareness and concentration on the present moment, accepting it fully without getting caught up in stress or distractions. The goal is to enable people to engage with stressful situations mindfully,

rather than reacting automatically. This approach emphasizes non-judgment and non-analysis, fostering awareness of one's breath, mind, and bodily sensations.

Mindfulness promotes the ability to sustain and focus attention, reducing susceptibility to distractions. It fosters equanimity, cultivating calmness in the presence of stress and pain, and decreasing reactive responses. Additionally, mindfulness enhances character and temperament, encouraging more positive interactions with others and the environment. Physiologically, mindfulness has been shown in EEG studies to increase patterns of relaxed brain activity and reduce responsiveness to stress, anxiety, and negative emotions.

Can we Train the Brain with Meditation?

In a longitudinal study by Zanesco et al. (2016)[17], participants were assessed before and after both 3-month and 1-month meditation retreats. Results showed meditators developed improved focused attention, reduced mind wandering, and enhanced mindfulness during tasks.

Rosenberg et al. (2015)[18] studied 60 participants undergoing three months of intensive meditation training or on a waitlist. The meditation group showed increased empathy and reduced feelings of rejection in emotional responses towards others.

Lazar (2005)[19] found that meditation might alter brain structure, with participants showing thicker brain regions associated with emotion, attention, and sensory processing compared to controls.

Mindfulness for Post Traumatic Stress Disorder

Core features of PTSD include avoidance, hyperarousal, emotional numbing, and negative emotions like shame, guilt, and dissociation.

Mindfulness components that could help include attention training, a mindful cognitive style, and non-judgmental awareness. Mindfully shifting attention to the present moment may improve attentional control and reduce bias towards trauma-related stimuli.

A mindful cognitive style may reduce rumination, lessening symptoms such as anxious arousal and anhedonia. Nonjudgmental acceptance of thoughts and emotions, taught through mindfulness, may also encourage facing fear-provoking stimuli, thereby reducing avoidance behaviors.

Interventions Related to Mindfulness Training

Mindfulness-Based Cognitive Therapy (MBCT) is used to prevent the recurrence of major depressive disorder, rooted in the information-processing theory of relapse. It emphasizes the practice of observing thoughts without attachment, teaching that "thoughts are not facts" and fostering the understanding that "I am not my thoughts."

In addressing stress, MBCT works by intervening early to prevent negative thoughts from escalating into persistent patterns of rumination. It incorporates techniques such as Loving Kindness Meditation, which involves intentional exercises to cultivate kindness and compassion through verbal and visual practices. Additionally, relaxation exercises are utilized to promote calmness and reduce stress levels.

Mindfulness isn't a universal solution. While it may not always be effective and could even have drawbacks, it highlights the potential for meaningful change through simple adjustments in how we handle emotions and stress. This suggests that our responses are not fixed and can lead to significant improvements.

Attribution

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5.11.3: Subpage for Chapter One

Positive and Negative Emotions

Negative emotions have a lot of specific action tendencies that keep us alive.

For example:

- Fear → run away
- Disgust → spit out
- Anger → fight

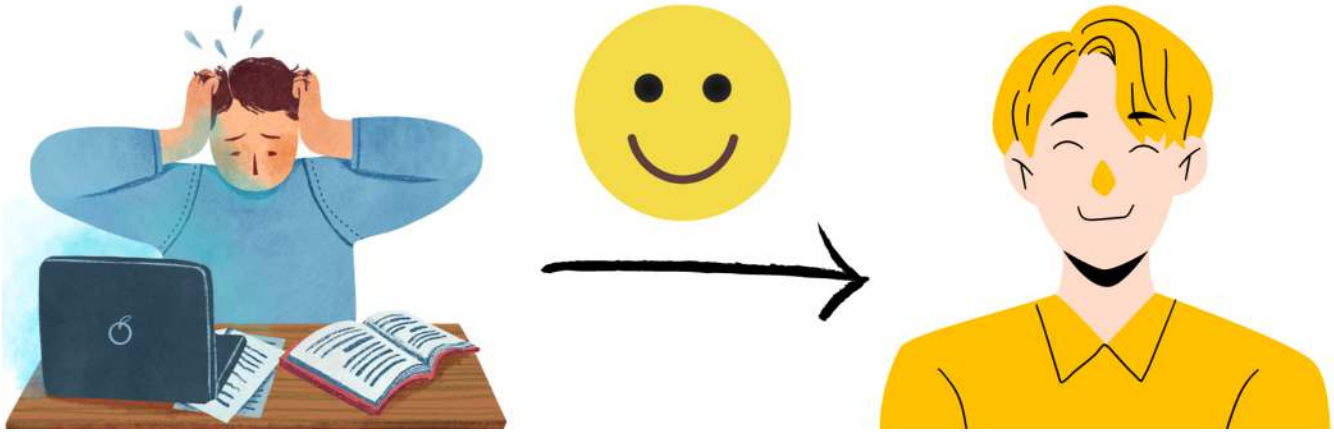


All negative emotions involve focusing and attention narrowing. So, what does feeling positive do for you?

Positive emotions help us think more creatively and creatively problem solve. They also widen our attentional scope and open us to experiences. The broaden and build theory, for example, says that positive emotions help widen our thoughts and actions.

How is this helpful to survival, do you think? Positive emotions generally communicate safety to both oneself and others, often through actions like smiling. Consequently, these emotions facilitate the formation of relationships, provide support, and contribute to the development of skills and health.

Additionally, we will explore a couple hypotheses regarding the advantages of positive emotions starting with the undoing hypothesis. In psychology, **the undoing hypothesis** suggests that experiencing positive emotions after stressful situations can help alleviate their effects (i.e., psychological arousal and negative impact of the initial experience). Similarly, **the stress buffering hypothesis** proposes that social support can help protect individuals from the negative effects of stress.



Positive emotions can change:

1. How you appraise stress
2. How you respond to stress
3. How you recover from stress

Read Does Positive Affect Influence Health?[12], by Dr. Sarah D. Pressman and Dr. Sheldon Cohen, a paper on the association of **positive affect (PA)** and physical health.

Some other benefits of positive emotions include:

- Marker that we are flourishing
- Leads to growth, wellness, and better relationships over time
- Reduces/Cancels/Offers resilience against stress
- Resource when coping with (e.g., positive affect (PA) itself can produce esteem, confidence)
- Triggers upward spirals → finding meaning in bad → triggers PA → broadens thinking → find more meaning

Dr. Barbara Fredrickson and Dr. Thomas Joiner examine how positive emotions trigger upward spirals toward emotional well-being[13] (2002) to learn about the original work on the idea of upward spiraling.



The Broaden and Build Theory

The broaden and build theory (previously mentioned) tells us that positive emotions may activate us but in broad ways (versus negative that narrows us).

- Joy: play, be creative
- Content: savor the moment
- Pride: share good news
- Interest: explore

> These positive emotions broaden our awareness and encourages novel and exploratory thoughts and actions. Over time, this builds skills and resources.

Resource building through Broaden & Building:

- Intellectual Resources:
  - Develops problem solving skills
  - Learn new information
- Social Resources:
  - Strengthen existing bonds (e.g., friends, spouse)
  - Makes new bonds
- Physical Resources
  - Develops coordination
  - Develops strengths & cardiovascular health

- Psychological Resources
  - Develops resilience & optimism
  - Develops sense of identity

Positive psych interventions (PPI) are simple positive activities that increase well-being. Although PPIs (positive psych interventions) have generally been shown to be effective (Sin & Lyubomirsky, 2009)[14], not every positive activity that a person performs will increase their well-being. To understand when a PPI will work and why it sometimes doesn't, it helps to understand the "active ingredients" that contribute to their success, i.e., the ones that need to be present to build wellbeing. A central active ingredient in PPIs is positive emotions. Recent advances in affective science provide a solid foundation to understand both the specificity and variety of positive emotions. We're beyond simple/basic positive vs. negative categories.

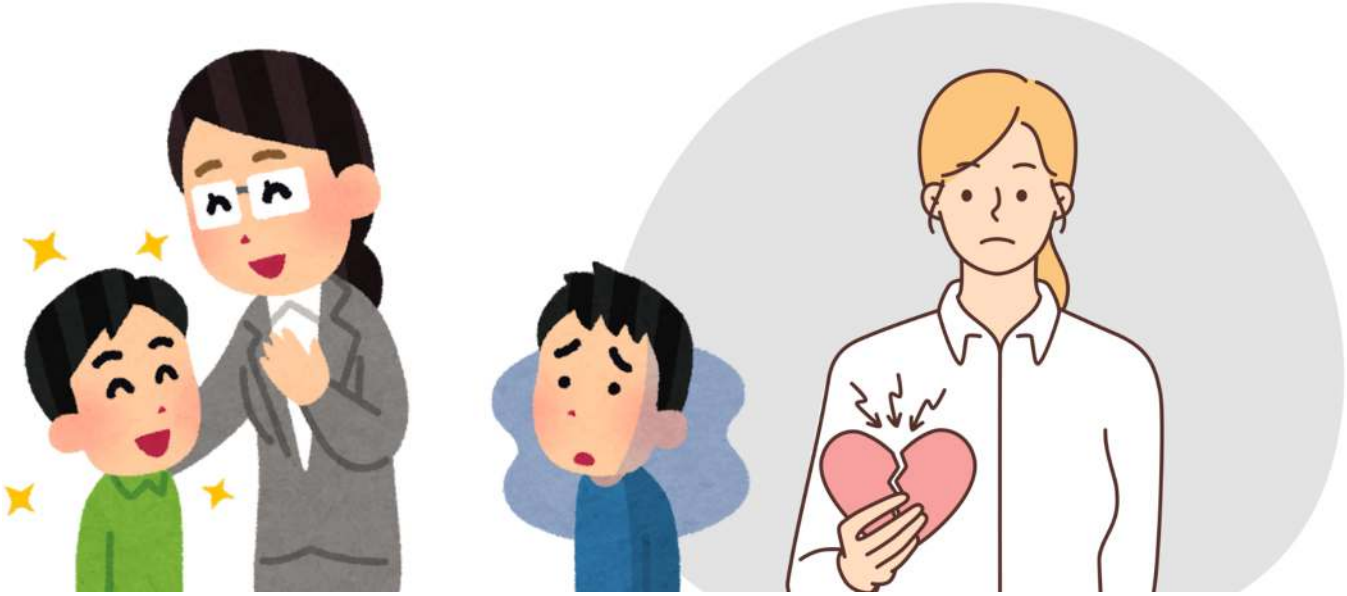
Examples of Positive Psych Interventions (PPI):

• Writing letters expressing gratitude	• Acts of kindness
• Cultivating strengths	• Visualize positive future self
• Meditate	• Count blessings
• Savoring	

The positive activity model (Layous & Lymbomirsky 2013)[15] focuses on promoting well-being through engaging in activities that generate positive emotions and foster personal growth. This explains how simple activities change well-being. Moderators play a crucial role in determining the effectiveness of activities aimed at increasing happiness. Various features of the activity, including dosage, variety, sequence, and the presence of built-in social support, can influence their success in boosting happiness levels.

For instance, greater variety is often associated with better outcomes, and certain activities may serve as better "starter" options. Moreover, different activities may have varying efficacy at different doses, and factors like whether they are outer-focused or inner-focused can interact with cultural differences, such as collectivist versus individualistic societies and time orientation. Additionally, individual characteristics, such as motivation to become happier, belief in the effectiveness of the activities, level of depression, and demographic factors, also influence the outcomes. Furthermore, the fit between the person and the activity is crucial, as enjoying an activity tends to lead to better overall results in terms of happiness enhancement.

One issue of this is that happiness is relative to your point of comparison. **The Social Comparison (SC) Theory** by Leon Festinger[16] states that individuals assess their own qualities and abilities by comparing themselves to others, which affects their self-esteem and emotions. In Social Comparison Theory, downward social comparison occurs when individuals compare themselves to others who they perceive as less fortunate, which has been linked to improved well-being in cancer patients. Conversely, upward social comparison can have both positive and negative effects, potentially serving as a source of inspiration or leading to a blow to one's self-esteem.



We generally hover around the same set point of well-being. The hedonic treadmill, also known as hedonic adaptation, is a theory positing that people repeatedly return to their baseline level of happiness, regardless of what happens to them. Changes that modify the impacts of exceptionally positive or negative events include contrast effects, where highly salient events diminish the influence of others, the introduction of new pleasures counteracted by the loss of old ones (such as gaining a large sum of money leading to new experiences but also diminishing the enjoyment of previous ones), and habituation, where the initial excitement or harm of something new gradually fades away, returning individuals to their baseline level of satisfaction.

Hedonic adaptation can be compared to a treadmill. The happiness treadmill, for example, is a concept where no matter how much running on it you do, you just stay in place (Deiner et al., 2009)[17]. We adapt pretty quickly (i.e., adapting to a bad smell). Our set point is based on our genetics and temperament.

Intentional activities matter because despite major positive or negative events or life changes, we quickly return to a relatively stable level of happiness. So, as a person makes more money, expectations and desires rise in tandem, which results in no permanent gain in happiness. Activities are the key to making lasting changes in happiness because such activities are more resistant to adaptation. We can deliberately engage in activities that make us happy while varying them enough to ward off adaptation.

> Interestingly, age matters for well-being too.

Interestingly, age matters for well-being too. The Socioemotional Selectivity Theory (Susan Charles & Laura Carstensen, 2010)[18] states that the older we age, we focus less on negative emotions, engage more deeply with emotional content of days, and especially savor the good stuff (e.g., relationships). It's important to note that older people have a positivity bias where they remember good stuff more quickly and don't remember the bad stuff as much (Mather & Carstensen, 2005)[19].

In sum, we learned that positive emotions have functions that are different from negative emotions. These positive emotions are a key ingredient of intentional activities that can change our well-being. Well-being can be hard and slow to move (genetics, circumstances), but with intentional activities, we can change our daily positive emotions which can then change our behavior, deepen our well-being, and more.

Definitions

The Undoing Hypothesis

experiencing positive emotions after stressful situations can help alleviate their effects

Stress Buffering Hypothesis

proposes that social support can help protect individuals from the negative effects of stress

Positive Affect

the experience of pleasant emotions (i.e., happiness, joy, contentment)

The Positive Activity Model

focuses on promoting well-being through engaging in activities that generate positive emotions and foster personal growth

The Social Comparison (SC) Theory

individuals assess their own qualities and abilities by comparing themselves to others, which affects their self-esteem and emotions

Attribution

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SECTION OVERVIEW

6.1: Talking and Listening

We are constantly interacting with people. We interact with our family and friends. We interact with our teachers and peers at school. We interact with customer service representatives, office coworkers, physicians/therapists, and so many other different people in average day. Humans are inherently social beings, so talking and listening to each other is a huge part of what we all do day-to-day.

6.1.1: The Importance of Everyday Conversations

6.1.2: Sharing Personal Information

6.1.3: Listening

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6.1.1: The Importance of Everyday Conversations

Learning Outcomes

1. Realize the importance of conversation.
2. Recognize the motives and needs for interpersonal communication.
3. Discern conversation habits.

Most of us spend a great deal of our day interacting with other people through what is known as a conversation. According to Judy Apps, the word "conversation" is comprised of the words *con* (with) and *versare* (turn): "conversation is turn and turnabout – you alternate."[1] As such, a conversation isn't a monologue or singular speech act; it's a dyadic process where two people engage with one another in interaction that has multiple turns. Philosophers have been writing about the notion of the term "conversation" and its importance in society since the written word began.[2] For our purposes, we will leave the philosophizing to the philosophers and start with the underlying assumption that conversation is an important part of the interpersonal experience. Through conversations with others, we can build, maintain, and terminate relationships.

Coming up with an academic definition for the term "conversation" is not an easy task. Instead, Donald Allen and Rebecca Guy offer the following explanation: "Conversation is the primary basis of direct social relations between persons. As a process occurring in real-time, conversation constitutes a reciprocal and rhythmic interchange of verbal emissions. It is a sharing process which develops a common social experience."[3] From this explanation, a conversation is how people engage in social interaction in their day-to-day lives. From this perspective, a conversation is purely a verbal process. For our purposes, we prefer Susan Brennan's definition: "Conversation is a joint activity in which two or more participants use linguistic forms and nonverbal signals to communicate interactively."[4] Brennan does differentiate conversations, which can involve two or more people, from dialogues, which only involve two people. For our purposes, this distinction isn't critical. What is essential is that conversations are one of the most common forms of interpersonal communication.

There is growing concern that in today's highly mediated world, the simple conversation is becoming a thing of the past. Sherry Turkle is one of the foremost researchers on how humans communicate using technology. She tells the story of an 18-year-old boy who uses texting for most of his fundamental interactions. The boy wistfully told Turkle, "Someday, someday, but certainly not now, I'd like to learn how to have a conversation."[5] When she asks Millennials across the nation what's wrong with holding a simple conversation:

> "I'll tell you what's wrong with having a conversation. It takes place in real-time and you can't control what you're going to say." So that's the bottom line. Texting, email, posting, all of these things let us present the self as we want to be. We get to edit, and that means we get to delete, and that means we get to retouch, the face, the voice, the flesh, the body–not too little, not too much, just right. [6]

Is this the world we now live in? Have people become so addicted to their technology that holding a simple conversation is becoming passé?

You should not take communication for granted. Reading this book, you will notice how much communication can be critical in our personal and professional lives. Communication is a vital component of our life. A few years ago, a prison decided to lessen the amount of communication inmates could have with each other. The prison administrators decided that they did not want inmates to share information. Yet, over time, the prisoners developed a way to communicate with each other using codes on walls and tapping out messages through pipes. Even when inmates were not allowed to talk to each other via face-to-face, they were still able to find other ways to communicate.[7]

Types of Conversations

David Angle argues that conversations can be categorized based on directionality (one-way or two-way) and tone/purpose (cooperative or competitive).[8] One-way conversations are conversations where an individual is talking *at* the other person and not *with* the other person. Although these exchanges are technically conversations because of the inclusion of nonverbal feedback, one of the conversational partners tends to monopolize the bulk of the conversation while the other partner is more of a passive

receiver. Two-way conversations, on the other hand, are conversations where there is mutual involvement and interaction. In two-way conversations, people are actively talking, providing nonverbal feedback, and listening.

In addition to one vs. two-way interactions, Angle also believes that conversations can be broken down on whether they are cooperative or competitive. Cooperative conversations are marked by a mutual interest in what all parties within the conversation have to contribute. Conversely, individuals in competitive conversations are more concerned with their points of view than others within the conversation. Angle further breaks down his typology of conversations into four distinct types of conversation (Figure 7.1.1).



Figure **6.1.1.1**: Four Types of Conversations

Discourse

The first type of conversation is one-way cooperative, which Angle labeled discourse. The purpose of a discourse conversation is for the sender to transmit information to the receiver. For example, a professor delivering a lecture or a speaker giving a speech.

Dialogue

The second type is what most people consider to be a traditional conversation: the dialogue (two-way, cooperative). According to Angle, "The goal is for participants to exchange information and build relationships with one another."[9] When you go on a first date, the general purpose of most of our conversations in this context is dialogue. If conversations take on one of the other three types, you could find yourself not getting a second date.

Debate

The third type of conversation is the two-way, competitive conversation, which Angle labels "debate." The debate conversation is less about information giving and more about persuading. From this perspective, debate conversations occur when the ultimate goal of the conversation is to win an argument or persuade someone to change their thoughts, values, beliefs, and behaviors. Imagine you're sitting in a study group and you're trying to advocate for a specific approach to your group's project. In this case, your goal is to persuade the others within the conversation to your point-of-view.

Diatribe

Lastly, Angle discusses the diatribe (one-way, competitive). The goal of the diatribe conversation is "to express emotions, browbeat those that disagree with you, and/or inspires those that share the same perspective."[10] For example, imagine that your best friend has come over to your dorm room, apartment, or house to vent about the grade they received on a test.

Communication Needs

There are many reasons why we communicate with each other, but what are our basic **communication needs**? The first reason why we communicate is for physical needs. Research has shown that we need to communicate with others because it keeps us healthier. There has been a direct link to mental and physical health. For instance, it has been shown that people who have cancer, depression, and even the common cold, can alleviate their symptoms simply by communicating with others. People who communicate their

problems, feelings, and thoughts with others are less likely to hold grudges, anger, hostility, which in turn causes less stress on their minds and their bodies.

Another reason why we communicate with others is that it shapes who we are or identity needs. Perhaps you never realized that you were funny until your friends told you that you were quite humorous. Sometimes, we become who we are based on what others say to us and about us. For instance, maybe your mother told you that you are a gifted writer. You believe that information because you were told that by someone you respected. Thus, communication can influence the way that we perceive ourselves.

The third reason we communicate is for social needs. We communicate with others to initiate, maintain, and terminate relationships with others. These relationships may be personal or professional. In either case, we have motives or objectives for communicating with other people. The concept of **communication motives** was created by Rebecca Rubin. She found that there are six main reasons why individuals communicate with each other: control, relaxation, escape, inclusion, affection, and pleasure.

Control motives are means to gain compliance. Relaxation motives are ways to rest or relax. Escape motives are reasons for diversion or avoidance of other activities. Inclusion motives are ways to express emotion and to feel a link to the other person. Affection motives are ways to express one's love and caring for another person. Pleasure motives are ways to communicate for enjoyment and excitement.

To maintain our daily routine, we need to communicate with others. The last reason we communicate is for practical needs. To exchange information or solve problems, we need to talk to others. Communication can prevent disasters from occurring. To create and/or sustain a daily balance in our lives, we need to communicate with other people. Hence, there is no escaping communication. We do it all the time.

Key Takeaways

- Communication is very important, and we should not take it for granted.
- There are six communication motives: control, affection, relaxation, pleasure, inclusion, and escape. There are four communication needs: physical, identity, social, and practical.
- Communication habits are hard to change.

Exercises

- Imagine if you were unable to talk to others verbally in a face-to-face situation. How would you adapt your communication so that you could still communicate with others? Why would you pick this method?
- Create a list of all the reasons you communicate and categorize your list based on communication motives and needs. Why do you think you communicate in the way that you do?
- Reflect on how you introduce yourself in a new situation. Write down what you typically say to a stranger. You can role play with a friend and then switch roles. What did you notice? How many of those statements are habitual? Why?

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6.1.2: Sharing Personal Information

Learning Outcomes

1. Describe motives for self-disclosure.
2. Appreciate the process of self-disclosure.
3. Explain the consequences of self-disclosure.
4. Draw and explain the Johari Window.

One of the primary functions of conversations is sharing information about ourselves. In Chapter 2, we discussed Berger and Calabrese's Uncertainty Reduction Theory (URT).[11] One of the basic axioms of URT is that, as verbal communication increases between people when they first meet, the level of uncertainty decreases. Specifically, the type of verbal communication generally discussed in initial interactions is called self-disclosure.[12] **Self-disclosure** is the process of purposefully communicating information about one's self. Sidney Jourard sums up self-disclosure as permitting one's "true self" to be known to others.[13]

As we introduce the concept of self-disclosure in this section, it's important to realize that there is no right or wrong way to self-disclose. Different people self-disclose for a wide range of different reasons and purposes. Emmi Ignatius and Marja Kokkonen found that self-disclosure can vary for several reasons:[14]

- Personality traits (shy people self-disclose less than extraverted people)
- Cultural background (Western cultures disclose more than Eastern cultures)
- Emotional state (happy people self-disclose more than sad or depressed people)
- Biological sex (females self-disclose more than males)
- Psychological gender (androgynous people were more emotionally aware, topically involved, and invested in their interactions; feminine individuals disclosed more in social situations, and masculine individuals generally did not demonstrate meaningful self-disclosure across contexts)
- Status differential (lower status individuals are more likely to self-disclose personal information than higher-status individuals)
- Physical environment (soft, warm rooms encourage self-disclosure while hard, cold rooms discourage self-disclosure)
- Physical contact (touch can increase self-disclosure, unless the other person feels that their personal space is being invaded, which can decrease self-disclosure)
- Communication channel (people often feel more comfortable self-disclosing when they're not face-to-face; e.g., on the telephone or through computer-mediated communication)

As you can see, there are quite a few things that can impact how self-disclosure happens when people are interacting during interpersonal encounters.

Motives for Self-Disclosure

So, what ultimately motivates someone to self-disclose? Emmi Ignatius and Marja Kokkonen found two basic reasons for self-disclosure: social integration and impression management. [15]

Social Integration

The first reason people self-disclose information about themselves is simply to develop interpersonal relationships. Part of forming an interpersonal relationship is seeking to demonstrate that we have commonality with another person. For example, let's say that it's the beginning of a new semester, and you're sitting next to someone you've never met before. You quickly strike up a conversation while you're waiting for the professor to show up. During those first few moments of talking, you're going to try to establish some kind of commonality. Maybe you'll learn that you're both communication majors or that you have the same favorite sports team or band. Self-disclosure helps us find these areas where we have similar interests, beliefs, values, attitudes, etc.… As humans, we have an innate desire to be social and meet people. And research has shown us that self-disclosure is positively related to liking.[16] The more we self-disclose to others, the more they like us and vice versa.

However, we should mention that appropriate versus inappropriate self-disclosures depends on the nature of your relationship. When we first meet someone, we do not expect that person to start selfdisclosing their deepest darkest secrets. When this happens,

then we experience an expectancy violation. Judee Burgoon conceptualized expectancy violation theory as an understanding of what happens when an individual within an interpersonal interaction violates the norms for that interaction.[17,18]Burgoon's original expectancy violation theory (EVT) primarily analyzed what happened when individuals communicated nonverbally in a manner that was unexpected (e.g., standing too close while talking). Over the years, EVT has been expanded by many scholars to look at a range of different situations when communication expectations are violated.[19] As a whole, EVT predicts that when individuals violate the norms of communication during an interaction, they will evaluate that interaction negatively. However, this does depend on the nature of the initial relationship. If we've been in a relationship with someone for a long time or if it's someone we want to be in a relationship with, we're more likely to overlook expectancy violations.

So, how does this relate to self-disclosure? Mostly, there are ways that we self-disclose that are considered "normal" during different types of interactions and contexts. What you disclose to your best friend will be different than what you disclose to a stranger at the bus station. What you disclose to your therapist will be different than what you disclose to your professor. When you meet a stranger, the types of self-disclosure tend to be reasonably common topics: your major, sports teams, bands, the weather, etc. If, however, you decide to self-disclose information that is overly personal, this would be perceived as a violation of the types of topics that are normally disclosed during initial interactions. As such, the other person is probably going to try to get out of that conversation pretty quickly. When people disclose information that is inappropriate to the context, those interactions will generally be viewed more negatively.[20]

From a psychological standpoint, finding these commonalities with others helps reinforce our self-concept. We find that others share the same interests, beliefs, values, attitudes, etc., which demonstrates that how we think, feel, and behave are similar to those around us. Admittedly, it's not like we do all of this consciously.[21]

Impression Management

The second reason we tend to self-disclose is to portray a specific impression of who we are as individuals to others. Impression management is defined as "the attempt to generate as favorable an impression of ourselves as possible, particularly through both verbal and nonverbal techniques of self-presentation."[22] Basically, we want people to view us in a specific way, so we communicate with others in an attempt to get others to see us that way. Research has found we commonly use six impression management techniques during interpersonal interactions: self-descriptions, accounts, apologies, entitlements and enhancements, flattery, and favors.[23,24,25]

Self-Descriptions

The first type of impression management technique we can use is self-descriptions, or talking about specific characteristics of ourselves. For example, if you want others to view you professionally, you would talk about the work that you've accomplished. If you want others to see you as someone fun to be around, you will talk about the parties you've thrown. In both of these cases, the goal is to describe ourselves in a manner that we want others to see.

Accounts

The second type of impression management is accounts. Accounts "are explanations of a predicamentcreating event designed to minimize the apparent severity of the predicament."[26] According to William Gardner and Mark Martinko, in accounts, "actors may deny events occurred, deny causing events, offer excuses, or justify incidents."[27] Basically, accounts occur when an individual is attempting to explain something that their interactant may already know.

For the purposes of initial interactions, imagine that you're on a first date and your date has heard that you're a bit of a "player." An account may be given to downplay your previous relationships or explain away the rumors about your previous dating history.

Apologies

The third type of impression management tactics is apologies. According to Barry Schlenker, apologies are "are designed to convince the audience that the undesirable event should not be considered a fair representation of what the actor is 'really like.'"[28] An apology occurs when someone admits that they have done something wrong while attempting to downplay the severity of the incident or the outcomes.

Imagine you just found out that a friend of yours told a personal story about you during class as an example. Your friend could offer an apology, admitting that they shouldn't have told the story, but also emphasize that it's not like anyone in the class knows who

you are. In essence, the friend admits that they are wrong, but also downplays the possible outcomes from the inappropriate disclosure of your story.

Entitlements and Enhancements

The fourth type of impression management tactic is the use of entitlements and enhancements. Entitlements and enhancements are "designed to explain a desirable event in a way that maximizes the desirable implications for the actor." [29] Primarily, "entitlements are designed to maximize an actor's apparent responsibility for an event; enhancements are designed to maximize the favorability of an event itself."[30] In this case, the goal is to make one's self look even better than maybe they actually are.

For our examples, let's look at entitlements and enhancements separately. For an example of an entitlement, imagine that you're talking to a new peer in class and they tell you about how they singlehandedly organized a wildly popular concert that happened over the weekend. In this case, the individual is trying to maximize their responsibility for the party in an effort to look good.

For an example of an enhancement, imagine that in the same scenario, the individual talks less about how they did the event single-handedly and talks more about how amazing the event itself was. In this case, they're aligning themselves with the event, so the more amazing the event looks, the better you'll perceive them as an individual.

Flattery

The fifth impression management tactic is the use of flattery, or the use of compliments to get the other person to like you more. In this case, there is a belief that if you flatter someone, they will see you in a better light. Imagine there's a new player on your basketball team. Almost immediately, they start complimenting you on your form and how they wish they could be as good as you are. In this case, the person may be completely honest, but the use of flattery will probably get you to see that person more positively as well.

Favors

The last tactic that researches have described for impression management is favors. Favors "involve doing something nice for someone to gain that person's approval." [31] One way that we get others to like us is to do things for them. If we want our peers in class to like us, then maybe we'll share our notes with them when they're absent. We could also volunteer to let someone use our washer and dryer if they don't have one. There are all kinds of favors that we can do for others. Although most of us don't think of favors as tactics for managing how people perceive us, they have an end result that does.

Social Penetration Theory

In 1973, Irwin Altman and Dalmas Taylor were interested in discovering how individuals become closer to each other.[32] They believed that the method of self-disclosure was similar to social penetration and hence created the **social penetration theory**. This theory helps to explain how individuals gradually become more intimate based on their communication behaviors. According to the social penetration theory, relationships begin when individuals share non-intimate layers and move to more intimate layers of personal information.[33]

Altman and Taylor believed that individuals discover more about others through self-disclosure. How people comprehend others on a deeper level helps us also gain a better understanding of ourselves. The researchers believe that penetration happens gradually. The scholars describe their theory visually like an onion with many rings or levels.[34] A person's personality is like an onion because it has many layers (Figure 7.2.1). We have an outer layer that everyone can see (e.g., hair color or height), and we have very personal layers that people cannot see (e.g., our dreams and career aspirations). Three factors affect what people chose to disclose. The first is personal characteristics (e.g., introverted or extraverted). The second is the possibility of any reward or cost with disclosing to the other person (e.g., information might have repercussions if the receiver does not like or agree with you). And the third is the situational context (e.g., telling your romantic partner that you want to terminate the relationship on your wedding day).

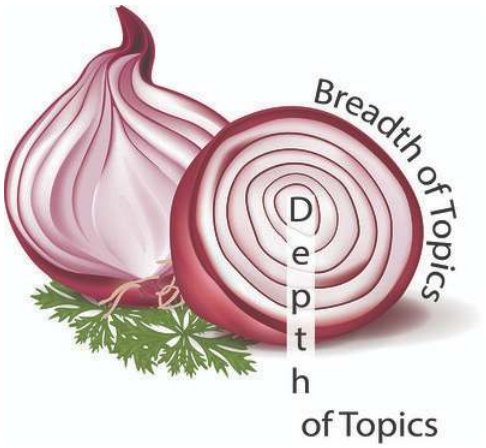


Figure **6.1.2.1**: Social Penetration Theory

When people first meet each other, they start from their outer rings and slowly move towards the core. The researchers described how people typically would go through various stages to become closer. The first stage is called the orientation stage, where people communicate on very superficial matters like the weather. The next stage is the exploratory affective stage, where people will disclose more about their feelings about normal topics like favorite foods or movies. Many of our friendships remain at this stage. The third stage is more personal and called the affective stage, where people engage in more private topics. The fourth stage is the stable stage, where people will share their most intimate details. The last stage is not obligatory and does not necessarily happen in every relationship, it is the depenetration stage, where people start to decrease their disclosures.

Social penetration theory also contains two different aspects. The first aspect is breadth, which refers to what topics individuals are willing to talk about with others. For instance, some people do not like to talk about religion and politics because it is considered inappropriate. The second aspect is depth, which refers to how deep a person is willing to go in discussing certain topics. For example, some people don't mind sharing information about themselves in regards to their favorite things. Still, they may not be willing to share their most private thoughts about themselves because it is too personal. The researchers believe that by self-disclosing to others both in breadth and depth, then it could lead to more relational closeness.

Johari Window

The name "Johari" is a combination of the two researchers who originated the concept: Joseph Luft (Jo) and Harrington Ingham (hari).[35] The basic idea behind the Johari Window is that we build trust in our interpersonal relationships as we self-disclose revealing information about ourselves, and we learn more about ourselves as we receive feedback from the people with whom we are interacting. As you can see in Figure 7.2.2, the Johari Window is represented by four window panes. Two window panes refer to ourselves, and two refer to others. First, when discussing ourselves, we have to be aware that somethings about ourselves are known to us, and others are not. For example, we may be completely aware of the fact that we are extraverted and love talking to people (known to self). However, we may not be aware of how others tend to view our extraversion as positive or negative (unknown to self). The second part of the window is what is known to others and unknown to others. For example, some common information known to others includes your height, weight, hair color, etc. At the same time, there is a bunch of information that people don't know about us: deepest desires, joys, goals in life, etc. Ultimately, the Johari Window breaks this into four different quadrants (Figure 7.2.2)

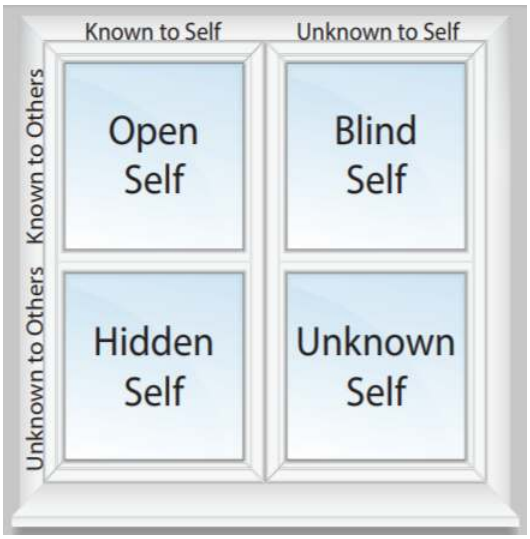


Figure **6.1.2.2**: Johari Window

Open Self

The first quadrant of the Johari Window is the open self, or when information is known to both ourselves and others. Although some facets are automatically known, others become known as we disclose more and more information about ourselves with others. As we get to know people and self-disclose and increasingly deeper levels, the open self quadrant grows. For the purposes of thinking about discussions and self-disclosures, the open self is where the bulk of this work ultimately occurs.

Information in the open self can include your attitudes, beliefs, behaviors, emotions/feelings, experiences, and values that are known to both the person and to others. For example, if you wear a religious symbol around your neck (Christian Cross, Jewish Start of David, Islamic Crescent Moon and Star, etc.), people will be able to ascertain certain facts about your religious beliefs immediately.

Hidden Self

The second quadrant is what is known to ourselves but is not known to others. All of us have personal information we may not feel compelled to reveal to others. For example, if you're a member of the LGBTQIA+ community, you may not feel the need to come out during your first encounter with someone new. It's also possible that you'll keep this information from your friends and family for a long time.

Think about your own life, what types of things do you keep hidden from others? One of the reasons we keep things hidden is because it's hard to open ourselves up to being vulnerable. Typically, the hidden self will decrease as a relationship grows. However, if someone ever violates our trust and discusses our hidden self with others, we are less likely to keep disclosing this information in the future. If the trust violation is extreme enough, we may discontinue that relationship altogether.

Blind Self

The third quadrant is called the blind self because it's what we don't know about ourselves that is known by others. For example, during an initial interaction, we may not know how the other person is reacting to us. We may think that we're coming off as friendly, but the other person may be perceiving us as shy or even pushy. One way to decrease the blind self is by soliciting feedback from others. As others reveal more of our blind selves, we can become more self-aware of how others perceive us.

One problem with the blind self is that how people view us and how we view ourselves can often be radically different. For example, people may perceive you as cocky, but in reality, you're scared to death. It's important to decrease the blind self during our interactions with others, because how people view us will determine how they interact with us.

Unknown Self

Lastly, we have the unknown self, or when information is not known by ourselves or others. The unknown self can include aptitudes/talents, attitudes/feelings, behaviors, capabilities, etc. that are unknown to us or others. For example, you may have a natural talent to play the piano. Still, if you've never sat down in front of a piano, neither you nor others would have any way of

knowing that you have the aptitude/talent for playing the piano. Sometimes parts of the unknown self are just under the surface and will arise with time and in the right contexts, but other times no one will ever know these unknown parts.

One other area that can affect the unknown self involves prior experiences. It's possible that you experienced a traumatic event that closes you down in a specific area. For example, imagine that you are an amazing writer, but someone, when you were in the fourth grade, made fun of a story you wrote, so you never tried writing again. In this case, the aptitude/talent for writing has been stamped out because of that one traumatic experience as a child. Sadly, a lot of us probably have a range of aptitudes/talents, attitudes/feelings, behaviors, capabilities, etc. that were stopped because of traumas throughout our lives.

Key Takeaways

- We self-disclose to share information with others. It allows us to express our thoughts, feelings, and behaviors.
- Self-disclosure includes levels of disclosure, reciprocity in disclosure, and appropriate disclosure.
- There can be positive and negative consequences of self-disclosure. These consequences can strengthen how you feel or create distance between you and someone else.
- The Johari Window is a model that helps to illustrate self-disclosure and the process by which you interact with other people.

Exercises

- Create a self-penetration diagram for yourself. What topics are you open to talk about? What are you not willing to discuss? Then compare with another student in class. How were you similar or dissimilar? Why do you think these differences/ similarities exist?
- Think of a time when you've used the six different impression management techniques. How effective were you with each technique? What could you have done differently?
- Draw your own Johari Window. Fill in each of the window panes with a topic of self-disclosure. You will probably need to ask a close friend or family member to help you with the unknown self pane. Why did you put what you put? Does it make sense? Why?

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6.1.3: Listening

Learning Outcomes

1. Differentiate between hearing and listening.
2. Understand how to listen effectively.
3. Recognize the different types of listening.

When it comes to daily communication, we spend about 45% of our listening, 30% speaking, 16% reading, and 9% writing.[36] However, most people are not entirely sure what the word "listening" is or how to do it effectively.

Hearing Is Not Listening

Hearing refers to a passive activity where an individual perceives sound by detecting vibrations through an ear. Hearing is a physiological process that is continuously happening. We are bombarded by sounds all the time. Unless you are in a sound-proof room or are 100% deaf, we are constantly hearing sounds. Even in a sound-proof room, other sounds that are normally not heard like a beating heart or breathing will become more apparent as a result of the blocked background noise.

Listening, on the other hand, is generally seen as an active process. Listening is "focused, concentrated attention for the purpose of understanding the meanings expressed by a [source]."[37] From this perspective, hearing is more of an automatic response when your ear perceives information; whereas, listening is what happens when we purposefully attend to different messages.

We can even take this a step further and differentiate normal listening from critical listening. **Critical listening** is the "careful, systematic thinking and reasoning to see whether a message makes sense in light of factual evidence."[38] From this perspective, it's one thing to attend to someone's message, but something very different to analyze what the person is saying based on known facts and evidence.

Let's apply these ideas to a typical interpersonal situation. Let's say that you and your best friend are having dinner at a crowded restaurant. Your ear is going to be attending to a lot of different messages all the time in that environment, but most of those messages get filtered out as "background noise," or information we don't listen to at all. Maybe then your favorite song comes on the speaker system the restaurant is playing, and you and your best friend both attend to the song because you both like it. A minute earlier, another song could have been playing, but you tuned it out (hearing) instead of taking a moment to enjoy and attend to the song itself (listen). Next, let's say you and your friend get into a discussion about the issues of campus parking. Your friend states, "There's never any parking on campus. What gives?" Now, if you're critically listening to what your friend says, you'll question the basis of this argument. For example, the word "never" in this statement is problematic because it would mean that the campus has zero available parking, which is probably not the case. Now, it may be difficult for your friend to find a parking spot on campus, but that doesn't mean that there's "never any parking." In this case, you've gone from just listening to critically evaluating the argument your friend is making.

Model of Listening

Judi Brownell created one of the most commonly used models for listening.[39] Although not the only model of listening that exists, we like this model because it breaks the process of hearing down into clearly differentiated stages: hearing, understanding, remembering, interpreting, evaluating, and responding (Figure 7.3.1).

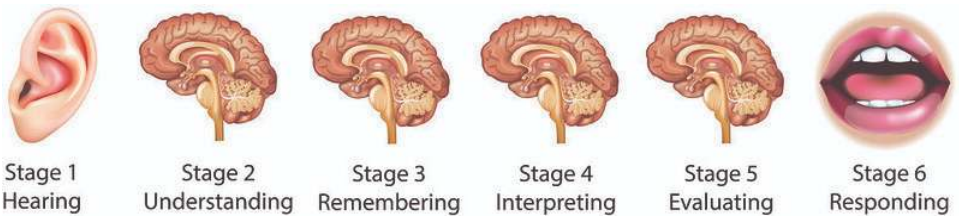


Figure **6.1.3.1**: HURIER Model of Listening

Hearing

From a fundamental perspective, for listening to occur, an individual must attend to some kind of communicated message. Now, one can argue that hearing should not be equated with listening (as we did above), but it is the first step in the model of listening. Simply, if we don't attend to the message at all, then communication never occurred from the receiver's perspective.

Imagine you're standing in a crowded bar with your friends on a Friday night. You see your friend Darry and yell her name. In that instant, you, as a source of a message, have attempted to send a message. If Darry is too far away, or if the bar is too loud and she doesn't hear you call her name, then Darry has not engaged in stage one of the listening model. You may have tried to initiate communication, but the receiver, Darry, did not know that you initiated communication.

Now, to engage in mindful listening, it's important to take hearing seriously because of the issue of intention. If we go into an interaction with another person without really intending to listening to what they have to say, we may end up being a passive listener who does nothing more than hear and nod our heads. Remember, mindful communication starts with the premise that we must think about our intentions and be aware of them.

Understanding

The second stage of the listening model is understanding, or the ability to comprehend or decode the source's message. When we discussed the basic models of human communication in Chapter 2, we discussed the idea of decoding a message. Simply, decoding is when we attempt to break down the message we've heard into comprehensible meanings. For example, imagine someone coming up to you asking if you know, "Tintinnabulation of vacillating pendulums in inverted, metallic resonant cups." Even if you recognize all of the words, you may not completely comprehend what the person is even trying to say. In this case, you cannot decode the message. Just as an FYI, that means "jingle bells."

Remembering

Once we've decoded a message, we have to actually remember the message itself, or the ability to recall a message that was sent. We are bombarded by messages throughout our day, so it's completely possible to attend to a message and decode it and then forget it about two seconds later.

For example, I always warn my students that my brain is like a sieve. If you tell me something when I'm leaving the class, I could easily have forgotten what you told me three seconds later because my brain switches gear to what I'm doing next: I run into another student into in the hallway; another thought pops into my head; etc. As such, I always recommend emailing me important things, so I don't forget them. In this case, it's not that I don't understand the message; I just get distracted, and my remembering process fails me. This problem plagues all of us.

Interpreting

The next stage in the HURIER Model of Listening is interpreting. "Interpreting messages involves attention to all of the various speaker and contextual variables that provide a background for accurately perceived messages."[40] So, what do we mean by contextual variables? A lot of the interpreting process is being aware of the nonverbal cues (both oral and physical) that accompany a message to accurately assign meaning to the message.

Imagine you're having a conversation with one of your peers, and he says, "I love math." Well, the text itself is demonstrating an overwhelming joy and calculating mathematical problems. However, if the message is accompanied by an eye roll or is said in a manner that makes it sound sarcastic, then the meaning of the oral phrase changes. Part of interpreting a message then is being sensitive to nonverbal cues.

Evaluating

The next stage is the evaluating stage, or judging the message itself. One of the biggest hurdles many people have with listening is the evaluative stage. Our personal biases, values, and beliefs can prevent us from effectively listening to someone else's message.

Let's imagine that you despise a specific politician. It's gotten to the point where if you hear this politician's voice, you immediately change the television channel. Even hearing other people talk about this politician causes you to tune out completely. In this case, your own bias against this politician prevents you from effectively listening to their message or even others' messages involving this politician. Overcoming our own biases against the source of a message or the content of a message in an effort to

truly listen to a message is not easy. One of the reasons listening is a difficult process is because of our inherent desire to evaluate people and ideas.

When it comes to evaluating another person's message, it's important to remember to be mindful. As we discussed in Chapter 1, to be a mindful communicator, you must listen with an open ear that is nonjudging. Too often, we start to evaluate others' messages with an analytical or cold quality that is antithetical to being mindful.

Responding

In Figure 7.3.1, hearing is represented by an ear, the brain represents the next four stages, and a person's mouth represents the final stage. It's important to realize that effective listening starts with the ear and centers in the brain, and only then should someone provide feedback to the message itself. Often, people jump from hearing and understanding to responding, which can cause problems as they jump to conclusions that have arisen by truncated interpretation and evaluation.

Ultimately, how we respond to a source's message will dictate how the rest of that interaction will progress. If we outright dismiss what someone is saying, we put up a roadblock that says, "I don't want to hear anything else." On the other hand, if we nod our heads and say, "tell me more," then we are encouraging the speaker to continue the interaction. For effective communication to occur, it's essential to consider how our responses will impact the other person and our relationship with that other person.

Overall, when it comes to being a mindful listener, it's vital to remember COAL: curiosity, openness, acceptance, and love.[41] We need to go into our interactions with others and try to see things from their points of view. When we engage in COAL, we can listen mindfully and be in the moment.

Taxonomy of Listening

Now that we've introduced the basic concepts of listening, let's examine a simple taxonomy of listening that was created by Andrew Wolvin and Carolyn Coakley.[42] The basic premise of the Wolvin and Coakley taxonomy of listening is that there are fundamental parts to listening and then higher-order aspects of listening (Figure 7.3.2). Let's look at each of these parts separately.

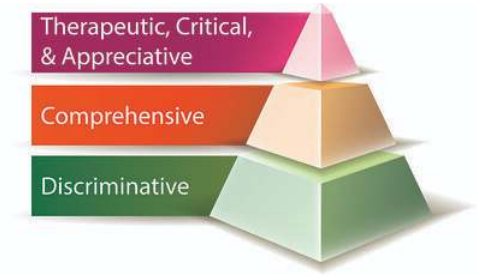


Figure **6.1.3.2**: Taxonomy of Listening

Discriminative

The base level of listening is what Wolvin and Coakley called discriminative listening, or distinguishing between auditory and visual stimuli and determining which to actually pay attention to. In many ways, discriminative listening focuses on how hearing and seeing a wide range of different stimuli can be filtered and used.

We're constantly bombarded by a variety of messages in our day-to-day lives. We have to discriminate between which messages we want to pay attention to and which ones we won't. As a metaphor, think of discrimination as your email inbox. Every day you have to filter out messages (aka spam) to find the messages you want to actually read. In the same way, our brains are constantly bombarded by messages, and we have to filter some in and most of them out.

Comprehensive

If we achieve discriminative listening, then we can progress to comprehensive listening. "Comprehensive listening requires the listener to use the discriminative skills while functioning to understand and recall the speaker's information."[43] If we go back and look at Figure 7.3.1, we can see that comprehensive listening essentially aligns with understanding and remembering.

Wolvin and Coakley argued that discriminative and comprehensive listening are foundational levels of listening. If these foundational levels of listening are met, then they can progress to the other three, higher-order levels of listening: therapeutic,

critical, and appreciative.

Therapeutic

Therapeutic listening occurs when an individual is a sounding board for another person during an interaction. For example, your best friend just fought with their significant other and they've come to you to talk through the situation.

Critical

The next aspect of listening is critical listening, or really analyzing the message that is being sent. Instead of just being a passive receiver of information, the essential goal of listening is to determine the acceptability or validity of the message(s) someone is sending.

Appreciative

Lastly, we have appreciative listening, which is when someone simply enjoys the act of listening or the message being sent. For example, let's say you're watching a Broadway musical or play or even a new movie at the cinema. While you may be engaged critically, you also may be simply appreciative and enjoying the act of listening to the message.

Listening Styles

Now that we have a better understanding of how listening works, let's talk about four different styles of listening researchers have identified. Kittie Watson, Larry Barker, and James Weaver defined listening styles as "attitudes, beliefs, and predispositions about the how, where, when, who, and what of the information reception and encoding process."[44] Watson et al. identified four distinct listening styles: people, content, action, and time. Before progressing to learning about the different listening styles, take a minute to complete the measure in Table 7.3.1, The Listening Style Questionnaire. The Listening Style Questionnaire is based on the original work of Watson, Barker, and Weaver.[45]

Table 7.3.1 Listening Style Questionnaire

Instructions: Read the following questions and select the answer that corresponds with how you tend to listen to public speeches. Do not be concerned if some of the items appear similar. Please use the scale below to rate the degree to which each statement applies to you:

Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5

1. I am very attuned to public speaker's emotions while listening to them.
2. I keep my attention on a public speaker's feelings why they speak.
3. I listen for areas of similarity and difference between me and a public speaker.
4. I generally don't pay attention to a speaker's emotions.
5. When listening to a speaker's problems, I find myself very attentive.
6. I prefer to listen to people's arguments while they are speaking.
7. I tend to tune out technical information when a speaker is speaking.
8. I wait until all of the arguments and evidence is presented before judging a speaker's message.
9. I always fact check a speaker before forming an opinion about their message.
10. When it comes to public speaking, I want a speaker to keep their opinions to themself and just give me the facts.
11. A speaker needs to get to the point and tell me why I should care.
12. Unorganized speakers drive me crazy.
13. Speakers need to stand up, say what they need to say, and sit down.
14. If a speaker wants me to do something, they should just say it directly.
15. When a speaker starts to ramble on, I really start to get irritated.
16. I have a problem listening to someone give a speech when I have other things to do, places to be, or people to see.
17. When I don't have time to listen to a speech, I have no problem telling someone.
18. When someone is giving a speech, I'm constantly looking at my watch or clocks in the room.
19. I avoid speeches when I don't have the time to listen to them.
20. I have no problem listening to a speech even when I'm in a hurry.

Scoring

People-Oriented Listener

A: Add scores for items 1, 2, 3, 5 and place total on line. _____

B: Place score for item 4 on the line. _____

C: Take the total from A and add 6 to the score. Place the new number on the line. _____

Step Four: Now subtract B from C. Place your final score on the line. _____

Content-Oriented Listener

A: Add scores for items 6, 8, 9, 10 and place total on line. _____

B: Place score for item 7 on the line. _____

Take the total from A and add 6 to the score. Place the new number on the line. _____

Final Score: Now subtract B from C. Place your final score on the line. _____

Time-Oriented Listener

Final Score: Add items 11, 12, 13, 14, 15 _____

Content-Oriented Listener

A: Add scores for items 16, 17, 19 and place total on line. _____

B. Add scores for items 18 & 20 and place total on line. _____

C: Take the total from A and add 12 to the score. Place the new number on the line. _____

Final Score: Now subtract B from C. Place your final score on the line. _____

Interpretation

For each of the four subscales, scores should be between 5 and 25. If your score is above 18, you are considered to have high levels of that specific listening style. If your score is below 12, you're considered to have low levels of that specific listening style.

Based On

Watson, K. W., Barker, L. L., & Weaver, J. B., III. (1992, March). *Development and validation of the Listener Preference Profile*. Paper presented at the International Listening Association in Seattle, WA

The Four Listening Styles

People

The first listening style is the people-oriented listening style. People-oriented listeners tend to be more focused on the person sending the message than the content of the message. As such, people-oriented listeners focus on the emotional states of senders of information. One way to think about people-oriented listeners is to see them as highly compassionate, empathic, and sensitive, which allows them to put themselves in the shoes of the person sending the message.

People-oriented listeners often work well in helping professions where listening to the person and understanding their feelings is very important (e.g., therapist, counselor, social worker). People-oriented listeners are also very focused on maintaining relationships, so they are good at casual conservation where they can focus on the person.

Action

The second listening style is the action-oriented listener. Action-oriented listeners are focused on what the source wants. The action-oriented listener wants a source to get to the point quickly. Instead of long, drawn-out lectures, the action-oriented speaker would prefer quick bullet points that get to what the source desires. Action-oriented listeners "tend to preference speakers that construct organized, direct, and logical presentations."[46]

When dealing with an action-oriented listener, it's important to realize that they want you to be logical and get to the point. One of the things action-oriented listeners commonly do is search for errors and inconsistencies in someone's message, so it's important to be organized and have your facts straight.

Content

The third type of listener is the content-oriented listener, or a listener who focuses on the content of the message and process that message in a systematic way. Of the four different listening styles, content-oriented listeners are more adept at listening to complex

information. Content-oriented listeners "believe it is important to listen fully to a speaker's message prior to forming an opinion about it (while action listeners tend to become frustrated if the speaker is 'wasting time')."[47]

When it comes to analyzing messages, content-oriented listeners really want to dig into the message itself. They want as much information as possible in order to make the best evaluation of the message. As such, "they want to look at the time, the place, the people, the who, the what, the where, the when, the how … all of that. They don't want to leave anything out."[48]

Time

The final listening style is the time-oriented listening style. Time-oriented listeners are sometimes referred to as "clock watchers" because they're always in a hurry and want a source of a message to speed things up a bit. Time-oriented listeners "tend to verbalize the limited amount of time they are willing or able to devote to listening and are likely to interrupt others and openly signal disinterest."[49]

They often feel that they are overwhelmed by so many different tasks that need to be completed (whether real or not), so they usually try to accomplish multiple tasks while they are listening to a source. Of course, multitasking often leads to someone's attention being divided, and information being missed.

Thinking About the Four Listening Types

Kina Mallard broke down the four listening styles and examined some of the common positive characteristics, negative characteristics, and strategies for communicating with the different listening styles (Table 7.3.2).[50]

Table 7.3.2 Understanding the Four Listening Styles

People-Oriented Listener		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Show care and concern for others	Over involved in feelings of others	Use stories and illustrations to make points
Are nonjudgmental	Avoid seeing faults in others	Use “we” rather than “I” in conversations
Provide clear verbal and nonverbal feedback signals	Internalize/adopt emotional states of others	Use emotional examples and appeals
Are interested in building relationships	Are overly expressive when giving feedback	Show some vulnerability when possible
Notice others’ moods quickly	Are nondiscriminating in building relationships	Use self-effacing humor or illustrations
Action-Oriented Listeners		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Get to the point quickly	Tend to be impatient with rambling speakers	Keep main points to three or fewer
Give clear feedback concerning expectations	Jump ahead and reach conclusions quickly	Keep presentations short and concise
Concentrate on understanding task	Jump ahead or finishes thoughts of speakers	Have a step-by-step plan and label each step
Action-Oriented Listeners		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Help others focus on what’s important	Minimize relationship issues and concerns	Watch for cues of disinterest and pick up vocal pace at those points or change subjects
Encourage others to be organized and concise	Ask blunt questions and appear overly critical	Speak at a rapid but controlled rate
Content-Oriented Listeners		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Value technical information	Are overly detail oriented	Use two-side arguments when possible
Test for clarity and understanding	May intimidate others by asking pointed questions	Provide hard data when available
Encourage others to provide support for their ideas	Minimize the value of nontechnical information	Quote credible experts
Welcome complex and challenging information	Discount information from nonexperts	Suggest logical sequences and plan
Look at all sides of an issue	Take a long time to make decisions	Use charts and graphs

Time-Oriented Listeners		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Manage and save time	Tend to be impatient with time wasters	Ask how much time the person has to listen
Set time guidelines for meeting and conversations	Interrupt others	Try to go under time limits when possible
Let others know listening-time requirements	Let time affect their ability to concentrate	Be ready to cut out necessary examples and information
Discourage wordy speakers	Rush speakers by frequently looking at watches/clock	Be sensitive to nonverbal cues indicating impatience or a desire to leave
Time-Oriented Listeners		
Positive Characteristics	***Negative Characteristics***	***Strategies for Communicating with People-Oriented Listeners***
Give cues to others when time is being wasted	Limit creativity in others by imposing time pressures	Get to the bottom line quickly
Original Source: Mallard, K. S. (1999). Lending an ear: The chair's role as listener. The Department Chair, 9(3), 1-13.		

Hopefully, this section has helped you further understand the complexity of listening. We should mention that many people are not just one listening style or another. It's possible to be a combination of different listening styles. However, some of the listening style combinations are more common. For example, someone who is action-oriented and time-oriented will want the bare-bones information so they can make a decision. On the other hand, it's hard to be a people-oriented listener and time-oriented listener because being empathic and attending to someone's feelings takes time and effort.

Mindfulness Activity



One of the hardest skills to master when it comes to mindfulness is mindful listening. To engage in mindful listening, Elaine Smookler recommends using the HEAR method:

1. HALT — Halt whatever you are doing and offer your full attention.
2. ENJOY — Enjoy a breath as you choose to receive whatever is being communicated to you—wanted or unwanted.
3. ASK — Ask yourself if you really know what they mean, and if you don't, ask for clarification. Instead of making assumptions, bring openness and curiosity to the interaction. You might be surprised at what you discover.
4. REFLECT — Reflect back to them what you heard. This tells them that you were really listening.[51]

For this mindfulness activity, we want you to engage in mindful listening. Start by having a conversation with a friend, romantic partner, or family member. Before beginning the conversation, find a location that has minimal distractions, so try not to engage in this activity in a public space. Also, turn off the television and radio. The goal is to focus your attention on the other person. Start by employing the HEAR method for listening during your conversation. After you have finished this conversation, try to answer the following questions:

1. How easy was it for you to provide your conversational partner your full attention? When stray thoughts entered your head, how did you refocus yourself?
2. Were you able to pay attention to your breathing while engaged in this conversation? Were you breathing lightly or heavily? Did your breathing get in the way of you listening mindfully? If yes, what happened?
3. Did you attempt to empathize with your conversational partner? How easy was it to understand where they were coming from? Was it still easy to empathize if you didn't agree with something they said or didn't like something they said?

4. How did your listening style impact your ability to stay mindful while listening? Do you think all four listening styles are suited for mindful listening? Why?

Key Takeaways

- Hearing happens when sound waves hit our eardrums. Listening involves processing these sounds into something meaningful.
- The listening process includes: having the motivation to listen, clearly hearing the message, paying attention, interpreting the message, evaluating the message, remembering and responding appropriately.
- There are many types of listening styles: comprehension, evaluative, empathetic, and appreciative.

Exercises

- Do a few listening activities. Go to: www.medel.com/resources-for-successsoundscape/
- For the next week, do a listening diary. Take notes of all the things you listen to and analyze to see if you are truly a good listener. Do you ask people to repeat things? Do you paraphrase?
- After completing the Listening Styles Questionnaire, think about your own listening style and how it impacts how you interact with others. What should you think about when communicating with people who have a different listening style?

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6.1.4: Listening Responses

Learning Outcomes

1. Discuss different types of listening responses.
2. Discern different types of questioning.
3. Analyze perception checking.

Who do you think is a great listener? Why did you name that particular person? How can you tell that person is a good listener? You probably recognize a good listener based on the nonverbal and verbal cues that they display. In this section, we will discuss different types of listening responses. We all don't listen in the same way. Also, each situation is different and requires a distinct style that is appropriate for that situation.

Types of Listening Responses

Ronald Adler, Lawrence Rosenfeld, and Russell Proctor are three interpersonal scholars who have done quite a bit with listening.[52] Based on their research, they have found different types of listening responses: silent listening, questioning, paraphrasing, empathizing, supporting, analyzing, evaluating, and advising (Figure 7.4.1).[53]

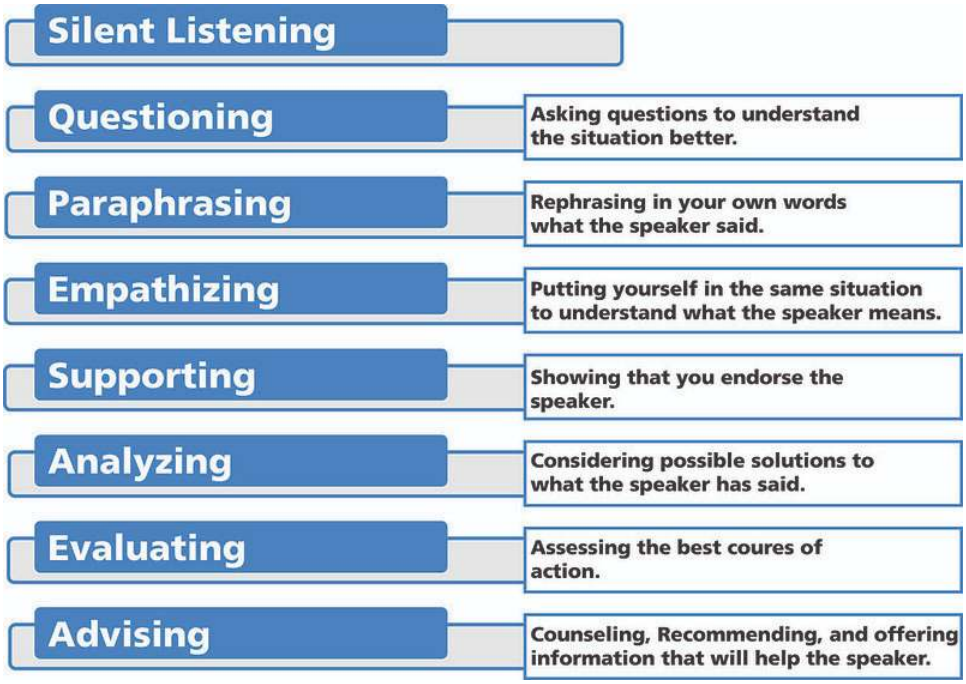


Figure **6.1.4.1**: Types of Listening Responses

Silent Listening

Silent listening occurs when you say nothing. It is ideal in certain situations and awful in other situations. However, when used correctly, it can be very powerful. If misused, you could give the wrong impression to someone. It is appropriate to use when you don't want to encourage more talking. It also shows that you are open to the speaker's ideas.

Sometimes people get angry when someone doesn't respond. They might think that this person is not listening or trying to avoid the situation. But it might be due to the fact that the person is just trying to gather their thoughts, or perhaps it would be inappropriate to respond. There are certain situations such as in counseling, where silent listening can be beneficial because it can help that person figure out their feelings and emotions.

Questioning

In situations where you want to get answers, it might be beneficial to use questioning. You can do this in a variety of ways. There are several ways to **question** in a sincere, nondirective way (see Table 7.4.1):

Table 7.4.1 Types of Nondirective Questioning

Reason	Example
To clarify meanings	A young child might mumble something and you want to make sure you understand what they said.
To learn about others' thoughts, feelings, and wants (**open/closed questions**)	When you ask your partner where they see your relationship going in the next few years.
To encourage elaboration	Nathan says "That's interesting!" Jonna has to ask him further if he means interesting in a positive or negative way.
To encourage discovery	Ask your parents how they met because you never knew.
To gather more facts and details	Police officers at the scene of the crime will question any witnesses to get a better understanding of what happened.

You might have different types of questions. Sincere questions are ones that are created to find a genuine answer. Counterfeit questions are disguised attempts to send a message, not to receive one. Sometimes, counterfeit questions can cause the listener to be defensive. For instance, if someone asks you, "Tell me how often you used crystal meth." The speaker implies that you have used meth, even though that has not been established. A speaker can use questions that make statements by emphasizing specific words or phrases, stating an opinion or feeling on the subject. They can ask questions that carry hidden agendas, like "Do you have $5?" because the person would like to borrow that money. Some questions seek "correct" answers. For instance, when a friend says, "Do I look fat?" You probably have a correct or ideal answer. There are questions that are based on unchecked assumptions. An example would be, "Why aren't you listening?" This example implies that the person wasn't listening, when in fact they are listening.

Paraphrasing

Paraphrasing is defined as restating in your own words, the message you think the speaker just sent. There are three types of paraphrasing. First, you can change the speaker's wording to indicate what you think they meant. Second, you can offer an example of what you think the speaker is talking about. Third, you can reflect on the underlying theme of a speaker's remarks. Paraphrasing represents mindful listening in the way that you are trying to analyze and understand the speaker's information. Paraphrasing can be used to summarize facts and to gain consensus in essential discussions. This could be used in a business meeting to make sure that all details were discussed and agreed upon. Paraphrasing can also be used to understand personal information more accurately. Think about being in a counselor's office. Counselors often paraphrase information to understand better exactly how you are feeling and to be able to analyze the information better.

Empathizing

Empathizing is used to show that you identify with a speaker's information. You are not empathizing when you deny others the rights to their feelings. Examples of this are statements such as, "It's really not a big deal" or "Who cares?" This indicates that the listener is trying to make the speaker feel a different way. In minimizing the significance of the situation, you are interpreting the situation in your perspective and passing judgment.

Supporting

Sometimes, in a discussion, people want to know how you feel about them instead of a reflection on the content. Several types of supportive responses are: agreement, offers to help, praise, reassurance, and diversion. The value of receiving support when faced with personal problems is very important. This has been shown to enhance psychological, physical, and relational health. To effectively support others, you must meet certain criteria. You have to make sure that your expression of support is sincere, be sure that other person can accept your support, and focus on "here and now" rather than "then and there."

Analyzing

Analyzing is helpful in gaining different alternatives and perspectives by offering an interpretation of the speaker's message. However, this can be problematic at times. Sometimes the speaker might not be able to understand your perspective or may become more confused by accepting it. To avoid this, steps must be taken in advance. These include tentatively offering your interpretation instead of as an absolute fact. By being more sensitive about it, it might be more comfortable for the speaker to accept. You can also make sure that your analysis has a reasonable chance of being correct. If it were inaccurate, it would leave the person more confused than before. Also, you must make sure the person will be receptive to your analysis and that your motive for offering is to truly help the other person. An analysis offered under any other circumstances is useless.

Evaluating

Evaluating appraises the speaker's thoughts or behaviors. The evaluation can be favorable ("That makes sense") or negative (passing judgment). Negative evaluations can be critical or non-critical (constructive criticism). Two conditions offer the best chance for evaluations to be received: if the person with the problem requested an evaluation, and if it is genuinely constructive and not designed as a putdown.

Advising

Advising differs from evaluations. It is not always the best solution and can sometimes be harmful. In order to avoid this, you must make sure four conditions are present: be sure the person is receptive to your suggestions, make sure they are truly ready to accept it, be confident in the correctness of your advice, and be sure the receiver won't blame you if it doesn't work out.

Perception Checking

Perceptions change in a relationship. Initially, people can view others positively (for example, confident, thrifty, funny), then later in the relationship that person changes (arrogant, cheap, childish). The person hasn't changed. Only our perceptions of them have changed. That is why we focus on perception in a communication book because often, our perception affects how we communicate. It also has an impact on what we listen to and how we listen. For instance, when people get married, one person might say, "I love you! I would die for you," then a couple of years later, that same person might say, "I hate you! I am going to kill you!" Their perceptions about the other person will change.[54]

Even when people break up, men typically will think about the physical aspects of the relationship (I gave her a watch, she wasn't that hot) and women will think about the emotional aspects of the relationship (I gave him my heart, I really cared about him.). Perception is an interesting thing because sometimes we think other people have a similar perspective, but as we will see, that is not always the case.

Selection

What we pay attention to varies from one person to another. The first step in the perception process is selection. It determines what things we focus on compared to what things we ignore. What we select to focus on depends on:

1. Intensity – if it is bigger, brighter, louder in some way. Think about all the advertisements that you view. If the words are bigger or if the sound is louder, you are more likely to pay attention to it. Advertisers know that intensity is very important to get people to pay attention.
2. Repetition–It has been said that to get someone to do something, they have to be told three different ways and three different times. People pay attention to things that repeat because you can remember it easier. In school, we learn to do things over and over again, because it teaches us mastery of a skill.
3. Differences – We will pay attention to differences, especially if it is a disparity or dissimilarity to what commonly occurs. Think about changes or adjustments that you had to deal with in life. These transformations made you notice the comparisons. For instance, children who go through a divorce will talk about the differences that they encountered. Children will focus on how things are different and how it is not the same.
4. Motives/Goals. We tend to pay attention to things for which have a strong interest or desire. If you love cars, you will probably notice cars more closely than someone else who has no interest in cars. Another example might be if you are single, then you might notice who is married and who is not more than someone in a committed relationship.

5. Emotions. Our emotional state has a strong impact on how we view life in general. If we are sad, we will probably notice other sad faces. The same thing happens when we are happy; we will tend to notice other happy people. Our emotions can impact how we feel. If we are angry, we might say things we don't mean and not perceive how we come across to other people.

Organization

The second phase in the perception process is organization, or how we arrange information in our minds. So, once we have selected what information we pay attention to, our minds try to process it. Sometimes when this occurs, we engage in stereotyping or attribute certain characteristics to a certain set of individuals. In other words, we classify or labels others based on certain qualities.

Also, when people organize information in their mind, they can also engage in punctuation, or establishing the effects and causes in communication behavior. It is more useful to realize that a conflict situation can be perceived differently by each person, and it is important to focus on "What we can do to make this situation better?"

Interpretation

The third phase of the perception process is interpretation. In this phase, we try to understand the information or make sense of it. This depends on a few factors:

1. Degree of involvement–If we were in the middle of an accident, we would probably have more information regarding what event occurred compared to a bystander. The more involved we are with something, the more we can make sense of what is actually happening. For instance, in cults, the members understand the rules and rituals, but an outsider would not understand, because they are not exposed to the rules and rituals.
2. Relational satisfaction – If we are happy in a relationship, we tend to think that everything is wonderful. However, if you are dissatisfied in the relationship, you might second guess the behaviors and actions of your partner.
3. Past experiences – If you had a good past experience with a certain company, you might think that everything they do is wonderful. However, if your first experience was horrible, you may think that they are always horrible. In turn, you will interpret that company's actions as justified because you already encountered a horrible experience.
4. Assumptions about human behavior – If you believed that most people do not lie, then you would probably be very hurt if someone important to you lied to you. Our assumptions about others help us understand their behaviors and actions. If you had a significant other cheats on you, you would probably be suspicious of future interactions with other significant others.
5. Expectations – Our behaviors are also influenced by our expectations of others. If we expect a party to be fun and it isn't, then we will be let down. However, if we have no expectations about a party, it may not affect how we feel about it.
6. Knowledge of others – If you know that someone close to you has a health problem, then it will not be a shock if they need medical attention. However, if you had no clue that this person was unhealthy, it would come as a complete surprise. How you interpret a given situation is oftentimes based on what you know about a certain situation. [55]

Negotiation

The last phase of the perception process is called negotiation. In this phase, people are trying to understand what is happening. People often use narratives or stories to explain and depict their life. For instance, a disagreement between a teacher and student might look very different depending on which perspective you take. The student might perceive that they are hard-working and very studious. The student thinks they deserve a high grade. However, the teacher might feel that their job is to challenge all students to their highest levels and be fair to all students. By listening to both sides, we can better understand what is going on and what needs to be done in certain situations. Think about car accidents and how police officers have to listen to both sides. Police officers have to determine what happened and who is at fault. Sometimes it is not an easy task.

Influences on Perception

All of us don't perceive the same things. One person might find something beautiful, but another person might think it is horrible. When it comes to our perception, there are four primary influences we should understand: physiological, psychological, social, and cultural.

Physiological Influences

Some of the reasons why we don't interpret things, in the same way are due to physiology. Hence, biology has an impact on what we do and do not perceive. In this section, we will discuss the various physiological influences.

1. Senses – Our senses can have an impact on what and where we focus our attention. For instance, if you have a strong sense of smell, you might be more sensitive to a foul-smelling odor compared to someone who cannot smell anything due to sinus problems. Our senses give us a different perception of the world.
2. Age – Age can impact what we perceive. Have you ever noticed that children have so much energy, and the elderly do not? Children may perceive that there is so much to do in a day, and the elderly may perceive that there is nothing to do. Our age influences how we think about things.
3. Health – when we are healthy, we have the stamina and endurance to do many things. However, when we are sick, our bodies may be more inclined to rest. Thus, we will perceive a lot of information differently. For instance, when you are healthy, some of your favorite meals will taste really good, but when you are sick, it might not taste so good, because you cannot smell things due to a stuffy nose.
4. Hunger – When you are hungry, it is tough to concentrate on anything except food. Studies have shown that when people are hungry, all they focus on is something to eat.
5. Biological cycles – Some people are "morning larks" and some are "night owls." In other words, there are peaks where people perform at their highest level. For some individuals, it is late at night, and for others, it is early in the morning. When people perform at their peak times, they are likely to be more perceptive of information. If you are a person who loves getting up early, you would probably hate night classes, because you are not able to absorb as much information as you could if the class was in the morning.

Psychological Influences

Sometimes the influences on perception are not physiological but psychological. These influences include mood and self-concept. These influences are based in our mind, and we can't detect them in others.

1. Mood – Whether we are happy or sad can affect how we view the world. For instance, if we are happy, then anything that happens, we might view it more positively.
2. Self-concept – If we have a healthy self-concept of ourselves, we may not be offended if someone makes a negative remark. Yet, if we have a poor self-concept of ourselves, then we are probably going to be more influenced by negative remarks. The stronger our self-concept is, the more likely it will affect how we view perceive other people's communication behaviors toward us.

Social Influences

Social influences include sex and gender roles, as well as occupational roles. These roles can impact our perceptions. Because we are in these roles, we might be likely to think differently than others in different roles.

1. Sex and gender roles – We have certain expectations in our culture regarding how men and women should behave in public. Women are expected to be more nurturing than men. Moreover, men and women are viewed differently concerning their marital status and age.
2. Occupational roles – Our jobs have an influence on how we perceive the world. If you were a lawyer, you might be more inclined to take action on civil cases than your average member of the public, because you know how to handle these kinds of situations. Moreover, if you are a nurse or medical specialist, you are more likely to perceive the health of other individuals. You would be able to tell if someone needed urgent medical care or not.

Research Spotlight



In 2015, Karina J. Lloyd, Diana Boer, Avraham N. Kluger, and Sven C. Voelpel conducted an experiment to examine the relationship between perceived listening trust and wellbeing. In this study, the researchers recruited pairs of strangers. They had one of the participants tell the other about a positive experience in their life for seven minutes (the talker) and one who sat and listened to the story without comment (the listener).

The researchers found that talkers who perceived the listener to be listening intently to be very important for effective communication. First, perceived listening led to a greater sense of social attraction towards the listener, which in turn, led to a greater sense of trust for the listener. Second, talkers who perceived the listener as listening intently felt their messages were clearer, which in turn, led to a greater sense of the talker's overall wellbeing (positive affect).

As you can see, simply perceiving that the other person is listening intently to you is very important on a number of fronts. For this reason, it's very important to remember to focus your attention when you're listening to someone.

Lloyd, K. J., Boer, D., Kluger, A. N., & Voelpel, S. C. (2015). Building trust and feeling well: Examining intraindividual and interpersonal outcomes and underlying mechanisms of listening. International Journal of Listening, 29(1), 12–29. https://doi.org/10.1080/10904018.2014.928211

Cultural Influences

In a recent meeting, the boss said, "Remember the Golden Rule," and a coworker from India asked the staff about the meaning of that phrase. He wondered if there was a silver rule or a bronze rule. The reason he didn't understand this concept is due to cultural influences. We know that everyone doesn't perceive things in the same fashion.

In some countries, the elderly are highly respected individuals, where the youth go to for advice and wisdom. Yet, in other countries, the elderly are seen as lazy and worthless. Hence, our culture has an impact on how we perceive the world and others. Communication is different across cultures. Western cultures, like the United States, value talk and view it as very important to function and conduct business. Thus, they do not like silence because it can be perceived as shyness, frustration, and intimidating.56 Western culture dislikes silence because it is uncomfortable and problematic. Asian cultures have different perceptions of communication. Silence is seen as valuable to reflect on one's thinking. Asians might view someone who is talkative very negatively. Based on this example, we can see that cultural perceptions can lead to problems, because, to an American, silence is considered rude and to an Asian, silence is good. To effectively communicate, we need to understand cultural perceptions.

Perception Checking

To judge others more accurately, we need to engage in perception checking.

Perception checking involves three steps:

1. Describe your perception of the event
2. Offer three different interpretations of that behavior
3. Seek clarification about the interpretations
4. That's it! I know this sounds easy, but it's definitely much harder than it looks.

Key Takeaways

- The different types of listening responses are silent listening, questioning, paraphrasing, empathizing, supporting, analyzing, evaluating, and advising.
- Questioning can be to clarify meanings, encourage elaboration, learn about others, increase discovery, or obtain more information.
- Perception checking involves describing the situation, offering three possible interpretations, and then seeking information.

Exercises

- Write down an example of each of the listening responses and why it is appropriate for that situation. Why did you write down what you did?
- Create a chart with the different types of questions and give at least two examples for each type. Compare with a friend in class.
- Watch a movie or television show with your friends, then ask them to write down the three most notable moments. Compare what you wrote to others. Was it similar or different? Why or why not? Did you all have the same perceptions? Why?

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6.1.5: Chapter Wrap-Up

We spend most of our lives engaged in talking and listening behavior. As such, understanding the functions of talking and listening in interpersonal communication is very important. In this chapter, we started by discussing the importance of everyday conversations. We next discussed a specific type of talk: disclosing information about ourselves (self-disclosure). We then switched gears and focused on the listening component. Overall, talking and listening are extremely important to interpersonal communication, so understanding how they function can help improve our communication skills.

End of Chapter

Key Terms

- Analyzing
- Appreciative Listening
- Communication Motives
- Communication Needs
- Comprehension Listening
- Conversations
- Emotional Blackmail
- Empathic Listening
- Empathizing
- Evaluative Listening
- Hearing
- Johari Window
- Listening
- Paraphrase
- Self-Disclosure
- Silent Listening
- Social Penetration Theory

Real World Case Study

Mictrotela is the new leader in telecommunications. However, many customers are having problems with their new cell phones. They have tried calling customer service to solve their problems. However, many of the customers get frustrated and wind up terminating their cell phone contracts. Mictrotela does some research and discovers that many of their customer service representatives do not know how to listen effectively. Many of the customers who call the company have complained that no one is listening to their problems.

1. If you were hired as a consultant for this business, how would you fix this problem?
2. How can you teach customer service representatives better listening skills?
3. What are some strategies to help customers feel like they are being listened to?

End of Chapter Quiz

1. Kara couldn't wait to talk to her best friend Jose. She's had a truly horrible, no good, very bad day. As soon as Jose enters her apartment, she just starts venting. What type of conversation is Kara having with Jose?
   a. discourse
   b. debate
   c. dialogue
   d. deviant
   e. diatribe
2. Cory doesn't know if he is a good cook because he has never been in a kitchen. His friends don't even know if Cory has a kitchen in his house. Which window pane of Johari's window does this represent?

a. open
b. blind
c. hidden
d. unknown
e. closed

3. All of the following are types of listening except:
   a. silent listening
   b. questioning
   c. empathizing
   d. imagining
   e. advising
4. In this chapter, we discuss all of the following types of listening except:
   a. comprehension
   b. evaluative
   c. empathetic
   d. appreciative
   e. interpretive
5. Meno's girlfriend has been seen with other male friends. His friends try and tell him that she is cheating on him, but he refuses to believe what they say. Even when they have pictures and proof, he doesn't listen to their words. He is displaying:
   a. interrupting
   b. daydreaming
   c. pseudo-listening
   d. emotional listening
   e. insulated listening

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End of Chapter Quiz Answer Key

1. E
2. D
3. D
4. E
5. B

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SECTION OVERVIEW

6.2: Building and Maintaining Relationships

Over the course of our lives, we will enter into and out of many different relationships. When it comes to dating, the average person has seven relationships before getting married.[1] According to a study conducted by OnePoll in conjunction with Evite, the average American has:

- Three best friends
- Five good friends
- Eight people they like but don't spend one-on-one time with
- 50 acquaintances
- 91 social media friends[2]

In this chapter, we are going to discuss how we go about building and maintaining our interpersonal relationships.

6.2.1: The Nature of Relationships

6.2.2: Relationship Formation

6.2.3: Stages of Relationships

6.2.4: Communication in Relationships

6.2.5: Dating Relationships

6.2.6: How Gender Affects Relationships

6.2.7: Chapter Wrap-Up

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6.2.1: The Nature of Relationships

Learning Outcomes

- Understand relationship characteristics.
- Identify the purposes of relationships.
- Explain the elements of a good relationship.

We've all been in a wide range of relationships in our lives. This section is going to explore relationships by examining specific relationship characteristics and the nature of significant relationships.

Relationship Characteristics

We all know that all relationships are not the same. We have people in our lives that we enjoy spending time with, like to support us, and/or assist us when needed. We will typically distance ourselves from people who do not provide positive feelings or outcomes for us. Thus, there are many characteristics in relationships that we have with others. These characteristics are: duration, contact frequency, sharing, support, interaction variability, and goals.[3]

Some friendships last a lifetime, others last a short period. The length of any relationship is referred to as that relationship's **duration**. People who grew up in small towns might have had the same classmate till graduation. This is due to the fact that duration with each person is different. Some people we meet in college and we will never see them again. Hence, our duration with that person is short. **Duration** is related to the length of your relationship with that person.

Second, **contact frequency** is how often you communicate with the other person. There are people in our lives we have known for years but only talk to infrequently. The more we communicate with others, the closer our bond becomes to the other person. Sometimes people think duration is the real test of a relationship, but it also depends on how often you communicate with the other person.

The third relationship trait is **sharing**. The more we spend time with other people and interact with them, the more we are likely to share information about ourselves. This type of sharing involves information that is usually our private and very intimate details of our thoughts and feelings. We typically don't share this information with a stranger. Once we develop a sense of trust and support with this person, we can begin to share more details.

The fourth characteristic is **support**. Think of the people in your life and who you would be able to call in case of an emergency. The ones that come to mind are the ones you know who would be supportive of you. They would support you if you needed help, money, time, or advice. Support is another relationship trait because we know that not everyone can support us in the same manner. For instance, if you need relationship advice, you would probably pick someone who has relationship knowledge and would support you in your decision. Support is so important. A major difference found between married and dating couples is that married couples were more likely to provide supportive communication behaviors to their partners than dating couples.[4]

The fifth defining characteristic of relationships is the **interaction variability**. When we have a relationship with another person, it is not defined by your interaction with them, rather on the different types of conversations you can have with that person. When you were little, you probably knew that if you were to approach your mom, she might respond a certain way as opposed to your dad, who might respond differently. Hence, you knew that your interaction would vary. The same thing happens with your classmates because you don't just talk about class with them. You might talk about other events on campus or social events. Therefore, our interactions with others are defined by the greater variability that we have with one person as opposed to another.

The last relationship characteristic is **goals**. In every relationship we enter into, we have certain expectations about that relationship. For instance, if your goal is to get closer to another person through communication, you might share your thoughts and feelings and expect the other person to do the same. If they do not, then you will probably feel like the goals in your relationship were not met because they didn't share information. The same goes for other types of relationships. We typically expect that our significant other will be truthful, supportive, and faithful. If they break that goal, then it causes problems in the relationship and could end the relationship. Hence, in all our relationships, we have goals and expectations about how the relationship will function and operate.

Significant Relationships

Think about all the relationships that you have in your life. Which ones are the most meaningful and significant for you? Why do you consider these relationships as the most notable one(s) for you? Your parents/guardians, teachers, friends, family members, and love interests can all serve as significant relationships for you. Significant relationships have a huge impact on our communication behaviors and our interpretation of these conversations. Significant relationships impact who we are and help us grow. These relationships can serve a variety of purposes in our lives.

Purposes of Relationships

Relationships can serve a variety of purposes: work, task, and social. First, relationships can be work-related. We might have a significant work relationship that helps us advance our professional career. We might have work relationships that might support us in gaining financial benefits or better work opportunities. Second, we might have significant relationships that are task-related. We may have a specific task that we need to accomplish with this other person. It might be a project or a mentorship. After the task is completed, then the relationship may end. For instance, a high school coach may serve as a significant relationship. You and your coach might have a task or plan to go to the state competition. You and your coach will work on ways to help you. However, after you complete high school and your task has ended, then you might keep in contact with the coach, or you may not since your competition (task) has ended. The last purpose is for social reasons. We may have social reasons for pursuing a relationship. These can include pleasure, inclusion, control, and/or affection. Each relationship that we have with another person has a specific purpose. We may like to spend time with a particular friend because we love talking to them; at the same time, we might like spending time with another friend because we know that they can help us become more involved with extracurricular activities.

Elements of a Good Relationship

In summary, relationships are meaningful and beneficial. Relationships allow us to grow psychologically, emotionally, and physically. We can connect with others and truly communicate. The satisfaction of our relationships usually determines our happiness and health.

Key Takeaways

- The nature of a relationship is not determined immediately; often, it evolves and is defined and redefined over time.
- Relationship characteristics include duration, contact frequency, sharing, support, interaction variability, and goals. The purposes of a relationship are for security and health.
- Elements of a good relationship include trust, commitment, willingness to work together to maintain the relationship, support, intimacy, empathy, and skills for dealing with emotions.

Exercises

- Conduct an inventory of your relationships. Think of all the people in your life and how they meet each of the relationship characteristics.
- Write a list of all the good relationships that you have with others or witnessed. What makes these relationships good? Is it similar to what we talked about in this chapter? Was anything different? Why?
- Write a hypothetical relationship article for a website. What elements make a lasting relationship? What would you write? What would you emphasize? Why? Let a friend read it and provide input.

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6.2.2: Relationship Formation

Learning Outcomes

- Understand attraction.
- Ascertain reasons for attraction.
- Realize the different types of attraction.

Have you ever wondered why people pick certain relationships over others? We can't pick our family members, although I know some people wish they could. We can, however, select who our friends and significant others are in our lives. Throughout our lives, we pick and select people that we build a connection to and have an attraction towards. We tend to avoid certain people who we don't find attractive.

Understanding Attraction

Researchers have identified three primary types of attraction: physical, social, and task. **Physical attraction** refers to the degree to which you find another person aesthetically pleasing. What is deemed aesthetically pleasing can alter greatly from one culture to the next. We also know that pop culture can greatly define what is considered to be physically appealing from one era to the next. Think of the curvaceous ideal of Marilyn Monroe and Elizabeth Taylor in the 1950s as compared to the thin Halle Barry or Anne Hathaway. Although discussions of male physical attraction occur less often, they are equally impacted by pop culture. In the 1950s, you had solid men like Robert Mitchum and Marlon Brando as compared to the heavily muscled men of today like Joe Manganiello or Zac Efron.

The second type of attraction is **social attraction**, or the degree to which an individual sees another person as entertaining, intriguing, and fun to be around. We all have finite sources when it comes to the amount of time we have in a given day. We prefer to socialize with people that we think are fun. These people may entertain us or they may just fascinate us. No matter the reason, we find some people more socially desirable than others. Social attraction can also be a factor of power, for example, in situations where there are kids in the "in-group" and those that are not. In this case, those that are considered popular hold more power and are perceived as being more socially desirable to associate with. This relationship becomes problematic when these individuals decide to use this social desirability as a tool or weapon against others.

The final type of attraction is **task attraction**, or people we are attracted to because they possess specific knowledge and/or skills that help us accomplish specific goals. The first part of this definition requires that the target of task attraction possess specific knowledge and/or skills. Maybe you have a friend who is good with computers who will always fix your computer when something goes wrong. Maybe you have a friend who is good in math and can tutor you. Of course, the purpose of these relationships is to help you accomplish your own goals. In the first case, you have the goal of not having a broken down computer. In the second case, you have the goal of passing math. This is not to say that an individual may only be viewed as task attractive, but many relationships we form are because of task attraction in our lives.

Reasons for Attraction

Now that we've looked at the basics of what attraction is, let's switch gears and talk about why we are attracted to each other. There are several reasons researchers have found for our attraction to others, including proximity, physicality, perceived gain, similarities and differences, and disclosure.

Physical Proximity

When you ask some people how they met their significant other, you will often hear proximity is a factor in how they met. Perhaps, they were taking the same class or their families went to the same grocery store. These common places create opportunities for others to meet and mingle. We are more likely to talk to people that we see frequently.

Physical Attractiveness

In day-to-day interactions, you are more likely to pay attention to someone you find more attractive than others. Research shows that males place more emphasis on physical attractiveness than females.[5] Appearance is very important at the beginning of the

relationship.

Perceived Gain

This type of relationship might appear to be like an economic model and can be explained by **exchange theory**.[6] In other words, we will form relationships with people who can offer us rewards that outweigh the costs. Rewards are the things we want to acquire. They could be tangible (e.g., food, money, clothes) or intangible (support, admiration, status). Costs are undesirable things that we don't want to expend a lot of energy to do. For instance, we don't want to have to constantly nag the other person to call us or spend a lot of time arguing about past items. A good relationship will have fewer costs and more rewards. A bad relationship will have more costs and fewer rewards. Often, when people decide to stay or leave a relationship, they will consider the costs and rewards in the relationship.

Costs and rewards are not the only factors in a relationship. Partners also consider alternatives in the relationship. For instance, Becky and Alan have been together for a few years. Becky adores Alan and wants to marry him, but she feels that there are some problems in the relationship. Alan has a horrible temper; he is pessimistic; and he is critical of her. Becky has gained some weight, and Alan has said some hurtful things to her. Becky knows that every relationship will have issues. She doesn't know whether to continue this relationship and take it further or if she should end it.

Her first alternative is called the **comparison level** (CL), which is the minimum standard that she is willing to tolerate. If Becky believes that it is ok for a person to say hurtful things to her or get angry, then Alan is meeting or exceeding her CL. However, if past romantic partners have never said anything hurtful towards her, then she would have a lower CL.

Becky will also consider another alternative, which is the **comparison level of alternatives** (CL_{alt}), or the comparison between current relationship rewards and what she might get in another relationship. If she doesn't want to be single, then she might have a lower CL of alternatives. If she has another potential mate who would probably treat her better, then she would have a higher level of alternatives. We use this calculation all the time in relationships. Often when people are considering the possibility to end a relationship, they will consider all alternatives rather than just focusing on costs and rewards.

Similarities and Differences

It feels comforting when someone who appears to like the same things you like also has other similarities to you. Thus, you don't have to explain yourself or give reasons for doing things a certain way. People with similar cultural, ethnic, or religious backgrounds are typically drawn to each other for this reason. It is also known as **similarity thesis**. The similarity thesis basically states that we are attracted to and tend to form relationships with others who are similar to us.[7] There are three reasons why similarity thesis works: validation, predictability, and affiliation. First, it is validating to know that someone likes the same things that we do. It confirms and endorses what we believe. In turn, it increases support and affection. Second, when we are similar to another person, we can make predictions about what they will like and not like. We can make better estimations and expectations about what the person will do and how they will behave. The third reason is due to the fact that we like others that are similar to us and thus they should like us because we are the same. Hence, it creates affiliation or connection with that other person.

However, there are some people who are attracted to someone completely opposite from who they are. This is where differences come into play. Differences can make a relationship stronger, especially when you have a relationship that is **complementary**. In complementary relationships, each person in the relationship can help satisfy the other person's needs. For instance, one person likes to talk, and the other person likes to listen. They get along great because they can be comfortable in their communication behaviors and roles. In addition, they don't have to argue over who will need to talk. Another example might be that one person likes to cook, and the other person likes to eat. This is a great relationship because both people are getting what they like, and it complements each other's talents. Usually, friction will occur when there are differences of opinion or control issues. For example, if you have someone who loves to spend money and the other person who loves to save money, it might be very hard to decide how to handle financial issues.

Disclosure

Sometimes we form relationships with others after we have disclosed something about ourselves to others. Disclosure increases liking because it creates support and trust between you and this other person. We typically don't disclose our most intimate thoughts to a stranger. We do this behavior with people we are close to because it creates a bond with the other person.

Disclosure is not the only factor that can lead to forming relationships. Disclosure needs to be appropriate and reciprocal[8]. In other words, if you provide information, it must be mutual. If you reveal too much or too little, it might be regarded as inappropriate and can create tension. Also, if you disclose information too soon or too quickly in the relationship, it can create some negative outcomes.

Key Takeaways

- We can be attracted to another person via various ways. It might be due to physical proximity, physical appearance, perceived gain, similarity/differences, and disclosure.
- The deepening of relationships can occur through disclosure and mutual trust.
- Relationships end through some form of separation or dissolution.

Exercises

- Take a poll of the couples that you know and how they met. Which category does it fall into? Is there a difference among your couples and how they met?
- What are some ways that you could form a relationship with others? Discuss your findings with the class. How is it different/similar to what we talked about in this chapter?
- Discuss how and why a certain relationship that you know dissolved. What were the reasons or factors that caused the separation?

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6.2.3: Stages of Relationships

Learning Outcomes

- Describe the coming together stages.
- Discern the coming apart stages.
- Realize relationship maintenance strategies.

Every relationship goes through various stages. Mark Knapp first introduced a series of stages through which relationships can progress.[9] This model was later modified by himself and coauthor Anita Vangelisti to create a model of relationships.[10] They believe that we come together and we can come apart in stages. Relationships can get stronger or weaker. Most relationships go through some or all of these stages.

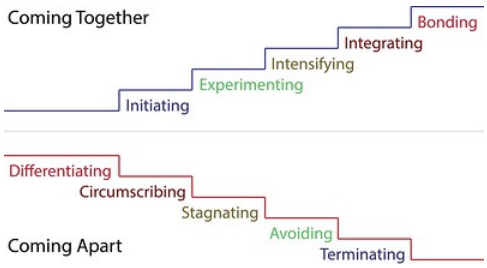


Figure 1: Knapp and Vangelisti Model of Relationships

Coming Together

Do you remember when you first met that special someone in your life? How did your relationship start? How did you two become closer? Every relationship has to start somewhere. It begins and grows. In this section, we will learn about the coming together stages, which include: initiating, experimenting, intensifying, integrating, and then bonding.

Initiating

At the beginning of every relationship, we have to figure out if we want to put in the energy and effort to talk to the other person. If we are interested in pursuing the relationship, we have to let the other person know that we are interested in initiating a conversation.

There are different types of initiation. Sustaining is trying to continue the conversation. Networking is where you contact others for a relationship. An offering is where you present your interest in some manner. Approaching is where you directly make contact with the other person. We can begin a relationship in a variety of different ways.

Communication at this initiating stage is very brief. We might say hello and introduce yourself to the other person. You might smile or wink to let the other person know you are interested in making conversation with him or her. The conversation is very superficial and not very personal at all. At this stage, we are primarily interested in making contact.

Experimenting

After we have initiated communication with the other person, we go to the next stage, which is experimenting. At this stage, you are trying to figure out if you want to continue the relationship further. We are trying to learn more about the other person.

At this stage, interactions are very casual. You are looking for common ground or similarities that you share. You might talk about your favorite things, such as colors, sports, teachers, etc. Just like the name of the stage, we are experimenting and trying to figure out if we should move towards the next stage or not.

Intensifying

After we talk with the other person and decide that this is someone we want to have a relationship with, we enter the intensifying stage. We share more intimate and/or personal information about ourselves with that person. Conversations become more serious, and our interactions are more meaningful. At this stage, you might stop saying “I” and say “we.” So, in the past, you might have

said to your partner, “I am having a night out with my friends.” It changes to “we are going out with my friends tonight.” We are becoming more serious about the relationship.

Integrating

The integrating stage is where two people truly become a couple. Before they might have been dating or enjoying each other’s company, but in this stage, they are letting people know that they are exclusively dating each other. The expectations in the relationship are higher than they were before. Your knowledge of your partner has increased. The amount of time that you spend with each other is greater.

Bonding

The next stage is the bonding stage, where you reveal to the world that your relationship to each other now exists. It might be as simple as a Facebook post. For others, the bonding stage is where they get engaged and have an engagement announcement. For those that are very committed to the relationship, they might decide to have a wedding and get married. In every case, they are making their relationship a public announcement. They want others to know that their relationship is real.

Coming Apart

Some couples can stay in committed and wonderful relationships. However, there are some couples for whom, after bonding, things seem to fall apart. No matter how hard they try to stay together, there is tension and disagreement. These couples go through a coming apart process that involves: differentiating, circumscribing, stagnating, avoiding, and terminating.

Differentiating

The differentiating stage is where both people are trying to figure out their own identities. Thus, instead of trying to say “we,” the partners will question “how am I different?” In this stage, differences are emphasized and similarities are overlooked.

As the partners differentiate themselves from each other, they tend to engage in more disagreements. The couples will tend to change their pronoun use from “our kitchen” becomes “my kitchen” or “our child” becomes “my child,” depending on what they want to emphasize.

Initially, in the relationship, we tend to focus on what we have in common with each other. After we have bonded, we are trying to deal with balancing our independence from the other person. If this cannot be resolved, then tensions will emerge, and it usually signals that your relationship is coming apart.

Circumscribing

The **circumscribing** stage is where the partners tend to limit their interactions with each other. Communication will lessen in quality and quantity. Partners try to figure out what they can and can’t talk about with each other so that they will not argue.

Partners might not spend as much time with each other at this stage. There are fewer physical displays of affection, as well. Intimacy decreases between the partners. The partners no longer desire to be with each other and only communicate when they have to.

Stagnating

The next stage is **stagnating**, which means the relationship is not improving or growing. The relationship is motionless or stagnating. Partners do not try to communicate with each other. When communication does occur, it is usually restrained and often awkward. The partners live with each other physically but not emotionally. They tend to distance themselves from the other person. Their enthusiasm for the relationship is gone. What used to be fun and exciting for the couple is now a chore.

Avoiding

The **avoiding** stage is where both people avoid each other altogether. They would rather stay away from each other than communicate. At this stage, the partners do not want to see each other or speak to each other. Sometimes, the partners will think that they don’t want to be in the relationship any longer.

Terminating

The **terminating** stage is where the parties decide to end or terminate the relationship. It is never easy to end a relationship. A variety of factors can determine whether to cease or continue the relationship. Time is a factor. Couples have to decide to end it gradually or quickly. Couples also have to determine what happens after the termination of the relationship. Besides, partners have to choose how they want to end the relationship. For instance, some people end the relationship via electronic means (e.g., text message, email, Facebook posting) or via face-to-face.

Final Thoughts on Coming Together

Not every relationship will go through each of the ten stages. Several relationships do not go past the experimenting stage. Some remain happy at the intensifying or bonding stage. When both people agree that their relationship is satisfying and each person has their needs met, then stabilization occurs. Some relationships go out of order as well. For instance, in some arranged marriages, the bonding occurs first, and then the couple goes through various phases. Some people jump from one stage into another. When partners disagree about what is optimal stabilization, then disagreements and tensions will occur.

In today's world, romantic relationships can take on a variety of different meanings and expectations. For instance, "hooking up" or having "friends with benefits" are terms that people might use to describe the status of their relationship. Many people might engage in a variety of relationships but not necessarily get married. We know that relationships vary from couple to couple. No matter what the relationship type, couples decided to come together or come apart.

Relationship Maintenance

You may have heard that relationships are hard work. Relationships need maintenance and care. Just like your body needs food and your car needs gasoline to run, your relationships need attention as well. When people are in a relationship with each other, what makes a difference to keep people together is how they feel when they are with each other. Maintenance can make a relationship more satisfying and successful.

Daniel Canary and Laura Stafford stated that "most people desire long-term, stable, and satisfying relationships."[11] To keep a satisfying relationship, individuals must utilize relationship maintenance behaviors. They believed that if individuals do not maintain their relationships, the relationships will weaken and/or end. "It is naïve to assume that relationships simply stay together until they fall apart or that they happen to stay together." [12]

Joe Ayres studied how individuals maintain their interpersonal relationships.[13] Through factor analysis, he identified three types of strategies. First, *avoidance strategies* are used to evade communication that might threaten the relationship. Second, *balance strategies* are used to maintain equality in the relationship so that partners do not feel underbenefited or overbenefited from being in the relationship. Third, *direct strategies* are used to evaluate and remind the partner of relationship objectives. It is worth noting that Joe Ayers found that relationship intent had a major influence on the perceptions of the relationship partners. If partners wanted to stay together, they would make more of an effort to employ maintenance strategies than deterioration strategies.

Laura Stafford and Daniel Canary (1991) found five key relationship maintenance behaviors (Figure 1). First, positivity is a relational maintenance factor used by communicating with their partners in a happy and supportive manner. Second, openness occurs when partners focus their communication on the relationship. Third, assurances are words that emphasize the partners' commitment to the duration of the relationship. Fourth, networking is communicating with family and friends. Lastly, sharing tasks is doing work or household tasks. Later, Canary and his colleagues found two more relationship maintenance behaviors: conflict management and advice.[14]

Additionally, Canary and Stafford also posited four propositions that serve as a conceptual framework for relationship maintenance research.[15] The first proposition is that relationships will worsen if they are not maintained. The second proposition is that both partners must feel that there are equal benefits and sacrifices in the relationship for it to sustain. The third proposition states that maintenance behaviors depend on the type of relationship. The fourth proposition is that relationship maintenance behaviors can be used alone or as a mixture to affect perceptions of the relationship. Overall, these propositions illustrate the importance and effect that relationship maintenance behaviors can have on relationships.

Relationship maintenance is the stabilization point between relationship initiation and potential relationship destruction.[16] There are two elements to relationship maintenance. First, strategic plans are intentional behaviors and actions used to maintain the

relationship. Second, everyday interactions help to sustain the relationship. Talk is the most important element in relationship maintenance.[17]

Mindfulness Activity

Learning how to use mindfulness in our interpersonal relationships is one way to ensure healthy relationships. Lauren Korshak recommends using the RAIN method when interacting with one's relational partners:

- Recognize: Nonjudgmentally recognize and name emotions you feel in the present moment.
- Allow: Acknowledge, accept, and allow your emotions to be as they are without trying to change them. Allowing does not mean you like what is happening, but that you allow it, dislike and all.
- Investigate with kindness: Ask yourself, "What am I experiencing inside my body? What is calling my attention? What does this feeling need from me?"
- Non-identification/nurture with self-compassion: Observe thoughts, feelings, and sensations without attaching to them. If you notice painful feelings, nurture them by placing a hand over your heart or speaking words of kindness, reassurance, and compassion, such as "I see you're suffering," or "I'm sorry," or "I love you, I'm listening."[18]

For this activity, we want you to use the RAIN method in a conversation with your romantic partner. As an alternative variant, both of you can engage in the RAIN method and discuss a recent conflict you had. The goal is not to establish fault or a win-lose attitude, but rather to learn to empathize with your partner and their perspective.

Key Takeaways

- The coming together stages include: initiating, experimenting, intensifying, integrating, and bonding
- The coming apart stages include: differentiating, circumscribing, stagnating, avoiding, and terminating.
- Relationship maintenance strategies include positivity, openness, assurances, sharing tasks, conflict management, social networks, and advice.

Exercises

- Find video clips online that illustrate each of the coming together/coming apart stages. Show them to your class. Do you agree/disagree?
- Do a self-analysis of a relationship that you have been involved with or have witnessed. How did the two people come together and come apart? Did they go through all the stages? Why/why not?
- Write down an example of each of the relationship maintenance strategies. Then, rank order in terms of importance to you. Why did you rank them the way that you did? Find a peer and compare your answers.

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6.2.4: Communication in Relationships

Learning Outcomes

- Learn how communication varies.
- Analyze relationship dialectics.
- Understand self-disclosure in relationships.

Relationship Dialectics

We know that all relationships go through change. The changes in a relationship are usually dependent on communication. When a relationship starts, there is a lot of positive and ample communication between the parties. However, sometimes couples go through a redundant problem, and it is important to learn how to deal with this problem. Partners can't always know what their significant other desires or needs from them

Dialectics had been a concept known well to many scholars for many years. They are simply the pushes and pulls that can be found every day in relationships of all types. Conversation involves people who must learn to adapt to each other while still maintaining their individuality.[19] The theory emphasizes interactions allowing for more flexibility to explain how couples maintain a satisfactory, cohesive union. This perspective views relationships as simply managing the tensions that arise because they cannot be fully resolved. The management of the tensions is usually based on past experiences; what worked for a person in the past will be what they decide to use in the future. These tensions are both contradictory and interdependent because without one, the other is not understood. Leslie A. Baxter, the scholar who developed this theory, pulled from as many outside sources as she could to better understand the phenomenon of dialectical tensions within relationships. The development began by closely studying the works of Mikhail Bakhtin, who was a Russian scholar of culture, literature, philosophy, and language. Baxter was interested in his life's work; the theory often was referred to as dialogism. Bakhtin argued that life is a social process of dialogue that is characterized by the concurrent coming together and separating of individual perspectives.

Early in Baxter's career, she noticed that while she was interested in the termination of relationships, her colleagues were interested in the beginnings. Although her colleagues were interested in disclosure, she was interested in non-disclosure. At this point, it still had not occurred to her that these opposing. interests in research would lead her to the understanding of dialectical tensions. She continued to research these subjects and read as much as she could on Marxist and Hegelian dialectics as she found these writings to be both fascinating and frustrating. She processed these writings slowly, and the concepts slowly began to show up in her work. In 1993, Baxter and Montgomery began writing a book on dialectics called *Relating: Dialogues and Dialectics*. This was her first official work done on dialectics and its conversational effects. She continued writing about dialectics and continued to expand the concepts as she further researched families, romantic relationships, and friendships. Since then, Baxter has continually changed and shifted her studies to find new and better ways to use the theory. After conducting a series of in-depth interviews, both Baxter and Montgomery began to see themes in the tensions experienced in romantic relationships. Their overarching research premise (which is applicable to all relationships, including mother/daughter relationships) is that all personal ties and relationships are always in a state of constant flux and contradiction. Relational dialectics highlight a "dynamic knot of contradictions in personal relationships; an unceasing interplay between contrary or opposing tendencies."[20] The concept of contradiction is crucial to understanding relational dialectics. The contradiction is when there are opposing sides to a situation. These contradictions tend to arise when both parties are considered interdependent. Dialectical tension is natural and inevitable. All relationships are complex because human beings are complex, and this fact is reflected in our communicative processes. Baxter and Montgomery argue that tension arises because we are drawn to the antitheses of opposing sides. These contradictions must be met with a "both/and" approach as opposed to the "either/ or" mindset. However, the "both/and" approach lends to tension and pressure, which almost always guarantees that relationships are not easy.

Dialectical tension is how individuals deal with struggles in their relationship. There are opposing forces or struggles that couples have to deal with. It is based on Leslie Baxter and Barbara Montgomery's Relational Dialectics Theory in 1996. Below are some different relational dialectics.[21]

Separation-Integration

This is where partners seek involvement but are not willing to sacrifice their entire identity. For instance, in a marriage, some women struggle with taking their partner's last name, keeping their maiden name or combining the two. Often when partners were single, they might have engaged in a girl's night out or a guy's night out. When in a committed relationship, one partner might feel left out and want to be more involved. Thus, struggles and conflict occur until the couple can figure out a way to deal with this issue.

Predictability–Novelty

This deals with rituals/routines compared to novelty. For instance, for some mothers, it is tough to accept that their child is an adult. They want their child to grow up, at the same time it is difficult to recognize how their child has grown up.

Openness–Closedness

Disclosure is necessary, but there is a need for privacy. For some couples, diaries work to keep things private. Yet, there are times when their partner needs to know what can't be expressed directly through words.

Similarity-Difference

This tension deals with self vs. others. Some couples are very similar in their thinking and beliefs. This is good because it makes communication easier and conflict resolution smoother. Yet, if partners are too similar, then they cannot grow. Differences can help couples mature and create stimulation.

Ideal-Real

Couples will perceive some things as good and some things as bad. Their perceptions of what is real may interfere with or inhibit perceptions of what is real. For instance, a couple may think that their relationship is perfect. But from an outsider, they might think that the relationship is abusive and devastating.

Another example might be that a young dating couple thinks that they do not have to marry each other because it is the ideal and accepted view of taking the relationship to the next phase. Thus, the couples move in together and raise a family without being married. They have deviated from what is an ideal normative cultural script.[22]

Every relationship is fraught with these dialectical tensions. There's no way around them. However, there are different ways of managing dialectical tensions:

- Denial is where we respond to one end. • Disorientation is where we feel overwhelmed. We fight, freeze, or leave. • Alternation is where we choose one end on different occasions. • Recalibration is reframing the situation or perspective. • Segmentation is where we compartmentalize different areas. • Balance is where we manage and compromise our needs. • Integration is blending different perspectives. • Reaffirmation is having the knowledge & accepting our differences.

Not every couple deals with dialectical tensions in the same way. Some will use a certain strategy during specific situations, and others will use the same strategy every time there is tension. You have to decide what is best for you based on the situation.

Self-Disclosure

In Chapter 7, we started our discussion of self-disclosure. We discussed Sidney Jourard's basic definition of self-disclosure, "the act of making yourself manifest, showing yourself so others can perceive you."[23] Jourard believed that self-disclosure was necessary to have good mental health. All in all, Jourard took a very humanistic or health approach to self-disclosure because he deemed that it was an essential and integral part of our wellbeing.

Individuals disclose for a variety of reasons. Sandra Petronio has presented five potential reasons for self-disclosure: (a) expression, (b) self-clarification, (c) social value, (d) relationship development, and (e) social control and influence.[24] Petronio explained, "for each type of disclosure, there is a corresponding expectation communicated that influences the choice of response."[25]

Four considerations are pertinent to disclosure.[26] First, the type of relationship will affect individuals' need to disclose. The more significant the disclose is to the discloser, then the greater the need more to disclose information. Second, the disclosure has a risk-to-benefits ratio. In other words, individuals who disclose certain types of information, may risk losing certain things (i.e., career or pride) or may benefit certain things (i.e., trust or security). Third, the appropriateness and relevance to the situation impacts what

gets disclosed and what does not get disclosed. Fourth, disclosure depends on reciprocity. Individuals will disclose similar amounts of information to each other.

The amount of disclosure that we are willing to share with others also depends on other factors. It is based on honesty, depth, availability of information, and the environment.

First, when we disclose to others, we can truly reveal characteristics about ourselves, or we can lie. In a recent study, it was found that most college students lie when initially meeting someone new for the first time. The cause is because we want to impress others. A lot of deception occurs in online chatrooms because sometimes people do not want to reveal who they really are, because of possible repercussions.

Depth is another factor of self-disclosure. When I talk to my parents, I can share hours of information about my day with them. I can talk about all sorts of things with them. However, I have a friend who is only willing to talk about the weather and what he ate with his parents. As you can see, the depth of information is very different. One person only talks about superficial facts, and the other person delves a lot deeper and is willing to discuss more themselves.

The availability of information has an impact as well. For instance, if you have more information on a certain topic, you might be willing to share more comments on the matter. For instance, say you and your friends are trying to decide which presidential candidate to support in the next election. You might be more willing to self-disclose what you know about a candidate and your opinions about that candidate based on your information. However, you might be less willing to comment on another candidate if you don't know their platform or background.

The context or environment also has an impact on self-disclosure. For instance, have you ever noticed that people tend to open up about themselves when they are in a confined space, such as an airplane? It is so interesting to see how people are willing to share personal information about themselves with a total stranger only because the other person is doing it as well.

Alternatives to Self-Disclosure

So, if you don't want to self-disclose to others, what are some techniques that you can use? First, you can use deception. Sometimes people lie simply to avoid conflict. This is true in cases where the person may become extremely upset. They can lie to gain power or to save face. They can also lie to guide the interaction.

Second, you can equivocate. This means you don't answer the question or provide your comments. Rather, you simply restated what they said differently. For instance, Sally says, "how do you like my new dress?", you can say "Wow! That's a new outfit!" In this case, you don't provide how you feel, and you don't disclose your opinion. You only offer the information that has been provided to you.

Third, you can hint. Perhaps, you don't want to lie or equivocate to someone you care about. You might use indirect or face-saving comments. For example, if your roommate has not helped you clean your apartment, you might say things like, "It sure is messy in here" or "This place could really use some cleaning."

Key Takeaways

- Communication is personalized. It can be symmetrical or complementary. Communication has two levels – content and relational.
- Relationship dialectics are tensions that happen in a relationship. Partners have to deal with integration vs. separation, stability vs change, and expression vs. privacy.
- Self-disclosure is important in relationships because it allows you to share more information about yourself with another person.

Exercises

- Find a transcript of your favorite television sitcom on the Internet. See if you can identify which types of communication is relational/content and which are symmetrical/complementary.

- Consider three different issues that you might be dealing in a relationship that you have with another person. What are the relationship dialectic tensions? How are you handling these tensions? Identify what strategy you are using to deal with this tension. Why?
- Create a list of all the reasons you would disclose and why you would not disclose. Discuss the finding in class. Were there differences or similarities?

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6.2.5: Dating Relationships

Learning Outcomes

- Define the term “date” and the supracategories associated with the term.
- Describe the importance of scripts in dating relationships.
- Differentiate among the five types of love.

We talk of dating as a single construct a lot of the time without really thinking through how dating has changed over time. In the 20th Century alone, we saw dating go from a highly formalized structure involving calling cards and sitting rooms; to drive-in movies in the back seat of a car; to cyberdating with people we’ve never met.[27] The 21st Century has already changed how people date through social networking sites and geolocation dating apps on smartphones. Dating is not a single thing, and dating has definitely changed with the times.

So, with all of this change, how does one even begin to know if someone’s on a date in the first place? Thankfully Paul Mongeau, Janet Jacobsen, and Carolyn Donnerstein have attempted to answer this question for us.[28] The researchers found that there are five of what they called “supracategories” that help define the term “date”: communication expectations, date goals, date elements, dyadic, and feelings. First, dating involves specific communication expectations. For example, people expect that there will be a certain level of self-disclosure on a date. Furthermore, people expect that their dating partner will be polite, relaxed, and social. Second, dating involves specific date goals, or people on dates have specific goals (e.g., future romantic relationships, reduce uncertainty, have fun). Third, there are specific date elements. For example, someone has to initiate the date; we get ready for a date, we know when the date has started and stopped, there are activities that constitute the date, etc. Fourth, dates are dyadic, or dating is a couple-based activity. Now, this doesn’t necessarily take into account the idea of “group dates,” but even on a group date traditionally there are dyadic couples that are involved in the date itself. Lastly, dates involve feelings. “These feelings range from affection (nonromantic feelings or behaviors), attraction (physical and/or emotional attraction toward the partner), to romantic (dates have romantic overtones).”[29]

Dating Scripts

All of us are going to spend a portion of our lives in some kind of dating relationship. Whether we are initiating dates, dating, or terminating relationships, we spend a great deal of time dating. Match.com publishes an annual study examining singles in the United States (https://www.singlesinamerica.com/). According to data from 2018,[30] here are some of the realities of modern single life:

- 55.8% did not go on any first dates, while only 12.6% went on one first date.
- Of those who went on a first date, 20.3% met the person on an online dating site/app while 15.6% met the person through a friend.
- When it comes to being passionately in love, 19.4% have never been in love, 27.3% have been in love once, and 27.7% have been in love twice.
- 25.1% have a “checklist” when it comes to finding a long-term romantic partner.
- 66.7% believe that loving someone is hard work.
- 75.2% believe that love is a possibility for them.
- 83.5% believe that love is hard to find in today’s world.
- 32.4% of dating partners have disagreed on how to label their relationship, and 23.0% have left a relationship over this disagreement.
- When it comes to first dates, participants preferred either quick and easy (36.0%, e.g., coffee, drinks) or more formal (21%, e.g., dinner, brunch).
- 38.1% had been in a “friends with benefits” relationship.
- 28.3% had a friendship that turned into a significant romantic relationship.
- 41.1% have dated someone they met online.
- 48.9% had created at least one profile on a dating website or app.

Admittedly, this study is probably pretty heterosexist because the data were not broken down by sexual orientation. Furthermore, we don't have similar data for bisexual, gay, and lesbian couples. Dating is one of those things we will spend a lot of time doing before we ever settle down and get married (assuming you ever do or have a desire to do so). So, one must imagine that with so much dating going on in the world, we'd have a pretty good grasp of how dating works.

Robert Abelson originally proposed the idea of script theory back in the late 1970s.[31] He defined a script as a "coherent sequence of events expected by the individual, involving him as either a participant or an observer."[32] According to script theory, people tend to pattern their responses and behaviors during different social interactions to take control of that situation. This does require an individual to be able to imagine their past, present, and future behavior to create this script.[33] In 1993, Suzanna Rose and Irene Frieze applied Abelson's notions of script theory to dating. They had college students keep records of what they did on a date. Ultimately, two different scripts were derived: one for men and one for women. The male script consisted of 15 different behavioral actions (all initiated by the male):[34]

1. Picked up date
2. Met parents/roommates
3. Left
4. Picked up friends
5. Confirmed plans
6. Talked, joked, laughed
7. Went to movies, show, party
8. Ate
9. Drank alcohol
10. Initiated sexual contact
11. Made out
12. Took date home
13. Asked for another date
14. Kissed goodnight
15. Went home

Women's scripts, on the other hand, contained both behavioral actions for themselves and behavioral actions they expected of the man during the date: [35]

1. Groomed and dressed
2. Was nervous
3. Picked up date (male)
4. Introduced to parents, etc.
5. Courtly behavior (open doors–male)
6. Left
7. Confirmed plans
8. Got to know & evaluate date
9. Talked, joked, laughed
10. Enjoyed date
11. Went to movies, show, party
12. Ate
13. Drank alcohol
14. Talked to friends
15. Had something go wrong
16. Took date home (male)
17. Asked for another date (male)
18. Told date will call her (male)
19. Kissed date goodnight (male)

Take a second and go through these two lists. Do you think they still apply today? How do you think these scripts differ? Once again, these dating scripts were created only using heterosexual college students. Do you think these scripts change if you have people dating in their late 20s or 30s? What about people who date in their 70s, 80s, or 90s?

There has been subsequent research in the area of dating scripts. Table 1 demonstrates some of the other dating scripts that researchers have found (this is not an exhaustive list).

Table 1: Dating Scripts

First Date[36]	Gay Men[37]	Lesbians[38]	Deaf College Students[39]

• Get ready
• Pick up date (M)
• Feel nervous
• Go to movie
• Pay (M)
• Talk
• Hold hands
• Go to café/party
• Nonverbal closeness
• Talk
• Drink alcohol
• Touch/hug
• Deep conversation
• Mingle with others
• Talk
• Leave party
• Invite the other in
• Walk/drive home (M)
• Polite leave-taking
• Kiss
• Future Plans
• Part for the night (M)
	• Discussed plans
	• Was nervous
	• Groomed/dressed
	• Went to date's house/picked up date
	• Met at a pre-arranged location
	• Left on location for another
	• Got to know/evaluate date
	• Talked/laughed/joked
	• Talked to friends while on date
	• Went to a movie, show, etc.
	• Ate/drank non-alcohol
	• Drank alcohol/used drugs
	• Initiated physical contact
	• Made out
	• Had sex
	• Stayed over
	• Made plans for another date
	• Went home
		• Discussed plans
		• Was nervous
		• Groomed/dressed
		• Prepared (cleaned apt., bought flowers, etc.)
		• Went to date's house/picked up date
		• Left
		• Got to know/evaluated date
		• Talked/laughed/joked
		• Went to a movie, show, etc.
		• Ate/drank non-alcohol
		• Positive affect
		• Drank alcohol/used drugs
		• Initiated physical contact
		• Kissed/hugged goodnight
		• Took date home
		• Went home
		• Evaluated feelings post-date
			• Initiation/meeting
			  ◦ Talk
			  ◦ Shared interest
			  ◦ Family and friends
			  ◦ Meet in public
			• Date activities
			  ◦ Group activities
			  ◦ Dinner
			  ◦ Movie
			• Outcomes/conclusions
			  ◦ Good night kiss
			  ◦ Take date home
			  ◦ Hug
			  ◦ Relationship development

We often think of dating as something that occurs purely among young people before they get married, but we know people in all age groups date and are looking for romantic relationships of all shapes and sizes.

One other facet of script theory that is very important to consider is how we learn these scripts in the first place. As you read through both the male and female dating script, did you consciously think about how you learned to date? Of course not! However, we've been conditioned since we were very young to date. We've listened to adults tell stories of dating. We've watched dating as it is fictionalized on television and in movies. Dating narratives surround us, and all of these narratives help create the dating scripts that we have. Although dating may feel like you're making it up as you go along, you already possess a treasure trove of information about how dating works. Thankfully, because we have these cultural images of dating presented to us, we also know that our dating partner (as long as they are from a similar culture) will have similar dating scripts.

Research Spotlight



One area that has received a decent amount of attention in script theory is sexual scripts, or scripts people engage in when thinking about "who can participate, what the participants should do (i.e., what verbal and nonverbal behaviors should be included and in what order they should be used), and where the sexual episode should take place."[40] In 1993, Timothy Edgar and Mary Anne Fitzpatrick proposed a sexual script theory for communication.[41] In 2010, this script was further evaluated by Betty La France. In La France's study, she wanted to examine the verbal and nonverbal communication behaviors that lead to sex. Starting with Edgar and Fitzpatrick's sexual scripts, La France narrowed the list down to the following:

Public Setting Script	Private Setting Script (Her Apartment)
Craig was standing at the bar when he noticed Sarah. She also noticed him. There was eye contact between them. She glanced away. He approached her. “Hi, my name is Craig,” he said. “I’m Sarah. How are you doing?,” she replied. “Can I buy you a drink?,” he asked. Craig asked, “Are you alone?” “No, I came with some friends,” she replied. Craig asked her questions about herself, such as where she was from and what her major was. She responded to his questions. In return, Sarah asked Craig similar questions about himself.	She brought him a drink. “Want to listen to some music?,” asked Sarah. She put on the music. Craig asked, “Are your roommates around?” “This is a great apartment,” said Craig. He sat next to her on the couch. They engaged in casual conversation. There was eye contact between them. He moved closer to her. “You are so beautiful,” said Craig. He put his arm around her. *Bedroom setting* He undressed her. Craig started to undress himself. Sarah helped him to undress. They discussed whether they should use protection. Craig put on a condom.

As for the results of this study, La France found that people predicted that as the sexual scripts progressed, the likelihood that Sarah and Craig were going to have sexual intercourse increased. Overall, La France found that the sequence of both verbal and nonverbal sexual behaviors could predict the likelihood that people believed that Sarah and Craig would have sex. For example, in the public setting script, when Sarah says, “No, I came with some friends,” this caused people to think that sex could be off-the-table because the statement indicates that the likelihood of the two leaving alone is less likely.

La France, B. (2010). What verbal and nonverbal communication cues lead to sex? An analysis of the traditional sexual script. *Communication Quarterly*, 58(3), 297–318. https://doi.org/10.1080/01463373.2010.503161

Love Styles

An individual’s love style is considered to be an attitude and describes how love is perceived.[42] Attitudes toward love and perceptions of love may change throughout an individual’s life. College students may perceive love very differently from their parents or guardians because college students are in a very different stage of life. College students are living among people their age who are more than likely single or unmarried. These two factors mean that there are more prospects for dating, and this may lead the college student to conclude that dating any number of these prospects is necessary or even perceive that “hooking up” with multiple prospects is acceptable. In contrast, individuals with children who are financially tied may view romantic relationships as partnerships in which goal achievement (pay off the house, send kids to college, pay off debt, etc.) is as important as romance. These differences in perceptions of love can be explored through John Lee’s love typology in which he discusses six love styles: eros, storge, ludus, agape, pragma, and mania (Figure 8.5.1).[43]

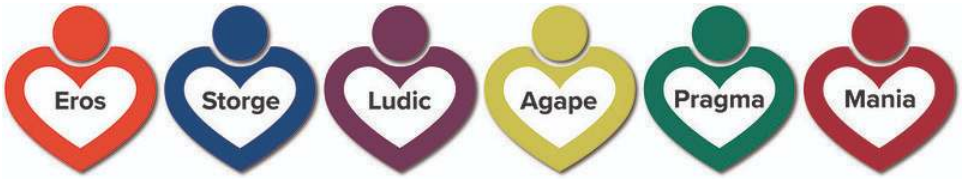


Figure 1: Love Styles

Eros

Eros is romance and emphasizes love and physical beauty, immediate attraction, emotional intensity, and strong commitment. Eros love involves the early initiation of sexual intimacy and consecutive monogamous relationships.

Storge

Storge love develops slowly out of friendship where stability and psychological closeness are valued along with commitment, which leads to enduring love. Passion and intense emotions are not valued as they are in the eros love style. One of the author's uncles was in his 60s and had never been married. However, he employed a woman who cooked and cleaned for him for over 20 years. His family was very surprised to receive an announcement that he was marrying the individual who took care of him for so long. The formation of their love is a great example of love that arises slowly out of friendship.

Ludic

Ludic lovers view love as a game, and playing this game with multiple partners is perceived to be acceptable by individuals with this love style. As such, this type of lover believes that deception and manipulation are acceptable. Individuals with this love style have a low tolerance for commitment, jealousy, and strong emotional attachment.

Agape

In contrast, **agape** love involves altruism, giving, and other-centered love. This love style approaches relationships in a non-demanding style with gentle caring and tolerance for others.

Pragma

Pragma love is known as practical love involving logic and reason. Arranged marriages were often arranged for functional purposes. Kings and Queens of different countries often married to form alliances. This love style may seek out a romantic partner for financial stability, ability to parent, or simple companionship.

Mania

Mania is the final love style characterized by dependence, uncertainty, jealousy, and emotional upheaval. This type of love is insecure and needs constant reassurance.

These love styles should not be considered to be mutually independent. An individual may approach love from a pragmatic stance and have found love that provides financial stability. However, they still feel insecure (representative of mania) about whether their romantic partner will remain with them, thus ensuring continued financial stability. It is important to remember that individuals engage in each of these love styles, and it is simply a matter of how much of each love style a person possesses.

Research Spotlight



In 2015, Alexander Khaddouma, Kristina Coop Gordon, and Jennifer Bolden set out to examine the relationship between mindfulness and relational satisfaction in dating relationships. The researchers predicted that mindfulness would lead to a greater sense of differentiation of self, which would then lead to greater relationship satisfaction. Differentiation of self has two basic components:

1. On an intrapsychic level, differentiation of self refers to an individual's ability to distinguish between thoughts and feelings and purposefully choose one's responses to these thoughts and feelings in present situations.
2. On an interpersonal level, differentiation of self refers to an individual's ability to balance intimacy and autonomy in relations with others.[44]

The concept of differentiation of self stems out of a body of research called family systems theory, which we'll discuss in more detail in Chapter 11. For now, it's important to understand that highly differentiated people have healthier levels of personal autonomy in their interpersonal relationships. Conversely, "less differentiated individuals are considered to be more automatically and emotionally reactive in stressful situations and have difficulty maintaining a stable, autonomous sense of self in close relationships." [45]

In this study, the researchers found that mindfulness led to greater differentiation of self, which in turn, led to greater overall relationship satisfaction.

Khaddouma, A., Gordon, K. C., & Bolden, J. (2015). Zen and the art of dating: Mindfulness, differentiation of self, and satisfaction in dating relationships. Couple and Family Psychology: Research and Practice, 4(1), 1-13. https://doi.org/10.1037/cfp0000035

Key Takeaways

- Mongeau, Jacobsen, and Donnerstein defined the term “dating” by identifying a series of “supracategories” that help define the term: communication expectations, date goals, date elements, dyadic, and feelings.
- The idea of script theory was originally proposed by Abelson who defined the concept of scripts as sequences of events expected by a participant or an observer. Dating scripts, therefore, are patterns of behavior that are expected during a “date.”
- There are six different love styles. Eros is romance and emphasizes love and physical beauty, immediate attraction, emotional intensity, and strong commitment. Second, storge love develops slowly out of friendship where stability and psychological closeness are valued along with commitment, which leads to enduring love. Third, ludic lovers view love as a game, and playing this game with multiple partners is perceived to be acceptable by individuals with this love style. Fourth, agape love involves altruism, giving, and other-centered love. Fifth, pragma love is known as practical love involving logic and reason. Lastly, mania love is characterized by dependence, uncertainty, jealousy, and emotional upheaval.

Exercises

- Compare a current or past romantic relationship to the definition of romantic relationships provided in this chapter. What are the similarities and differences in your romantic relationship?
- List the physical features you find attractive. List the personality factors you find attractive. Would you have a romantic relationship with someone who possessed the personality characteristics you find attractive, but not the physical characteristics? Why or why not? Now, consider whether you would have a romantic relationship with someone physically attractive, but who did not possess the personality characteristics you find attractive. Would you have a romantic relationship with this individual? Why or why not?
- List and define each love style. List the love style of each of your parents and grandparents. Explain how your love style developed and whether it was learned from a family member or innate.

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6.2.6: How Gender Affects Relationships

Learning Outcomes

- Discern the difference between sex and gender.
- Understand the sex and gender differences in communication.
- Discover ways to improve communication.

Biological Sex vs. Gender

Sex refers to one's biological status as male or female, as determined by chromosomes and secondary sex characteristics. **Gender**, however, refers to the behaviors and traits society considers masculine and feminine.[46] Shuhbra Gaur stated "the meaning of gender, according to her, depends on the ways a culture defines femininity and masculinity which lead to expectations about how individual women and men should act and communicate; and how individuals communicate establishes meanings of gender that in turn, influence cultural views."[47] That being said, you can have a female that has a masculine gender and, conversely, a male that has a feminine gender. Gender is all about how society has taught one to perceive the surrounding environment. The different traits that an individual displays is how one interprets gender, while other traits depict how an individual was raised and developed. Heidi Reeder noted that "In Western culture the stereotypically masculine traits include aggressiveness, independence and task orientation. Stereotypically feminine traits include being helpful, warm and sincere."[48] Sex is predetermined, and in most cases, it cannot be changed, but gender, on the other hand, is fluid and can vary in many different ways.

Gender is formed at a young age and then reinforced for the remainder of a lifetime. That does not mean that gender cannot be changed; it just means that one would be going against what gender society deems an individual should be. Gender comes from communication from influential figures in a person's life. Gender plays a major role in perceived closeness and disclosure.[49]

When we talk about gender, we are not considering what the person is born physically. Rather, we consider what the person feels psychologically. Sandra Bem (1974) was interested in gender roles. She created a Bem Sex Role Inventory (BSRI). Based on her findings, she was able to categorized four types of genders: **feminine**, **masculine**, **androgynous** (a combination of both feminine and masculine traits), and **undifferentiated** (neither masculine or feminine).[50] When you combine sex and gender together, you can have eight different combinations: masculine males, feminine males, androgynous males, undifferentiated males, masculine females, feminine females, androgynous females, undifferentiated females.51 Most people will perceive themselves as sex-typed or androgynous, rather than undifferentiated.

Bem's work in gender has been eye-opening. She contended that there are three main gender perspectives in Western culture. First, males and females are psychologically different. Second, males are considered more dominating than females. Third, the differences between males and females are natural. If we can understand these basic differences, then we can communicate and function better.

Gender Differences in Interpersonal Communication

Each of the gender types will communicate differently. Feminine females will perceive interpersonal relationships as possibilities to nurture, to articulate their emotions and feelings. Whereas, masculine males will view interpersonal relationships as competition and the potential for gaining something. Androgynous male and androgynous females do not differ much in terms of their perceptions of interpersonal relationships. However, androgynous males and females, as well as feminine females are likely to sympathize with others more than masculine males.[52]

Sex Differences in Interpersonal Communication

In the United States, we have expectations for how males and females should communicate and behave.[53] We learn sex differences at a very young age. Boys and girls play, perform, dress, and respond to things very differently. Girls are taught that it is okay to cry in public, but boys are taught to "be a man." It is acceptable for boys to pretend to play guns and for girls to pretend to play being mothers. Males are conditioned to have **instrumental** roles, which are task-oriented responsibilities. Females are condition to have **expressive** roles, which are focused on helping and nurturing others, which are relationship-oriented roles.

Improving Communication Skills

Many popular guides to enhancing communication skills place particular emphasis on exploring your own needs, desires, and motives in the relationship. Some of the goals you have in a relationship may be subconscious. By becoming more aware of these goals, and what you want to achieve in a relationship, you can identify areas of the relationship that you would like to improve and generate ideas for making these changes.

Because people in relationships are interconnected and interdependent, it takes people willing to be open about their needs and relationship goals and willing to work on improving communication and, hence, the relationship in general.

As discussed previously, clear communication is necessary to give and receive information. Words have multiple denotations and connotations, and word choice is critical when you communicate about areas of your relationship that are not satisfying. Asking for and providing clarification and sending explicit messages, obtaining feedback to be sure that you are understood, and listening carefully to the feedback are all important components in effective communication. Finally, when you communicate, remember that everyone wants to be heard, to feel valued, to know that they matter, and to be assured that their ideas are important.

Key Takeaways

- Sex is biological, and gender is psychological.
- Males tend to communicate instrumentally, and females tend to communicate expressively.
- By becoming more aware of your goals and open to talk about the other person's needs, you can improve your communication.

Exercises

- As a class, ask everyone to write down all the characteristics of males and females. Then, ask one person to write each word on a post-it note. Then, on the board in front of the class divide it into two sections: males and females. Each student will get the opportunity to put the words into the male or female section. Have a discussion to see if you all agree.
- Ask all the males to step out of the classroom and ask all the females to stay in the classroom. Each group will come up with ten questions that they always wanted to know about the opposite sex. For instance, why do girls open their mouths when putting on mascara? Or why do boys recall sports information so well? Come back into the classroom together and designate a spokesperson for each side. Males will ask their questions to the females, and females will ask their questions to the males. Each side will get to respond as a group. Why did you answer the way you did? Are there truly differences between males and females?
- On a sheet of paper, divide into two parts and label one side as male and one side as female. Complete the sentence: Males are_____ and Females are _____. Write your words on your paper. Try to write down ten possible answers for females and males. As a class, compare what you wrote down.

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6.2.7: Chapter Wrap-Up

In this chapter, we've explored the range of issues related to building and maintaining relationships. We started by discussing the nature of relationships, which included a discussion of the characteristics of relationships and the importance of significant relationships. We then discussed the formation and dissolution of relationships. Then we explored the importance of communication in relationships. Lastly, we looked at dating relationships and ended by discussing gender and relationships. Hopefully, you can see that building and maintaining relationships takes a lot of work.

End of Chapter

Key Terms

- Agape
- Androgynous
- Attraction
- AvoidingBonding
- Circumscribing
- Comparison Level
- Comparison Level of Alternatives
- Compatible
- Complementary
- Contact Frequency
- Content Level
- Differentiating
- Duration
- Empathy
- Eros
- Experimenting
- Expressive
- Gender
- Goals
- Hedge
- Initiating
- Instrumental
- Integrating
- Intensifying
- Interaction Variability
- Interdependent
- Intimacy
- Love
- Love Style
- Ludus
- Mania
- Physical Attraction
- Platonic
- Pragma
- Relationship
- Relationship Dialectic
- Relationship Level
- Relationship Maintenance
- Romantic Relationships

- Self-Disclosure
- Sex
- Sharing
- Social Attraction
- Stagnating
- Storge
- Support
- Symmetrical Relationship
- Task Attraction
- Terminating

Real World Case Study

Bill and Hillary have been dating each other since they were first-year students in college. They know that they would like to possibly get married and start a family. Before graduation, Bill finds out that he got his dream job offer in another city. Hillary wants to stay in the same college town, where she grew up and her family lives. She does not want to move. In addition, she got a job offer in the same town that would be beneficial for her. In the long-term, Hillary thinks that Bill should give up his dream job and sacrifice it for love and their future together. Bills thinks she is being selfish. He thinks he could make enough money so that they could travel back to see her family often. He thinks she is being selfish for not thinking about his feelings and his dreams. Bill knows that he will never get another opportunity like this again. He also knows he will not find another woman like Hillary. Hillary loves Bill, but she also loves her family. She doesn't want a long-distance relationship with either of them. Hilary thinks that if they have their own family, it would be ideal to have other family members close to them.

1. What would you do if you were Hillary/Bill?
2. How do you determine the best decision?
3. What are some possible solutions, and what would be the best solution?
4. If they decide to get married, how do they determine when would be best and when to have kids?
5. What kind of topics do Bill and Hillary need to agree on first?

End of Chapter Quiz

1. Picking a seat in class near the person you'd like to get to know is an example of
   a. offering
   b. approaching
   c. networking
   d. self-disclosing
   e. sustaining
2. The fact that we are likely to pick a mate with whom we frequently cross paths is due to which reason for forming relationships?
   a. appearance
   b. proximity
   c. similarity
   d. reciprocity
   e. differences
3. After 20 years of marriage, Chad and Autumn are bored in their relationship. They know what the other person will do and say every day. This dialectical tension is:
   a. integration-separation
   b. expression -privacy
   c. stability–change
   d. altruistic-selfishness
   e. complementary-symmetrical

4. Aubrey loves to eat Asian food, but Gavin would rather just eat American food. The way the deal with their tensions is to say that they both love to eat food. The strategy they are most likely using is:
   a. denial
   b. recalibration
   c. integration
   d. balance
   e. reaffirmation
5. Anna, who is a counselor at a women's crisis center, says the reason she most often hears from battered wives for returning to their husbands is, "I don't have any other place to go." Which explanation of why people perform relationships best predicts this relationship?
   a. disclosure thesis that suggests we are attracted to those who use disclosure appropriately
   b. the reward thesis that suggests we are attracted to people we believe are can give us rewards
   c. the similarity thesis that suggests we like people whom we perceive are like us
   d. exchange theory that suggests we form relationships through assessment of potential rewards and costs
   e. the reciprocity thesis that suggests being liked by others is a strong source of attraction

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End of Chapter Quiz Answer Key

1. B
2. B
3. C
4. B
5. D





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SECTION OVERVIEW

6.3: Conflict in Relationships

Conflict is a normal and natural part of life. However, learning how to manage conflict in our interpersonal relationships is very important for long-term success in those relationships. This chapter is going to look at how conflict functions and provide several strategies for managing interpersonal conflict.

6.3.1: Understanding Conflict

6.3.2: Emotions and Feelings

6.3.3: Power and Influence

6.3.4: Conflict Management Strategies

6.3.5: Chapter Wrap-Up

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6.3.1: Understanding Conflict

Learning Outcomes

- Differentiate between the terms conflict, disagreement, and argument.
- Explain two perspectives about the existence of conflict.
- Define and explain the term “interpersonal conflict.”

For our purposes, it is necessary to differentiate a conflict from a disagreement.[1] A **disagreement** is a difference of opinion and often occurs during an **argument**, or a verbal exchange between two or more people who have differing opinions on a given subject or subjects. It’s important to realize that arguments are not conflicts, but if they become verbally aggressive, they can quickly turn into conflicts. One factor that ultimately can help determine if an argument will escalate into a conflict is an individual’s tolerance for disagreement. James McCroskey, along with his colleagues, initially defined **tolerance for disagreement** as whether an individual can openly discuss differing opinions without feeling personally attacked or confronted.[2,3] People that have a high tolerance for disagreement can easily discuss opinions with pretty much anyone and realize that arguing is perfectly normal and, for some, even entertaining. People that have a low tolerance for disagreement feel personally attacked any time someone is perceived as devaluing their opinion. From an interpersonal perspective, understanding someone’s tolerance for disagreement can help in deciding if arguments will be perceived as the other as attacks that could lead to verbally aggressive conflicts. However, not all conflict is necessarily verbally aggressive nor destructive.

The term “conflict” is actually very difficult to pin down. We could have an entire chapter where we just examined various definitions of the term. Simplistically, **conflict** is an interactive process occurring when conscious beings (individuals or groups) have opposing or incompatible actions, beliefs, goals, ideas, motives, needs, objectives, obligations resources and/or values. First, conflict is interactive and inherently communicative. Second, two or more people or even groups of people who can think must be involved. Lastly, there are a whole range of different areas where people can have opposing or incompatible opinions. For this generic definition, we provided a laundry list of different types of incompatibility that can exist between two or more individuals or groups. Is this list completely exhaustive? No. But we provided this list as a way of thinking about the more common types of issues that are raised when people engage in conflict. From this perspective, everything from a minor disagreement to a knock-down, drag-out fight would classify as a conflict

The rest of this section is going to explore the nature of conflict and its importance in communication. To do this, we’ll discuss two different perspectives on conflict (disruption vs. normalcy). Then we’ll explore interpersonal conflict more closely. Lastly, we’ll discuss the positive and negative functions of conflict.

Two Perspectives on Conflict

As with most areas of interpersonal communication, no single perspective exists in the field related to interpersonal conflict. There are generally two very different perspectives that one can take. Herbert W. Simmons was one of the first to realize that there were two very different perspectives on conflict.[4] On the one hand, you had scholars who see conflict as a disruption in a normal working system, which should be avoided. On the other hand, some scholars view conflict as a normal part of human relationships. Let’s look at each of these in this section.

Disruptions in Normal Workings of a System

The first major perspective of conflict was proposed by James C. McCroskey and Lawrence R. Wheeless.[5] McCroskey and Wheeless described conflict as a negative phenomenon in interpersonal relationships:

> Conflict between people can be viewed as the opposite or antithesis of affinity. In this sense, interpersonal conflict is the breaking down of attraction and the development of repulsion, the dissolution of perceived homophily (similarity) and the increased perception of incompatible differences, the loss of perceptions of credibility and the development of disrespect. [6]

From this perspective, conflict is something inherently destructive. McCroskey and Virginia P. Richmond went further and argued that conflict is characterized by antagonism, distrust, hostility, and suspicion.[7]

This more negative view of conflict differentiates itself from a separate term, **disagreement**, which is simply a difference of opinion between two or more people or groups of people. Richmond and McCroskey note that there are two types of disagreements: substantive and procedural.[8] A **substantive** disagreement is a disagreement that people have about a specific topic or issue. Basically, if you and your best friend want to go eat at two different restaurants for dinner, then you're engaging in a substantive disagreement. On the other hand, **procedural disagreements** are "concerned with procedure, how a decision should be reached or how a policy should be implemented."[9] So, if your disagreement about restaurant choice switches to a disagreement on how to make a choice (flipping a coin vs. rock-paper-scissors), then you've switched into a procedural disagreement.

A conflict then is a disagreement plus negative affect, or when you disagree with someone else and you don't like the other person. It's the combination of a disagreement and dislike that causes a mere disagreement to turn into a conflict. Ultimately, conflict is a product of how one communicates this dislike of another person during the disagreement. People in some relationships end up saying very nasty things to one another during a disagreement because their affinity for the other person has diminished. When conflict is allowed to continue and escalate, it "can be likened to an ugly, putrid, decaying, pusfilled sore."[10]

From this perspective, conflicts are ultimately only manageable; whereas, disagreements can be solved. Although a disagreement is the cornerstone of all conflicts, most disagreements don't turn into conflicts because there is an affinity between the two people engaged in the disagreement.

Normal Part of Human Communication

The second perspective of the concept of conflict is very different from the first one. As described by Dudley D. Cahn and Ruth Anna Abigail, conflict is a normal, inevitable part of life.[11] Cahn and Abigail argue that conflict is one of the foundational building blocks of interpersonal relationships. One can even ask if it's possible to grow in a relationship without conflict. Managing and overcoming conflict makes a relationship stronger and healthier. Ideally, when interpersonal couples engage in conflict management (or conflict resolution), they will reach a solution that is mutually beneficial for both parties. In this manner, conflict can help people seek better, healthier outcomes within their interactions.

Ultimately, conflict is neither good nor bad, but it's a tool that can be used for constructive or destructive purposes. Conflict can be very beneficial and healthy for a relationship. Let's look at how conflict is beneficial for individuals and relationships:

- Conflict helps people find common ground.
- Conflict helps people learn how to manage conflict more effectively for the future.
- Conflict provides the opportunity to learn about the other person(s).
- Conflict can lead to creative solutions to problems.
- Confronting conflict allows people to engage in an open and honest discussion, which can build relationship trust.
- Conflict encourages people to grow both as humans and in their communication skills.
- Conflict can help people become more assertive and less aggressive.
- Conflict can strengthen individuals' ability to manage their emotions.
- Conflict lets individuals set limits in relationships.
- Conflict lets us practice our communication skills.

When one approaches conflict from this vantage point, conflict can be seen as an amazing resource in interpersonal relationships. However, both parties must agree to engage in prosocial conflict management strategies for this to work effectively (more on that later in this chapter).

Now that we've examined the basic idea of conflict, let's switch gears and examine conflict in a more interpersonal manner.

Interpersonal Conflict

According to Cahn and Abigail, interpersonal conflict requires four factors to be present:

1. the conflict parties are interdependent,
2. they have the perception that they seek incompatible goals or outcomes or they favor incompatible means to the same ends,
3. the perceived incompatibility has the potential to adversely affect the relationship leaving emotional residues if not addressed, and
4. there is a sense of urgency about the need to resolve the difference. [12]

Let's look at each of these parts of interpersonal conflict separately.

People are Interdependent

According to Cahn and Abigail, "**interdependence** occurs when those involved in a relationship characterize it as continuous and important, making it worth the effort to maintain."[13] From this perspective, interpersonal conflict occurs when we are in some kind of relationship with another person. For example, it could be a relationship with a parent/guardian, a child, a coworker, a boss, a spouse, etc. In each of these interpersonal relationships, we generally see ourselves as having long-term relationships with these people that we want to succeed. Notice, though, that if you're arguing with a random person on a subway, that will not fall into this definition because of the interdependence factor. We may have disagreements and arguments with all kinds of strangers, but those don't rise to the level of interpersonal conflicts.

People Perceive Differing Goals/Outcomes of Means to the Same Ends

An incompatible goal occurs when two people want different things. For example, imagine you and your best friend are thinking about going to the movies. They want to see a big-budget superhero film, and you're more in the mood for an independent artsy film. In this case, you have pretty incompatible goals (movie choices). You can also have incompatible means to reach the same end. Incompatible means, in this case, "occur when we want to achieve the same goal but differ in how we should do so."[14] For example, you and your best friend agree on going to the same movie, but not about at which theatre you should see the film.

Conflict Can Negatively Affect the Relationship if Not Addressed

Next, interpersonal conflicts can lead to very negative outcomes if the conflicts are not managed effectively. Here are some examples of conflicts that are not managed effectively:

- One partner dominates the conflict, and the other partner caves-in.
- One partner yells or belittles the other partner.
- One partner uses half-truths or lies to get her/his/their way during the conflict.
- Both partners only want to get their way at all costs.
- One partner refuses to engage in conflict.
- Etc.

Again, this is a sample laundry list of some of the ways where conflict can be mismanaged. When conflict is mismanaged, one or both partners can start to have less affinity for the other partner, which can lead to a decreasing in liking, decreased caring about the relational partner, increased desire to exit the relationship, increased relational apathy, increased revenge-seeking behavior, etc. All of these negative outcomes could ultimately lead to conflicts becoming increasingly more aggressive (both active and passive) or just outright conflict avoidance. We'll look at both of these later in the chapter.

Some Sense of Urgency to Resolve Conflict

Lastly, there must be some sense of urgency to resolve the conflict within the relationship. The conflict gets to the point where it must receive attention, and a decision must be made or an outcome decided upon, or else. If a conflict reaches the point where it's not solved, then the conflict could become more problematic and negative if it's not dealt with urgently.

Now, some people let conflicts stir and rise over many years that can eventually boil over, but these types of conflicts when they arise generally have some other kind of underlying conflict that is causing the sudden explosion. For example, imagine your spouse has a particularly quirky habit. For the most part, you ignore this habit and may even make a joke about the habit. Finally, one day you just explode and demand the habit must change. Now, it's possible that you let this conflict build for so long that it finally explodes. It's kind of like a geyser. According to Yellowstone National Park, here's how a geyser works:

> The looping chambers trap steam from the hot water. Escaped bubbles from trapped steam heat the water column to the boiling point. When the pressure from the trapped steam builds enough, it blasts, releasing the pressure. As the entire water column boils out of the ground, more than half the volume is this steam. The eruption stops when the water cools below the boiling point.[15]

In the same way, sometimes people let irritations or underlying conflict percolate inside of them until they reach a boiling point, which leads to the eventual release of pressure in the form of a sudden, out of nowhere conflict. In this case, even though the

conflict has been building for some time, the eventual desire to make this conflict known to the other person does cause an immediate sense of urgency for the conflict to be solved.

Key Takeaways

- The terms disagreement and argument are often confused with one another. For our purposes, the terms refer to unique concepts. A disagreement is a difference of opinion between two or more people or groups of people; whereas, an argument is a verbal exchange between two or more people who have differing opinions on a given subject or subjects.
- There are two general perspectives regarding the nature of conflict. The first perspective sees conflict as a disruption to normal working systems, so conflict is inherently something that is dangerous to relationships and should be avoided. The second perspective sees conflict as a normal, inevitable part of any relationship. From this perspective, conflict is a tool that can either be used constructively or destructively in relationships.
- According to Cahn and Abigail, interpersonal conflict consists of four unique parts: 1) interdependence between or among the conflict parties, (2) incompatible goals/ means, (3) conflict can adversely affect a relationship if not handled effectively, and (4) there is a sense of urgency to resolve the conflict.

Exercises

1. On a sheet of paper, write out what you believe are the pros and cons of both major perspectives about conflict. Which one do you think describes your own understanding of conflict? Do you think they are both applicable to interpersonal conflict?
2. Think of a time when you've engaged in conflict with a relational partner of some kind (parent/guardian, child, sibling, spouse, friend, romantic partner, etc.). Using Cahn and Abigail's four parts of interpersonal conflict, dissect the conflict and explain why it would qualify as an interpersonal conflict.
3. We know that different people have different levels of tolerance for disagreement in life. How do you think an individual's tolerance for disagreement impacts her/ his/their ability to interact with others interpersonally?

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6.3.2: Emotions and Feelings

Learning Outcomes

- Explain the interrelationships among emotions and feelings.
- Describe emotional awareness and its importance to interpersonal communication.
- Differentiate between “I” and “You” statements.
- Explain the concept of emotional intelligence.

To start our examination of the idea of emotions and feelings and how they relate to harmony and discord in a relationship, it’s important to differentiate between emotions and feelings. Emotions are our reactions to stimuli in the outside environment. **Emotions**, therefore, can be objectively measured by blood flow, brain activity, and nonverbal reactions to things. **Feelings**, on the other hand, are the responses to thoughts and interpretations given to emotions based on experiences, memory, expectations, and personality. So, there is an inherent relationship between emotions and feelings, but we do differentiate between them. Table 6.3.2.1 breaks down the differences between the two concepts.

Table 6.3.2.1: **The Differences of Emotions and Feelings**

Feelings:	**Emotions:**
Feelings tell us “**how to live**.”	Emotions tell us **what** we “**like**” and “**dislike**.”
Feelings state: “There is a **right** and **wrong** way **to be**."	Emotions state: “There are **good** and **bad actions**.”
Feelings state: “**your emotions matter**.”	Emotions state: “**The external world matters**.”
Feelings establish our **long-term attitude** toward reality.	Emotions establish our **initial attitude** toward reality.
Feelings alert us to **anticipated dangers** and prepares us for action.	Emotions alert us to **immediate dangers** and prepare us for action.
Feelings ensure **long-term survival** of self (body and mind).	Emotions ensure **immediate survival** of self (body and mind).
Feelings are Low-key but **Sustainable**.	**Emotions are Intense** but **Temporary**.
Happiness: is a feeling.	**Joy**: is an emotion.
Worry: is a feeling.	**Fear**: is an emotion.
Contentment: is a feeling.	**Enthusiasm**: is an emotion.
Bitterness: is a feeling.	**Anger**: is an emotion.
Love: is a feeling.	**Lust**: is an emotion.
Depression: is a feeling.	**Sadness**: is an emotion.

It’s important to understand that we are all allowed to be emotional beings. Being emotional is an inherent part of being a human. For this reason, it’s important to avoid phrases like “don’t feel that way” or “they have no right to feel that way.” Again, our emotions are our emotions, and, when we negate someone else’s emotions, we are negating that person as an individual and taking away their right to emotional responses. At the same time, though, no one else can make you “feel” a specific way. Our emotions are our emotions. They are how we interpret and cope with life. A person may set up a context where you experience an emotion, but you are the one who is still experiencing that emotion and allowing yourself to experience that emotion. If you don’t like “feeling” a specific way, then change it. We all have the ability to alter our emotions. Altering our emotional states (in a proactive way) is how we get through life. Maybe you just broke up with someone, and listening to music helps you work through the grief you are experiencing to get to a better place. For others, they need to openly communicate about how they are feeling in an effort to process and work through emotions. The worst thing a person can do is attempt to deny that the emotion exists.

Think of this like a balloon. With each breath of air you blow into the balloon, you are bottling up more and more emotions. Eventually, that balloon will get to a point where it cannot handle any more air in it before it explodes. Humans can be the same way with emotions when we bottle them up inside. The final breath of air in our emotional balloon doesn't have to be big or intense. However, it can still cause tremendous emotional outpouring that is often very damaging to the person and their interpersonal relationships with others.

Other research has demonstrated that handling negative emotions during conflicts within a marriage (especially on the part of the wife) can lead to faster de-escalations of conflicts and faster conflict mediation between spouses.[16]

Emotional Awareness

Sadly, many people are just completely unaware of their own emotions. **Emotional awareness**, or an individual's ability to clearly express, in words, what they are feeling and why, is an extremely important factor in effective interpersonal communication. Unfortunately, our emotional vocabulary is often quite limited. One extreme version of not having an emotional vocabulary is called **alexithymia**, "a general deficit in emotional vocabulary—the ability to identify emotional feelings, differentiate emotional states from physical sensations, communicate feelings to others, and process emotion in a meaningful way."17 Furthermore, there are many people who can accurately differentiate emotional states but lack the actual vocabulary for a wide range of different emotions. For some people, their emotional vocabulary may consist of good, bad, angry, and fine. Learning how to communicate one's emotions is very important for effective interpersonal relationships.[18] First, it's important to distinguish between our emotional states and how we interpret an emotional state. For example, you can feel sad or depressed, but you really cannot feel alienated. Your sadness and depression may lead you to perceive yourself as alienated, but alienation is a perception of one's self and not an actual emotional state. There are several evaluative terms that people ascribe themselves (usually in the process of blaming others for their feelings) that they label emotions, but which are in actuality evaluations and not emotions. Table **6.3.2.2**: presents a list of common evaluative words that people confuse for emotional states.

Table **6.3.2.2**: **Evaluative Words Confused for Emotions**

Abandoned	Cornered	Mistreated	Scorned
Abused	Devalued	Misunderstood	Taken for granted
Affronted	Diminished	Neglected	Threatened
Alienated	Distrusted	Overworked	Thwarted
Attacked	Humiliated	Patronized	Tortured
Belittled	Injured	Pressured	Unappreciated
Betrayed	Interrupted	Provoked	Unheard
Boxed-in	Intimidated	Put away	Unseen
Bullied	Let down	Putdown	Unsupported
Cheated	Maligned	Rejected	Unwanted
Coerced	Manipulated	Ridiculed	Used
Co-opted	Mocked	Ruined	Wounded

Instead, people need to avoid these evaluative words and learn how to communicate effectively using a wide range of emotions. Tables \(\PageIndex{3}\): and **6.3.2.4**: provide a list of both positive and negative feelings that people can express. Go through the list considering the power of each emotion. Do you associate light, medium, or strong emotions with the words provided on these lists? Why? There is no right or wrong way to answer this question. Still, it is important to understand that people can differ in their interpretations of the strength of different emotionally laden words. If you don't know what a word means, you should look it up and add another word to your list of feelings that you can express to others.

Table **6.3.2.3**: **Positive Emotions**

Absorbed	Eager	Happy	Rapturous
Adventurous	Ebullient	Helpful	Refreshed
Affectionate	Ecstatic	Hopeful	Relaxed
Aglow	Effervescent	Inquisitive	Relieved
Alert	Elated	Inspired	Sanguine
Alive	Enchanted	Intense	Satisfied
Amazed	Encouraged	Interested	Secure
Amused	Energetic	Intrigued	Sensitive
Animated	Engrossed	Invigorated	Serene
Appreciative	Enlivened	Involved	Spellbound
Ardent	Enthusiastic	Jovial	Splendid
Aroused	Euphoric	Joyous	Stimulated
Astonished	Excited	Jubilant	Sunny
Blissful	Exhilarated	Keyed-up	Surprised
Breathless	Expansive	Lively	Tender
Buoyant	Expectant	Loving	Thankful
Calm	Exultant	Mellow	Thrilled
Carefree	Fascinated	Merry	Tickled Pink
Cheerful	Free	Mirthful	Touched
Comfortable	Friendly	Moved	Tranquil
Complacent	Fulfilled	Optimistic	Trusting
Composed	Genial	Overwhelmed	Upbeat
Concerned	Glad	Peaceful	Vibrant
Confident	Gleeful	Perky	Warm
Content	Glorious	Pleasant	Wonderful
Cool	Glowing	Pleased	Zippy
Curious	Good-humored	Proud	
Dazzled	Grateful	Quiet	
Delighted	Gratified	Radiant	

Table **6.3.2.4**: Negative Emotions

Agitated	Dismayed	Intense	Shameful
Alarmed	Displeased	Irate	Shocked
Angry	Disquieted	Irked	Skeptical
Anguished	Disturbed	Irritated	Sleepy
Annoyed	Distressed	Jealous	Sorrowful
Antagonistic	Downcast	Jittery	Sorry
Anxious	Downhearted	Keyed-up	Spiritless
Apathetic	Dull	Lazy	Spiteful
Appalled	Edgy	Leery	Startled
Apprehensive	Embarrassed	Lethargic	Sullen
Aroused	Embittered	Listless	Surprised
Ashamed	Exasperated	Lonely	Suspicious
Beat	Exhausted	Mad	Tearful
Bewildered	Fatigued	Mean	Tepid
Bitter	Fearful	Melancholy	Terrified
Blah	Fidgety	Miserable	Ticked off
Blue	Forlorn	Mopey	Tired
Bored	Frightened	Morose	Uncomfortable
Brokenhearted	Frustrated	Mournful	Unconcerned
Cold	Galled	Nettled	Uneasy
Concerned	Gloomy	Numb	Unglued
Confused	Grim	Overwhelmed	Unhappy
Cool	Grouchy	Panicky	Unnerved
Crabby	Guilty	Passive	Unsteady
Cranky	Harried	Perplexed	Upset
Cross	Heavy	Pessimistic	Uptight
Dejected	Helpless	Petulant	Vexed
Depressed	Hesitant	Puzzled	Weary
Despairing	Hopeless	Rancorous	Weepy
Despondent	Horrified	Repelled	Withdrawn
Disaffected	Hostile	Resentful	Woeful
Disenchanted	Hot	Restless	Worried
Disappointed	Humdrum	Sad	Wretched

Discouraged	Hurt	Scared	Sensitive
Disgruntled	Ill-Tempered	Seething	Shaky

The Problem of You Statements

According to Marshall Rosenberg, the father of nonviolent communication, “You” statements ultimately are moralistic judgments where we imply the wrongness or badness of another person and the way they have behaved.[19] When we make moralistic judgments about others, we tend to deny responsibility for our thoughts, feelings, and behaviors. Remember, when it comes to feelings, no one can “make” you feel a specific way. We choose the feelings we inhabit; we do not inhabit the feelings that choose us. When we make moralistic judgments and deny responsibility, we end up in a constant cycle of defensiveness where your individual needs are not going to be met by your relational partner. Behind every negative emotion is a need not being fulfilled, and when we start blaming others, those needs will keep getting unfilled in the process. Often this lack of need fulfillment will result in us demanding someone fulfill our need or face blame or punishment. For example, “if you go hang out with your friends tonight, I’m going to hurt myself and it will your fault.” In this simple sentence, we see someone who disapproves of another’s behaviors and threatens to blame their relational partner for the individual’s behavior. In highly volatile relationships, this constant blame cycle can become very detrimental, and no one’s needs are getting met.

However, just observing behavior and stating how you feel only gets you part of the way there because you’re still not describing your need. Now, when we talk about the idea of “needing” something, we are not talking about this strictly in terms of Maslow’s Hierarchy of Needs, though those are all entirely appropriate needs. At the same time, relational needs are generally not rewards like tangible items or money. Instead, Marshall Rosenberg categorizes basic needs that we all have falling into the categories: autonomy, celebration, play, spiritual communion, physical nurturance, integrity, and interdependence (Table **6.3.2.5**). As you can imagine, any time these needs are not being met, you will reach out to get them fulfilled. As such, when we communicate about our feelings, they are generally tied to an unmet or fulfilled need. For example, you could say, “I feel dejected when you yell at me because I need to be respected.” In this sentence, you are identifying your need, observing the behavior, and labeling the need. Notice that there isn’t judgment associated with identifying one’s needs.

Table **6.3.2.5**: **Needs**

Autonomy	• to choose one's dreams, goals, values • to choose one's plan for fulfilling one's dreams, goals, values
Celebration	• to celebrate the creation of life and dreams fulfilled • to celebrate losses: loved ones, dreams, etc. (mourning)
Play	• fun • laughter
Spiritual Communion	• beauty • harmony • inspiration • order • peace
Physical Nurturance	• air • food • movement, exercise • protection from life-threatening forms of life: viruses, bacteria, insects, predatory animals • rest • sexual expression • shelter • touch • water
Integrity	• authenticity • creativity • meaning • self-worth
Interdependence	• acceptance • appreciation • closeness • community • consideration • contribution to the enrichment of life (to exercise one's power by giving that which contributes to life) • emotional safety • empathy • honesty (the empowering honest that enables us to learn from our limitations) • love • reassurance • respect • support • trust • understanding • warmth

Emotional Intelligence

In Chapter 3, we first discussed the concept of emotional intelligence. However, it’s important to revisit this concept before we move on. In Chapter 3, we defined **emotional intelligence** (EQ) as an individual’s appraisal and expression of their emotions and the emotions of others in a manner that enhances thought, living, and communicative interactions. Furthermore, we learned that EQ

is built by four distinct emotional processes: perceiving, understanding, managing, and using emotions.[20] Although we are talking about the importance of EQ, take a minute and complete Table **6.3.2.6**, which is a simple 20- item questionnaire designed to help you evaluate your own EQ.

Example: Emotional Intelligence Questionnaire

Read the following questions and select the answer that corresponds with your perception. Do not be concerned if some of the items appear similar. Please use the scale below to rate the degree to which each statement applies to you.

Strongly Disagree - 1	**Disagree - 2**	**Neutral - 3**	**Agree - 4**	**Strongly Agree - 5**

1. I am aware of my emotions as I experience them. _____
2. I easily recognize my emotions. _____
3. I can tell how othersarefeeling simply by watching their body movements. _____
4. I can tell how others are feeling by listening to their voices. _____
5. When I look at people's faces, I generally know how they are feeling. _____
6. When my emotions change, I know why. _____
7. I understand that my emotional state is rarely comprised of one single emotion. _____
8. When I am experiencing an emotion, I have no problem easily labeling that emotion. _____
9. It's completely possible to experience two opposite emotions at the same time (e.g., love & hate; awe & fear; joy & sadness). _____
10. I can generally tell whenmyemotional state is shifting from one emotion toanother. _____
11. I don't let my emotions get the best of me. _____
12. I have control over my own emotions. _____
13. I can analyze my emotions and determine if they are reasonable or not. _____
14. I can engage or detach from an emotion depending on whether I find it informative or useful. _____
15. When I'm feeling sad, I know how to seek out activities that will make me happy. _____
16. I can create situations that will cause others to experience specific emotions. _____
17. I can use my understanding of emotions to have more productive interactions with others. _____
18. I know how to make other people happy or sad. _____
19. I often lift people's spirits when they are feeling down. _____
20. I know how to generate negative emotions and enhance pleasant ones in my interactions with others. _____

Scoring

Understanding Emotions	Add scores for items 6, 7, 8, 9, & 10 = _____
Managing Emotions	Add scores for items 11, 12, 13, 14, & 15 = _____
Using Emotions	Add scores for items 16, 17, 18, 19, & 2 = _____

Interpretation

Each of the four parts of the EQ Model can have a range of 5 to 25.

Scores under 11 represent low levels of EQ for each aspect.

Scores between 12 and 18 represent average levels of EQ.

Scores 19 and higher represent high levels of EQ.

Research Spotlight



In 2020, researchers Anna Wollny, Ingo Jacobs, and Luise Pabel set out to examine the impact that trait EQ has on both relationship satisfaction and dyadic coping. Dyadic coping is based on Guy Bodenmann's Systemic Transactional Model (STM), which predicts that stress in dyadic relationships is felt by both partners.[21] So, if one partner experiences the stress of a job loss, that stress really impacts both partners. As a result, both partners can engage in mutual shared problem-solving or joint emotion-regulation.[22] According to Bodenmann, there are three different common forms of dyadic coping:

1. Positive dyadic coping involves the provision of problem-and emotion-focused support and reducing the partner's stress by a new division of responsibilities and contributions to the coping process.
2. Common dyadic coping (i.e., joint dyadic coping) includes strategies in which both partners jointly engage to reduce stress (e.g., exchange tenderness, joint problem-solving).
3. Negative dyadic coping comprises insufficient support and ambivalent or hostile intervention attempts (e.g., reluctant provision of support while believing that the partner should solve the problem alone).[23]

In the Wollny et al. (2000) study, the researchers studied 136 heterosexual couples. Trait EQ was positively related to relationship satisfaction. Trait EQ was positively related to positive dyadic coping and common dyadic coping but not related to negative dyadic coping.

Wollny, A., Jacobs, I., & Pabel, L. (2020, 2020/01/02). Trait emotional intelligence and relationship satisfaction: The mediating role of dyadic coping. The Journal of Psychology, 154(1), 75-93. https://doi.org/10.10 80/00223980.2019.1661343

Letting Go of Negative Thoughts

We often refer to these negative thoughts as vulture statements (as discussed in Chapter 3).24 Some of us have huge, gigantic vultures sitting on our shoulders every day, and we keep feeding them with all of our negative thoughts. Right when that thought enters your head, you have started to feed that vulture sitting on your shoulders.

Unfortunately, many of us will focus on that negative thought and keep that negative thought in our heads for a long period. It's like have a bag full of carrion, and we just keep lifting it to the vulture, who just keeps getting fatter and fatter, weighing you down more and more.

Every time we point out a negative thought instead of harping on that thought, we take a pause and stop feeding the vulture. Do this long enough, and you will see the benefits to your self-concept. Furthermore, when we have a healthy self-concept, we also have stronger interpersonal relationships.[25]

Positive Emotions During Conflict

Researchers have found that serious relationship problems arise when those in the relationship are unable to reach beyond the immediate conflict and include positive as well as negative emotions in their discussions. In a landmark study of newlywed couples, for example, researchers attempted to predict who would have a happy marriage versus an unhappy marriage or a divorce, based on how the newlyweds communicated with each other. Specifically, they created a stressful conflict situation for couples. The researchers then evaluated how many times the newlyweds expressed positive emotions and how many times they expressed negative emotions in talking with each other about the situation.

When the marital status and happiness of each couple were evaluated over the next six years, the study found that the strongest predictor of a marriage that stayed together and was happy was the degree of positive emotions expressed during the conflict situation in the initial interview.[26]

In happy marriages, instead of always responding to anger with anger, the couples found a way to lighten the tension and to de-escalate the conflict. In long-lasting marriages, during stressful times or in the middle of conflict, couples were able to interject some positive comments and positive regard for each other. When this finding is generalized to other types of interpersonal relationships, it makes a strong case for having some positive interactions, interjecting some humor, some light-hearted fun, or some playfulness into your conversation while you are trying to resolve conflicts.

Key Takeaways

- Emotions are our physical reactions to stimuli in the outside environment; whereas, feelings are the responses to thoughts and interpretations given to emotions based on experiences, memory, expectations, and personality.
- Emotional awareness involves an individual's ability to recognize their feelings and communicate about them effectively. One of the common problems that some people have with regards to emotional awareness is a lack of a concrete emotional vocabulary for both positive and negative feelings. When people cannot adequately communicate about their feelings, they will never get what they need out of a relationship.
- One common problem in interpersonal communication is the overuse of "You" statements. "I" statements are statements that take responsibility for how one is feeling. "You" statements are statements that place the blame of one's feelings on another person. Remember, another person cannot make you feel a specific way. Furthermore, when we communicate "you" statements, people tend to become more defensive, which could escalate into conflict.
- Emotional intelligence is the degree to which an individual has the ability to perceive (recognizing emotions when they occur), understand (the ability to understand why emotions and feelings arise), communicate (articulating one's emotions and feelings to another person), and manage emotions and feelings (being able to use emotions effectively during interpersonal relationships).

Exercises

1. Think of an extreme emotion you've felt recently. Explain the interrelationships between that emotion, your thoughts, and your feelings when you experienced that extreme emotion.
2. Complete the Emotional Intelligence Questionnaire. What areas are your strengths with regard to EQ? What areas are your weaknesses? How can you go about improving your strengths while alleviating your weaknesses?
3. Think of a conflict you've had with a significant other in your relationship. How many of the statements that were made during that conflict were "You" statements as compared to "I" statements? How could you have more clearly expressed your feelings and link them to your needs?

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6.3.3: Power and Influence

Learning Outcomes

- Define the term “influence” and explain the three levels of influence.
- Define the word “power” and explain the six bases of power.

One of the primary reasons we engage in a variety of interpersonal relationships over our lifetimes is to influence others. We live in a world where we constantly need to accomplish a variety of goals, so being able to get others to jump on board with our goals is a very important part of social survival. As such, we define **influence** when an individual or group of people alters another person’s thinking, feelings, and/ or behaviors through accidental, expressive, or rhetorical communication.[27] Notice this definition of influence is one that focuses on the importance of communication within the interaction. Within this definition, we discuss three specific types of communication: accidental, expressive, or rhetorical.

First, we have accidental communication, or when we send messages to another person without realizing those messages are being sent. Imagine you are walking through your campus’ food court and notice a table set up for a specific charity. A person who we really respect is hanging out at the table laughing and smiling, so you decide to donate a dollar to the charity. The person who was just hanging out at the table influenced your decision to donate. They could have just been talking to another friend and may not have even really been a supporter of the charity, but their presence was enough to influence your donation. At the same time, we often influence others to think, feel, and behave in ways they wouldn’t have unconsciously. A smile, a frown, a head nod, or eye aversion can all be nonverbal indicators to other people, which could influence them. There’s a great commercial on television that demonstrates this. The commercial starts with someone holding the door for another person, then this person turns around and does something kind to another person, and this “paying it forward” continues through the entire commercial. In each incident, no one said to the person they were helping to “pay it forward,” they just did.

The second type of communication we can have is **expressive or emotionally-based communication**. Our emotional states can often influence other people. If we are happy, others can become happy, and if we are sad, others may avoid us altogether. Maybe you’ve walked into a room and seen someone crying, so you ask, “Are you OK?” Instead of responding, the person just turns and glowers at you, so you turn around and leave. With just one look, this person influenced your behavior.

The final type of communication, **rhetorical communication**, involves purposefully creating and sending messages to another person in the hopes of altering another person’s thinking, feelings, and/or behaviors. Accidental communication is not planned. Expressive communication is often not conscious at all. However, rhetorical communication is purposeful. When we are using rhetorical communication to influence another person(s), we know that we are trying to influence that person(s).

Levels of Influence

In 1958 social psychologist Herbert Kelman first noted that there are three basic levels of influence: compliance, identification, and internalization.[28] Kelman’s basic theory was that changes in a person’s thoughts, feelings, and/or behaviors occur at different levels, which results in different processes an individual uses to achieve conformity with an influencer. Let’s look at each of these three levels separately.

Compliance

The first, and weakest, form of influence is compliance. **Compliance** implies that an individual accepts influence and alters their thoughts, feelings, and/or behaviors. However, this change in thoughts, feelings, and/or behaviors is transitory and only lasts as long as the individual sees compliance as beneficial.[29] Generally, people accept influence at this level because they perceive the rewards or punishments for influence to be in their best interest. As such, this form of influence is very superficial.[30]

Identification

The second form of influence discussed by Kelman is **identification**, which is based purely in the realm of relationships. Identification occurs when an individual accepts influence because they want to have a satisfying relationship with the influencer or influencing group. “The individual actually believes in the responses which he [or she] adopts through identification, but their specific content is more or less irrelevant. He [or she] adopts the induced behavior because it is associated with the desired

relationship. Thus the satisfaction derived from identification due to the act of conforming as such."[31] Notice that Kelman is arguing that the actual change to thoughts, feelings, and/or behaviors is less of an issue that the relationship and the act of conforming. However, if an individual ever decides that the relationship and identification with the influencing individual or group are not beneficial, then the influencing attempts will disappear, and the individual will naturally go back to their original thoughts, feelings, and/or behaviors.

Internalization

The final level of influence proposed by Kelman is **internalization**, which occurs when an individual adopts influence and alters their thinking, feeling, and/or behaviors because doing so is intrinsically rewarding. Ultimately, changing one's thinking, feelings, and/or behavior happens at the internalization level because an individual sees this change as either coinciding with their value system, considers the change useful, or fulfills a need the individual has. Influence that happens at this level becomes highly intertwined with the individual's perception of self, so this type of influence tends to be long-lasting.

French & Raven's Five Bases of Power

When you hear the word "power," what comes to mind? Maybe you think of a powerful person like a Superhero or the President of the United States. For social scientists, we use the word "power" in a very specific way. **Power** is the degree that a social agent (A) has the ability to get another person(s) (P) to alter their thoughts, feelings, and/or behaviors. First, you have a social agent (A), which can come in a variety of different forms: another person, a role someone embodies, a group rule or norm, or a group or part of a group.[32] Next, we have the person(s) who is being influenced by the goal to be a specific change in thoughts, feelings, and/or behaviors. When we discussed influence above, we talked about it in terms of communication: accidental, expressive, and rhetorical. When we deal with power, we are only dealing in the realm of rhetorical communication because the person exerting power over another person is consciously goal-directed.



Figure **6.3.3.1**: French & Raven's Five Bases of Power

Probably the most important people in the realm of power have been John French and Bertram Raven. In 1959, French and Raven identified five unique bases of power that people can use to influence others (coercive, reward, legitimate, expert, and referent).[33] At the time of their original publication, there was a sixth base of power that Raven attempted to argue for, informational. Although he lost the battle in the initial publication, subsequent research by Raven on the subject of the bases of power have all included informational power.[34]

Let's examine each of these five bases of power.

Informational

The first basis of power is the last one originally proposed by Raven.[35] **Informational power** refers to a social agent's ability to bring about a change in thought, feeling, and/or behavior through information. For example, since you initially started school, teachers have had informational power over you. They have provided you with a range of information on history, science, grammar, art, etc. that shape how you think (what constitutes history?), feel (what does it mean to be aesthetically pleasing?), and behave (how do you properly mix chemicals in a lab?). In some ways, informational power is very strong, because it's often the

first form of power with which we come into contact. In fact, when you are taught how to think, feel, and/ or behave, this change "now continues without the target necessarily referring to, or even remembering, the [influencer] as being the agent of change."[36]

Coercive and Reward

The second base of power is **coercive power**, which is the ability to punish an individual who does not comply with one's influencing attempts. On the other end of the spectrum, we have **reward power** (3rd base of power), which is the ability to offer an individual rewards for complying with one's influencing attempts. We talk about these two bases of power together because they are two sides of the same coin. Furthermore, the same problems with this type of power apply equally to both. Influence can happen if you punish or reward someone; however, as soon as you take away that punishment or reward, the thoughts, feelings, and/or behavior will reverse back to its initial state. Hence, we refer to both coercive and reward power as attempts to get someone to comply with influence, because this is the highest level of influence one can hope to achieve with these two forms of power.

Legitimate

The fourth base of power is **legitimate power**, or influence that occurs because a person (P) believes that the social agent (A) has a valid right to influence P, and P has an obligation to accept A's attempt to influence P's thoughts, feelings, and/or behaviors. French and Raven argued that there were two common forms of legitimate power: cultural and structural. Cultural legitimate power occurs when a change agent is viewed as having the right to influence others because of their role in the culture. For example, in some cultures, the elderly may have a stronger right to influence than younger members of that culture. Structural legitimate power, on the other hand, occurs because someone fulfills a specific position within the social hierarchy. For example, your boss may have the legitimate right to influence your thoughts, feelings, and/or behaviors in the workplace because they are above you in the organizational hierarchy.[37]

Expert

The fifth base of power is **expert power**, or the power we give an individual to influence us because of their perceived knowledge. For example, we often give our physicians the ability to influence our behavior (e.g., eat right, exercise, take medication) because we view these individuals as having specialized knowledge. However, this type of influence only is effective if P believes A is an expert, P trusts A, and P believes that A is telling the truth.

One problem we often face in the 21st Century involves the conceptualization of the word "expert." Many people in today's world can be perceived as "experts" just because they write a book, have a talk show, were on a reality TV show, or are seen on news programs.[38] Many of these so-called "experts" may have no reasonable skill or knowledge but they can be trumpeted as experts. One of the problems with the Internet is the fundamental flaw that anyone can put information online with only an opinion and no actual facts. Additionally, we often engage in debates about "facts" because we have different talking heads telling us different information. Historically, expert power was always a very strong form of power, but there is growing concern that we are losing expertise and knowledge to unsubstantiated opinions and rumor mongering.

At the same time, there is quite a bit of research demonstrating that many people are either unskilled or unknowledgeable and completely unaware of their lack of expertise. This problem has been called the **Dunning–Kruger effect**, or the tendency of some people to inflate their expertise when they really have nothing to back up that perception.[39] As you can imagine, having a lot of people who think they are experts spouting off information that is untrue can be highly problematic in society. For example, do you really want to take medical advice from a TV star? Many people do. While we have some people who inflate their expertise, on the other end of the spectrum, some people suffer from imposter syndrome, which occurs when people devalue or simply do not recognize their knowledge and skills. Imposter syndrome is generally a problem with highly educated people like doctors, lawyers, professors, business executives, etc. The fear is that someone will find out that they are a fraud.

Referent

The final base of power originally discussed by French and Raven is **referent power**, or a social agent's ability to influence another person because P wants to be associated with A. Ultimately, referent power is about relationship building and the desire for a relationship. If A is a person P finds attractive, then P will do whatever they need to do to become associated with A. If A belongs to a group, then P will want to join that group. Ultimately, this relationship exists because P wants to think, feel, and behave as A does. For example, if A decides that he likes modern art, then P will also decide to like modern art. If A has a very strong work ethic in

the workplace, then P will adopt a strong work ethic in the workplace as well. Often A has no idea of the influence they are having over P. Ultimately, the stronger P desires to be associated with A, the more referent power A has over P.

Influence and Power

By now, you may be wondering about the relationship between influence and power. Research has examined the relationship between the three levels of influence and the six bases of power. Coercive, reward, and legitimate power only influence people at the compliance level. Whereas, informational, expert, and referent power have been shown to influence people at all three levels of influence: compliance, identification, and internalization.[40] When you think about your own interpersonal influencing goals, you really need to consider what level of influence you desire a person's change in thoughts, feelings, and/or behaviors to be. If your goal is just to get the change quickly, then using coercive, reward, and legitimate power may be the best route. If, however, you want to ensure long-term influence, then using informational, expert, and referent power are probably the best routes to use.

Research Spotlight



In 2013, Shireen Abuhatoum and Nina Howe set out to explore how siblings use French and Raven's bases of power in their relationships. Specifically, they examined how older siblings (average age of 7 years old) interacted with their younger siblings (average age was 4 ½ years old). Sibling pairs were recorded playing at home with a wooden farm set that was provided for the observational study. Each recorded video lasted for 15-minutes. The researchers then coded the children's verbal and nonverbal behaviors. The goal was to see what types of power strategies the siblings employed while playing.

Unsurprisingly, older siblings were more likely to engage in power displays with their younger siblings to get what they wanted. However, younger siblings were more likely to appeal to a third party (usually an adult) to get their way.

The researchers also noted that when it came to getting a desired piece of the farm to play with, older siblings were more likely to use coercive power. Younger siblings were more likely to employ legitimate power as an attempt to achieve a compromise.

Abuhatoum, S., & Howe, N. (2013). Power in sibling conflict during early and middle childhood. Social Development, 22(4), 738–754. doi.org/10.1111/sode.12021

Key Takeaways

- Herbert Kelman noted that there are three basic levels of influence: compliance (getting someone to alter behavior), identification (altering someone's behavior because they want to be identified with a person or group), and internalization (influence that occurs because someone wants to be in a relationship with an influencer).
- French and Raven have devised six basic bases of power: informational, coercive, reward, legitimate, expert, and referent. First, we have informational power, or the power we have over others as we provide them knowledge. Second, we have coercive power, or the ability to punish someone for noncompliance. Third, we have reward power, or the ability to reward someone for compliance. Fourth we have legitimate power, or power someone has because of their position within a culture or a hierarchical structure. Fifth, we have expert power, or power that someone exerts because they are perceived as having specific knowledge or skills. Lastly, we have referent power, or power that occurs because an individual wants to be associated with another person.

Exercises

1. Think of a time when you've been influenced at all three of Kelman's levels of influence. How were each of these situations of influence different from each other? How were the different levels of influence achieved?
2. Think of each of the following situations and which form of power would best be used and why:
   - A mother wants her child to eat his vegetables.
   - A police officer wants to influence people to slow down in residential neighborhoods.
   - The Surgeon General of the United States wants people to become more aware of the problems of transsaturated fats in their diets.
   - A friend wants to influence his best friend to stop doing drugs.

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6.3.4: Conflict Management Strategies

Learning Outcomes

- Differentiate between conflict and disagreement.
- Explain the three common styles of conflict management.
- Summarize the STLC Model of Conflict.

Many researchers have attempted to understand how humans handle conflict with one another. The first researchers to create a taxonomy for understanding conflict management strategies were Richard E. Walton and Robert B. McKersie.[41] Walton and McKersie were primarily interested in how individuals handle conflict during labor negotiations. The Walton and McKersie model consisted of only two methods for managing conflict: integrative and distributive. **Integrative conflict** is a win-win approach to conflict; whereby, both parties attempt to come to a settled agreement that is mutually beneficial. **Distributive conflict** is a win-lose approach; whereby, conflicting parties see their job as to win and make sure the other person or group loses. Most professional schools teach that integrative negotiation tactics are generally the best ones.

ABC's of Conflict

Example: Emotional Intelligence Questionnaire

Read the following questions and select the answer that corresponds with how you typically behave when engaged in conflict with another person. Do not be concerned if some of the items appear similar. Please use the scale below to rate the degree to which each statement applies to you.

Strongly Disagree - 1	**Disagree - 2**	**Neutral - 3**	**Agree - 4**	**Strongly Agree - 5**

When I start to engage in a conflict, I _____

1. Keep the conflict to myself to avoid rocking the boat. _____
2. Do my best to win. _____
3. Try to find a solution that works for everyone. _____
4. Do my best to stay away from disagreements that arise. _____
5. Create a strategy to ensure my successful outcome. _____
6. Try to find a solution that is beneficial for those involved. _____
7. Avoid the individual with whom I'm having the conflict. _____
8. Won't back down unless I get what I want. _____
9. Collaborate with others to find an outcome OK for everyone. _____
10. Leave the room to avoid dealing with the issue. _____
11. Take no prisoners. _____
12. Find solutions that satisfy everyone's expectations. _____
13. Shutdown and shutup in order to get it over with as quickly as possible. _____
14. See it as an opportunity to get what I want. _____
15. Try to integrate everyone's ideas to come up with the best solution for everyone. _____
16. Keep my disagreements to myself. _____
17. Don't let up until I win. _____
18. Openly raise everyone's concerns to ensure the best outcome possible. _____

Scoring

Avoiders	Add scores for items 1, 4, 7, 10, 13, & 16 = _____
Battlers	Add scores for items 2, 5, 8, 11, 14, & 17 = _____
Collaborators	Add scores for items 3, 6, 9, 12, 15, & 18 = _____

Interpretation

Each of the four parts of the EQ Model can have a range of 5 to 25.

Scores under 11 represent low levels of EQ for each aspect.

Scores between 12 and 18 represent average levels of EQ.

Scores 19 and higher represent high levels of EQ



Over the years, a number of different patterns for handling conflict have arisen in the literature, but most of them agree with the first two proposed by Walton and McKersie, but they generally add a third dimension of conflict: **avoidance**.

Avoiders

Alan Sillars, Stephen, Coletti, Doug Parry, and Mark Rogers created a taxonomy of different types of strategies that people can use when avoiding conflict. Table **6.3.4.1** provides a list of these common tactics.[42]

Table **6.3.4.1**: Avoidant Conflict Management Strategies

Conflict Management Tactic	Definition	Example
Simple Denial	Statements that deny the conflict.	“No, I’m perfectly fine.”
Extended Denial	Statements that deny conflict with a short justification.	“No, I’m perfectly fine. I just had a long night.”
Underresponsiveness	Statements that deny the conflict and then pose a question to the conflict partner.	“I don’t know why you are upset, did you wake up on the wrong side of the bed this morning?”
Topic Shifting	Statements that shift the interaction away from the conflict.	“Sorry to hear that. Did you hear about the mall opening?”
Topic Avoidance	Statements designed to clearly stop the conflict.	“I don’t want to deal with this right now.”
Abstractness	Statements designed to shift a conflict from concrete factors to more abstract ones	“Yes, I know I’m late. But what is time really except a construction of humans to force conformity.”
Semantic Focus	Statements focused on the denotative and connotative definitions of words.	“So, what do you mean by the word ‘sex’?”
Process Focus	Statements focused on the “appropriate” procedures for handling conflict.	“I refuse to talk to you when you are angry.”
Joking	Humorous statements designed to derail conflict.	“That’s about as useless as a football bat.”
Ambivalence	Statements designed to indicate a lack of caring.	“Whatever!” “Just do what you want.”
Pessimism	Statements that devalue the purpose of conflict.	“What’s the point of fighting over this? Neither of us are changing our minds.”
Evasion	Statements designed to shift the focus of the conflict.	“I hear the Joneses down the street have that problem, not us.”
Stalling	Statements designed to shift the conflict to another time.	“I don’t have time to talk about this right now.”
Irrelevant Remark	Statements that have nothing to do with the conflict.	“I never knew the wallpaper in here had flowers on it.”

Battlers

For our purposes, we have opted to describe those who engage in distributive conflict as battlers because they often see going into a conflict as heading off to war, which is most appropriately aligned with the distributive conflict management strategies. Battlers believe that conflict should take on an approach where the battler must win the conflict at all costs without regard to the damage they might cause along the way. Furthermore, battlers tend to be very personalistic in their goals and are often highly antagonistic towards those individuals with whom they are engaging in conflict.[43]

Alan Sillars, Stephen, Coletti, Doug Parry, and Mark Rogers created a taxonomy of different types of strategies that people can use when using distributive conflict management strategies. Table **6.3.4.2** provides a list of these common tactics. [44]

Table **6.3.4.2**: Distributive Conflict Management Strategies

Conflict Management Tactic	Definition	Example
Faulting	Statements that verbally criticize a partner.	“Wow, I can’t believe you are so dense at times.”
Rejection	Statements that express antagonistic disagreement.	“That is such a dumb idea.”
Hostile Questioning	Questions designed to fault a partner.	“Who died and made you king?”
Hostile Joking	Humorous statements designed to attack a partner.	“I do believe a village has lost its idiot.”
Presumptive Attribution	Statements designed to point the meaning or origin of the conflict to another source.	“You just think that because your father keeps telling you that.”
Avoiding Responsibility	Statements that deny fault.	“Not my fault, not my problem.”
Prescription	Statements that describe a specific change to another’s behavior.	“You know, if you’d just stop yelling, maybe people would take you seriously.”
Threat	Statements designed to inform a partner of a future punishment.	“You either tell your mother we’re not coming, or I’m getting a divorce attorney.”
Blame	Statements that lay culpability for a problem on a partner.	“It’s your fault we got ourselves in this mess in the first place.”
Shouting	Statements delivered in a manner with an increased volume.	“DAMMIT! GET YOUR ACT TOGETHER!”
Sarcasm	Statements involving the use of irony to convey contempt, mock, insult, or wound another person.	“The trouble with you is that you lack the power of conversation but not the power of speech.”

Collaborators

The last type of conflicting partners are collaborators. There are a range of collaborating choices, from being completely collaborative in an attempt to find a mutually agreed upon solution, to being compromising when you realize that both sides will need to win and lose a little to come to a satisfactory solution. In both cases, the goal is to use prosocial communicative behaviors in an attempt to reach a solution everyone is happy with. Admittedly, this is often easier said than done. Furthermore, it’s entirely possible that one side says they want to collaborate, and the other side refuses to collaborate at all. When this happens, collaborative conflict management strategies may not be as effective, because it’s hard to collaborate with someone who truly believes you need to lose the conflict.

Alan Sillars, Stephen, Coletti, Doug Parry, and Mark Rogers created a taxonomy of different types of strategies that people can use when collaborating during a conflict. Table **6.3.4.3** provides a list of these common tactics.[45]

Table **6.3.4.3**: Integrative Conflict Management Strategies

Conflict Management Tactic	Definition	Example
Descriptive Acts	Statements that describe obvious events or factors.	“Last time your sister babysat our kids, she yelled at them.”
Qualification	Statements that explicitly explain the conflict.	“I am upset because you didn’t come home last night.”
Disclosure	Statements that disclose one’s thoughts and feelings in a non-judgmental way.	“I get really worried when you don’t call and let me know where you are.”
Soliciting Disclosure	Questions that ask another person to disclose their thoughts and feelings.	“How do you feel about what I just said?”
Negative Inquiry	Statements allowing for the other person to identify your negative behaviors.	“What is it that I do that makes you yell at me?”
Empathy	Statements that indicate you understand and relate to the other person’s emotions and experiences.	“I know this isn’t easy for you.”
Emphasize Commonalities	Statements that highlight shared goals, aims, and values.	“We both want what’s best for our son.”
Accepting Responsibility	Statements acknowledging the part you play within a conflict.	“You’re right. I sometimes let my anger get the best of me.”
Initiating Problem-Solving	Statements designed to help the conflict come to a mutually agreed upon solution.	“So let’s brainstorm some ways that will help us solve this.”
Concession	Statements designed to give in or yield to a partner’s goals, aims, or values.	“I promise, I will make sure my homework is complete before I watch television.”

Before we conclude this section, we do want to point out that conflict management strategies are often reciprocated by others. If you start a conflict in a highly competitive way, do not be surprised when your conflicting partner mirrors you and starts using distributive conflict management strategies in return. The same is also true for integrative conflict management strategies. When you start using integrative conflict management strategies, you can often deescalate a problematic conflict by using integrative conflict management strategies.[46]

STLC Conflict Model

Ruth Anna Abigail and Dudley Cahn created a very simple model when thinking about how we communicate during conflict.[47] They called the model the STLC Conflict Model because it stands for stop, think, listen, and then communicate.



Figure **6.3.4.1**: STLC Conflict Model

Stop

The first thing an individual needs to do when interacting with another person during conflict is to take the time to be present within the conflict itself. Too often, people engaged in a conflict say whatever enters their mind before they’ve really had a chance to process the message and think of the best strategies to use to send that message. Others end up talking past one another during a conflict because they simply are not paying attention to each other and the competing needs within the conflict. Communication

problems often occur during conflict because people tend to react to conflict situations when they arise instead of being mindful and present during the conflict itself. For this reason, it's always important to take a breath during a conflict and first stop.

Sometimes these "time outs" need to be physical. Maybe you need to leave the room and go for a brief walk to calm down, or maybe you just need to get a glass of water. Whatever you need to do, it's important to take this break. This break takes you out of a "reactive stance into a proactive one." [48]

Think

Once you've stopped, you now have the ability to really think about what you are communicating. You want to think through the conflict itself. What is the conflict really about? Often people engage in conflicts about superficial items when there are truly much deeper issues that are being avoided. You also want to consider what possible causes led to the conflict and what possible courses of action you think are possible to conclude the conflict. Cahn and Abigail argue that there are four possible outcomes that can occur: do nothing, change yourself, change the other person, or change the situation.

First, you can simply sit back and avoid the conflict. Maybe you're engaging in a conflict about politics with a family member, and this conflict is actually just going to make everyone mad. For this reason, you opt just to stop the conflict and change topics to avoid making people upset. One of our coauthors was at a funeral when an uncle asked our coauthor about our coauthor's impression of the current President. Our coauthor's immediate response was, "Do you really want me to answer that question?" Our coauthor knew that everyone else in the room would completely disagree, so our coauthor knew this was probably a can of worms that just didn't need to be opened.

Second, we can change ourselves. Often, we are at fault and start conflicts. We may not even realize how our behavior caused the conflict until we take a step back and really analyze what is happening. When it comes to being at fault, it's very important to admit that you've done wrong. Nothing is worse (and can stoke a conflict more) than when someone refuses to see their part in the conflict.

Third, we can attempt to change the other person. Let's face it, changing someone else is easier said than done. Just ask your parents/guardians! All of our parents/guardians have attempted to change our behaviors at one point or another, and changing people is very hard. Even with the powers of punishment and reward, a lot of time change only lasts as long as the punishment or the reward. One of our coauthors was in a constant battle with our coauthors' parents about thumb sucking as a child. Our coauthor's parents tried everything to get the thumb sucking to stop. They finally came up with an ingenious plan. They agreed to buy a toy electric saw if their child didn't engage in thumb sucking for the entire month. Well, for a whole month, no thumb sucking occurred at all. The child got the toy saw, and immediately inserted the thumb back into our coauthor's mouth. This short story is a great illustration of the problems that can be posed by rewards. Punishment works the same way. As long as people are being punished, they will behave in a specific way. If that punishment is ever taken away, so will the behavior.

Lastly, we can just change the situation. Having a conflict with your roommates? Move out. Having a conflict with your boss? Find a new job. Having a conflict with a professor? Drop the course. Admittedly, changing the situation is not necessarily the first choice people should take when thinking about possibilities, but often it's the best decision for long-term happiness. In essence, some conflicts will not be settled between people. When these conflicts arise, you can try and change yourself, hope the other person will change (they probably won't, though), or just get out of it altogether.

Listen

The third step in the STLC model is listen. Humans are not always the best listeners. As we discussed in Chapter 7, listening is a skill. Unfortunately, during a conflict situation, this is a skill that is desperately needed and often forgotten. When we feel defensive during a conflict, our listening becomes spotty at best because we start to focus on ourselves and protecting ourselves instead of trying to be empathic and seeing the conflict through the other person's eyes.

One mistake some people make is to think they're listening, but in reality, they're listening for flaws in the other person's argument. We often use this type of selective listening as a way to devalue the other person's stance. In essence, we will hear one small flaw with what the other person is saying and then use that flaw to demonstrate that obviously everything else must be wrong as well.

The goal of listening must be to suspend your judgment and really attempt to be present enough to accurately interpret the message being sent by the other person. When we listen in this highly empathic way, we are often able to see things from the other person's

point-of-view, which could help us come to a better-negotiated outcome in the long run.

Communicate

Lastly, but certainly not least, we communicate with the other person. Notice that Cahn and Abigail put communication as the last part of the STLC model because it's the hardest one to do effectively during a conflict if the first three are not done correctly. When we communicate during a conflict, we must be hyper-aware of our nonverbal behavior (eye movement, gestures, posture, etc.). Nothing will kill a message faster than when it's accompanied by bad nonverbal behavior. For example, rolling one's eyes while another person is speaking is not an effective way to engage in conflict. One of our coauthors used to work with two women who clearly despised one another. They would never openly say something negative about the other person publicly, but in meetings, one would roll her eyes and make these nonword sounds of disagreement. The other one would just smile, slow her speech, and look in the other woman's direction. Everyone around the conference table knew exactly what was transpiring, yet no words needed to be uttered at all.

During a conflict, it's important to be assertive and stand up for your ideas without becoming verbally aggressive. Conversely, you have to be open to someone else's use of assertiveness as well without having to tolerate verbal aggression. We often end up using mediators to help call people on the carpet when they communicate in a fashion that is verbally aggressive or does not further the conflict itself. As Cahn and Abigail note, "People who are assertive with one another have the greatest chance of achieving mutual satisfaction and growth in their relationship." [49]

Mindfulness Activity



The STLC Model for Conflict is definitely one that is highly aligned with our discussion of mindful interpersonal relationships within this book. Taylor Rush, a clinical psychologist working for the Cleveland Clinic's Center for Neuro-Restoration, recommends seven considerations for ensuring mindfulness while engaged in conflict:

1. **Set intentions.** What do you want to be discussed during this interaction? What do you want to learn from the other person? What do you want to happen as a result of this conversation? Set your intentions early and check-in along to way to keep the conversation on point.
2. **Stay present to the situation.** Try to keep assumptions at bay and ask open-ended questions to better understand the other person's perspective and experiences.
3. **Stay aware of your inner reactions.** Disrupt the automatic feedback loop between your body and your thoughts. Acknowledge distressing or judgmental thoughts and feelings without reacting to them. Then check them against the facts of the situation.
4. **Take one good breath before responding.** A brief pause can mean all the difference between opting for a thoughtful response or knee-jerk reaction.
5. **Use reflective statements.** This is a tried and true strategy for staying present. It allows you to fully concentrate on what the other person is saying (rather than form your rebuttal) and shows the other person you have an interest in what they are actually saying. This will make them more likely to reciprocate!
6. **Remember, it's not all about you.** The ultimate objective is that both parties are heard and find the conversation beneficial. Try to actively take the other person's perspective and cultivate compassion (even if you fundamentally do not agree with their position). This makes conflict escalation much less likely.
7. **Investigate afterward.** What do you feel now that the conversation is over? What was the overall tone of the conversation? Do you feel like you understand the other person's perspective? Do they understand yours? Will this require further conversation or has the issue been resolved? Asking these questions will help you to hone your practice for the future.[50]

For this activity, we want you to think back to a recent conflict that you had with another person (e.g., coworker, friend, family member, romantic partner). Answer the following questions:

1. If you used the STLC Model for Conflict, how effective was it for you? Why?
2. If you did not use the STLC Model for Conflict, do you think you could have benefited from this approach? Why?

3. Looking at Rush's seven strategies for engaging in mindful conflict, did you engage in all of them? If you didn't engage in them all, which ones did you engage in, and which ones didn't you engage in? How could engaging in all seven of them helped your conflict management with this person?
4. If you haven't already, take a moment to think about the questions posed in #7 of Rush's list. What can you learn from this conflict that will help prepare you for future conflicts with this person or future conflicts more broadly?

Key Takeaways

- A conflict occurs when two people perceive differing goals or values, and if the two parties do not reach a solution, the interpersonal relationship could be seriously fractured. An argument, on the other hand, is a difference of opinion that occurs between two people during an argument. The primary difference between a conflict and an argument involves the emotional volatility of the situation. However, individuals with a low tolerance for disagreement may perceive any form of argument as interpersonal conflict.
- In this section, we discussed three basic forms of conflict management: integrative (collaborators), distributive (battlers), and avoidance (avoiders). Integrative conflict occurs when two people attempt a win-win situation where the conflict parties strive to find a mutually beneficial solution to a problem. Distributive conflict occurs when one or both conflict parties desire a win-lose orientation where they will win and the other person will lose. Lastly, we have avoidance, which occurs when an individual either tries to avoid a conflict altogether or leaves the conflict field.
- Dudley Cahn and Ruth Anna Abigail's STLC method for communication is very helpful when working through conflict with others. STLC stands for stop, think, listening, and communicate. Stop and time to be present within the conflict itself and prepare. Think through the real reasons for the conflict and what you want as an outcome for the conflict. Listen to what the other person says and try to understand the conflict from their point-of-view. Communicate in a manner that is assertive, constructive, and aware of your overall message.

Exercises

1. Think of a time when a simple disagreement escalated to a conflict. What happened? Why did this escalation occur?
2. During conflict, do you think it's appropriate to use all three forms of conflict management? Why?
3. Think of a recent interpersonal conflict that you had that went badly. How could you have implemented the STLC Model of Conflict to improve what happened during that conflict?

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6.3.5: Chapter Wrap-Up

As we discussed at the beginning of this chapter, conflict in interpersonal relationships is inevitable. The only way relationships can truly grow is through conflict, so learning how to manage conflict effectively is essential for successful interpersonal relationships.

End of Chapter

Key Terms

- Accidental Communication
- Alexithymia
- Argument
- Avoidance
- Coercive Power
- Compliance
- Conflict
- Disagreement
- Distributive Conflict
- Dunning–Kruger Effect
- Emotional awareness
- Emotional Intelligence
- Emotions
- Expert Power
- Expressive Communication
- Feelings
- Identification
- Influence
- Informational Power
- Integrative Conflict
- Interdependence
- Internalization
- Legitimate Power
- Power
- Procedural Disagreements
- Referent Power
- Reward Power
- Rhetorical Communication
- Substantive Disagreement
- Tolerance for Disagreement
- “You” Statements

Read World Case Study

Paul has been in a yearlong relationship with his boyfriend Bill. Paul really loves the idea of being in love, but he’s just not in love with Bill at all. Unfortunately, on Valentine’s Day, he made the mistake of telling Bill that he loved him even though he just doesn’t. As far as Paul is concerned, he could end the relationship today.

Bill, on the other hand, fell madly in love with Paul almost immediately after they started hanging out and going to the gym together. One day when Bill and Paul were hanging out watching TV, he looked at Paul and told him that he loved him. Bill immediately noticed that Paul looked like a deer in headlights and let him off easy saying, “There’s no need to say it back if you’re not ready to do so.”

Ultimately, the relationship became more like a really good friendship than a romantic relationship. The two hung out and went to dinner and saw movies, but were never really intimate with one another at all. Paul kept up the charade because he kind of liked some of the perks of being in a relationship. He liked having someone to hang out with all the time. He liked having someone who cleaned his house and cooked for him. He liked having someone who would look after his cats when he went on vacation.

Over time, Bill started to realize that something was wrong with the relationship. One day when he and Paul were talking about the future, he told Paul, "I want to be everything for you." He immediately saw that once again Paul looked like a deer trapped in headlights. Over time, Bill started noticing that Paul was getting more and more distant. He really loved Paul, but he started to realize that it really wasn't being reciprocated the same way. Instead of saying something, he just shook the thoughts out of his mind and kept going.

1. Would you classify this as a healthy relationship?
2. Why do you think Paul has such a hard time being honest with Bill?
3. Why do you think Bill was so determined to make the relationship work when it was clearly not being reciprocated?
4. How would you describe the emotional quality of this relationship?
5. How do you think this couple would engage in conflict?

End of Chapter Quiz

1. Jonathan loves to debate a wide range of ideas. In fact, he has no problems arguing for or against something just to engage in a healthy debate with another person. Which personality trait does Jonathan exhibit?
   a. need for cognition
   b. argumentativeness proneness
   c. conflict avoidance
   d. high tolerance for disagreement

Answer

e

2. Which of the following represents a nonviolent communicative message?
   a. silence
   b. placating
   c. playing games
   d. aggressive behavior
   e. violence

Answer

c

3. Which of the following is not an effective statement when communicating about one's feelings?
   a. "If you flirt with one more person, I'm going to hurt myself, and it will be your fault."
   b. "I hate it when you flirt with other people."
   c. "I feel lonely when you flirt with other people because I need emotional safety."
   d. "You make me feel like a piece of trash when you flirt with other people."

Answer

a

4. Viivi is a Norwegian language instructor. As she teaches about Norwegian, she also peppers in a variety of culture factors into her teachings. One of her students, Jim, really wants to spend a summer abroad in Norway, so Jim listens attentively to everything Viivi has to offer. Because of Viivi's knowledge of Norway, Jim hangs on every word. What type of power best represents Viivi's?
   a. coercive

b. reward
c. legitimate
d. expert
e. referent

Answer

d

5. Hodoya is a Canadian union leader. She's currently involved in negotiations with a large uranium production company. Hodoya sees her job as the lead negotiator to get the best possible deal for her union members. As such, she goes into negotiations with a win-lose orientation. What type of conflict management strategies will Hodoya employ?
   a. avoidance
   b. distributive
   c. competitive
   d. collaborative
   e. integrative

Answer

d

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SECTION OVERVIEW

6.4: Intrapersonal Communication

Who are you? Have you ever sat around thinking about how you fit into the larger universe. Manford Kuhn created a simple exercise to get at the heart of this question.[1] Take out a piece of paper and number 1 to 20 (or use the worksheet in the workbook). For each number, answer the question "Who Am I?" using a complete sentence. Results from this activity generally demonstrate five distinct categories about an individual: social group an individual belongs to, ideological beliefs, personal interests, personal ambitions, and self-evaluations. If you did the Twenty Item Test, take a second and identify your list using this scheme. All of these five categories are happening at what is called the intrapersonal-level. **Intrapersonal** refers to something that exists or occurs within an individual's self or mind. This chapter focuses on understanding intrapersonal processes and how they relate to communication.

Larry Barker and Gordon Wiseman created one of the oldest definitions of the term "intrapersonal communication" in the field of communication. Barker and Wiseman defined intrapersonal communication as "the creating, functioning, and evaluating of symbolic processes which operate primarily within oneself."[2] The researchers go on to explain that intrapersonal communication exists on a continuum from thinking and reflecting (more internal) to talking aloud or writing a note to one's self (more external).

More recently, Samuel Riccillo defined intrapersonal communication as a "process involving the activity of the individual biological organism's capacity to coordinate and organize complex actions of an intentional nature… For the human organism, such complex interactions are anchored in the signaling processes known as symbolic language."[3] Both the Barker and Wiseman and the Riccillo definitions represent two ends of the spectrum with regards to the idea of intrapersonal communication. For our purposes in this book, we define intrapersonal communication as something of a hybrid between these two definitions. **Intrapersonal communication** refers to communication phenomena that exist within or occurs because of an individual's self or mind. Under this definition, we can examine Barker and Wiseman's notions of both ends of their intrapersonal communication continuum while also realizing that Riccillo's notions of biology (e.g., personality and communication traits) are equally important.

6.4.1: Communication and Relational Dispositions

6.4.2: Who Are You?

6.4.3: Personality and Perception in Intrapersonal Communication

6.4.4: Chapter Wrap-Up

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6.4.1: Communication and Relational Dispositions

Learning Outcomes

- List and explain the different personality traits associated with Daly's communication dispositions.
- List and explain the different personality traits associated with Daly's relational dispositions.

In the previous section, we explored the importance of temperament, cognitive dispositions, and personal-social dispositions. In this section, we are going to explore the last two dispositions discussed by John Daly: communication and relational dispositions.[68]

Communication Dispositions

Now that we've examined cognitive and personal-social dispositions, we can move on and explore some intrapersonal dispositions studied specifically by communication scholars. **Communication dispositions** are general patterns of communicative behavior. We are going to explore the nature of introversion/extraversion, approach and avoidance traits, argumentativeness/verbal aggressiveness, and lastly, sociocommunicative orientation.

Introversion/Extraversion

The concept of **introversion/extraversion** is one that has been widely studied by both psychologists and communication researchers. The idea is that people exist on a continuum that exists from highly extraverted (an individual's likelihood to be talkative, dynamic, and outgoing) to highly introverted (an individual's likelihood to be quiet, shy, and more reserved). Before continuing, take a second and fill out the Introversion Scale created by James C. McCroskey and available on his website (http://www.jamescmccroskey.com/measu...troversion.htm). There is a considerable amount of research that has found an individual's tendency toward extraversion or introversion is biologically based.[69] As such, where you score on the Introversion Scale may largely be a factor of your genetic makeup and not something you can alter greatly.

When it comes to interpersonal relationships, individuals who score highly on extraversion tended to be perceived by others as intelligent, friendly, and attractive. As such, extraverts tend to have more opportunities for interpersonal communication; it's not surprising that they tend to have better communicative skills when compared to their more introverted counterparts.

Approach and Avoidance

Traits The second set of communication dispositions are categorized as approach and avoidance traits. According to Virginia Richmond, Jason Wrench, and James McCroskey, approach and avoidance traits depict the tendency an individual has to either willingly approach or avoid situations where he or she will have to communicate with others.[70] To help us understand the approach and avoidance traits, we'll examine three specific traits commonly discussed by communication scholars: shyness, communication apprehension, and willingness to communicate.

Shyness

In a classic study conducted by Philip Zimbardo, he asked two questions to over 5,000 participants: Do you presently consider yourself to be a shy person? If "No," was there ever a period in your life during which you considered yourself to be a shy person? [71] The results of these two questions were quite surprising. Over 40% said that they considered themselves to be currently shy. Over 80% said that they had been shy at one point in their lifetimes. Another, more revealing measure of shyness, was created by James C. McCroskey and Virginia Richmond and is available on his website (http://www.jamescmccroskey.com/measures/shyness.htm).[72] Before going further in this chapter, take a minute and complete the shyness scale.

According to Arnold Buss, shyness involves discomfort when an individual is interacting with another person(s) in a social situation.[73] Buss further clarifies the concept by differentiating between anxious shyness and self-conscious shyness. Anxious shyness involves the fear associated with dealing with others face-to-face. **Anxious shyness** is initially caused by a combination of strangers, novel settings, novel social roles, fear of evaluation, or fear of self-presentation. However, long-term anxious shyness is generally caused by chronic fear, low sociability, low self-esteem, loneliness, and avoidance conditioning. **Self-conscious shyness**, on the other hand, involves feeling conspicuous or socially exposed when dealing with others face-to-face. Self-conscious shyness is generally initially caused by feelings of conspicuousness, breaches of one's privacy, teasing/ridicule/bullying, overpraise, or

one's foolish actions. However, long-term self-conscious shyness can be a result of socialization, public self-consciousness, history of teasing/ridicule/bullying, low self-esteem, negative appearance, and poor social skills.

Whether one suffers from anxious or self-conscious shyness, the general outcome is a detriment to an individual's interpersonal interactions with others. Generally speaking, shy individuals have few opportunities to engage in interpersonal interactions with others, so their communicative skills are not as developed as their less-shy counterparts. This lack of skill practice tends to place a shy individual in a never-ending spiral where he or she always feels just outside the crowd.

Communication Apprehension

James C. McCroskey started examining the notion of anxiety in communicative situations during the late 1960s. Since that time, research on communication apprehension has been one of the most commonly studied variables in the field. McCroskey defined **communication apprehension** as the fear or anxiety "associated with either real or anticipated communication with another person or persons."[74] Although many different measures have been created over the years examining communication apprehension, the most prominent one has been James C. McCroskey's Personal Report of Communication Apprehension-24 (PRCA-24).[75] If you have not done so already, please stop reading and complete the PRCA-24 before going further (http://www.jamescmccroskey.com/measures/prca24.htm).

The PRCA-24 evaluates four distinct types of communication apprehension (CA): interpersonal CA, group CA, meeting CA, and public CA. Interpersonal CA is the one most important to us within this textbook because it examines the extent to which individuals experience fear or anxiety when thinking about or actually interacting with another person (For more on the topic of CA as a general area of study, read Richmond, Wrench, and McCroskey's book, *Communication Apprehension, Avoidance, and Effectiveness*[76]). Interpersonal CA impacts people's relationship development almost immediately. In one experimental study, researchers paired people and had them converse for 15 minutes. At the end of the 15-minute conversation, the researchers had both parties rate the other individual. The results indicated that high-CAs (highly communicative apprehensive people) were perceived as less attractive, less trustworthy, and less satisfied than low-CAs (people with low levels of communication apprehension).[77] Generally speaking, high-CAs don't tend to fare well in most of the research in interpersonal communication. Instead of going into too much detail at this point, we will periodically revisit CA as we explore several different topics in this book.

Research Spotlight



In 2019, Jason Wrench, Narissra, Punyanunt-Carter, and Adolfo Garcia examined the relationships between mindfulness and religious communication. For our purposes, the researchers examined an individual's religious CA, or the degree to which people were anxious about communicating with another person about their personally held religious beliefs. In this study, mindful describing and nonreactivity to inner experience was found to be negatively related to religious CA. As the authors note, "mindfulness can help people develop more confidence to communicate their ideas and opinions about religion. Therefore, people would be less apprehensive about communicating about religion" (pg. 13).

Wrench, J. S., Punyanunt-Carter, N. M., & Garcia, A. J. (2019). Understanding college students' perceptions regarding mindfulness: The impact on intellectual humility, faith development, religious communication apprehension, and religious communication. Journal of Religion and Health. https://doi.org/10.1007/s10943-019-00861-3

Willingness to Communicate

The final of our approach and avoidance traits is the willingness to communicate (WTC). James McCroskey and Virginia Richmond originally coined the WTC concept as an individual's predisposition to initiate communication with others.[78] **Willingness to communicate** examines an individual's tendency to initiate communicative interactions with other people. Take a minute and complete the WTC scale available from James C. McCroskey's website (http://www.jamescmccroskey.com/measures/WTC.htm).

People who have high WTC levels are going to be more likely to initiate interpersonal interactions than those with low WTC levels. However, just because someone is not likely to initiate conversations doesn't mean that he or she is unable to actively and successfully engage in interpersonal interactions. For this reason, we refer to WTC as an approach trait because it describes an individual's likelihood of approaching interactions with other people. As noted by Richmond et al., "People with a high WTC

attempt to communicate more often and work harder to make that communication effective than people with a low WTC, who make far fewer attempts and often aren't as effective at communicating." [79]

Argumentativeness/Verbal Aggressiveness

Starting in the mid-1980s, Dominic Infante and Charles Wigley defined verbal aggression as "the tendency to attack the self-concept of individuals instead of, or in addition to, their positions on topics of communication."[80] Notice that this definition specifically is focused on the attacking of someone's self-concept or an individual's attitudes, opinions, and cognitions about one's competence, character, strengths, and weaknesses. For example, if someone perceives themself as a good worker, then a verbally aggressive attack would demean that person's quality of work or their ability to do future quality work. In a study conducted by Terry Kinney,81 he found that self-concept attacks happen on three basic fronts: group membership (e.g., "Your whole division is a bunch of idiots!"), personal failings (e.g., "No wonder you keep getting passed up for a promotion!"), and relational failings (e.g., "No wonder your spouse left you!").

Now that we've discussed what verbal aggression is, we should delineate verbal aggression from another closely related term, argumentativeness. According to Dominic Infante and Andrew Rancer, **argumentativeness** is a communication trait that "predisposes the individual in communication situations to advocate positions on controversial issues, and to attacking verbally the positions which other people take on these issues."[82]You'll notice that argumentativeness occurs when an individual attacks another's positions on various issues; whereas, verbal aggression occurs when an individual attacks someone's self-concept instead of attack another's positions. Argumentativeness is seen as a constructive communication trait, while verbal aggression is a destructive communication trait.

Individuals who are highly verbally aggressive are not liked by those around them.[83]Researchers have seen this pattern of results across different relationship types. Highly verbally aggressive individuals tend to justify their verbal aggression in interpersonal relationships regardless of the relational stage (new vs. long-term relationship).[84] In an interesting study conducted by Beth Semic and Daniel Canary, the two set out to watch interpersonal interactions and the types of arguments formed during those interactions based on individuals' verbal aggressiveness and argumentativeness.[85] The researchers had friendshipdyads come into the lab and were asked to talk about two different topics. The researchers found that highly argumentative individuals did not differ in the number of arguments they made when compared to their low argumentative counterparts. However, highly verbally aggressive individuals provided far fewer arguments when compared to their less verbally aggressive counterparts. Although this study did not find that highly argumentative people provided more (or better) arguments, highly verbally aggressive people provided fewer actual arguments when they disagreed with another person. Overall, verbal aggression and argumentativeness have been shown to impact several different interpersonal relationships, so we will periodically revisit these concepts throughout the book.

Sociocommunicative Orientation

In the mid to late 1970s, Sandra Bem began examining psychological gender orientation.[86] In her theorizing of psychological gender, Bem measured two constructs, masculinity and femininity, using a scale she created called the Bem Sex-Role Inventory (BSRI–garote.bdmonkeys.net/bsri.html). Her measure was designed to evaluate an individual's femininity or masculinity. Bem defined masculinity as individuals exhibiting perceptions and traits typically associated with males, and femininity as individuals exhibiting perceptions and traits usually associated with females. Individuals who adhered to both their biological sex and their corresponding psychological gender (masculine males, feminine females) were considered sex-typed. Individuals who differed between their biological sex and their corresponding psychological gender (feminine males, masculine females) were labeled cross-sex typed. Lastly, some individuals exhibited both feminine and masculine traits, and these individuals were called androgynous.

Virginia Richmond and James McCroskey opted to discard the biological sex-biased language of "masculine" and "feminine" for the more neutral language of "assertiveness" and "responsiveness."[87] The combination of assertiveness and responsiveness was called someone's sociocommunicative orientation, which emphasizes that Bem's notions of gender are truly representative of communicator traits and not one's biological sex. Before talking about the two factors of **sociocommunicative orientation**, please take a few minutes to complete the Sociocommunicative Orientation Scale (http://www.jamescmccroskey.com/measures/sco.htm).[88]

Responsiveness

Responsiveness refers to an individual who "considers other's feelings, listens to what others have to say, and recognizes the needs of others."[89] If you filled out the Sociocommunicative Orientation Scale, you would find that the words associated with responsiveness include the following: helpful, responsive to others, sympathetic, compassionate, sensitive to the needs of others, sincere, gentle, warm, tender, and friendly.

Assertiveness

Assertiveness refers to individuals who "can initiate, maintain, and terminate conversations, according to their interpersonal goals." [90] If you filled out the Sociocommunicative Orientation Scale, you would find that the words associated with assertiveness include the following: defends own beliefs, independent, forceful, has a strong personality, assertive, dominant, willing to take a stand, acts as a leader, aggressive, and competitive.

Versatility

Communication always exists within specific contexts, so picking a single best style to communicate in every context simply can't be done because not all patterns of communication are appropriate or effective in all situations. As such, McCroskey and Richmond added a third dimension to the mix that they called **versatility**. [91] In essence, individuals who are competent communicators know when it is both appropriate and effective to use both responsiveness and assertiveness. The notion of pairing the two terms against each other did not make sense to McCroskey and Richmond because both were so important. Other terms scholars have associated with versatility include "adaptability, flexibility, rhetorical sensitivity, and style flexing." [92]The opposite of versatility was also noted by McCroskey and Richmond, who saw such terms as dogmatic, rigid, uncompromising, and unyielding as demonstrating the lack of versatility.

Sociocommunicative Orientation and Interpersonal Communication

Sociocommunicative orientation has been examined in several studies that relate to interpersonal communication. In a study conducted by Brian Patterson and Shawn Beckett, the researchers sought to see the importance of sociocommunicative orientation and how people repair relationships.[93] Highly assertive individuals were found to take control of repair situations. Highly responsive individuals, on the other hand, tended to differ in their approaches to relational repair, depending on whether the target was perceived as assertive or responsive. When a target was perceived as highly assertive, the responsive individual tended to let the assertive person take control of the relational repair process. When a target was perceived as highly responsive, the responsive individual was more likely to encourage the other person to self-disclose and took on the role of the listener. As a whole, highly assertive individuals were more likely to stress the optimism of the relationship, while highly responsive individuals were more likely to take on the role of a listener during the relational repair. Later in this book, we will revisit several different interpersonal communication contexts where sociocommunicative orientation has been researched.

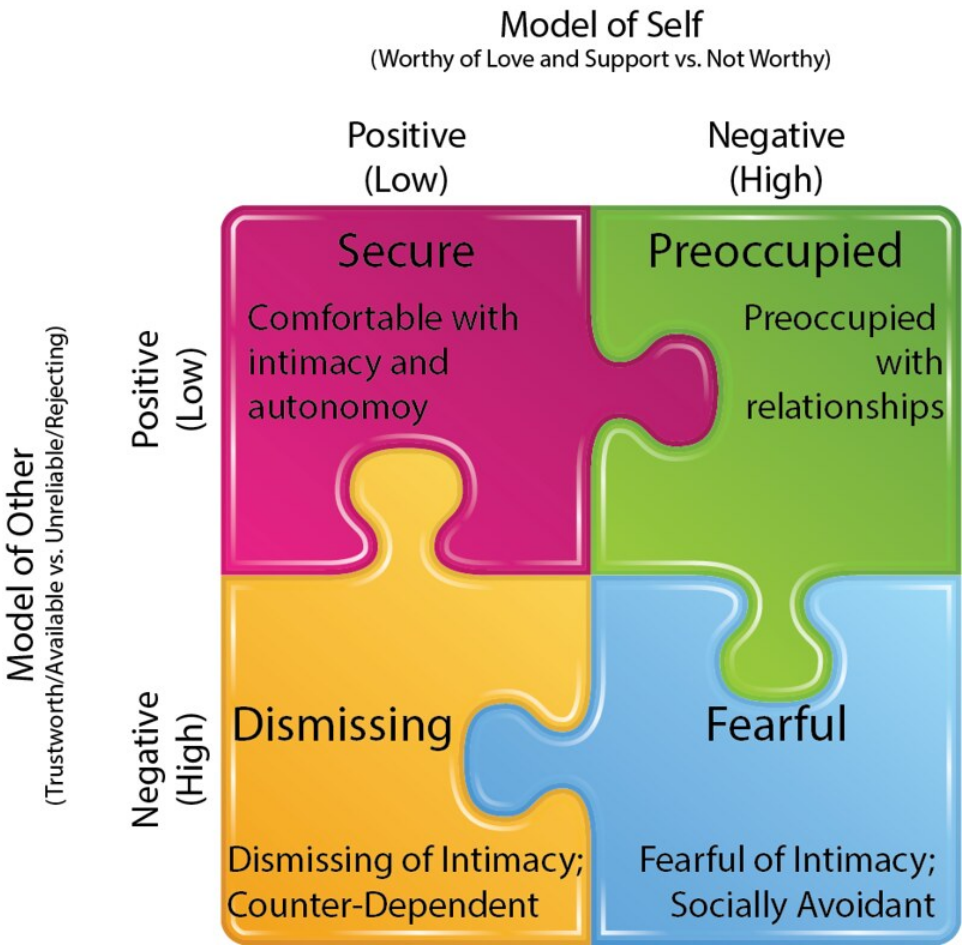


Figure **6.4.1.1**: Attachment Styles

Relational Dispositions

The final three dimensions proposed by John Daly were relational dispositions.[94] **Relational dispositions** are general patterns of mental processes that impact how people view and organize themselves in relationships. For our purposes, we'll examine two unique relational dispositions: attachment and rejection sensitivity.

Attachment

In a set of three different volumes, John Bowlby theorized that humans were born with a set of inherent behaviors designed to allow proximity with supportive others.[95]These behaviors were called attachment behaviors, and the supportive others were called attachment figures. Inherent in Bowlby's model of attachment is that humans have a biological drive to attach themselves with others. For example, a baby's crying and searching help the baby find their attachment figure (typically a parent/guardian) who can provide care, protection, and support. Infants (and adults) view attachment as an issue of whether an attachment figure is nearby, accessible, and attentive? Bowlby believed that these interpersonal models, which were developed in infancy through thousands of interactions with an attachment figure, would influence an individual's interpersonal relationships across their entire life span. According to Bowlby, the basic internal working model of affection consists of three components.[96] Infants who bond with their attachment figure during the first two years develop a model that people are trustworthy, develop a model that informs the infant that he or she is valuable, and develop a model that informs the infant that he or she is effective during interpersonal interactions. As you can easily see, not developing this model during infancy leads to several problems.

If there is a breakdown in an individual's relationship with their attachment figure (primarily one's mother), then the infant would suffer long-term negative consequences. Bowlby called his ideas on the importance of mother-child attachment and the lack thereof as the **Maternal Deprivation Hypothesis**. Bowlby hypothesized that maternal deprivation occurred as a result of separation from or loss of one's mother or a mother's inability to develop an attachment with her infant. This attachment is crucial during the first

two years of a child's life. Bowlby predicted that children who were deprived of attachment (or had a sporadic attachment) would later exhibit delinquency, reduced intelligence, increased aggression, depression, and **affectionless psychopathy** – the inability to show affection or care about others.

In 1991, Kim Bartholomew and Leonard Horowitz expanded on Bowlby's work developing a scheme for understanding adult attachment.[97] In this study, Bartholomew and Horowitz proposed a model for understanding adult attachment. On one end of the spectrum, you have an individual's abstract image of themself as being either worthy of love and support or not. On the other end of the spectrum, you have an individual's perception of whether or not another person will be trustworthy/available or another person is unreliable and rejecting. When you combine these dichotomies, you end up with four distinct attachment styles (as seen in Figure 3.3.1).

The first attachment style is labeled "**secure**," because these individuals believe that they are loveable and expect that others will generally behave in accepting and responsive ways within interpersonal interactions. Not surprisingly, secure individuals tend to show the most satisfaction, commitment, and trust in their relationships. The second attachment style, **preoccupied**, occurs when someone does not perceive themself as worthy of love but does generally see people as trustworthy and available for interpersonal relationships. These individuals would attempt to get others to accept them. The third attachment style, **fearful** (sometimes referred to as fearful avoidants[98]), represents individuals who see themselves as unworthy of love and generally believe that others will react negatively through either deception or rejection. These individuals simply avoid interpersonal relationships to avoid being rejected by others. Even in communication, fearful people may avoid communication because they simply believe that others will not provide helpful information or others will simply reject their communicative attempts. The final attachment style, **dismissing**, reflects those individuals who see themselves as worthy of love, but generally believes that others will be deceptive and reject them in interpersonal relationships. These people tend to avoid interpersonal relationships to protect themselves against disappointment that occurs from placing too much trust in another person or making one's self vulnerable to rejection.

Rejection Sensitivity

Although no one likes to be rejected by other people in interpersonal interactions, most of us do differ from one another in how this rejection affects us as humans. We've all had our relational approaches (either by potential friends or dating partners) rejected at some point and know that it kind of sucks to be rejected. The idea that people differ in terms of degree in how sensitive they are to rejection was first discussed in the 1930s by a German psychoanalyst named Karen Horney.[99] **Rejection sensitivity** can be defined as the degree to which an individual expects to be rejected, readily perceives rejection when occurring, and experiences an intensely adverse reaction to that rejection.

First, people that are highly sensitive to rejection expect that others will reject them. This expectation of rejection is generally based on a multitude of previous experiences where the individual has faced real rejection. Hence, they just assume that others will reject them.

Second, people highly sensitive to rejection are more adept at noting when they are being rejected; however, it's not uncommon for these individuals to see rejection when it does not exist. Horney explains perceptions of rejection in this fashion:

> It is difficult to describe the degree of their sensitivity to rejection. Change in an appointment, having to wait, failure to receive an immediate response, disagreement with their opinions, any noncompliance with their wishes, in short, any failure to fulfill their demands on their terms, is felt as a rebuff. And a rebuff not only throws them back on their basic anxiety, but it is also considered equivalent to humiliation. [100]

As we can see from this short description from Horney, rejection sensitivity can occur from even the slightest perceptions of being rejected.

Lastly, individuals who are highly sensitive to rejection tend to react negatively when they feel they are being rejected. This negative reaction can be as simple as just not bothering to engage in future interactions or even physical or verbal aggression. The link between the rejection and the negative reaction may not even be completely understandable to the individual. Horney explains, "More often the connection between feeling rebuffed and feeling irritated remains unconscious. This happens all the more easily since the rebuff may have been so slight as to escape conscious awareness. Then a person will feel irritable, or become spiteful and vindictive or feel fatigued or depressed or have a headache, without the remotest suspicion why." [101] Ultimately, individuals with

high sensitivity to rejection can develop a “why bother” approach to initiating new relationships with others. This fear of rejection eventually becomes a self-induced handicap that prevents these individuals from receiving the affection they desire.

As with most psychological phenomena, this process tends to proceed through a series of stages. Horney explains that individuals suffering from rejection sensitivity tend to undergo an eight-step cycle:

1. Fear of being rejected.
2. Excessive need for affection (e.g., demands for exclusive and unconditional love).
3. When the need is not met, they feel rejected.
4. The individual reacts negatively (e.g., with hostility) to the rejection.
5. Repressed hostility for fear of losing the affection.
6. Unexpressed rage builds up inside.
7. Increased fear of rejection.
8. Increased need for relational reassurance from a partner.

Of course, as an individual’s need for relational reassurance increases, so does their fear of being rejected, and the perceptions of rejection spiral out of control.

As you may have guessed, there is a strong connection between John Bowlby’s attachment theory[102] and Karen Horney’s theory of rejection sensitivity. As you can imagine, rejection sensitivity has several implications for interpersonal communication. In a study conducted by Geraldine Downey, Antonio Freitas, Benjamin Michaelis, and Hala Khouri, the researchers wanted to track high versus low rejection sensitive individuals in relationships and how long those relationships lasted.[103] The researchers also had the participants complete the Rejection Sensitivity Questionnaire created by Geraldine Downey and Scott Feldman.[104] The study started by having couples keep diaries for four weeks, which helped the researchers develop a baseline perception of an individual’s sensitivity to rejection during the conflict. After the initial four-week period, the researchers revisited the participants one year later to see what had happened. Not surprisingly, high rejection sensitive individuals were more likely to break up during the study than their low rejection sensitivity counterparts.

Key Takeaways

- The idea is that people exist on a continuum from highly extraverted (an individual’s likelihood to be talkative, dynamic, and outgoing) to highly introverted (an individual’s likelihood to be quiet, shy, and more reserved). Generally speaking, highly extraverted individuals tend to have a greater number of interpersonal relationships, but introverted people tend to have more depth in the handful of relationships they have.
- In this chapter, three approach and avoidance traits were discussed: willingness to communicate, shyness, and communication apprehension. Willingness to communicate refers to an individual’s tendency to initiate communicative interactions with other people. Shyness refers to discomfort when an individual is interacting with another person(s) in a social situation. Communication apprehension is the fear or anxiety associated with either real or anticipated communication with another person or persons. Where WTC examines initiation of interpersonal interactions, shyness discusses actual reserved interpersonal behavior, and CA is focused on the anxiety experienced (or perceived) in interpersonal interactions.
- Argumentativeness refers to an individual’s tendency to engage in the open exchange of ideas in the form of arguments; whereas, verbal aggressiveness is the tendency to attack an individual’s self-concept instead of an individual’s arguments.
- Sociocommunicative orientation refers to an individual’s combination of both assertive and responsive communication behaviors. Assertive communication behaviors are those that initiate, maintain, and terminate conversations according to their interpersonal goals during interpersonal interactions. Responsive communication behaviors are those that consider others’ feelings, listens to what others have to say, and recognizes the needs of others during interpersonal interactions. Individuals who can appropriately and effectively utilize assertive and responsive behaviors during interpersonal communication across varying contexts are referred to as versatile communicators (or competent communicators).
- John Bowlby’s theory of attachment starts with the basic notion that infants come pre-equipped with a set of behavioral skills that allow them to form attachments with their parents/guardians (specifically their mothers). When these attachments are not formed, the infant will grow up being unable to experience a range of healthy attachments later in life, along with several other counterproductive behaviors.

- Karen Horney's concept of rejection sensitivity examines the degree to which an individual anxiously expects to be rejected, readily perceives rejection when occurring, and experiences an intensely negative reaction to that rejection. People that have high levels of rejection sensitivity tend to create relational cycles that perpetuate a self-fulfilling prophecy of rejection in their interpersonal relationships.

Exercises

- Fill out the various measures discussed in this section related to communication. After completing these measures, how can your communication traits help explain your interpersonal relationships with others?
- Watch a segment of a political debate on YouTube. Would you characterize debates as argumentative, verbally aggressive, or something else entirely? Why?
- John Bowlby's attachment theory and Karen Horney's theory of rejection sensitivity have theoretical overlaps. Do you think that an individual's early attachment can lead to higher levels of rejection sensitivity? Why or why not?

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6.4.2: Who Are You?

Learning Outcomes

1. Differentiate between self-concept and self-esteem.
2. Explain what is meant by Charles Horton Cooley's concept of the looking-glass self.
3. Examine the impact that self-esteem has on communication.

In the first part of this chapter, we mentioned Manford Kuhn's "Who Am I?" exercise for understanding ourselves. A lot of the items generally listed by individuals completing this exercise can fall into the areas of self-concept and self-esteem. In this section, we're going to examine both of these concepts.

Self-Concept

According to Roy F. Baumeister (1999), **self-concept** implies "the individual's belief about himself or herself, including the person's attributes and who and what the self is."[4] An attribute is a characteristic, feature, or quality or inherent part of a person, group, or thing. In 1968, social psychologist Norman Anderson came up with a list of 555 personal attributes.[5] He had research participants rate the 555 attributes from most desirable to least desirable. The top ten most desirable characteristics were:

1. Sincere
2. Honest
3. Understanding
4. Loyal
5. Truthful
6. Trustworthy
7. Intelligent
8. Dependable
9. Open-Minded
10. Thoughtful

Conversely, the top ten least desirable attributes were:

1. Liar
2. Phony
3. Mean
4. Cruel
5. Dishonest
6. Untruthful
7. Obnoxious
8. Malicious
9. Dishonorable
10. Deceitful

When looking at this list, do you agree with the ranks from 1968? In a more recent study, conducted by Jesse Chandler using an expanded list of 1,042 attributes,6 the following pattern emerged for the top 10 most positively viewed attributes:

1. Honest
2. Likable
3. Compassionate
4. Respectful
5. Kindly
6. Sincere
7. Trustworthy
8. Ethical

9. Good-Natured
10. Honorable

And here is the updated list for the top 10 most negatively viewed attributes:

1. Pedophilic
2. Homicidal
3. Evil-Doer
4. Abusive
5. Evil-Minded
6. Nazi
7. Mugger
8. Asswipe
9. Untrustworthy
10. Hitlerish

Some of the changes in both lists represent changing times and the addition of the new terms by Chandler. For example, the terms sincere, honest, and trustworthy were just essential attributes for both the 1968 and 2018 studies. Conversely, none of the negative attributes remained the same from 1968 to 2018. The negative attributes, for the most part, represent more modern sensibilities about personal attributes.

The Three Selves

Carl Rogers, a distinguished psychologist in the humanistic approach to psychology, believed that an individual's self-concept is made of three distinct things: self-image, self-worth, and ideal-self.[7]

Self-Image

An individual's **self-image** is a view that they have of themselves. If we go back and look at the attributes that we've listed in this section, think about these as laundry lists of possibilities that impact your view of yourself. For example, you may view yourself as ethical, trustworthy, honest, and loyal, but you may also realize that there are times when you are also obnoxious and mean. For a positive self-image, we will have more positive attributes than negative ones. However, it's also possible that one negative attribute may overshadow the positive attributes, which is why we also need to be aware of our perceptions of our self-worth.

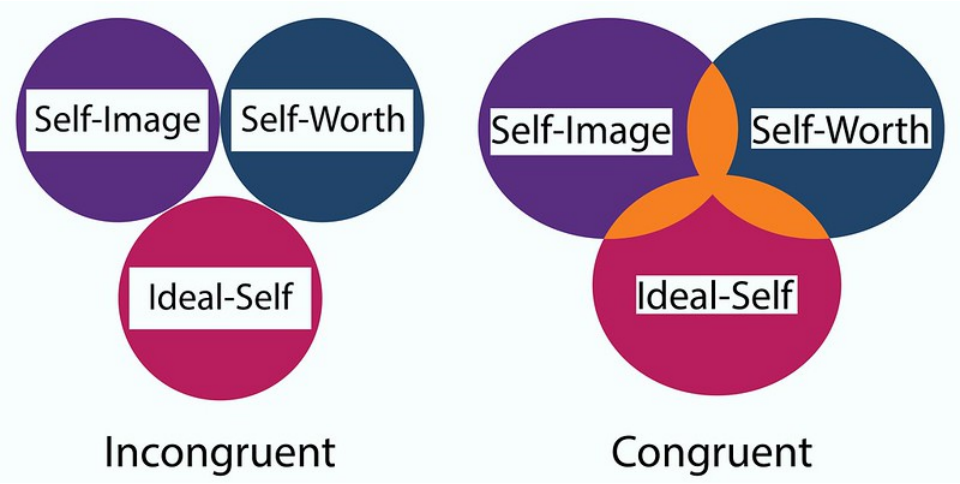


Figure **6.4.2.1**: Carl Rogers' Self-Concept

Self-Worth

Self-worth is the value that you place on yourself. In essence, self-worth is the degree to which you see yourself as a good person who deserves to be valued and respected. Unfortunately, many people judge their self-worth based on arbitrary measuring sticks like physical appearance, net worth, social circle/ clique, career, grades, achievements, age, relationship status, likes on Facebook, social media followers, etc.… Interested in seeing how you view your self-worth? Then take a minute and complete the

Contingencies of Self-Worth Scale.[8] According to Courtney Ackerman, there are four things you can do to help improve your self-worth:[9]

1. You no longer need to please other people.
2. No matter what people do or say, and regardless of what happens outside of you, you alone control how you feel about yourself.
3. You have the power to respond to events and circumstances based on your internal sources, resources, and resourcefulness, which are the reflection of your true value.
4. Your value comes from inside, from an internal measure that you've set for yourself.

Ideal-Self

The final characteristic of Rogers' three parts to self-concept is the ideal-self.[10] The ideal-self is the version of yourself that you would like to be, which is created through our life experiences, cultural demands, and expectations of others. The real-self, on the other hand, is the person you are. The ideal-self is perfect, flawless, and, ultimately, completely unrealistic. When an individual's real-self and ideal-self are not remotely similar, someone needs to think through if that idealized version of one's self is attainable. It's also important to know that our ideal-self is continuously evolving. How many of us wanted to be firefighters, police officers, or astronauts as kids? Some of you may still want to be one of these, but most of us had our ideal-self evolve.

Three Self's Working Together

Now that we've looked at the three parts of Carl Rogers' theory of self-concept, let's discuss how they all work together to create one's self-concept. Rogers' theory of self-concept also looks at a concept we discussed in Chapter 2 when we discussed Abraham Maslow's Hierarchy of Needs. Specifically, the idea of self-actualization. In Rogers' view, self-actualization cannot happen when an individual's self-image, self-worth, and ideal-self have no overlap.

As you can see in Figure 3.1.1, on the left side, you have the three parts of self-concept as very distinct in this individual, which is why it's called incongruent, or the three are not compatible with each other. In this case, someone's self-image and ideal-self may have nothing in common, and this person views themself as having no self-worth. When someone has this type of incongruence, they are likely to exhibit other psychological problems. On the other hand, when someone's self-image, ideal-self, and self-worth overlap, that person is considered congruent because the three parts of self-concept overlap and are compatible with each other. The more this overlap grows, the greater the likelihood someone will be able to self-actualize. Rogers believed that self-actualization was an important part of self-concept because until a person self-actualizes, then he/she/they will be out of balance with how he/she/they relate to the world and with others.

In 1902, Charles Horton Cooley wrote *Human Nature and the Social Order*. In this book, Cooley introduced a concept called the looking-glass self: "Each to each a looking-glass / Reflects the other that doth pass"[11] Although the term "looking-glass" isn't used very often in today's modern tongue, it means a mirror. Cooley argues, when we are looking to a mirror, we also think about how others view us and the judgments they make about us. Cooley ultimately posed three postulates:

1. Actors learn about themselves in every situation by exercising their imagination to reflect on their social performance.
2. Actors next imagine what those others must think of them. In other words, actors imagine the others' evaluations of the actor's performance.
3. The actor experiences an affective reaction to the imagined evaluation of the other.[12]

In Figure 3.1.2, we see an illustration of this basic idea. You have a figure standing before four glass panes. In the left-most mirror, the figure has devil horns; in the second, a pasted on a fake smile; in the third, a tie; and in the last one, a halo. Maybe the figure's ex sees the devil, his friends and family think the figure is always happy, the figure's coworkers see a professional, and the figure's parents/guardians see their little angel. Along with each of these ideas, there are inherent judgments. And, not all of these judgments are necessarily accurate, but we still come to understand and know ourselves based on our perceptions of these judgments.

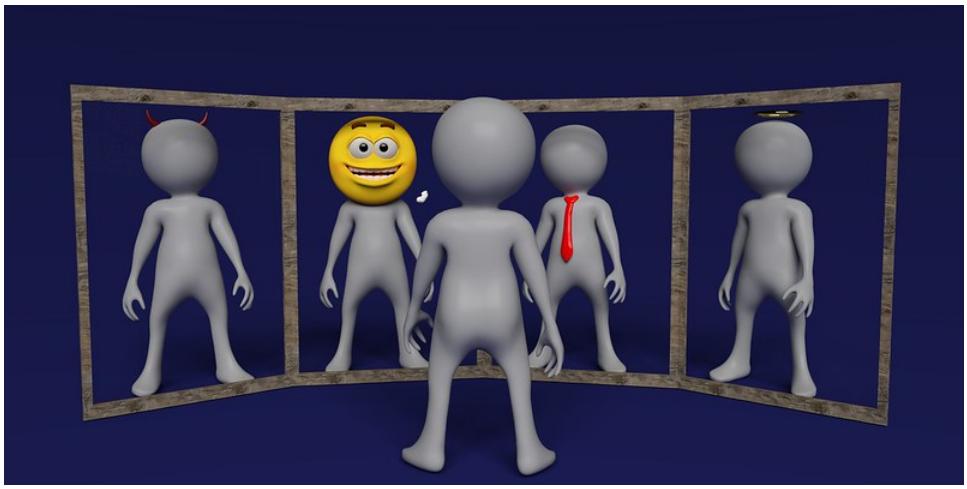


Figure 6.4.2.2: Looking-Glass Self

Ultimately, our self-image is shaped through our interactions with others, but only through the mediation of our minds. At the same time, because we perceive that others are judging us, we also tend to shape our façade to go along with that perception. For example, if you work in the customer service industry, you may sense that you are always expected to smile. Since you want to be viewed positively, you plaster on a fake smile all the time no matter what is going on in your personal life. At the same time, others may start to view you as a happy-go-lucky person because you're always in a good mood.

Thankfully, we're not doing this all the time, or we would be driving ourselves crazy. Instead, there are certain people in our lives about whose judgments we worry more than others. Imagine you are working in a new job. You respect your new boss, and you want to gain her/his/their respect in return. Currently, you believe that your boss doesn't think you're a good fit for the organization because you are not serious enough about your job. If you perceive that your boss will like you more if you are a more serious worker, then you will alter your behavior to be more in line with what your boss sees as "serious." In this situation, your boss didn't come out and say that you were not a serious worker, but we perceived the boss' perception of us and her/his/their judgment of that perception of us and altered our behavior to be seen in a better light.

Self-Esteem

One of the most commonly discussed intrapersonal communication ideas is an individual's self-esteem. There are a ton of books in both academic and non-academic circles that address this idea.

Defining Self-Esteem

Self-esteem is an individual's subjective evaluation of her/his/their abilities and limitations. Let's break down this definition into sizeable chunks.

Subjective Evaluation

The definition states that someone's self-esteem is an "individual's subjective evaluation." The word "subjective" emphasizes that self-esteem is based on an individual's emotions and opinions and is not based on facts. For example, many people suffer from what is called the impostor syndrome, or they doubt their accomplishments, knowledge, and skills, so they live in fear of being found out a fraud. These individuals have a constant fear that people will figure out that they are "not who they say they are." Research in this area generally shows that these fears of "being found out" are not based on any kind of fact or evidence. Instead, these individuals' emotions and opinions of themselves are fueled by incongruent self-concepts. Types of people who suffer from imposter syndrome include physicians, CEOs, academics, celebrities, artists, and pretty much any other category. Again, it's important to remember that these perceptions are subjective and not based on any objective sense of reality. Imagine a physician who has gone through four years of college, three years of medical school, three years of residency, and another four years of specialization training only to worry that someone will find out that he/she/they aren't that smart after all. There's no objective basis for this perception; it's completely subjective and flies in the face of facts.

In addition to the word "subjective," we also use the word "evaluation" in the definition of self-esteem. By evaluation, we mean a determination or judgment about the quality, importance, or value of something. We evaluate a ton of different things daily:

1. We evaluate how we interact with others.
2. We evaluate the work we complete.
3. We also evaluate ourselves and our specific abilities and limitations.

Our lives are filled with constant evaluations.

Abilities

When we discuss our abilities, we are referring to the acquired or natural capacity for specific talents, skills, or proficiencies that facilitate achievement or accomplishment. First, someone's abilities can be inherent (natural) or they can be learned (acquired). For example, if someone is 6'6", has excellent reflexes, and has a good sense of space, he/she/they may find that they have a natural ability to play basketball that someone who is 4'6", has poor reflex speed, and has no sense of space simply does not have. That's not to say that both people cannot play basketball, but they will both have different ability levels. They can both play basketball because they can learn skills necessary to play basketball: shooting the ball, dribbling, rules of the game, etc. In a case like basketball, professional-level players need to have a combination of both natural and acquired abilities.

We generally break abilities into two different categories: talent or skills to help distinguish what we are discussing. First, talent is usually more of an inherent or natural capacity. For example, someone may look like the ideal basketball player physically, but the person may simply have zero talent for the game. Sometimes we call talent the "it factor" because it's often hard to pinpoint why someone people have it and others don't. Second, skills refer to an individual's use of knowledge or physical being to accomplish a specific task. We often think of skills in terms of the things we learn to do. For example, most people can learn to swim or ride a bike. Doing this may take some time to learn, but we can develop the skills necessary to stay afloat and move in the water or the skills necessary to achieve balance and pedal the bike.

The final part of the definition of abilities is the importance of achievement and accomplishment. Just because someone has learned the skills to do something does not mean that they can accomplish the task. Think back to when you first learned to ride a bicycle (or another task). Most of us had to try and try again before we found ourselves pedaling on our own without falling over. The first time you got on the bicycle and fell over, you didn't have the *ability* to ride a bike. You may have had a general understanding of how it worked, but there's often a massive chasm between knowing how something is done and then actually achieving or accomplishing it. As such, when we talk about abilities, we really emphasize the importance of successful completion.

Limitations

In addition to one's abilities, it's always important to recognize that we all have limitations. In the words of my podiatrist, I will never be a runner because of the shape of my arch. Whether I like it or not, my foot's physical structure will not allow me to be an effective runner. Thankfully, this was never something I wanted to be. I didn't sit up all night as a child dreaming of running a marathon one day. In this case, I have a natural limitation, but it doesn't negatively affect me because I didn't evaluate running positively for myself. On the flip side, growing up, I took years of piano lessons, but honestly, I was just never that good at it. I have short, stubby fingers, so reaching notes on a piano that are far away is just hard for me. To this day, I wish I was a good piano player. I am disappointed that I couldn't be a better piano player. Now, does this limitation cripple me? No.

We all have limitations on what we can and cannot do. When it comes to your self-esteem, it's about how you evaluate those limitations. Do you realize your limitations and they don't bother you? Or do your limitations prevent you from being happy with yourself? When it comes to understanding limitations, it's important to recognize the limitations that we can change and the limitations we cannot change. One problem that many people have when it comes to limitations is that they cannot differentiate between the types of limitations. If I had wanted to be a runner growing up and then suddenly found out that my dream wasn't possible because of my feet, then I could go through the rest of my life disappointed and depressed that I'm not a runner. Even worse, I could try to force myself to into being a runner and cause long-term damage to my body.



Figure **6.4.2.3**: Levels of Communication

Self-Esteem and Communication

You may be wondering by this point about the importance of self-esteem in interpersonal communication. Self-esteem and communication have a reciprocal relationship (as depicted in Figure 3.1.3). Our communication with others impacts our self-esteem, and our self-esteem impacts our communication with others. As such, our self-esteem and communication are constantly being transformed by each other.

As such, interpersonal communication and self-esteem cannot be separated. Now, our interpersonal communication is not the only factor that impacts self-esteem, but interpersonal interactions are one of the most important tools we have in developing our selves.

Mindfulness Activity



One of the beautiful things about mindfulness is that it positively impacts someone's self-esteem.[13] It's possible that people who are higher in mindfulness report higher self-esteem because of the central tenant of non-judgment. People with lower self-esteems often report highly negative views of themselves and their past experiences in life. These negative judgments can start to wear someone down.

Christopher Pepping, Analise O'Donovan, and Penelope J. Davis believe that mindfulness practice can help improve one's self-esteem for four reasons:[14]

- Labeling internal experiences with words, which might prevent people from getting consumed by self-critical thoughts and emotions;
- Bringing a non-judgmental attitude toward thoughts and emotions, which could help individuals have a neutral, accepting attitude toward the self;
- Sustaining attention on the present moment, which could help people avoid becoming caught up in self-critical thoughts that relate to events from the past or future;
- Letting thoughts and emotions enter and leave awareness without reacting to them.[15]

For this exercise, think about a recent situation where you engaged in self-critical thoughts.

1. What types of phrases ran through your head? Would you have said these to a friend? If not, why do you say them to yourself? 1. What does the negative voice in your head sound like? Is this voice someone you want to listen to? Why?
2. Did you try temporarily distracting yourself to see if the critical thoughts would go away (e.g., mindfulness meditation, coloring, exercise)? If yes, how did that help? If not, why?
3. Did you examine the evidence? What proof did you have that the self-critical thought was true?
4. Was this a case of a desire to improve yourself or a case of non-compassion towards yourself?

Self-Compassion

Some researchers have argued that self–esteem as the primary measure of someone's psychological health may not be wise because it stems from comparisons with others and judgments. As such, Kristy Neff has argued for the use of the term self-compassion.[16]

Self-Compassion stems out of the larger discussion of compassion. Compassion "involves being touched by the suffering of others, opening one's awareness to others' pain and not avoiding or disconnecting from it, so that feelings of kindness toward others and the desire to alleviate their suffering emerge."[17] **Compassion** then is about the sympathetic consciousness for someone who is suffering or unfortunate. **Self-compassion** "involves being touched by and open to one's own suffering, not avoiding or disconnecting from it, generating the desire to alleviate one's suffering and to heal oneself with kindness. Self-compassion also involves offering nonjudgmental understanding to one's pain, inadequacies and failures, so that one's experience is seen as part of

the larger human experience."[18] Neff argues that self-compassion can be broken down into three distinct categories: self-kindness, common humanity, and mindfulness (Figure 3.1.4).



Figure **6.4.2.4**: Three Factors of Self-Compassion

Self-Kindness

Humans have a really bad habit of beating ourselves up. As the saying goes, we are often our own worst enemies. Self-kindness is simply extending the same level of care and understanding to ourselves as we would to others. Instead of being harsh and judgmental, we are encouraging and supportive. Instead of being critical, we are empathic towards ourselves. Now, this doesn't mean that we just ignore our faults and become narcissistic (excessive interest in oneself), but rather we realistically evaluate ourselves as we discussed in the Mindfulness Exercise earlier.

Common Humanity

The second factor of self-compassion is common humanity, or "seeing one's experiences as part of the larger human experience rather than seeing them as separating and isolating." 19 As Kristen Naff and Christopher Germer realize, we're all flawed works in progress.20 No one is perfect. No one is ever going to be perfect. We all make mistakes (some big, some small). We're also all going to experience pain and suffering in our lives. Being self-compassionate is approaching this pain and suffering and seeing it for what it is, a natural part of being human. "The pain I feel in difficult times is the same pain you feel in difficult times. The circumstances are different, the degree of pain is different, but the basic experience of human suffering is the same." [21]

Mindfulness

The final factor of self-compassion is mindfulness. Although Naff defines mindfulness in the same terms we've been discussing in this text, she specifically addresses mindfulness as a factor of pain, so she defines mindfulness, with regards to self-compassion, as "holding one's painful thoughts and feelings in balanced awareness rather than over-identifying with them." [22] Essentially, Naff argues that mindfulness is an essential part of self-compassion, because we need to be able to recognize and acknowledge when we're suffering so we can respond with compassion to ourselves.

Don't Feed the Vulture

One area that we know can hurt someone's self-esteem is what Sidney Simon calls "vulture statements." According to Simon,

> Vulture ('vul-cher) noun. 1: any of various large birds of prey that are related to the hawks, eagles, and falcons, but with the head usually naked of feathers and that subsist chiefly or entirely on dead flesh.[23]



Figure 6.4.2.5: Don't Feed the Vulture

Unfortunately, all of us have vultures circling our heads or just sitting on our shoulders. In Figure 3.1.5, we see a young woman feeding an apple to her vulture. This apple represents all of the negative things we say about ourselves during a day. Many of us spend our entire days just feeding our vultures and feeding our vultures these self-deprecating, negative thoughts and statements. Admittedly, these negative thoughts "come from only one place. They grow out of other people's criticisms, from the negative responses to what we do and say, and the way we act."[24] We have the choice to either let these thoughts consume us or fight them. According to Virginia Richmond, Jason Wrench, and Joan Gorham, the following are characteristic statements that vultures wait to hear so they can feed (see also Figure 3.1.6):

- Oh boy, do I look awful today; I look like I've been up all night.
- Oh, this is going to be an awful day.
- I've already messed up. I left my students' graded exams at home.
- Boy, I should never have gotten out of bed this morning.
- Gee whiz. I did an awful job of teaching that unit.
- Why can't I do certain things as well as Mr. Smith next door?
- Why am I always so dumb?
- I can't believe I'm a teacher; why, I have the mentality of a worm.
- I don't know why I ever thought I could teach.
- I can't get anything right.
- Good grief, what am I doing here? Why didn't I select any easy job?
- I am going nowhere, doing nothing; I am a failure at teaching.
- In fact, I am a failure in most things I attempt.[25]



Figure 6.4.2.6: Don't Feed the Vulture

Do any of these vulture statements sound familiar to you? If you're like us, I'm sure they do. Part of self-compassion is learning to recognize these vulture statements when they appear in our minds and evaluate them critically. Ben Martin proposes four ways to challenging vulture statements (negative self-talk):

1. Reality testing
    - What is my evidence for and against my thinking?
    - Are my thoughts factual, or are they just my interpretations?
    - Am I jumping to negative conclusions?
    - How can I find out if my thoughts are actually true?
2. Look for alternative explanations
    - Are there any other ways that I could look at this situation?
    - What else could this mean?
    - If I were being positive, how would I perceive this situation?
3. Putting it in perspective
    - Is this situation as bad as I am making out to be?
    - What is the worst thing that could happen? How likely is it?
    - What is the best thing that could happen?
    - What is most likely to happen?
    - Is there anything good about this situation?
    - Will this matter in five years?
4. Using goal-directed thinking
    - Is thinking this way helping me to feel good or to achieve my goals?
    - What can I do that will help me solve the problem?
    - Is there something I can learn from this situation, to help me do it better next time?[26]

So, next time those vultures start circling you, check that negative self-talk. When we can stop these patterns of negativity towards ourselves and practice self-compassion, we can start plucking the feathers of those vultures. The more we treat ourselves with self-compassion and work against those vulture statements, the smaller and smaller those vultures get. Our vultures may never die, but we can make them much, much smaller.

Research Spotlight



In 2018, Laura Umphrey and John Sherblom examined the relationship between social communication competence, self-compassion, and hope. The goal of the study was to see if someone's social communication competence could predict their ability to engage in self-compassion. Ultimately, the researchers found individuals who engaged in socially competent communication behaviors were more likely to engage in self-compassion, which "suggests that a person who can learn to speak with others competently, initiate conversations, engage others in social interaction, and be more outgoing, while managing verbal behavior and social roles, may also experience greater personal self-compassion" (p. 29).

Umphrey, L. R., & Sherblom, J. C. (2018). The constitutive relationship of social communication competence to self-compassion and hope. Communication Research Reports, 35(1), 22–32. https://doi.org/10.1080/08824096.2017.1361395

Key Takeaways

- Self-concept is an individual's belief about themself, including the person's attributes and who and what the self is. Conversely, self-esteem is an individual's subjective evaluation of their abilities and limitations.
- Sociologist Charles Horton Cooley coined the term "looking-glass self" to refer to the idea that an individual's self-concept is a reflection of how an individual imagines how he or she appears to other people. In other words, humans are constantly comparing themselves to how they believe others view them.
- There is an interrelationship between an individual's self-esteem and her/his/ their communication. In essence, an individual's self-esteem impacts how they communicate with others, and this communication with others impacts their selfesteem.

Exercises

- Pull out a piece of paper and conduct the “Who Am I?” exercise created by Manford Kuhn. Once you have completed the exercise, categorize your list using Kuhn’s five distinct categories about an individual: social group an individual belongs to, ideological beliefs, personal interests, personal ambitions, and self-evaluations. After categorizing your list, ask yourself what your list says about your self-concept, self-image, self-esteem, and self-respect.
- Complete the Rosenberg Self-Esteem Scale (http://www.wwnorton.com/college/ psych/psychsci/media/rosenberg.htm). After getting your results, do you agree with your results? Why or why not? Why do you think you scored the way you did on the measure?

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6.4.3: Personality and Perception in Intrapersonal Communication

Learning Outcomes

1. Define and differentiate between the terms personality and temperament.
2. Explain common temperament types seen in both research and pop culture.
3. Categorize personality traits as either cognitive dispositions or personal-social dispositions.

After the previous discussions of self-concept, self-image, and self-esteem, it should be obvious that the statements and judgments of others and your view of yourself can affect your communication with others. Additional factors, such as your personality and perception, affect communication as well. Let us next examine these factors and the influence each has on communication.

Personality

Personality is defined as the combination of traits or qualities—such as behavior, emotional stability, and mental attributes—that make a person unique. Before going further, let's quickly examine some of the research related to personality. John Daly categorizes personality into four general categories: cognitive dispositions, personal-social dispositions, communicative dispositions, and relational dispositions.[27] Before we delve into these four categories of personality, let's take a quick look at two common themes in this area of research: nature or nurture and temperament.

Nature or Nurture

One of the oldest debates in the area of personality research is whether a specific behavior or thought process occurs within an individual because of their nature (genetics) or nurture (how he/she/they were raised). The first person to start investigating this phenomenon was Sir Francis Galton back in the 1870s.[28] In 1875, Galton sought out twins and their families to learn more about similarities and differences. As a whole, Galton found that there were more similarities than differences: "There is no escape from the conclusion that nature prevails enormously over nurture when the differences of nurture do not exceed what is commonly to be found among persons of the same rank of society and in the same country."[29] However, the reality is that Galton's twin participants had been raised together, so parsing out nature and nurture (despite Galton's attempts) wasn't completely possible. Although Galton's anecdotes provided some interesting stories, that's all they amounted to.

Minnesota Twins Raised Apart

So, how does one determine if something ultimately nature or nurture? The next breakthrough in this line of research started in the late 1970s when Thomas J. Bouchard and his colleagues at Minnesota State University began studying twins who were raised separately.[30] This research started when a pair of twins, Jim Lewis and Jim Springer, were featured in an article on February 19, 1979, in the Lima News in Lima, Ohio.[31] Jim and Jim were placed in an adoption agency and separated from each other at four weeks of age. They grew up just 40 miles away from each other, but they never knew the other one existed. Jess and Sarah Springer and Ernest and Lucille Lewis were looking to adopt, and both sets of parents were told that their Jim had been a twin, but they were also told that his twin had died. Many adoption agencies believed that placing twins with couples was difficult, so this practice of separating twins at birth was an inside practice that the adoptive parents knew nothing about. Jim Lewis' mother had found out that Jim's twin was still alive when he was toddler, so Jim Lewis knew that he had a twin but didn't seek him out until he was 39 years old. Jim Springer, on the other hand, learned that he had been a twin when he was eight years old, but he believed the original narrative that his twin had died.

As you can imagine, Jim Springer was pretty shocked when he received a telephone message with his twin's contact information out of nowhere one day. The February 19th article in the *Lima News* was initially supposed to be a profile piece on one of the Springers' brothers, but the reporter covering the wedding found Lewis and Springer's tale fascinating. The reporter found several striking similarities between the twins:[32]

- Their favorite subject in school was math
- Both hated spelling in school
- Their favorite vacation spot was Pas Grille Beach in Florida
- Both had previously been in law enforcement

- They both enjoyed carpentry as a hobby
- Both were married to women named Betty
- Both were divorced from women named Linda
- Both had a dog named “Toy”
- Both started suffering from tension headaches when they were 18
- Even their sons’ names were oddly similar (James Alan and James Allan)

This sensationalist story caught the attention of Bouchard because this opportunity allowed him and his colleagues to study the influence rearing had on twins in a way that wasn’t possible when studying twins who were raised together.

Over the next decade, Bouchard and his team of researchers would seek out and interview over 100 different pairs of twins or sets of triplets who had been raised apart.[33] The researchers were able to compare those twins to twins who were reared together. As a whole, they found more similarities between the two twin groups than they found differences. This set of studies is one of many that have been conducted using twins over the years to help us understand the interrelationship between rearing and genetics.

Twin Research in Communication

In the field of communication, the first major twin study published was conducted by Cary Wecht Horvath in 1995.[34] In her study, Horvath compared 62 pairs of identical twins and 42 pairs of fraternal twins to see if they differed in terms of their communicator style, or “the way one verbally, nonverbally, and paraverbally interacts to signal how literal meaning should be taken, filtered, or understood.”[35] Ultimately, Horvath found that identical twins’ communicator styles were more similar than those of fraternal twins. Hence, a good proportion of someone’s communicator style appears to be a result of someone’s genetic makeup. However, this is not to say that genetics was the only factor at play about someone’s communicator style.

Other research in the field of communication has examined how a range of different communication variables are associated with genetics when analyzed through twin studies:[36,37, 38]

- Interpersonal Affiliation
- Aggressiveness
- Social Anxiety
- Audience Anxiety
- Self-Perceived Communication Competence
- Willingness to Communicate
- Communicator Adaptability

It’s important to realize that the authors of this book do not assume nor promote that all of our communication is biological. Still, we also cannot dismiss the importance that genetics plays in our communicative behavior and development. Here is our view of the interrelationship among environment and genetics. Imagine we have two twins that were separated at birth. One twin is put into a middle-class family where she will be exposed to a lot of opportunities. The other twin, on the other hand, was placed with a lower-income family where the opportunities she will have in life are more limited. The first twin goes to a school that has lots of money and award-winning teachers. The second twin goes to an inner-city school where there aren’t enough textbooks for the students, and the school has problems recruiting and retaining qualified teachers. The first student has the opportunity to engage in a wide range of extracurricular activities both in school (mock UN, debate, student council, etc.) and out of school (traveling softball club, skiing, yoga, etc.). The second twin’s school doesn’t have the budget for extracurricular activities, and her family cannot afford out of school activities, so she ends up taking a job when she’s a teenager. Now imagine that these twins are naturally aggressive. The first twin’s aggressiveness may be exhibited by her need to win in both mock UN and debate; she may also strive to not only sit on the student council but be its president. In this respect, she demonstrates more prosocial forms of aggression. The second twin, on the other hand, doesn’t have these more prosocial outlets for her aggression. As such, her aggression may be demonstrated through more interpersonal problems with her family, teachers, friends, etc.… Instead of having those more positive outlets for her aggression, she may become more physically aggressive in her day-to-day life. In other words, we do believe that the context and the world where a child is reared is very important to how they display communicative behaviors, even if those communicative behaviors have biological underpinnings.

Temperament Types

Temperament is the genetic predisposition that causes an individual to behave, react, and think in a specific manner. The notion that people have fundamentally different temperaments dates back to the Greek physician Hippocrates, known today as the father of medicine, who first wrote of four temperaments in 370 BCE: Sanguine, Choleric, Phlegmatic, and Melancholic. Although closely related, temperament and personality refer to two different constructs. Jan Strelau explains that temperament and personality differ in five specific ways:

1. Temperament is biologically determined where personality is a product of the social environment.
2. Temperamental features may be identified from early childhood, whereas personality is shaped in later periods of development.
3. Individual differences in temperamental traits like anxiety, extraversion-introversion, and stimulus-seeking are also observed in animals, whereas personality is the prerogative of humans.
4. Temperament stands for stylistic aspects. Personality for the content aspect of behavior.
5. Unlike temperament, personality refers to the integrative function of human behavior.[39]

In 1978, David Keirsey developed the Keirsey Temperament Sorter, a questionnaire that combines the Myers-Briggs Temperament Indicator with a model of four temperament types developed by psychiatrist Ernst Kretschmer in the early 20th century.[40] Take a minute and go to David Keirsey's website and complete his four-personality type questionnaire (http://www.keirsey.com/sorter/register.aspx). You'll also be able to learn a lot more about the four-type personality system.

In reality, there are a ton of four-type personality system systems that have been created over the years. Table 3.1 provides just a number of the different four-type personality system that are available on the market today. Each one has its quirks and patterns, but the basic results are generally the same.

Table 3.2.1 Comparing 4-Personality Types

Hippocrates Greek Terms	Sanguine	Melancholy	Choleric	Phlegmatic
Wired that Way	Popular Sanguine	Perfect Melancholy	Powerful Choleric	Peaceful Phlegmatic
Keirsy Temperament (1967)	Artisan Sensation Seeking	Rational Knowledge Seeking	Guardian Security Seeking	Idealist Identity Seeking
Carl Jung's Theory (1921)	Feeling	Thinking	Sensing	Intuition
Myers-Briggs Type Indicator (1962)	Feeler Extravert	Thinker Introvert	Intuiter Extravert	Sensor Introvert
"What's My Style?" (WMS)	Spirited	Systematic	Direct	Considerate
The P's	Popular	Perfect	Powerful	Peaceful
The S's	Spirited	Systematic	Self-propelled	Solid
The A's	Active	Analytical	Administrative	Amiable
LEAD Test	Expressor	Analyst	Leader	Dependable
Biblical Characters	Peter	Moses	Paul	Abraham
DiSC	Influencing of Others	Cautiousness/Compliance	Dominance	Steadiness
McCarthy/4MAT System	Dynamic	Analytic	Common Sense	Innovative
Plato (340 BC)	Artisan	Scientist	Guardian	Philosopher
Enneagram	Helper Romantic	Asserter Perfectionist	Adventurer Achiever	Peacemaker Observer
True Colors	Orange	Gold	Green	Blue
Children's Literature	Tigger	Eeyore	Rabbit	Pooh
Charlie Brown Characters	Snoopy	Linus	Lucy	Charlie Brown
Who Moved My Cheese?	Scurry	Hem	Sniff	Haw
Eysenck's EPQ-R	High Extravert Low Neurotic	Low Extravert High Neurotic	High Extravert High Neurotic	Low Extravert Low Neurotic

And before you ask, none of the research examining the four types has found clear sex differences among the patterns. Females and males are seen proportionately in all four categories.

For example, training publisher HRDQ publishes the "What's My Style?" series (www. hrdqstore.com/Style), and has applied the four-personalities to the following workplace issues: coaching, communication, leadership, learning, selling, teams, and time management.

David Keirsey argues that the consistent use of the four temperament types (whatever terms we use) is an indication of the long-standing tradition and complexity of these ideas.[41]

The Big Five

In the world of personality, one of the most commonly discussed concepts in research is the Big Five. In the late 1950s, Ernest C. Tupes and Raymond E. Christal conducted a series of studies examining a model of personality.[42,43] Ultimately, they found five consistent personality clusters they labeled: surgency, agreeableness, dependability, emotional stability, and culture). Listed below are the five broad personality categories with the personality trait words in parentheses that were associated with these categories:

1. Surgency (silent vs. talkative; secretive vs. frank; cautious vs. adventurous; submissive vs. assertive; and languid, slow vs. energetic)
2. Agreeableness (spiteful vs. good-natured; obstructive vs. cooperative; suspicious vs. trustful; rigid vs. adaptable; cool, aloof vs. attentive to people; jealous vs. not so; demanding vs. emotionally mature; self-willed vs. mild; and hard, stern vs. kindly)
3. Dependability (frivolous vs. responsible and unscrupulous vs. conscientious; indolent vs. insistently orderly; quitting vs. persevering; and unconventional vs. conventional)
4. Emotional Stability (worrying, anxious vs. placid; easily upset vs. poised, tough; changeable vs. emotionally stable; neurotic vs. not so; hypochondriacal vs. not so; and emotional vs. calm)
5. Culture (boorish vs. intellectual, cultured; clumsy, awkward vs. polished; immature vs. independent-minded; lacking artistic feelings vs. esthetically fastidious, practical, logical vs. imaginative)

Although Tupes and Christal were first, they were not the only psychologists researching the idea of personality clusters.

Two other researchers, Robert R. McCrae and Paul T. Costa, expanded on Tupes and Christal's work to create the OCEAN Model of personality. McCrae and Costa originally started examining just three parts of the model, openness, neuroticism, and extroversion,[44] but the model was later expanded to include both conscientiousness and agreeableness (Figure 3.2.1).[45] Before progressing forward, take a minute and complete one of the many different freely available tests of the Five Factor Model of Personality:

- projects.fivethirtyeight. com/personality-quiz/,
- https://openpsychometrics.org/ tests/IPIP-BFFM/,
- https://www.123test.com/ personality-test/,
- www.idrlabs.com/big-fivesubscales/test.php



Figure 6.4.3.1: OCEAN Model for Personality (The Big Five)

Openness

Openness refers to "openness to experience," or the idea that some people are more welcoming of new things. These people are willing to challenge their underlying life assumptions and are more likely to be amenable to differing points of view. Table 3.2.2 explores some of the traits associated with having both high levels of openness and having low levels of openness.

Table 3.2.2 Openness

High Openness	Low Openness
Original	Conventional
Creative	Down to Earth
Complex	Narrow Interests
Curious	Unadventurous
Prefer Variety	Conforming
Independent	Traditional
Liberal	Unartistic

Conscientiousness

Conscientiousness is the degree to which an individual is aware of their actions and how their actions impact other people. Table 3.2.3 explores some of the traits associated with having both high levels of conscientiousness and having low levels of conscientiousness.

Table 3.2.3 Conscientiousness

High Conscientiousness	Low Conscientiousness
Careful	Negligent
Reliable	Disorganized
Hard-Working	Impractical
Self-Disciplined	Thoughtless
Punctual	Playful
Deliberate	Quitting
Knowledgeable	Uncultured

Extraversion

Extraversion is the degree to which someone is sociable and outgoing. Table 3.2.4 explores some of the traits associated with having both high levels of extraversion and having low levels of extraversion.

Table 3.2.4 Extraversion

High Extraversion	Low Extraversion
Sociable	Sober
Fun Loving	Reserved
Friendly	Quiet
Talkative	Unfeeling
Warm	Lonely
Person-Oriented	Task-Oriented
Dominant	Timid

Agreeableness

Agreeableness is the degree to which someone engages in prosocial behaviors like altruism, cooperation, and compassion. Table 3.2.5 explores some of the traits associated with having both high levels of agreeableness and having low levels of agreeableness.

Table 3.2.5 Agreeableness

High Agreeableness	Low Agreeableness
Good-Natured	Irritable
Soft Hearted	Selfish
Sympathetic	Suspicious
Forgiving	Critical
Open-Minded	Disagreeable
Flexible	Cynical
Humble	Manipulative

Neuroticism

Neuroticism is the degree to which an individual is vulnerable to anxiety, depression, and emotional instability. Table 3.2.6 explores some of the traits associated with having both high levels of neuroticism and having low levels of neuroticism.

Table 3.2.6 Neuroticism

High Neuroticism	Low Neuroticism
Nervous	Calm
High-Strung	Unemotional
Impatient	Secure
Envious/Jealous	Comfortable
Self-Conscious	Not impulse ridden
Temperamental	Hardy
Subjective	Relaxed

Research Spotlight



In 2018, Yukti Mehta and Richard Hicks set out to examine the relationship between the Big Five Personality Types (openness, conscientiousness, agreeableness, extroversion, & neuroticism) and the Five Facets of Mindfulness Measure (observation, description, aware actions, non-judgmental inner experience, & nonreactivity). For the purposes of this study, the researchers collapsed the five facets of mindfulness into a single score. The researchers found that openness, conscientiousness, agreeableness, and extroversion were positively related to mindfulness, but neuroticism was negatively related to mindfulness.

Mehta, Y., & Hicks, R. E. (2018). The Big Five, mindfulness, and psychological wellbeing. *Global Science and Technology Forum (GSTF) Journal of Psychology*, 4(1). doi. org/10.5176/2345-7929_4.1.103

Cognitive Dispositions

Cognitive dispositions refer to general patterns of mental processes that impact how people respond and react to the world around them. These dispositions (or one's natural mental or emotional outlook) take on several different forms. For our purposes, we'll

briefly examine the four identified by John Daly: locus of control, cognitive complexity, authoritarianism/dogmatism, and emotional intelligence.[46]

Locus of Control

One's **locus of control** refers to an individual's perceived control over their behavior and life circumstances. We generally refer to two different loci when discussing locus of control. First, we have people who have an **internal locus of control**. People with an internal locus of control believe that they can control their behavior and life circumstances. For example, people with an internal dating locus of control would believe that their dating lives are ultimately a product of their behaviors and decisions with regard to dating. In other words, my dating life exists because of my choices. The opposite of internal locus of control is the **external locus of control**, or the belief that an individual's behavior and circumstances exist because of forces outside the individual's control. An individual with an external dating locus of control would believe that their dating life is a matter of luck or divine intervention. This individual would also be more likely to blame outside forces if their dating life isn't going as desired. We'll periodically revisit locus of control in this text because of its importance in a wide variety of interpersonal interactions.

Cognitive Complexity

According to John Daly, cognitive "complexity has been defined in terms of the number of different constructs an individual has to describe others (differentiation), the degree to which those constructs cohere (integration), and the level of abstraction of the constructs (abstractiveness)."[47]By differentiation, we are talking about the number of distinctions or separate elements an individual can utilize to recognize and interpret an event. For example, in the world of communication, someone who can attend to another individual's body language to a great degree can differentiate large amounts of nonverbal data in a way to understand how another person is thinking or feeling. Someone low in differentiation may only be able to understand a small number of pronounced nonverbal behaviors.

Integration, on the other hand, refers to an individual's ability to see connections or relationships among the various elements he or she has differentiated. It's one thing to recognize several unique nonverbal behaviors, but it's the ability to interpret nonverbal behaviors that enables someone to be genuinely aware of someone else's body language. It would be one thing if I could recognize that someone is smiling, an eyebrow is going up, the head is tilted, and someone's arms are crossed in front. Still, if I cannot see all of these unique behaviors as a total package, then I'm not going to be able to interpret this person's actual nonverbal behavior

The last part of Daly's definition involves the ability to see levels of abstraction. Abstraction refers to something which exists apart from concrete realities, specific objects, or actual instances. For example, if someone to come right out and verbally tell you that he or she disagrees with something you said, then this person is concretely communicating disagreement, so as the receiver of the disagreement, it should be pretty easy to interpret the disagreement. On the other hand, if someone doesn't tell you he or she disagrees with what you've said but instead provides only small nonverbal cues of disagreement, being able to interpret those theoretical cues is attending to communicative behavior that is considerably more abstract.

Overall, cognitive complexity is a critical cognitive disposition because it directly impacts interpersonal relationships. According to Brant Burleson and Scott Caplan,[48] cognitive complexity impacts several interpersonal constructs:

1. Form more detailed and organized impressions of others;
2. Better able to remember impressions of others;
3. Better able to resolve inconsistencies in information about others;
4. Learn complex social information quickly; and
5. Use multiple dimensions of judgment in making social evaluations.

In essence, these findings clearly illustrate that cognitive complexity is essential when determining the extent to which an individual can understand and make judgments about others in interpersonal interactions.

Authoritarianism/Dogmatism

According to Jason Wrench, James C. McCroskey, and Virginia Richmond, two personality characteristics that commonly impact interpersonal communication are authoritarianism and dogmatism.[49] **Authoritarianism** is a form of social organization where individuals favor absolute obedience to authority (or authorities) as opposed to individual freedom. The highly authoritarian

individual believes that individuals should just knowingly submit to their power. Individuals who believe in authoritarianism but are not in power believe that others should submit themselves to those who have power.

Dogmatism, although closely related, is not the same thing as authoritarianism. **Dogmatism** is defined as the inclination to believe one's point-of-view as undeniably true based on faulty premises and without consideration of evidence and the opinions of others. Individuals who are highly dogmatic believe there is generally only one point-of-view on a specific topic, and it's their point-of-view. Highly dogmatic individuals typically view the world in terms of "black and white" while missing most of the shades of grey that exist between. Dogmatic people tend to force their beliefs on others and refuse to accept any variation or debate about these beliefs, which can lead to strained interpersonal interactions. Both authoritarianism and dogmatism "tap into the same broad idea: Some people are more rigid than others, and this rigidity affects both how they communicate and how they respond to communication." [50]

One closely related term that has received some minor exploration in interpersonal communication is right-wing authoritarianism. According to Bob Altemeyer in his book *The Authoritarians* (members. shaw.ca/jeanaltemeyer/drbob/TheAuthoritarians.pdf), **right-wing authoritarians** (RWAs) tend to have three specific characteristics:

1. RWAs believe in submitting themselves to individuals they perceive as established and legitimate authorities.
2. RWAs believe in strict adherence to social and cultural norms.
3. RWAs tend to become aggressive towards those who do not submit to established, legitimate authorities and those who violate social and cultural norms.

Please understand that Altemeyer's use of the term "right-wing" does not imply the same political connotation that is often associated with it in the United States. As Altemeyer explains, "Because the submission occurs to traditional authority, I call these followers *right-wing* authoritarians. I'm using the word "right" in one of its earliest meanings, for in Old English 'right' (pronounced 'writ') as an adjective meant lawful, proper, correct, doing what the authorities said of others."[51] Under this definition, rightwing authoritarianism is the perfect combination of both dogmatism and authoritarianism.

Right-wing authoritarianism has been linked to several interpersonal variables. For example, parents/ guardians who are RWAs are more likely to believe in a highly dogmatic approach to parenting. In contrast, those who are not RWAs tend to be more permissive in their approaches to parenting.[52] Another study found that men with high levels of RWA were more likely to have been sexually aggressive in the past and were more likely to report sexually aggressive intentions for the future.[53] Men with high RWA scores tend to be considerably more sexist and believe in highly traditional sex roles, which impacts how they communicate and interact with women. [54] Overall, RWA tends to negatively impact interpersonal interactions with anyone who does not see an individual's specific world view and does not come from their cultural background.

Emotional Intelligence

Emotional intelligence is an individual's appraisal and expression of their emotions and the emotions of others in a manner that enhances thought, living, and communicative interactions. Emotional intelligence, while not a new concept, really became popular after Daniel Goleman's book, *Emotional Intelligence*. [55] Social psychologists had been interested in and studying the importance of emotions long before Goleman's book, but his book seemed to shed new light on an old idea.[56] Goleman drew quite a bit on a framework that was created by two social psychologists named Peter Salovey and John Mayer, who had coined the term "emotional intelligence" in an article in 1990.[57] In the Salovey and Mayer framework for emotional intelligence, emotional intelligence consisted of four basic processes. Figure 3.2.2 pictorially demonstrates the four basic parts of Salovey and Mayer's Emotional Intelligence Model.

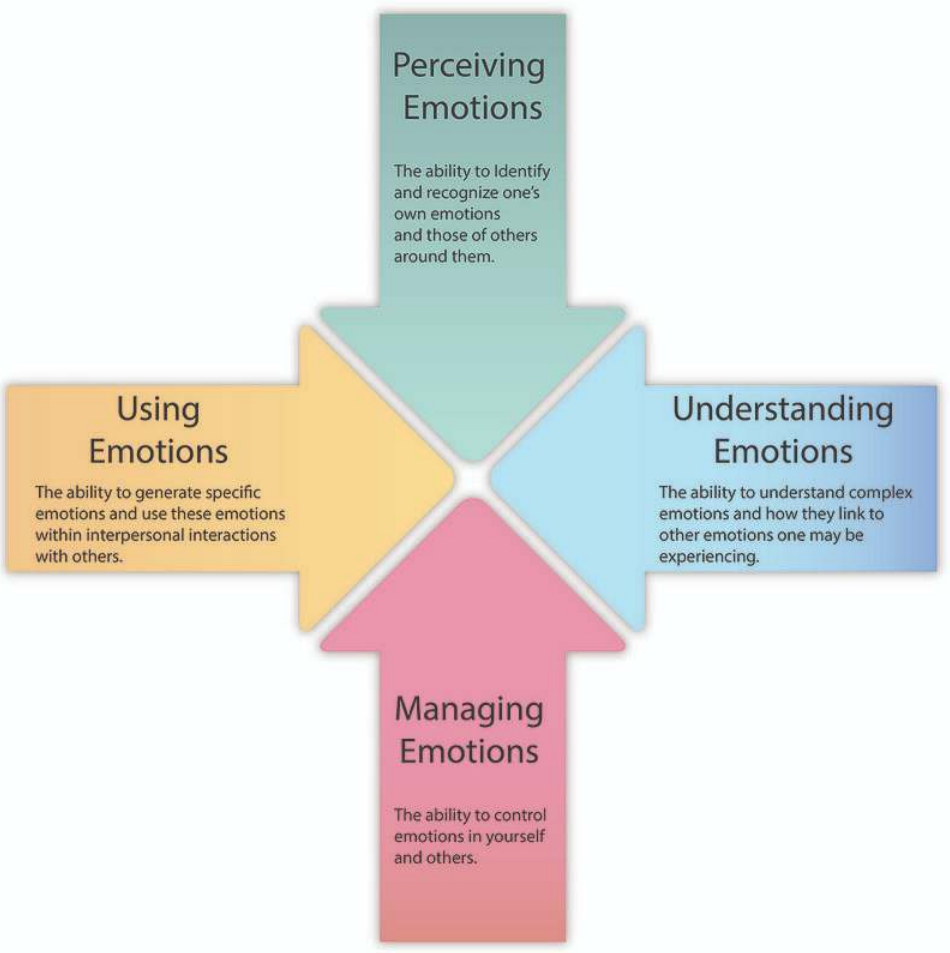


Figure **6.4.3.2**: Salovey and Mayer's Emotional Intelligence Model

Emotional intelligence (EQ) is important for interpersonal communication because individuals who are higher in EQ tend to be more sociable and less socially anxious. As a result of both sociability and lowered anxiety, high EQ individuals tend to be more socially skilled and have higher quality interpersonal relationships

A closely related communication construct originally coined by Melanie and Steven Booth-Butterfield is **affective orientation**. [58] As it is conceptualized by the Booth-Butterfields, affective orientation (AO) is "the degree to which people are aware of their emotions, perceive them as important, and actively consider their affective responses in making judgments and interacting with others." [59] Under the auspices of AO, the general assumption is that highly affective-oriented people are (1) cognitively aware of their own and others' emotions, and (2) can implement emotional information in communication with others. Not surprisingly, the Booth-Butterfields found that highly affective-oriented individuals also reported greater affect intensity in their relationships.

Melanie and Steven Booth-Butterfield later furthered their understanding of AO by examining it in terms of how an individual's emotions drive their decisions in life.[60] As the Booth-Butterfields explain, in their further conceptualization of AO, they "are primarily interested in those individuals who not only sense and value their emotions but scrutinize and give them weight to direct behavior." [61] In this sense, the Booth-Butterfields are expanding our notion of AO by explaining that some individuals use their emotions as a guiding force for their behaviors and their lives. On the other end of the spectrum, you have individuals who use no emotional information in how they behave and guide their lives. Although relatively little research has examined AO, the conducted research indicates its importance in interpersonal relationships. For example, in one study, individuals who viewed their parents/guardians as having high AO levels reported more open communication with those parents/guardians.[62]

Personal-Social Dispositions

Social-personal dispositions refer to general patterns of mental processes that impact how people socially relate to others or view themselves. All of the following dispositions impact how people interact with others, but they do so from very different places.

Without going into too much detail, we are going to examine the seven personal-social dispositions identified by John Daly. [63]

Loneliness

The first social-personal disposition is **loneliness** or an individual's emotional distress that results from a feeling of solitude or isolation from social relationships. Loneliness can generally be discussed as existing in one of two forms: emotional and social. **Emotional loneliness** results when an individual feels that he or she does not have an emotional connection with others. We generally get these emotional connections through our associations with loved ones and close friends. If an individual is estranged from their family or doesn't have close friendships, then he or she may feel loneliness as a result of a lack of these emotional relationships. **Social loneliness**, on the other hand, results from a lack of a satisfying social network. Imagine you're someone who has historically been very social. Still, you move to a new city and find building new social relationships very difficult because the people in the new location are very cliquey. The inability to develop a new social network can lead someone to feelings of loneliness because he or she may feel a sense of social boredom or marginalization.

Loneliness tends to impact people in several different ways interpersonally. Some of the general research findings associated with loneliness have demonstrated that these people have lower self-esteem, are more socially passive, are more sensitive to rejection from others, and are often less socially skilled. Interestingly, lonely individuals tend to think of their interpersonal failures using an internal locus of control and their interpersonal successes externally.[64]

Depression

Depression is a psychological disorder characterized by varying degrees of disappointment, guilt, hopelessness, loneliness, sadness, and self-doubt, all of which negatively impact a person's general mental and physical wellbeing. Depression (and all of its characteristics) is very difficult to encapsulate in a single definition. If you've ever experienced a major depressive episode, it's a lot easier to understand what depression is compared to those who have never experienced one. Depressed people tend to be less satisfied with life and less satisfied with their interpersonal interactions as well. Research has shown that depression negatively impacts all forms of interpersonal relationships: dating, friends, families, work, etc. We will periodically come back to depression as we explore various parts of interpersonal communication.

Self-Esteem

As discussed earlier in this chapter, self-esteem consists of your sense of self-worth and the level of satisfaction you have with yourself; it is how you feel about yourself. A good self-image raises your self-esteem; a poor self-image often results in poor self-esteem, lack of confidence, and insecurity. Not surprisingly, individuals with low self-esteem tend to have more problematic interpersonal relationships.

Narcissism

Ovid's story of Narcissus and Echo has been passed down through the ages. The story starts with a Mountain Nymph named Echo who falls in love with a human named Narcissus. When Echo reveals herself to Narcissus, he rejects her. In true Roman fashion, this slight could not be left unpunished. Echo eventually leads Narcissus to a pool of water where he quickly falls in love with his reflection. He ultimately dies, staring at himself, because he realizes that his love will never be met.

The modern conceptualization of narcissism is based on Ovid's story of Narcissus. Today researchers view **narcissism** as a psychological condition (or personality disorder) in which a person has a preoccupation with one's self, an inflated sense of one's importance, and longing of admiration from others. Highly narcissistic individuals are completely self-focused and tend to ignore the communicative needs and emotions of others. In fact, in social situations, highly narcissistic individuals strive to be the center of attention.

Anita Vangelisti, Mark Knapp, and John Daly examined a purely communicative form of narcissism they deemed conversational narcissism.[65] Conversational narcissism is an extreme focusing of one's interests and desires during an interpersonal interaction while completely ignoring the interests and desires of another person: Vangelisti, Knapp, and Daly fond four general categories of conversationally narcissistic behavior. First, conversational narcissists inflate their self-importance while displaying an inflated self-image. Some behaviors include bragging, refusing to listen to criticism, praising one's self, etc. Second, conversational narcissists exploit a conversation by attempting to focus the direction of the conversation on topics of interest to them. Some behaviors include talking so fast others cannot interject, shifting the topic to one's self, interrupting others, etc. Third,

conversational narcissists are exhibitionists, or they attempt to show-off or entertain others to turn the focus on themselves. Some behaviors include primping or preening, dressing to attract attention, being or laughing louder than others, positioning one's self in the center, etc. Lastly, conversational narcissists tend to have impersonal relationships. During their interactions with others, conversational narcissists show a lack of caring about another person and a lack of interest in another person. Some common behaviors include "glazing over" while someone else is speaking, looking impatient while someone is speaking, looking around the room while someone is speaking, etc. As you can imagine, people engaged in interpersonal encounters with conversational narcissists are generally highly unsatisfied with those interactions.

Machiavellianism

In 1513, Nicolo Machiavelli (Figure 3.2.3) wrote a text called *The Prince* (http://www.gutenberg.org/ files/1232/1232-h/1232-h.htm). Although Machiavelli dedicated the book to Lorenzo di Piero de' Medici, who was a member of the ruling Florentine Medici family, the book was originally scribed for Lorenzo's uncle. In *The Prince*, Nicolo Machiavelli unabashedly describes how he believes leaders should keep power. First, he notes that traditional leadership virtues like decency, honor, and trust should be discarded for a more calculating approach to leadership. Most specifically, Machiavelli believed that humans were easily manipulated, so ultimately, leaders can either be the ones influencing their followers or wait for someone else to wield that influence in a different direction.



Figure **6.4.3.3**: Nicolo Machiavelli

In 1970, two social psychologists named Richard Christie and Florence Geis decided to see if Machiavelli's ideas were still in practice in the 20th Century.[66] The basic model that Christie and Geis proposed consisted of four basic Machiavellian characteristics:

1. Lack of affect in interpersonal relationships (relationships are a means to an end);
2. Lack of concern with conventional morality (people are tools to be used in the best way possible);
3. Rational view of others not based on psychopathology (people who actively manipulate others must be logical and rational); and
4. Focused on short-term tasks rather than long-range ramifications of behavior (these individuals have little ideological/ organizational commitment).

Imagine working with one of these people. Imagine being led by one of these people. Part of their research consisted of creating a research questionnaire to measure one's tendency towards **Machiavellianism**. The questionnaire has undergone several revisions, but the most common one is called the Mach IV (personality-testing. info/tests/MACH-IV.php).

Interpersonally, highly Machiavellian people tend to see people as stepping stones to get what they want. If talking to someone in a particular manner makes that other people feel good about themself, the Machiavellian has no problem doing this if it helps the

Machiavellian get what he or she wants. Ultimately, Machiavellian behavior is very problematic. In interpersonal interactions where the receiver of a Machiavellian's attempt of manipulation is aware of the manipulation, the receiver tends to be highly unsatisfied with these communicative interactions. However, someone who is truly adept at the art of manipulation may be harder to recognize than most people realize.

Empathy

Empathy is the ability to recognize and mutually experience another person's attitudes, emotions, experiences, and thoughts. Highly empathic individuals have the unique ability to connect with others interpersonally, because they can truly see how the other person is viewing life. Individuals who are unempathetic generally have a hard time taking or seeing another person's perspective, so their interpersonal interactions tend to be more rigid and less emotionally driven. Generally speaking, people who have high levels of empathy tend to have more successful and rewarding interactions with others when compared to unempathetic individuals. Furthermore, people who are interacting with a highly empathetic person tend to find those interactions more satisfying than when interacting with someone who is unempathetic.

Self-Monitoring

The last of the personal-social dispositions is referred to as **self-monitoring**. In 1974 Mark Snyder developed his basic theory of self-monitoring, which proposes that individuals differ in the degree to which they can control their behaviors following the appropriate social rules and norms involved in interpersonal interaction.[67] In this theory, Snyder proposes that there are some individuals adept at selecting appropriate behavior in light of the context of a situation, which he deems high self-monitors. High self-monitors want others to view them in a precise manner (impression management), so they enact communicative behaviors that ensure suitable or favorable public appearances. On the other hand, some people are merely unconcerned with how others view them and will act consistently across differing communicative contexts despite the changes in cultural rules and norms. Snyder called these people low self-monitors.

Interpersonally, high self-monitors tend to have more meaningful and satisfying interpersonal interactions with others. Conversely, individuals who are low self-monitors tend to have more problematic and less satisfying interpersonal relationships with others. In romantic relationships, high self-monitors tend to develop relational intimacy much faster than individuals who are low self-monitors. Furthermore, high self-monitors tend to build lots of interpersonal friendships with a broad range of people. Low-self-monitors may only have a small handful of friends, but these friendships tend to have more depth. Furthermore, high self-monitors are also more likely to take on leadership positions and get promoted in an organization when compared to their low self-monitoring counterparts. Overall, self-monitoring is an important dispositional characteristic that impacts interpersonal relationships.

Key Takeaways

- Personality and temperament have many overlapping characteristics, but the basis of them is fundamentally different. Personality is the product of one's social environment and is generally developed later in one's life. Temperament, on the other hand, is one's innate genetic predisposition that causes an individual to behave, react, and think in a specific manner, and it can easily be seen in infants.
- In both the scientific literature and in pop culture, there are many personality/ temperament schemes that involve four specific parts. Table 3.1, in this chapter, showed a range of different personality quizzes/measures/tests that break temperament down into these four generic categories.
- In this section, we examined a range of different cognitive dispositions or personal-social dispositions. The cognitive dispositions (general patterns of mental processes that impact how people respond and react to the world around them) discussed in this chapter were the locus of control, cognitive complexity, authoritarianism, dogmatism, emotional intelligence, and AO. The social-personal dispositions (general patterns of mental processes that impact how people socially relate to others or view themselves) discussed in this chapter were loneliness, depression, self-esteem, narcissism, Machiavellianism, empathy, and self-monitoring.

Exercises

- Complete the Keirsey Temperament Sorter®-II (KTS®-II; www.keirsey. com/sorter/register.aspx). After finding out your temperament, reflect on what your temperament says about how you interact with people interpersonally.
- Watch the following interview conducted by Allan Gregg with Daniel Goleman (the individual who popularized emotional intelligence) (http://www.youtube.com/ watch?v=NeJ3FF1yFyc). After watching the interview with Goleman, what did you learn about emotional intelligence? How can you apply emotional intelligence in your own life?
- Complete the Self-Monitoring Scale created by Mark Snyder (http://personalitytesting.info/tests/SM.php). After finishing the scale, what do your results say about your ability to adapt to changing interpersonal situations and contexts?

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6.4.4: Chapter Wrap-Up

In addition to your personality, your biologically based temperament also plays an important role in how you interact with others interpersonally. As discussed in this chapter, your temperament is identifiable at birth, whereas, your personality is something that develops over your lifespan. Although we cannot change the biological aspects of our temperament, we can learn how to adjust our behaviors in light of our temperaments.

End of Chapter

Key Terms

- Affectionless Psychopathy
- Affective Orientation
- Anxious Shyness
- Argumentativeness
- Assertiveness
- Authoritarianism
- Cognitive Dispositions
- Communication Apprehension
- Communication Dispositions
- Depression
- Dismissing Attachment
- Dogmatism
- Emotional Intelligence
- Emotional Loneliness
- Empathy
- External Locus of Control
- Extraversion
- Fearful Attachment
- Ideal-Self
- Internal Locus of Control
- Intrapersonal
- Intrapersonal Communication
- Introversion
- Locus of Control
- Loneliness
- Machiavellianism
- Maternal Deprivation Hypothesis
- Narcissism
- Personality
- Preoccupied Attachment
- Rejection Sensitivity
- Relational Dispositions
- Responsiveness
- Right-Wing Authoritarians
- Secure Attachment
- Self-Concept
- Self-Conscious Shyness
- Self-Esteem
- Self-Image
- Self-Monitoring

- Self-Worth
- Shyness
- Social Loneliness
- Social-Personal Dispositions
- Sociocommunicative Orientation
- Temperament
- Verbal Aggression
- Versatility
- Willingness to Communicate

Real World Case Study

John's mother, Kathleen, was 16 years old when he was born. Kathleen's mother had died during her childbirth because she had refused to get cancer treatments, which could have harmed her unborn child. After Kathleen's birth and her mother's death, Kathleen's father was always cold towards his daughter and often blamed her for his wife's death.

When Kathleen entered her teenage years, she started acting out and started participating in several risky behaviors, which is how she ended up pregnant at 16. After John's birth, Kathleen was simply ill-equipped to handle a child, let alone attempt to bond with a child. During John's first two years of life, he was often dropped at Kathleen's friends' houses or even her grandmother's house, and then Kathleen would disappear for days. After two years of attempting to raise John, Kathleen's grandmother convinced her to put her child up for adoption.

When John was two, he was adopted by Bobby and Priscilla Wright. The couple already had one child, Mikey, and they desperately wanted another child, but Priscilla was unable to have more children, so the addition of John to their family was very welcome. Although Bobby and Priscilla were amazing parents, John always felt somewhat disconnected.

In school, John rarely kept the same friends as he progressed through his education. He found it easy to leave one set of friends behind and create a new set wherever he went. He often found it very odd when people were still friends with people they'd known since birth. This same pattern of behavior continued into adulthood, and John quickly found himself with a small circle of friends. Honestly, he was horrible at keeping up with his friends. It's not that he didn't like his friends, but he felt that friends needed to fit into his schedule. As time went by, he quickly found himself with more and more acquaintances and fewer and fewer closer relationships. Even his relationship with his family seemed remote and non-essential. He loved his family, but they were almost out of sight, out of mind since they were on the other side of the country.

When John turned 40, he started trying to figure out how his social and relationship life was in such shambles. He wanted to have relationships with other people but simply didn't know how.

1. Based on the information contained in the case, how would you characterize John in this story?
2. Apply John Bowlby's theory of attachment to this story.
3. Apply Karen Horney's theory of rejection sensitivity to this story.

End of Chapter Quiz

1. Which of the following is NOT one of Charles Horton Cooley's postulates related to the "looking-glass self?"
   a. Actors learn about themselves in every situation by exercising their imagination to reflect on their social performance.
   b. Actors next imagine what those others must think of them.
   c. Actors assess those perceptions through prior interactions with others.
   d. Actors experience an affective reaction to the imagined evaluation of the other
2. Which of the following is the truest statement about the relationship between communication and self-esteem?
   a. There is no relationship between communication and self-esteem.
   b. One's self-esteem impacts how he/she/they communicate.
   c. One's communication impacts an individual's self-esteem.
   d. There is a circular relationship between self-esteem and communication.
3. Which of John Daly's personality dispositions refers to general patterns of mental processes that impact how people socially relate to others or view themselves?

a. Cognitive
b. Communicative
c. Relational
d. Personal-social

4. Jerry is highly in-tune with his emotions. He generally believes that whatever his feelings are telling him to do, it's probably the right thing for him to do. What personality trait is Jerry exhibiting?
   a. Cognitive complexity
   b. Affective orientation
   c. Emotional intelligence
   d. Shyness
5. Which of Kim Bartholomew and Leonard Horowitz's attachment styles describes individuals who see themselves as unworthy of love and generally believe that others will react negatively through either deception or rejection?
   a. Alienated
   b. Dismissing
   c. Fearful
   d. Secure

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End of Chapter Quiz Answer Key

1. C
2. D
3. D
4. B
5. C





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SECTION OVERVIEW

6.5: Friendship Relationships

When you hear the words “friend” or “friendship,” what comes to mind? In today’s society, the words “friend” and “friendship” can refer to a wide range of different relationships or attachments. We can be a friend of a library, museum, opera, theatre, etc. We can be a friend to someone in need. We can friend thousands of people on social media platforms like Facebook. We can develop friendships with people in our day-to-day lives at work, in social groups, at school, at church, etc. Some people see their parents/guardians, spouses, and siblings as “friends.” Many of us even have one or more best friends. So, when we look at all of these different areas where we use the word “friend,” do we mean the same thing? In this chapter, we’re going to delve into the world of interpersonal friendships, which at least takes a few items off of our list of friendships (e.g., libraries, museums, operas), but we’re still left with a term that is very difficult to define.



Figure 1: Interpersonal Communication

Beverley Fehr was one of the first scholars to note the problem related to defining the term “friendship”: “Everyone knows what friendship is – until asked to define it. There are virtually as many definitions of friendship as there are social scientists studying the topic.”[1] Table 10.0.1 presents some sample definitions that exist in the literature for the terms “friend” or “friendship.”

Table 1: Defining Friendship

Anthropologica	“A friendship-like relationship is a social relationship in which partners provide support according to their abilities in times of need, and in which this behavior is motivated in part by positive affect between partners.”[2]
Clinical Psychology	“[S]omeone who likes and wishes to do well for someone else and who believes that these feelings and good intentions are reciprocated by the other party.”[3]
Dictionary	“The emotions or conduct of friends; the state of being friends.”[4]
Evolutionary	“Friendship is a long-term, positive relationship that involves cooperation.”[5,6]
Friendship as Love	“The etymology of word friend connects its meaning with love, freedom and choice, suggesting an ideal definition of friendship as a voluntary relationship that includes a mutual and equal emotional bond, mutual and equal care and goodwill, as well as pleasure.”[7]
Legal	“Friendship is a word of broad and varied application. It is commonly used to describe the undefinable relationships which exist not only between those connected by ties of kinship or marriage, but as well between strangers in blood, and which vary in degree from the greatest intimacy to an acquaintance more or less casual.”[8]
Personality	“[V]oluntary, mutual, flexible, and terminable; relationships that emphasize equality and reciprocity, and require from each partner an affective involvement in the total personality of the other.”[9]
Philosophy	“[A] distinctively personal relationship that is grounded in a concern on the part of each friend for the welfare of the other, for the other’s sake, and that involves some degree of intimacy.”[10]
Social Psychology	“[V]oluntary or unrestrained interaction in which the participants respond to one another personally, that is, as unique individuals rather than as packages of discrete attributes or mere role occupants.”[11]

As you can see, there are several different ways that scholars can define the term “friendship.” So, we must question whether defining the term “friendship” is the best way to start a discussion of this topic.

6.5.1: Friendship Relationships

6.5.2: Stages and Types of Friendships

6.5.3: Friendships in Different Contexts

6.5.4: Chapter Wrap-Up

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6.5.1: Friendship Relationships

Learning Outcomes

- Evaluate Rawlins' friendship characteristics.
- Analyze the importance of communication in the formation of friendships.
- Appraise Rawlins' dialectical approach to friendships.

In a 2017 book on the psychology of friendship, Michael Monsour asked the different chapter authors if they planned on defining the term "friendship" within their various chapters.[12] Monsour found that the majority of the authors planned on not defining the term "friendship," but instead planned on identifying characteristics of the term "friendship." We point this out because defining "friend" and "friendship" isn't an easy thing to do. We all probably see our friendships as different or unique, which is one of the reasons why defining the terms is so hard. For our purposes in this chapter, we're going to go along with the majority of friendship scholars and not provide a strict definition for the term.

Friendship Characteristics

William K. Rawlins, a communication scholar and one of the most influential figures in the study of friendship, argues that friendships have five essential characteristics that make them unique from other forms of interpersonal relationships: voluntary, personal, equality, involvement, and affect (Figure 1).[13]



Figure 1: Friendship

All Friendships are Essentially Voluntary

There's an old saying that goes, "You can't choose your family, but you can choose your friends." This saying affirms the basic idea that friendship relationships are voluntary. Friendships are based out of an individual's free will to choose whom they want to initiate a friendship relationship with. We go through our lives constantly making decisions to engage in a friendship with one person and not engage in a friendship with another person. Each and every one of us has our reasons for friendships. For example, one of our coauthors originally established a friendship with a peer during graduate school because they were the two youngest people in the program. In this case, the friendship was initiated because of demographic homophily but continues almost 20 years later because they went on to establish a deeper, more meaningful relationship over time. Take a second and think about your friendships. Why did you decide to engage in those friendships? Of course, the opposite is also true. We meet some people and never end up in friendship with them. Sometimes it's because you're not interested or the other person isn't interested (voluntariness works both ways). We also choose to end some friendships when they are unhealthy or no longer serve a specific purpose within our lives.

Friendships are Personal Relationships that are Negotiated Between Two Individuals

The second quality of friendships is that they are personal relationships negotiated between two individuals. In other words, we create our friendships with individuals and we negotiate what those relationships look like with that other individual. For example, let's imagine you meet a new person named Kris. When you enter into a relationship with Kris, you negotiate what that relationship will look like with Kris. If Kris happens to be someone who is transgendered, you are still entering into a relationship with Kris and not everyone who is transgendered. Kris is not the ambassador for all things transgendered for us, but rather a unique individual we decide we want to be friends with. Hence, these are not group relationships; these are individualized, personal relationships that we establish with another person.

Friendships Have a Spirit of Equality

The next characteristic of friendships is a spirit of equality. Rawlins notes, "Although friendship may develop between individuals of different status, ability, attractiveness, or age, some facet of the relationship functions as a leveler. Friends tend to emphasize the personal attributes and styles of interaction that make them appear more or less equal to each other."[14] It's important to note that we're not saying a 50/50 split in everything is what makes a friendship equal. Friendships ebb and flow over time as friends'' desires, needs, and interests change. For example, it's perfectly possible for two people from very different social classes to be friends. In this case, the different social classes may put people at an imbalance when it comes to financial means, but this doesn't mean that the two cannot still have a sense of equality within the relationship. Here are some ways to ensure that friendships maintain a spirit of equality:

1. Both friend's needs and desires are important, not just one person's. 2. Both friends are curious about their friend's personal life away from the friendship. 3. Both friends show affection in their own ways. 4. Both friends demonstrate effort and work in the relationship. 5. Both friends encourage the other's goals and dreams. 6. Both friends are responsible for mutual happiness. 7. Both friends decide what activities to pursue and how to have fun. 8. Both friends are mutually engaged in conversations. 9. Both friends carry the other's burdens. 10. Both friends desire for the relationship to continue and grow.

Friendships Have Mutual Involvement

The fourth characteristic of friendships is that they require mutual involvement. For friendships to work, both parties have to be mutually engaged in the relationship. This does not mean that friends have to talk on a daily, weekly, or even monthly basis for them to be effective. Many people establish long-term friendships with individuals they don't get to see more than once a year or even once a decade. For example, my father has a group of friends from high school whom he meets up with once a year. His friends and their spouses pick a location, and they all meet up once a year for a week together. For the rest of the year, there are occasional emails and Facebook posts, but they don't interact much outside of that. However, that once a year get together is enough to keep these long-term (70+ years at this point) friendships healthy and thriving.

The concept of "mutual involvement" can differ from one friendship pair to another. Different friendship pairs collaborate to create their sense of what it means to be a friend, their shared social reality of friendship. Rawlins states, "This interpersonal reality evolves out of and furthers mutual acceptance and support, trust and confidence, dependability and assistance, and discussion of thoughts and feelings."[15] One of the reasons why defining the term "friendship" is so difficult is because there are as many friendship realities as there are pairs of friends. Although we see common characteristics among them, it's important to understand that these characteristics have many ways of being exhibited.

Friendships Have Affective Aspects

The final characteristic of friendships is the notion of affect. **Affect** refers to "any experience of feeling or emotion, ranging from suffering to elation, from the simplest to the most complex sensations of feeling, and from the most normal to the most pathological emotional reactions. Often described in terms of positive affect or negative affect, both mood and emotion are considered affective states."16 Built into the voluntariness, personal, equal, and mutually involved nature of friendships is the inherent caring and concern that we establish within those friendships, the affective aspects. Some friends will go so far as to say that they love each other. Not in the *eros* or romantic sense of the term, but instead in the *philia* or affectionate sense of the term. People often use the term "platonic" love to describe the love that exists without physical attraction based on the writings of Plato. However, Aristotle, Plato's student, believed that *philia* was an even more profound form of dispassionate, virtuous love that existed in the loyalty of friends void of any sexual connotations.

All friendships are going to have affective components, but not all friendships will exhibit or express affect in the same ways. Some friendships may exhibit no physical interaction at all, but this doesn't mean they are not intimate emotionally, intellectually, or spiritually. Other friendships could be very physically affective, but have little depth to them in other ways. Every pair of friends determines what the affect will be like within that friendship pairing. However, both parties within the relationship must have their affect needs met. Hence, people often need to have conversations with friends about their needs for affection.

Communication and Friendship Formation

Now that we've explored the five basic characteristics of friendships, let's switch gears and focus on communication and friendships. This entire chapter is about communication and friendships, but we're going to explore two communication variables that impact the formation of friendships.

Communication Competence

Previously in this book, we talked about the notion of **communication competence**. For our purposes, we used the definition from John Wiemann, "the ability of an interactant to choose among available communicative behaviors in order that he [she/they] may successfully accomplish his [her/their] own interpersonal goals, while maintaining the face and line of his [her/their] fellow interactants within the constraints of the situation."[17] Not surprisingly, an individual's communication competence impacts their friendships. Kenneth Rubin and Linda Rose-Krasnor took communication competence a step further and referred to social communicative competencies, "ability to achieve personal goals in social interaction while simultaneously maintaining positive relationships."[18] The most common place where we exhibit social competencies is within our friendships. Throughout our lifespans, we continue to develop our social communicative competencies through our continued interactions with others. However, individuals with lower levels of competency will have problems in their day-to-day communicative interactions. Analisa Arroyo and Chris Segrin tested this idea and found that individuals who reported having lower levels of communication competence were less satisfied in their friendships.[19] Furthermore, individuals who rated a specific friend as having lower levels of communication competency reported lower levels of both friendship satisfaction and commitment. So right off the bat people with lower levels of communication competence are going to have problems in their communicative interactions with friends.

Communication Apprehension

Another variable of interest to communication scholars has been communication apprehension (CA). We know that peers tend to undervalue their quieter peers, generally seeing them as less credible and socially attractive.[20] In a study examining friendships among college students, participants indicated how many people they would classify as "good friends."[21] Over one-third of the people with high levels of CA reported having no good friends at all. No students with low or average levels of CA reported having no good friends. Over half of high CA individuals also reported family members as being their good friends (e.g., siblings, parents/guardians, cousins). Less than 5% of individuals with low or average levels of CA mentioned relatives. Ultimately, we know it's harder for people with higher levels of CA to establish relationships and keep those relationships growing. Furthermore, individuals with higher levels of CA are less satisfied with their communicative interactions with friends.[22]

As you can see, both communication competence and CA are important aspects of communication that impact the establishment of effective friendship relationships.

Dialectical Approaches to Friendships

Earlier in this book, we introduced you to the dialectical perspective for understanding interpersonal relationships. William K. Rawlins proposed a dialectical approach to friendships.[23] The dialectics can be broken down into two distinct categories: contextual and interactional.

Contextual Dialectics

The first category of dialectics is contextual dialectics, which are dialectics that stem out of the cultural order where the friendship exists. If the friends in question live in the United States, then the prevailing social order in the United States will impact the friendship. However, if the friends are in Malaysia, then the Malaysian culture will be the prevailing social order that impacts the friendship. There are two different dialectics that Rawlins labeled as contextual: private/public and ideal/real.

Private/Public

The first friendship dialectic is the private/public dialectic. Let's start by examining the public side of friendships in the United States. Sadly, these relationships aren't given much credence in the public space. For example, there are no laws protecting friendships. Your friends can't get health benefits from your job. Religious bodies don't recognize your friendships. As you can see, we're comparing friendships here to marriages, which do have religious and legal protections. In fact, in the legal system, the family often trumps friends unless there is a power of attorney or will.

As a significant historical side note, one of the biggest problems many gay and lesbian couples faced before marriage legalization was that their intimate partners were perceived as "friends" in the legal system. Family members could swoop in when Partner A died and evict and confiscate all of Partner A's money and property unless there was an iron-clad will leaving the money and property to Partner B. From a legal perspective, marriage equality was very important in ensuring the rights of LGBTQIA individuals and their spouses.

On the opposite end of this dialectic, many friendship bonds are as strong if not stronger than familial or marital bonds. We voluntarily enter into friendships and create our sense of purpose and behaviors outside of any religious or legal context. In essence, these friendships are autonomous and outside of social strictures that define the lines of marital bonds. Instead of having a religious organization dictate the morality of a relationship, friendships ultimately develop a sense of morality that is based within the relationship itself.

Ideal/Real

From the moment we are born, we start being socialized into a wide range of relationships. Friendship is one of those relationships. We learn about friendships from our family, schools, media, peers, etc.… With each of these different sources of information, we develop an ideal of what friendship should be. However, friendships are not ideals; they are real, functioning relationships with plusses and minuses. This dialectic also impacts how we communicate and interact within the friendship itself. If our culture tells us that people must be reserved and respectful in private, then a simple act of laughing with another person could be an outward sign of friendship.

Interactional Dialectics

It's important to understand that friendships change over time; along with how we interact within those friendships. For communication scholars, Rawlins **interactional dialectics** help us understand how communicative behavior happens within friendships.[24] Rawlins noted four primary communicative dialectics for friendships: independence/dependence, affection/instrumentality, judgment/acceptance, and expressiveness/protectiveness.

Independence/Dependence

First and foremost, friendships are voluntary relationships that we choose. However, there is a constant pull between the desire to be an independent person and the willingness to depend on one's friend. Let's look at a quick example. A few weeks ago, you and one of your friends both mentioned that you wanted to see a new film getting released. A few weeks later, it's a Friday afternoon and you're done with class or work. The movie was released that day, so you go and watch a matinee. You decided to engage in behavior without thought of your friend. You acted independently. It's also possible that you know your friend hates going to the movies, so engaging independent movie watching behavior is very much in line with the norms you've established within your friendship.

On the other side, we do depend on our friendships. You could have a friend that you do almost everything with, and it gets to the point that people see you as a duo and are shocked when both of you aren't together. In these highly dependent friendships, individual behavior is probably very infrequent and more likely to be resented. Now, if you went to the movie alone in a highly dependent friendship, your friend may be upset or jealous because you didn't wait to see it with her/him/them. You may have had the right to engage as an independent person, but a friend in a highly dependent friendship would see this as a violation. This story would cause even more friction within the friendship if you had promised your friend to see the movie with her/him/them. You would still be acting independently, but your friend would have a stronger foundation for being upset.

Ultimately, all friendships have to negotiate independence and dependence. As with the establishment of any friendship norm, the pair involved in the relationship needs to decide when it's appropriate to be independent and when it is appropriate to be dependent. Maybe you need to check-in via text 20 times a day (pretty dependent) or talk on the phone once a year; in both cases, friendships

are different and are in constant negotiation. It's also important to note that a friendship that was once highly dependent can become highly independent and vice versa.

Affection/Instrumentality

The second interactional dialectic examines the intersection of affection as a reason for friendship versus instrumentality (the agency or means by which a person accomplishes her/his/their goals or objectives). As Rawlins noted, "This principle formulates the interpenetrated nature of caring for a friend as an end-in-itself and/or as a means to an end."25 We already discussed the importance of affection in a friendship, but haven't examined the issue of friendships and instrumentality. In friendships, the issue of instrumentality helps us understand the following question, "How do we use friendships to benefit ourselves?" Some people are uncomfortable with this question and find the idea of instrumentality very anti-friendship. Have you ever had a really bad day and all you needed was a hug from your best friend? Well, was that hug a sign of affection? Or did you use that friendship to get something you wanted/ needed (instrumentality)? We all do this to varying degrees within friendships. Maybe you don't have a washer and dryer in your apartment, so you go to your best friend's place to do laundry. In that situation, you are using your friend and that relationship to achieve a need that you have (wearing clean clothes).

The problem of instrumentality arises when one party feels that he/she/they are being used and taken for granted within the friendship itself or if one friend stops seeing these acts as voluntary and starts seeing them as obligatory. First, there are times when there is an imbalance in friendships, and one friend feels that they are being taken advantage of. Maybe the friend with the washer and dryer starts realizing that the only time their friend really reaches out to see if they're available to hang out is when the friend needs to do laundry. Second, sometimes acts that were initially voluntary become seen as obligatory. In our example, maybe the friend who needs to wash their clothes starts to see what was once a nice, voluntary gesture as an obligation. If this happens, then the use of the washer and dryer becomes part of the rules of the friendship, which can change the dynamic of the relationship if the person with the washer and dryer isn't happy about being used in this way.

Judgment/Acceptance

In our friendships, we expect that these relationships are going to enhance our self-esteem and make us feel accepted, cared for, and wanted. On the other hand, interpersonal relationships of all kinds are marked by judgmental messages. Ronald Liang argued that all interpersonal messages are inherently evaluative.[26] So, how do we navigate the need to be accepted and the reality of being judged? A lot of this is involved in the negotiation of the friendship itself. Although we may not appreciate receiving criticism from others, Liang argues that criticism demonstrates to another person that we value them enough to judge.[27] Now, can criticism become toxic? Yes. Maybe you've experienced a friend who criticized everything about you. Perhaps it got to the point where it felt that you needed to change pretty much everything about how you look, act, think, feel, and behave just to be "good enough" for your friend. If that's the case, then that friend is clearly not criticizing you for your betterment but for her/his/their desires.

Expressiveness/Protectiveness

The final interactional dialectic is expressiveness/protectiveness. This dialectic questions the degree to which we want to express ourselves in our friendships while determining how much not to express to protect ourselves. As we discussed earlier in this book, social penetration theory starts with the basic idea that in our initial interactions with others we disclose a wide breadth about ourselves. Still, these are primarily surface level topics (e.g., what's your major, what are your hobbies, where are you from). As time goes on, the number of topics we express decreases, but they become more personal (depth). In a friendship relationship, we have to navigate this breadth and depth in deciding what we express and what we protect.

Ultimately, this is an issue of vulnerability. When we open ourselves up to people and express those deeper parts of ourselves, there is an excellent likelihood that disclosure of these areas could cause greater harm to the individual self-disclosing if the information got out. For example, one of our coauthors had a friendship sour after our coauthor's friend started talking to our coauthor's parents about our coauthor's sexual orientation. Our coauthor saw this as a massive violation of the confidentiality of what was self-disclosed in their friendship. This friend still speaks to our coauthor's parents 20 years later, but our coauthor hasn't spoken to this former friend since the trust was violated. All friendships are an exploration of what can be expressed and what needs to be protected. We all have some friends that we keep at arm's length because we know we need to protect ourselves, since they tend towards being overly chatty or gossipy. At the same time, we have other friends who get to see the real us as we protect less and less of ourselves in those friendships. No one will ever completely know what's going on in our heads, but deep friendships probably come the closest and also make us the most vulnerable.

Mindfulness Activity



In a 2018 survey of readers, the magazine mindful explored the qualities of good friendships, "(38%) was a friend's propensity for understanding. Next was 29% for trustworthiness, followed by 13% for compassion. Another 15% of the vote was divided between positivity, generosity, sense of humor, and sharing similar interests and passions. Finally, 5% of respondents named other qualities, such as self-awareness and honesty."[28]

For this activity, we want you to think about how you can become more mindful of your friendships. Here are three things you can do: be present, try something new, and practice compassion and kindness.[29] Think about your friendships and answer the following questions:

1. When you're with your friends, are you truly present, or do you let distractions (e.g., your cell phone, personal problems) get in the way of your interactions?
2. How often do you and your friends do new things, or are you stuck in a rut doing the same activities over and over again?
3. When you're with your friends, are you mindfully aware of your attention, intention, and attitude? If not, what can you do to refocus yourself to be more present?

Key Takeaways

- William K. Rawlins proposed five specific characteristics of friendships: voluntary (friendships are based on an individual's free will), personal (we create our friendships with individuals negotiating what those relationships look like with that other individual), equality (friendships have a sense of balance that makes them appear equal), involvement (both parties have to be mutually engaged in the relationship), and affect (friendships involve emotional characteristics different from other types of relationships).
- Two important communication variables impact friendship formation: communication competence and CA. Individuals who have lower levels of communication competence have fewer opportunities to make friends and actually report lower overall satisfaction with their friendships. Individuals with CA are less likely to engage in interactions with others, so they have fewer opportunities to engage in friendships. Individuals with high levels of CA report having fewer friendships and are more likely to list a family member as her/his/their best friend.
- Rawlins' dialectical approach to communication breaks friendship down into two large categories of dialectical tensions: contextual (private/public & ideal/real) and interactional(independence/dependence, affection/instrumentality, judgment/acceptance, and expressiveness/protectiveness). These dialectical tensions provide friendship scholars a framework for understanding and discussing friendships.

Exercises

- Think about one of your current or past friendships. Examine that friendship using Rawlins' five characteristics of friendships: voluntary, personal, equality, involvement, and affect.
- How has your communication competence or CA impacted your ability to develop friendships? Also, what advice would you give to someone who has low levels of communication competence or high levels of communication apprehension on how to form friendships?
- Think about one of your current or past friendships. Use Rawlins friendship dialectics to analyze this friendship (both contextual and interactional). After analyzing your friendship, what do these dialectical tensions tell you about the nature and quality of this friendship?

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6.5.2: Stages and Types of Friendships

Learning Outcomes

- Differentiate among Rawlins' seven stages of friendships.
- Evaluate Matthews three basic types of friendships.
- Compare and contrast healthy and unhealthy friendships.

In Stephen Sondheim and George Furth's musical, *Merrily We Roll Along*, the story follows the careers and friendships of three people trying to make it in New York City. One song in the show has always stuck out because of its insightful message about friendship, "Hey Old Friends." In the musical, three friends Mary, Charlie, and Frank get together after not having seen each other for a while. The purpose of the song is to discuss how some friendships can persist even when we aren't in each other's lives daily. You can see a clip from the rehearsal at the *New York City Center's Encore's* production starring Celia Keenan-Bolger (Mary), Colin Donnell (Frank) and Lin-Manuel Miranda (Charley). In this short song, we learn a lot about the nature of this group's friendship and their enduring desire to be close to one another through the ins and outs of life. This section of the chapter is going to examine the stages that friendships through, the types of friendships we have, and healthy vs. unhealthy friendships.

Stages of Friendships

As we've already discussed, friendships are not static relationships we're born with. Instead, these relationships are dynamic, and we grow with them. To help us understand how we ultimately form friendships, William Rawlins broke this process into seven stages of friendships (Figure 1).[30]



Figure 1: Stages of Friendship

Role Delimited Interaction

The first stage of friendship is called role delimited interaction. The basic idea behind this stage is that we all exist in a wide range of roles within our lives: shopper, salesperson, patient, driver, student, parent/ guardian, spouse, etc. In each of these different roles, we end up interacting with a wide range of different people. For example, imagine you're just sitting down in a new class in college, and you talk to the stranger sitting next to you named Adilah. In this case, you are both interacting within your roles as students. Outside of those roles and that context, you may never meet and never have the opportunity even to develop a social relationship with this other person. This does not discount the possibility of random, chance encounters with other people. Still, most of our interpersonal relationships (outside of our family) stem from these roles and the communicative contexts they present.

Friendly Relations

From role delimited interaction, we may decide to move to the second stage of friendship, friendly relations. These relations are generally positive interactions, but they still exist within those same roles. In our example, we start chatting with Adilah before the beginning of each class. At this point, though, most of our interactions are still going to be within those roles, so we end up talking about the class, fellow students, the teacher, homework assignments, etc. Notice that there is not a lot of actual self-disclosure happening within friendly relations. Some people can maintain friendly relations with others for years. For example, you may

interact with coworkers, religious association members, and neighbors within this type of relationship without them ever progressing to the next stage of friendship. According to Rawlins, friendly relationships move towards friendships because they start to exhibit four specific communication behaviors:

1. moves away from what is required in the specific role relationship,
2. fewer stereotyped lines of interaction,
3. individual violations of public propriety, and
4. greater spontaneity.[31]

First, we start interacting in a manner that doesn't resemble the original roles we had. In our example, we start interacting in a manner that doesn't resemble the roles of students when they first meet. Second, we move away from lines of communication that are stereotypes for our roles. For example, some possible stereotyped lines for two students could include, "what did you think of the homework;" "did you bring your book with you today;" "see you next class;" etc. In each of these lines, we enact dialogue that is expected (or stereotyped) within the context of the class itself. Third, more of our normal selves will start to seep into our interactions, which are called violations of public propriety. Maybe one day Adilah turns to you before class, saying, "That reading for homework was such a waste of time." In this case, Adilah is giving you a bit more insight into who she is as a person "These violations of public propriety single an individual out as having an essential side which is not so easily circumscribed by the protocol of a situation."[32] Lastly, we see increased spontaneity in our interactions with the other person. Over time, these interactions, although still interacting within their formal roles, take on more social and less formalized tones. Maybe one day Adilah tells you a joke or shares a piece of gossip she heard. In this case, Adilah is starting to be more spontaneous and less structured in her interactions.

Moves-Toward-Friendship

At some point, people decide to interact with one another outside of the roles they originally embodied when they initially met. This change in roles is a voluntary change. In our example, maybe one day Adilah invites you to get coffee after class, and then another day, you ask her to get lunch before class. Although it's possible that a single step outside of those roles could be enough that a friendly relation is moving towards a friendship, there is generally a sequence of these occurrences. In our example here, Adilah may have made the first move inviting us to coffee, but we then reciprocated later by asking her to lunch. In both of these cases, we are starting to step outside of the original friendly relation and changing the nature of our original interactions.

Nascent Friendship

When one enters into the nascent stage of friendship, the friends are no longer interacting within their original roles, and their interactions do not follow the stereotypes associated with those roles. Eventually, we start to develop norms for how we communicate with this other person that are beyond those original roles and stereotypes. Ultimately, this stage is all about developing those norms. We develop norms for what we talk about, when we talk, and how we talk. Maybe Adilah makes it very clear that she doesn't want to talk about politics or religion, and we're perfectly OK with that. Maybe we keep the bulk of our interaction before and after class, or we start having lunch together before class or coffee after class. The norms will differ from friendship to friendship, but these norms allow us to set parameters on the relationship in this early stage. These norms are also important because keeping them demonstrates that we can be trusted. And when we show we can be trusted over time, the level of intimacy we can develop within our relationship also increases.

It's also during this period that others start to see you more and more as a pair of friends, and external forces may begin to impact the development of your friendship as well. In our case, maybe Adilah has a sister who also goes to the school, so she starts hanging out with both of you from time to time. Maybe we have a significant other, and he/she/they start hanging out as well. Even though we may have these distractions, we must keep faithful to the original friendship. For example, if we start spending more time with Adilah's sister than Adilah, then we aren't faithful to the original friendship. Eventually, the friendship crystalizes, and others start to see the two friends as a pair. One of our coauthors had a friend in graduate school, and it was very common for people to ask the friend when our coauthor couldn't be found or ask the coauthor when the friend couldn't be found. Friends in the nascent state are seen increasingly as a "duo."

Stabilized Friendship

Ultimately nascent friendships evolve into stabilized friendships through time and refinement. It's not like one day you wake up and go, "My friendship has stabilized!" It's much more gradual than that. We get to the point where our developed norms and interaction patterns for the friendship are functioning optimally for both parties, and the friendship is working smoothly. In nascent friendships, the focus is on the duo and developing the friendship. In stabilization, we often bring in new friends. For example, if we had found out that Adilah had coffee with another person from our class during the nascent stage of friendship, we may have felt a bit hurt or jealous of this outsider intruding on our growing friendship. As stabilized friends, we realize that Adilah having coffee with someone else isn't going to impact the strength of the relationship we already have. If anything, maybe Adilah will find other friends to grow the friendship circle. However, like any relationship, both parties still must make an effort to make the friendship work. We need to reaffirm our friendships, spend time with our friends, and maintain that balance of equity we discussed earlier in this chapter.

Rawlins also notes that friendships in the stabilized stage can represent three different basic patterns: active, dormant, and commemorative.[33] **Active friendships** are ones where there is a negotiated sense of mutual accessibility and availability for both parties in the friendship. **Dormant friendships** "share either a valued history or a sufficient amount of sustained contact to anticipate or remain eligible for a resumption of the friendship at any time."[34] These friends may not be ones we interact with every day, but they are still very much alive and could take on new meaning and grow back into an active friendship if the time arises. **Commemorative friendships** are ones that reflect a specific space and time in our lives, but current interaction is minimal and primarily reflects a time when the two friends were highly involved in each other's lives. With commemorative friendships, we still see ourselves as friends even though we don't have the consistent interaction that active friendships have.

In a study conducted by Sara LaBelle and Scott Myers, the researchers set out to determine what types of relational maintenance strategies people use to keep their friendships going across the three different types of friendship patterns (active, dormant, & commemorative).[35] Using the seven relational maintenance behaviors noted by Laura Stafford (positivity, understanding, self-disclosure, relationship talks, assurances, tasks, & networks),[36] the researchers recruited participants over the age of 30 to examine the intersection of relational maintenance and friendship types. All three friendship types use positivity, relational talks, and networks related to relational maintenance to some degree. However, active friendships were more likely than commemorative friendships to use understanding, self-disclosure, assurances, and tasks to maintain their friendships. No differences were seen in relational maintenance strategies between active and dormant friendships nor dormant friendships and commemorative friendships.

Waning Friendship

Unfortunately, some friendships will not last. There are many reasons why friendships may start to wane or decrease in importance in our lives. There are three primary reasons Rawlins discusses as causes: "an overall decline in affect, an individual or mutual decision to let it wane based on identifiable dissatisfaction with the relationship, or a significant, negative, relational event which precipitates an abrupt termination of the friendship."[37] First, some relationships wane because there is a decrease in emotional attachment. Some friends stop putting in the time and effort to keep the friendship going, so it's not surprising that there is a decrease in emotional attachments. Second, both parties may become dissatisfied with the relationship and decide to take a hiatus or spend more time with other friends. Lastly, some relationship-destroying event could happen. For example, you find out that Adilah had an affair with your romantic partner. Adilah broke a promise to you or told someone one of your secrets. Adilah started yelling at you for no reason and physically assaulted you. Each of these events would most likely destroy your friendship.

A wide range of different events could end a friendship. In a study conducted by a team of researchers led by Amy Janan Johnson, the researchers interviewed college students about why their friendships had terminated.[38] The most common reasons listed for why relationships fell apart were 1) romantic partner of self or friend, 2) increase in geographic distance, 3) conflict, 4) not many common interests, 5) hanging out with different groups or different friends, and 6) other. Interestingly, females and males in the study did report differences in the likelihood that these five reasons led to deterioration. Females reported that conflict was a greater reason for friendship deterioration than males. And males reported not having many common interests was a greater reason for friendship deterioration than females. Females and males did not differ in the other three categories. It's important to note, that while this set of findings is interesting, it was conducted among college students, so it may not apply to older adults.

Post-Friendship

The final stage of the friendship is what happens after the friendship is over. Even if a friendship ended on a horrible note, there are still parts of that friendship that will remain with us forever, impacting how we interact with friends and perceive friendships. You may even have symbolic links to your friends: the nightclubs you went to, the courses you took together, the coffee shops you frequented, the movies you watched, etc. all are links back to that friendship. It's also possible that the friendship ended on a positive note and you still periodically say hello on Facebook or during the holidays through card exchanges. Just as all friendships are unique, so are their experiences of post-friendship reality.

Friendship Styles

Beyond the stages of friendship development, different people develop different types of friendship throughout their lifetime. Sarah H. Matthews noted that ultimately people have three basic types of friendships: independent, discerning, and acquisitive (as seen in Figure 2).[39]

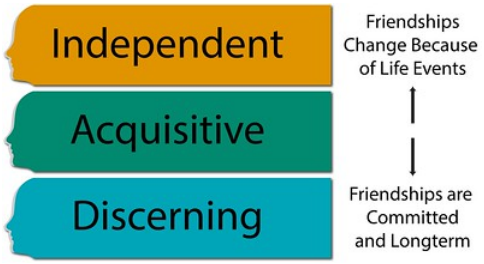


Figure 2: Friendship Styles

Independent

In her study, Matthews found that independents often saw their friendships based on specific circumstances in their lives and not necessarily specific friends. When talking about friends, independents were more likely to about "people they knew" or "people they had known," not reflecting on specific names. Independents were more likely to mention specific names when they talked about people they were interacting with currently. For example, independents talked about friends during periods of their life (e.g., elementary school, junior high/middle-school, high school, college) and not about specific people they knew for long periods of life. Matthews argues that independents framed their concepts of friendships regarding major life events. They also never reported having a close, special, or best friend relationship, so during periods of major life events, they didn't have specific commitments to the people they called "friends." Independents were also more likely to talk about friends as a general concept instead of specific friends. Comparing independents to the stages of friendship discussed by Rawlins, you can consider these to be more along the lines of "friendly relations." Matthews chose the term "independents" because it reflects a more autonomous state, "It was clear that most of them were not isolated people, but instead considered themselves to be sufficient unto themselves."[40]

Discerning

The second type of friendship discussed by Matthews was the discerning style, which, unlike independents, is marked by a deep connection with a friend or group of friends regardless of changing circumstances in their lives. These friendships are marked by deep commitment and longevity, which also means that when a discerning person loses a friend, they are the most likely to experience a deep sense of loss in their lives. Discerners were also more likely to draw clear lines between friendly relations and friendship. Overall, "the discerning identified … only a very few people throughout their lives whom they considered friends. Although not all of these informants had kept these friendships, those who had, valued them highly."[41]

Acquisitive

The final friendship style discussed by Matthews is the acquisitive style. Acquisitives are "people who moved through their lives collecting a variety of friendships, allowing circumstances to make possible the meeting of likely candidates, but then, committing themselves to the friendships once they were made, at the very least for the period of time during which they and their friends were geographically proximate."[42] Unlike the independents, acquisitives discussed having close connections with all of the friends they've met, and unlike the discerning, acquisitives were open to developing new friendships throughout their lives. In essence,

these individuals develop a strong, core group of friends as they go throughout their lives while acquiring new ones depending on changes within their lives.

Good and Bad Friendships

Another system for understanding friendships is to think of them with regard to two basic psychological constructs: health and enjoyment. First, is the relationship a healthy one for you to have? Although this is a concept that is more commonly discussed in romantic relationships, friendships can also be healthy or unhealthy (Table 1).

Table 1: Healthy vs. Unhealthy Friendships

Healthy	Unhealthy
Mutual respect	Contempt
Trust	Suspicion
Honesty	Untruthful
Support	Hinder
Fairness/Equality	Unjust/Inequality
Separate Identities	Intertwined Identities
Open Communication	Closed Communication
Playfulness/Fondness	Sober/Animus
Self-Esteem Enhancing	Self-Esteem Destroying
Fulfilling	Depressing
Acceptance	Combative
Affectionate/Loving	Cold/Indifferent
Comforting	Stressful
Genuine/Benevolent	Manipulative/Exploitive
Beneficial	Damaging
Healthful	Toxic

In addition to the health of a friendship, you must also question if the friendship is something that is ultimately enjoyable to you as a person. Does this friendship give you meaning of some kind? Ultimately, we can break this down into four distinct types of friendship experiences people may have (Figure 3).



Figure 3: Four Types of Friendships

Ideal Friendship

The first category we label as “ideal friends” because these relationships are both healthy and enjoyable. In an ideal world, the majority of our relationships would fall into the category of ideal friendships.

Waning Friendship

The second category we label as “waning friendship” because these friendships are still healthy but not enjoyable anymore. Chances are, this friendship was an ideal friendship at some point and has started to become less enjoyable over time. There’s a wide range of reasons why friendships may stop being enjoyable. It’s possible that you no longer have the time to invest in the friendship, so you find yourself regretting the amount of time and energy that’s necessary to keep the friendship afloat.

Problematic Friendship

The third category of friendship, classified as problematic friendships, is tricky because these are enjoyable but not healthy for us. Ultimately, the friend we have could be a lot of fun to hang out with, but they also could be more damaging to us as people. Instead of supporting us, they make fun of us. Instead of treating us as equals, they hold all the power in the relationship. Instead of being honest, we always know they’re lying to us. Ultimately, we must question why we decide to stay in these relationships.

Deviant Friendship

The final category of friendships we may have is deviant friendships, more commonly referred to as toxic friendships. For our purposes here, we use the term “deviant” because it refers to any behavior that violates behavioral norms. In this case, any friendship situation that is clearly outside the parameters of what is a healthy and enjoyable friendship is not the norm. Unfortunately, some people get so stuck in these friendships that they stop realizing that these friendships aren’t normal at all. Other people may think that their deviant friendships are the only kinds of friendships they can get and/or deserve. It’s entirely possible that a deviant friendship started as perfectly healthy and normal, but often these were somewhat problematic in their early stages and eventually progressed into fully deviant friendships.

Deviant Friends:

- Use criticism and insults as weapons
- Use guilt to get you to cave-in to their desires and whims
- Immediately assume you’re lying (probably because they are)
- Disclose your personal secrets
- Are very gossipy about others, and are probably gossipy about you as well
- Only care about their own desires and needs
- Use your emotions as weapons to attack you psychologically
- Pass judgment on you and your ideas based on their own with little flexibility
- Are stuck up and only really turn to you when they need you
- Can be obsessively needy, but then are very hard to please
- Are inconsistent, so predicting how they will think or behave can be very hard if not impossible
- Put you in competition with their other friends for affection and attention
- Conversations tend to be all about them and their desires and needs
- Make you feel that being your friend is a chore for them
- Make you feel as if you’ve lost control over your own life and choices
- Cross major relationship boundaries and violate relationship norms without apology
- Express their jealousy of your other friendships and relationships

Key Takeaways

- Rawlins proposed that friendships go through seven distinct stages. The first stage, role delimited interaction, is where we interact with a broad range of people within specific roles we play in life. The second stage, friendly relations, occurs when we have continuous positive interactions with someone, but the interactions still exist within those same roles. The third stage, moves-toward-friendship, occurs when people decide to interact with one another outside of the roles they originally embodied when they initially met. The fourth stage, nascent friendship, occurs when the friends are no longer interacting

within their original roles, and their interactions do not follow the stereotypes associated with those roles. The fifth stage, stabilized friendship, reflects friendships that have developed norms and interaction patterns that are functioning optimally for both parties, and the friendship is working smoothly. The sixth stage, waning friendship, occurs when a friendship decreases in importance in our lives. The final stage, post-friendship, occurs after a friendship has been terminated.

- Sarah H. Matthews proposed three basic types of friendships that people have: independent, discerning, and acquisitive. Independents see friendships based on specific circumstances in their lives and not necessarily on specific friends. Discerning friendships are marked by a deep connection with a friend or group of friends regardless of changing circumstances in their lives. Lastly, acquisitive individuals develop a strong, core group of friends as they go throughout their lives while acquiring new ones depending on changes within their lives.
- To understand healthy versus unhealthy friendships, it's also important to consider whether an individual finds that relationship enjoyable or unenjoyable. People who are in a healthy and enjoyable friendship are in an ideal friendship. Individuals who are in a healthy friendship that is unenjoyable are in a waning friendship. People who are in unhealthy friendships that are enjoyable are in a problematic friendship. Lastly, people who are in unhealthy friendships that are unenjoyable are in a deviant friendship.

Exercises

- Think back on a friendship that you no longer have. Take that friendship through all seven of Rawlins' friendship stages. How did you decide when the friendship entered into a new stage?
- Think about your patterns of friendships in your life. Based on the information you learned from Matthews, what type of friendship style do you have? What made you decide that this friendship style most accurately reflects your approach to friendships?
- Thinking about the intersection of healthy friendships and enjoyability, think of one friendship from your own life (past or present) that fits into each category. After coming up with four friendships, differentiate among the four friendships and their outcomes.

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6.5.3: Friendships in Different Contexts

Learning Outcomes

- Differentiate between same-sex and opposite sex friendships.
- Evaluate J. Donald O'Meara five distinct challenges that opposite-sex relationships have.
- Define and explain the term "postmodern friendship."
- Appraise the importance of cross-group friendships.
- Interpret the impact that mediated technologies have on friendships.

So far in this chapter, we've explored the foundational building blocks for understanding friendships. We're now going to break friendships down by looking at them in several different contexts: gender and friendships, cross-group friendships, and mediated friendships.

Gender and Friendships

Based on a more traditional differentiation of both same and opposite sex friendships, early friendship research divided friendships into two categories communal and agentic. Communal friendships were marked by intimacy, personal/emotional expressiveness, amount of self-disclosure, quality of self-disclosure, confiding, and emotional supportiveness.[43] Agentic friendships, on the other hand, were activity-centered. Figure 1 illustrates three curves associated with these concepts. The first one shows women being communal and men being agentic in their friendships, which was a common perspective on the nature of gender differences and friendships. In reality, research demonstrated that both males and females can have communal relationships even though women report notedly higher levels of communality in their friendships (second set of curves). As for agency, women and men were found to both have agentic friendships, and there was considerable overlap between the two groups here, with men being slightly more agentic (seen in the third set of curves).

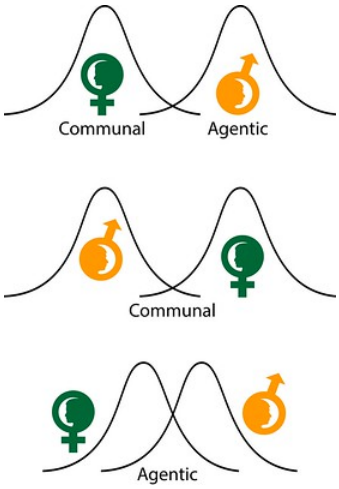


Figure 1: Communal vs. Agentic

A great deal of research in friendship has focused on sex differences between males and females with regard to friendship. In this section, we're going to start by looking at some of the research specifics to same-sex friendships and then opposite sex friendships. We'll end this section discussing a different way of thinking about these types of relationships.

Same-Sex Friendships

For a lot of research, we use the term "same-sex" to refer to two individuals of the same biological sex as friends. Gerald Phillips and Julia Wood argue that there are four primary reasons females develop friendships with the same-sex: activities, personal support, problem-solving, and reciprocation.[44] For female same-sex friendships, the first reason is activity. These are friendships that tend to develop around a specific activity: working out, church, social clubs, etc. For the most part, these friendships stay confined to the activity itself and provide a chance for conversation and noncommittal associations. The second reason is personal support. It's this second category that many highlight when discussing the differences between female and male friendships.

Personal support involves friendships where an individual has a personal confidant with whom they can share their deepest, darkest secrets, concerns, needs, and desires. These friendships are often highly stable friendships and tend to last for a long time. By nature, these friendships tend to be highly communal, which is why we generally discuss them as a key reason for female same-sex friendships. Third, all of us have areas where we're skillful and lack skill. We often develop friendships with people who have skills that are complementary to our own. Consciously or subconsciously, we develop friendships with others out of a need to problem-solve in our daily lives. For example, an information technology specialist may become friends with an accountant. In their friendship, they provide complementary support: computer help and financial advice. Finally, females tend to view their friendships as highly reciprocal. They expect to get out of a friendship what they put into a friendship; it's a mutual exchange. If a female feels her friend is not putting into a relationship the same amount of time and energy, she is less likely to keep sustaining that friendship.

As for male-male friendships, research shows us that they're not drastically different, though their friendships may be framed differently. They still create friendships because of recreation, personal support, problem-solving, and reciprocation. And these relationships can be just as intimate as their female counterparts, but the relationships may look a bit more distinct. First, many male friendships are based around activities: church, work, hobbies, social clubs, etc. These friendships are less about having conversations and more about engaging in the activity at hand. These friendships are not going to be as communal as female friendships that develop around recreation. Often people mistake these male friendships as being less "intimate" because they do not disclose a lot of information, and there isn't necessarily a lot of talk involved, but males do find these relationships perfectly fulfilling.

Phillips and Woods noted that men often view friendships in terms of teams; having allies and team members. In essence, they create their tight-knit circles of in and out-group members based on "team" status. Part of this team status involves performing favors for each other and siding with one another. It's the whole "I've got your back" mentality. We should also note that males are more likely to be friends with those who are the most like them: similar majors, similar religion, similar rungs of the social hierarchy, similar socioeconomic status, similar attitudes, similar interests, etc. Research has even shown that males are more likely to have male friends who are equally physically attractive.[45] One possible explanation for this phenomenon is that males are more likely to develop relationships based on social hierarchies. If attractive males are on a higher rung of a social hierarchy, then it's not surprising that the matching effect occurs.[46]

Opposite Sex Friendships

"Friendship between a woman and a man? For many people, the idea is charming but improbable."[47] William Rawlins originally wrote this sentence in 1993 at the start of a chapter about the problems associated with opposite sex or opposite-sex friendships. What do you think? J. Donald O'Meara discusses five distinct challenges that opposite-sex relationships have: emotional bond, sexuality, inequality and power, public relationships, and opportunity structure.[48,49]

Emotional Bond

First and foremost, in Western society females and males are raised to see the opposite sex as potential romantic partners and not friends. One of the inherent problems with opposite-sex friendships is that one of the friends may misinterpret the friendship as romantic. From an emotional sense, the question that must be answered is how do friends develop a deep-emotional or even loving relationship with someone of the opposite sex. Unfortunately, females are more likely than males to think this is possible. William Rawlins did attempt to differentiate between five distinct love styles that could help distinguish the types of emotional bonds possible: friendship, Platonic love, friendship love, physical love, and romantic love.[50] First, friendship is "a voluntary, mutual, personal and affectionate relationship devoid of expressed sexuality."[51] Second, Platonic love is an even deeper sense of intimacy and emotional commitment without sexual activity. Third, friendship love is the interplay between friendships and sexual relationships. It's often characterized by the use of the terms "boyfriend" and "girlfriend" as distinguishing characteristics to denote paired romantic attachments. Fourth, physical love tends to involve high levels of sexual intimacy with love levels of relationship commitment. And finally, there's romantic love, or a relationship marked by exclusivity with regards to emotional attachment and sexual activity. O'Meara correctly surmises that the challenge for opposite-sex friendships is finding that shared sense of love without one partner slipping into one of the other four categories of love because often the emotions associated with all five different types of love can be perceived similarly.

Sexuality

The obvious next step in the progression of issues related to opposite-sex friendships is sexuality. Sexual attraction is inherent in any opposite-sex friendship between heterosexual couples. Sexual attraction may not be something initial in a relationship. Still, it could develop further down the line and start to blur the lines between someone's desire for friendship and a sexual relationship. In any opposite-sex friendship, there will always be a latent or manifested sexual attraction that is possible. Even if one of the parties involved in the friendship is completely unattracted to the other person, it doesn't mean that the other friend isn't sexually attracted. As such, like it or not, there will always be the potential for the issue of sexuality in opposite-sex friendships once people hit puberty. Now it's perfectly possible that both parties within a friendship are mutually sexually attracted to each other and decide openly not to explore that path. You can find someone sexually attractive and not see them as a viable sexual or romantic partner. For example, maybe you both decide not to consider each other viable sexual or romantic partners because you're already in healthy romantic relationships, or you may realize that your friendship is more important.

Inequality and Power

We live in a society where men and women are not treated equally. As such, a fact of inequality and power-imbalance, created by our society, will always exist between people in opposite-sex friendships. As such, males are in a better position to be in an exchange relationship. O'Meara argues that opposite-sex friendships should, therefore, strive to develop communal ones. However, there is also an imbalance that may exist when it comes to communal needs as well. Females are more likely to get their emotional needs through same-sex friendships. However, males are more likely to get their emotional needs met through opposite sex friendships. This dependence on the opposite sex for emotional needs and support places females in a subordinate position of needing to fulfill those needs.

Public Relationships

The next challenge for opposite-sex friendships involves the public side of friendships. The previous three challenges were all about the private inner workings of the friendship between a female and a male (internal side). This challenge is focused on public displays of opposite-sex friendships. First, it's possible that others will see an opposite-sex friendship as a romantic relationship. Although not a horrible thing, this could give others the impression that a pair of friends are not available for romantic relationships. If one of the friends is seen on a date, other could get the impression that the friend is clearly cheating on their significant other. Second, it's possible that others won't believe the couple as "simply being friends." This consistent devaluing of opposite-sex friendships and the favoring of opposite-sex romantic relationships in our society puts a lot of stress on opposite-sex friendships. Devaluing of friendships over romantic relationships can also be seen as a tool to delegitimize opposite-sex friendships. Third, it's possible that others may question the sexual orientation of the individuals involved in the opposite-sex friendship. If a male is in a friendship relationship with a female, he may be labeled as gay or bisexual for not turning that opposite-sex friendship into a romantic one. The opposite is also true. Lastly, public opposite-sex friendships can cause problems for opposite-sex romantic partners. Although not always the case, it may be very difficult for one member of a romantic relationship to conceive that their partner is in a close friendship relationship with the opposite sex that is not romantic or sexual. For individuals who have never experienced these types of emotional connections, they may assume that it is impossible and that the opposite-sex friends are just "kidding themselves." Another possible problem for romantic relationships is that the significant other becomes jealous of the opposite-sex friend because they believe that, as the significant other, they should be fulfilling any role an opposite-sex friend is.

Scouts are Changing with the Times

Just as a quick caveat, as of the publication of this book, the Girl Scouts of America is open to transgendered children on a case-by-case basis. However, Boy Scouts of America started accepting girls starting in 2017 and is now called Scouts BSA to show this change to policy.

Opportunity Structure

The final challenge described by O'Meara was not part of the original four but was described in a subsequent article.[52] This question is primarily focused on how individuals find opportunities to develop opposite-sex friendships. A lot of our social lives are divided into females and males. Girls go to Girl Scouts and Boys to Boy Scouts. Girls play volleyball and softball while boys play

football and baseball. Now, that's not to say that there aren't girls who play football or boys who play volleyball, but most of these sports are still highly sex-segregated. As such, when we're growing up, we are more likely to spend social time with the same-sex. Ultimately, it's not impossible for opposite-sex relationships to develop, but our society is not structured for these to happen naturally in many ways.

Postmodern Friendships

In the previous section, we looked at some of the basic issues of same-sex and opposite-sex friendships; however, a great deal of this line of thinking has been biased by heteronormative patterns of understanding.[53] The noted absence of LGBTQIA+ individuals from a lot of the friendship literature is nothing new.[54] We have needed newer theoretical lenses to help us break free of some of these historical understandings of friendship. "Growing out of poststructuralism, feminism, and gay and lesbian studies, queer theory has been favored by those scholars for whom the heteronormative aspects of everyday life are troubling, in how they condition and govern the possibilities for individuals to build meaningful identities and selves."[55] By taking a purely heteronormative stance at understanding friendships, friendship scholars built a field around basic assumptions about gender and the nature of gender.[56]

Friendship scholar Michael Monsour asked a group of friendship scholars about the definition of "friendship" and found there was little to no consensus. How then, Monsour argues, can researchers be clear in their attempts to define "gender" and "sex" when analyzing same-sex or opposite sex friendships?[57] As part of his discussion questioning the nature of gender and sex and they have been used by friendship scholars, Monsour provided the following questions for us to consider:

- What does it mean to state that two individuals are in a same-sex or opposite sex friendship and/or that they are of the same or opposite sex from one another?
- What decision rules are invoked when deciding whether a particular friendship is one or the other?
- Why must the friendship be one or the other?
- If friendship scholars and researchers believe that all friendships are either same–sex or opposite-sex (and it appears that most do), at a minimum there should be agreement about what constitutes biological sex. What biological traits make a person a female or a male?
- Are they absolute?
- Are they universal?[58]
- As part of this discussion, Monsour provides an extensive list of areas of controversy related to the terms used for binary gender identity. • What about individuals who are intersexed?
- What about individuals with chromosomal differences outside of traditional XX and XY (e.g., X, Y, XYY, XXX, XXY)? Heck, there are even some XXmales and XYfemales who develop because of chromosomal structural anomalies SRY region on the Y chromosome?
- What about bisexual, gay, and lesbian people?
- What about people who are transgendered?
- What about people who are asexual?

Hopefully, you're beginning to see that the concept of labeling "same-sex" and "opposite sex" friendships based on heterosexual cisgendered individuals who have 46-chromosomal pairs that are either XX or XY may not be the best or most complete way of understanding friendship.

We should also note that research in the field of communication has noted that an individual's biological sex contributes to maybe 1% of the differences between "females" and "males."[59] So, why would we use the words "same" and "opposite" to differentiate friendship lines when there is more similarity between groups than not? As such, we agree with the definition and conceptualization of the term created by Mike Monsour and William Rawlins' "postmodern friendships."[60] A **postmodern friendship** is one where the "participants co-construct the individual and dyadic realities within specific friendships. This co-construction involves negotiating and affirming (or not) identities and intersubjectively creating relational and personal realities through communication."[61] Ultimately, this perspective allows individuals to create their own friendship identities that may or may not be based on any sense of traditional gender identities.

Cross-Group Friendships

As we noted above, research has found that one of the biggest factors in friendship creation is the groups one belongs too (more so for males than females). In this section, we're going to explore issues related to cross-group friendships. A cross-group friendship is a friendship that exists between two individuals who belong to two or more different cultural groups (e.g., ethnicity, race, sexual orientation, socioeconomic status, nationality). "The phrase, 'Some of my best friends are...' is all too typically used by individuals wanting to demonstrate their liberal credentials. 'Some of my best friends are ... gay.' 'Some of my best friends are ... Black.' People say, 'Some of my best friends are ...' and then fill in the blank with whatever marginalized group which they care to exonerate themselves."[62] Often when we hear people make these "Some of my best friends are…" statements, we view them as seriously suspect and question the validity of these relationships as actual friendships. However, many people develop successful cross-group friendships.

It's important to understand that our cultural identities can help us feel that we are part of the "in-group" or part of the "out-group" as well. Identity in our society is often highly intertwined with marginalization. As noted earlier, we also know that males are more likely to align themselves with others they perceive as similar. Females do this as well, but not to the same degree as males. In essence, most of us protect our group identities by associating with people we think are like us, so it's not surprising that most of our friendships are with people who are demographically and ideologically similar to us. To a certain extent, we judge members of different out-groups based on our ethnocentric perceptions of behavior. For example, some people ask questions like, "Why does my Black friend talk about race so much?"; "Does my friend have to act 'so' gay when we're in public?"; or "I like my friend, but does she always have to talk to me about her religion?". In these three instances (race, sexual orientation, and religion), we see examples of judging someone's communicative behavior based on their own in-group's communicative behavioral norms. Especially for people who are marginalized, being marginalized is a part of who they are that cannot be separated from how they think and behave. Maybe a friend talks about race because they are part of a marginalized racial group, so this is their experience in life. "This is actually normal and understandable behavior on the part of these different groups. They are not the ones who make it the focus of their lives. Society—the rest of us—makes race or orientation or gender an issue for them—an issue that they cannot ignore, even if they wanted to. They have to face it every waking moment of their lives."[63] People who live their lives in marginalized groups see this marginalization as part of their daily life, and it's intrinsically intertwined with their identity.

Many of us will have the opportunity to develop cross-group friendships throughout our lives. As our society becomes more diverse, so does the likelihood of developing cross-group friendships. In a large research project examining the outcomes associated with cross-group friendships, the researchers found two factors were the most important when it came to developing cross-group friendships: racism and exposure to cross-group friendships. First, individuals who are racist are less likely to engage in cross-group friendships.[64] Second, actual exposure to cross-group friendships can lead to more intergroup contact and more positive attitudes towards members in those groups. Ultimately, successful cross-group friendships succeed or fail based on two primary factors: time and self-disclosure.[65]

First, successful cross-group friendships take time to develop, so don't expect them to happen overnight. Furthermore, these relationships will take more time to develop as you navigate your cultural differences in addition to the terms of the friendship itself. It's important that when we use the word "time" here, we are not only discussing both longitudinal time, but also the amount of time we spend with the other person. The more we interact with someone from another group, the stronger our friendship will become.

Second, successful cross-group friendships involve high amounts of self-disclosure. We must be open and honest with our thoughts and feelings. We need to discuss not only the surface level issues in our lives, but also have deeper, more meaningful disclosures about who we are as individuals and who we are as individuals because of our cultural groups. One of our coauthor's best friend is from a different racial background. Our coauthors grew up in the Southern part of the United States, and our coauthor's friend grew up in the inner-city area in Los Angeles. When they met, they had very different lived experiences related to both race and geographic differences. Their connection was almost instantaneous, but the friendship grew out of many long nights of conversations over many years.

Mediated Friendships

Probably nothing has more radically altered the meaning of the words "friend" and "friendship" than widespread use of social technology. Although the Internet has been around since 1969 and was consistently used for the exchange of messages through the

1990s, the public didn't start to become more actively involved with the technology until it became cheap enough to use in one's daily life. Before December 1996, using the "information superhighway" was limited to tech professionals, colleges and universities, the government, and hobbyists. The pricing model for Internet use had been similar to that of a telephone subscription. You paid a base rate that allowed you so many hours each month (usually 10) of connected Internet time, and then you paid an additional rate for each subsequent hour. People who were highly active on the Internet racked up enormous bills for their use. Of course, this all changed in December 1996 when America Online (AOL) decided to offer unlimited internet access to the world for $19.95 per month. This change in the pricing structure ultimately led to the first real wave of people jumping online because it was now economically feasible.

The Internet that we all know and love today looks nothing like the web-landscape of the late 20th Century. So much has changed in the first 20 years of the new millennium in technology and how we use it to interact with your friends and family. For our purposes, we're going to focus on the issue of mediated friendships in this section. We'll discuss computer-mediated communication, in general, in Chapter 12.

In the earliest days of online friendships, technology was commonly used to interact with people at larger geographic distances. You met friends in chatrooms or on bulletin boards (precursors to modern social media), and most often, these people were not ones in your town, state, or even country. By 2002, 72% of college students were interacting with their friends online.[66] This was the same year Friendster was created, the year before MySpace came into existence, and a solid two years before Facebook was created (February 4, 2004). So, most interaction in 2002 was through email, instant messaging, and chat rooms. Today we talk less about using the Internet and more about what types of applications people are using on their smartphones (the first iPhone came out on June 29, 2007). For example, in 2018, 68% of U.S. adults used Facebook. By comparison, 81% of adults 18 to 29 use Facebook, while only 41% of U.S. adults over the age of 65 are using Facebook.[67] What about other common apps? Statistics show that, among US adults, 73% use YouTube, 35% use Instagram, 29% use Pinterest, 27% use Snapchat, 25% use LinkedIn, 24% use Twitter, and 22% use WhatsApp.[68]

All of these different technologies have enabled us to keep in touch with each other in ways that didn't exist at the beginning of the 21st Century. As such, the nature of the terms "friend" and "friendship" have changed. For example, how does one differentiate between a friend someone has primarily online and a friend someone sees face-to-face daily? Does the type of technology we use help us explain the nature of our friendships? Let's explore both of these questions.

What's a Friend?

As mentioned at the very beginning of this chapter, one of the biggest changes to the story of friendships has been the dilution of the term "friendship." In some ways, this dilution is a result of social networking sites like Friendster, Facebook, Snapchat, Instagram, etc. Today, we friend people on Facebook that we wouldn't have had any contact with 20 years ago. We have expanded the term "friend" to include everything from casual acquaintances to best friends. When we compare William Rawlins' six stages of friendships to how we use the term "friend" in the mediated context, we see that everything from friendly relations to stabilized friendships gets the same generic term, "friend."[69]

One Australian writer, Mobinah Ahmad realized that the term "friend" was being widely used and often didn't fit the exact nature of the relationships she experienced. She created a six stage theory (see sidebar) to express how she views the nature of friendships in the time of Facebook. She started by analyzing her 538 "friends" on Facebook. The overwhelming majority of these friends really were acquaintances. In fact, of the 538 friends Ahmad had, she claimed that only one of them was a "true friend."[70]

Friendship Acquaintance Six Stage Theory

Dear person reading this,

Find out where you fit in and the next time I tell you we aren't friends don't get offended. Now you'll know why. Love, Moby. P.S. This is not some exclusive thing, where I'm telling people they're unworthy. It's telling it like it is.

PreAcquaintance (10% of people I know)

- We don't know each other.
- We know each other's name only.

Acquaintance Level 1: To know of someone 20% of people I know

- We know of each other through mutual friends/acquaintances.
- We met briefly at a party/social event/university.
- You're a work colleague or business client (who I haven't spent much time with).
- We run into each other now and then by coincidence.
- Convenient Interactions Meeting up is not planned, and only because it is convenient and easy.
- Details about each other are superficial.

Acquaintance Level 2: Liking & Preliminary Care 30% of people I know

- We went to school/university together, or have known you for a long period of time.
- We usually meet in groups, rarely one-on-one.
- If you needed my help, I would actively participate in helping them to the best of my ability.
- I can handle a 20-minute smalltalk chat with you, any longer and I will get bored.

Acquaintance Level 3: Significant Connection & Care 25% of people I know

- We have a really good connection.
- We have some very meaningful talks.
- We care a lot about each other.
- We don't see each other all that much, just now and then when we plan to meet.

PreFriend (AKA Potential Friend) 14% of people I know

- Someone I wish were a friend (as defined below and NOT as society currently defines it)
- I want to spend more time with this person and establish a proper friendship with them.

Friend: Mutual Feelings of Love 1% of people I know

- I care immensely in every domain of their life (academic, physical, mental wellbeing), how their relationships with their loved ones are. I also care about their thoughts, ideas, elations, and fears.
- I can easily give my honest opinion and thoughts.
- This person notices when I am upset through subtle indications.
- I see this person regularly and feel totally comfortable to contact them for a deep and meaningful talk.
- Someone who takes initiative and makes sacrifices to work on this friendship.
- Mutual trust, respect, admiration, forgiveness and unconditional care. Note: If it's not mutual, then we're not friends.

Further Notes

1. There is no shame in being an acquaintance. I think society has made the word derogatory and that is why it seems offensive. It's just about being honest.
2. Friendship is not that complicated to me (I know, the irony of making up a theory and calling it uncomplicated). There may be a small few that cannot be categorized because there is history and shades of grey but I look at my relationship with most people as being Black or White, categorized, uncomplicated.
3. The theory is flexible in the sense that people can go up or down the levels and understands that throughout a dynamic friendship, people become closer or further apart from each other.
4. My theory originates from personal experiences. I realize that one of my biggest vulnerabilities is that I'm too sentimental; this theory combats this problem quite efficiently.
5. I understand that this theory cannot be applied to everyone, but it significantly helps me.

Reprinted with Permission of the Author, Mobinah Ahmad.

Now that you've had a minute to read through Mobinah Ahmad's six stage theory of friendships and acquaintances, how do you see this playing out in your own life? How many people whom you label as "friends" really are acquaintances?

Technologies and Friendships

Today a lot of our interaction with friends is mediated in some fashion. Whether it's through phone calls and texts or social media, gaming platforms, Skype, and other interactive technologies, we interact with our friends in new and unique ways. For example, in

a study that came out in 2018, found that 60% of today's teenagers interact with their friends online daily while only 24% see their friends daily.[71] Interacting online with people is fulfilling some of the basic functions that used to be filled through traditional face-to-face friendships for today's modern teenagers. Teens who spend time interacting with others in an online group or forum say that these interactions played a role in exposing them to new people (74%), making them feel more accepted (68%), figuring out important issues (65%), and helping them through tough times in life (55%).

But, are all technologies created equal when it comes to friendships? In a study by Dong Liu and Chia-chen Yang, the researchers set out to determine whether the way we perceive our friendships differs based on the communication technologies we use to interact.[72] The researchers examined data gathered from 22 different research samples collected by researchers around the world. Ultimately, they found that there is a difference in how we use technologies to interact with friends. They labeled the two different categories Internet-independent (e.g., calls, texts) and Internet-dependent (e.g., instant messaging, social networking sites, gaming). Of the different technologies examined, "Mobile phone-based channels had stronger associations with friendship closeness, suggesting that phone calls and texting were predominantly used with closest associates."[73] As a side note, the researchers did not find sex differences with regard to communication technologies use and friendship intimacy.

Research Spotlight



In 2018, Bree McEwan, Erin Sumner, Jennifer Eden, and Jennifer Fletcher set out to examine relational maintenance strategies on Facebook among friends. Previous research by McEwan found that there were three different relational maintenance strategies used by members of Facebook:[74]

1. Social Contact – personalizing messages to specific friends via Facebook.
2. Relational Assurances – demonstrating one's commitment to continuing a relationship on Facebook.
3. Response Seeking – sending messages to a large number of people via Facebook in the hopes of getting input from an array of people.

In this study, the researchers found that social contact, relational assurances, and response seeking were all positively related to liking, relational closeness, relationship satisfaction, and relationship commitment.

McEwan, B., Sumner, E., Eden, J., & Fletcher, J. (2018). The effects of Facebook relational maintenance on friendship quality: An investigation of the Facebook Relational Maintenance Measure. *Communication Research Reports*, 35(1), 1–11. https://doi.org/10.1080/08824096.2017.1361393

Key Takeaways

- Although there was a historical perception that same-sex friendships were distinctly different, research has shown that there is more overlap between female-female and male-male friendships than there are actual differences.
- J. Donald O'Meara proposed five distinct challenges that opposite-sex relationships have: emotional bond (males and females are raised to see the opposite sex as potential romantic partners and not friends), sexuality (inherent in any opposite-sex friendship between heterosexual couples is sexual attraction), inequality and power (a fact of inequality and power-imbalance, created by our society, will always exist between people in opposite-sex); public relationships (opposite-sex friendships are often misunderstood and devalued in our society in favor of romantic relationships); and opportunity structure (our society often makes it difficult for opposite-sex friendships to develop).
- Cross-group friendships are an important part of our society. The two factors that have been shown to be the most important when developing opposite-sex friendships are time and self-disclosure. First, cross-group friendships take more time to develop as individuals navigate cultural differences in addition to navigating the terms of the friendship itself. Second, effective cross-group friendships are often dependent on the adequacy of self-disclosure. Individuals in cross-group friendships need to discuss not only the surface level issues in our lives, but they need to have deeper, more meaningful disclosures about who they are as individuals.

Exercises

- In your view, what is a postmodern friendship, and why is it an important perspective for communication scholars? Would any of your friendships fall within this framework? Why?
- Think of a time when you've had a cross-group friendship. What made it a cross-group friendship? How did this friendship differ from your same-group friendships? How was it similar to your same-group friendships? If you were explaining the importance of cross-group friendships in your life to another, what would you tell them?
- Do you think the word "friend" has been devalued through the use of social media? When you look at Mobinah Ahmad's six stage theory of friendships, do you agree with her perspective? Why?

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6.5.4: Chapter Wrap-Up

Friendships are a very important part of our interpersonal relationships. As such, we should never take our friendships for granted. For this reason, it's important to remember that friendships (like all relationships) take work. In this chapter, we started by exploring the nature and characteristics of friendships. We then examined the stages and types of friendships. We ended this chapter by exploring friendships in several different contexts.

End of Chapter

Real World Case Study

Friendships often blossom between people that surprise those around them. For example, two U.S. Supreme Court Justices, Antonin Scalia and Ruth Bader Ginsburg, were known for having a decade's long friendship despite being on polar opposite ends of the political spectrum. They served on the Supreme Court for 22 years together until Scalia's death in 2016, but their actual friendship date back to the 1980s when they served on the federal circuit court in Washington, DC.

This unlikely friend pair was known to travel together with their spouses, and they shared an affinity for the opera. Scalia was Ginsburg's favorite souvenir shopping buddy when the two went on trips. There's even a famous picture of the two of them riding an elephant together during a trip to India.

So, how did the two handle their friendship when they were at such opposite ends of the political spectrum? Scalia once noted that if someone cannot agree to disagree with others and remain friends while on the bench, then they probably needed to get a different job.

1. Do you think these types of friendships are possible, given the deep political divides that are plaguing the United States?
2. Why do you think Scalia and Ginsberg's friendship withstood the test of time and politics?
3. How can you analyze this friendship using what you've learned in this chapter?

End of Chapter Quiz

1. Which of William K. Rawlins' friendship characteristics is the one marked by issues of emotional connection?
   a. Affective
   b. Equality
   c. Mutual
   d. Personal
   e. Voluntary
2. Which stage of friendship development is marked by four specific communication behaviors: (1) moves away from what is required in the specific role relationship, (2) fewer stereotyped lines of interaction, (3) individual violations of public propriety, and (4) greater spontaneity?
   a. Friendly Relations
   b. Moves-Toward-Friendship
   c. Nascent Friendship
   d. Post-Friendship
   e. Waning Friendship
3. Joan is one of those people who has a lot of friendships. She has friendships ranging from when she was a young kid and friendships she developed this year. She just has a tendency of making new friends and adding them to the list of friends she already has. Which of Sarah H. Matthews' friendship styles does Joan reflect?
   a. Acquisitive
   b. Affective
   c. Communal
   d. Discerning
   e. Independent
4. _____ friendships are marked by activity.
   a. Acquisitive

b. Affective
c. Agentic
d. Communal
e. Discerning

5. A _____ friendship is one where participants co-construct the individual and dyadic realities within specific friendships.
   a. Affective
   b. Agentic
   c. Independent
   d. Postmodern
   e. Relational

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End of Chapter Quiz Answer Key

1. A
2. A
3. A
4. C
5. D



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SECTION OVERVIEW

6.6: Family and Marriage Relationships

Families are one of the essential relationships that all of us have in our lifetimes. Admittedly, there are a wide range of family types: adopted families, foster families, stepfamilies, nuclear families, and the families we make. According to the latest research from the US Census Bureau, there are a wide range of different types of households in the United States today:

- Family households (83.48 Million)
- Married couple households (61.96 Million)
- Married couple households with own children (31.29 Million)
- Married couple households without own children (30.67 Million)
- Male householder, with own children (3.81 Million)
- Male householder, without own children (2.67 Million)
- Female householder, with own children (12.33 Million)
- Female householder, without own children (2.72 Million)

This chapter is going to explore the different types of family relationships and then end by looking at marriage.

6.6.1: Family Relationships

6.6.2: Family Changes

6.6.3: Sibling Types

6.6.4: Marriage Relationships

6.6.5: Chapter Wrap-Up

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6.6.1: Family Relationships

Learning Outcomes

- Differentiate among various definitions of the word “family.”
- Describe the term “family communication patterns” and the two basic types of family communication patterns.
- Explain family systems theory and its utility for family communication researchers.

We interact within our families and begin learning our family communication pattern from the time we are born. Families are comparable to cultures in that each family has its own beliefs, customes, practices, rituals, and values. Interactions with other families reveal that there are vast differences between families. You may notice that the family down the street yells at each other almost constantly. Yelling is their baseline interaction, whereas another family never raises their voices and may seem to speak so infrequently that it appears that they have nothing to talk about within their family unit. These differences and our tendency as humans to make comparisons cause individuals to assess the value of the various styles of family communication.

Defining Family

One of the biggest challenges for family researchers has been to define the term “family.” The ambiguity of the term has often been seen in the academic literature. The definition of the family developed by Ernest W. Burgess was the first widely used definition by academics.[1] The term “family” was described as “two or more persons joined by ties of marriage, blood, or adoption; constituting a single household; interacting and communicating with each other in their respective social roles of husband and wife, mother and father, son and daughter, brother and sister; and creating and maintaining a common culture.”[2] According to Burgess, a family must be legally tied together, live together, interact together, and maintain a common culture together. The first three aspects of Burgess’ definition are pretty easy to conceptualize, but the concept of common culture deserves further explanation. Common culture consists of those communication interactions (day-to-day communication) and cultural tools (communication acts learned from one’s culture previous to the marriage) that each person brings into the marriage or family. The various tools and interactions form a unique and individual subculture that exists within the context of the new family. A couple can pick and choose from their various backgrounds which communicative acts are most important to them and integrate those into the family unit. If a couple has communicative acts that are polarized, then a couple will need to negotiate and form new ways of communicating. Burgess’ definition of the family was useful because he was the first to examine the family structure’s attempt to maintain a common culture, but it also has many serious problems that cannot be ignored. Burgess’ definition of the word “family” excludes single parent families, commuter families, bisexual, gay, lesbian, and transgendered/transsexual families, and families who do not choose to, or are unable to, have children.

Statistical Definition of ‘Family’ Unchanged

By David Pemberton (2015, January 28)

What is the Census Bureau’s definition of “family”?

Printed decennial census reports from 1930 to the present are consistent in their definition of “family.” The 2010 version states: “A family consists of a householder and one or more other people living in the same household who are related to the householder by birth, marriage or adoption.”

The 1930 version is strikingly similar: “Persons related in any way to the head of the family by blood, marriage or adoption are counted as members of the family.”

But prior to 1930, the definition of a family was quite different.

The 1920 version went like this: “The term ‘family’ as here used signifies a group of persons, whether related by blood or not, who live together as one household, usually sharing the same table. One person living alone is counted as a family, and, on the other hand, the occupants or inmates of a hotel or institution, however numerous, are treated as a single family.”

The 1900 Census announced: “The word family has a much wider application, as used for census purposes, than it has in ordinary speech. As a census term, it may stand for a group of individuals who occupy jointly a dwelling place or part of a

dwelling place or for an individual living alone in any place of abode. All the occupants and employees of a hotel, if they regularly sleep there, make up a single family, because they occupy one dwelling place …"

The older definition is closer to the current use of the term "household."

Enumerator instructions beginning in at least 1860 and extending at least through 1940 emphasize this older definition of family.

Here is an example from the 1860 instructions: "By the term 'family' is meant either one person living separately and alone in a house, or a part of a house, and providing for him or herself, or several persons living together in a house, or part of a house, upon one common means of support and separately from others in similar circumstances. A widow living alone and separately providing for herself, or 200 individuals living together and provided for by a common head, should each be numbered as one family."

The 1870 instructions add the element of eating together as one defining element of a family: "Under whatever circumstances, and in whatever numbers, people live together under one roof, and are provided for at a common table, there is a family in the meaning of the law."

By 1930, the concept of a "household" had become more important and by implication was separated from the term "family": "A household for census purposes is a family or any other group of persons, whether or not related by blood or marriage, living together with common housekeeping arrangements in the same living quarters."

In 1960, the concepts of household and family were even more clearly delineated: "A household consists of a group of people who sleep in the same dwelling unit and usually have common arrangements for the preparation and consumption of food. Most households consist of a related family group. In some cases, you may find three generations represented in one household. Some household members may have no family relationship to the central group — boarders and servants, for example — but they should be included with the household if they eat and sleep in the same dwelling unit."

In summary, the definition of family before 1930 was more similar to today's definition of household. However, since 1930, the definition of family has remained the same, and includes those who are related to the householder by birth, marriage, or adoption.

www.census.gov/newsroom/blog...ince-1930.html

After examining the flaws of Burgess' definition of the word "family," an anthropologist, George Peter Murdock, attempted to define the family, "Social group characterized by common residence, economic cooperation, and reproduction. It includes adults of both sexes, at least two of whom maintain a socially approved sexual relationship, and one or more children, own or adopted, of the sexually cohabiting adults." [3] Once again, this definition only allows for heterosexual couples who have children to be considered a family because of the "socially approved" sexual relationship clause.

Another problem with this definition deals with the required inclusion of children for a couple to be labeled as a family. Many couples are unable to have children. Yet other couples opt not to have children. Does this really mean that they are not families? Couples, with or without children, should be considered as family units. All in all, this definition gave more direction than the Burgess one, but it is still extremely ambiguous and exclusive.

Another anthropologist, Bronislaw Malinowski, was looking at tribal familial structures all over the world at the turn of the century and defined the family as having 1) boundaries, 2) common residence, and 3) mutual affection for one another.[4] Malinowski's definition deals primarily with the fact that in different cultures around the world, a family member may include anyone from the immediate family of origin who gave birth to a person, to any member of the society into which one is born. Many African tribes see the tribe as being the family unit, and the tribe takes it upon itself to raise the children.

The United States' societal concept of the term "family" became very rigid during the 1950s when the family was depicted by social norms and the media as a mother, father, 2.5 offspring, and the family dog living together behind a white picket fence in the suburbs.[5] Though this is currently what many Americans picture as the typical 1950s' family, the reality was considerably different. According to Steven Mintz and Susan Kellog the family structure was very weak in the 1950s.[6] Women started using tranquilizers as a method for dealing with normal household duties, and the divorce rate skyrocketed when compared with the 1940s. Currently, only around seven percent of U.S. families participate in the so-called "traditional" 1950s-style family with Ozzie, the

breadwinning father, and Harriet, the happy homemaking mother, enjoying their first marriage, which has produced two or more school-aged children.[7]

During the 1970s, a variety of psychologists attempted to define the term "family." Arthur P. Bochner defined the family as "an organized, naturally occurring relational interaction system, usually occupying a common living space over an extended time, and possessing a confluence of interpersonal images which evolve through the exchange of messages over time."[8,9] Though this definition is broad enough to allow for a variety of relationships to be considered families, the definition is too vague. It has allowed almost anything to be considered a family. Take, for example, individuals who live in a dormitory setting either at a college or in the military. The first part of Bochner's definition of family is that it has an organized, naturally occurring relational interaction system. In essence, this means that any group that has organization and interacts through various relationships accomplishes part of what it means to be a family. People who live in dormitories interact through various relationships on a regular basis. Whether it be relating with one's roommate or with the other people who live in the rooms next to you, people in dorms do interact. Dormitories are generally highly organized. People are required to listen to complex directors and Resident Assistants (on a collegiate level). Also, with the myriad of dormitory softball teams and other activities, interaction occurs regularly.

The second part of Bochner's definition of the family deals with occupying a common living space for an extended period. People who live in college dormitories do so for around a year. To many transient people, this can be seen as an extended period. The extended time clause is very awkward simply because of its ambiguity.

The last aspect of Bochner's definition of the family deals with the possession of interpersonal images that evolve through communication. Many people who live in the same space will start to acquire many stories and anecdotes concerning those people with whom they are in close proximity. Whether it be remembering the night that a group went on a beer run or the time when everyone pulled together to win the intramural softball competition, a variety of interpersonal images will be created through communication.

As can be seen through the previous discussion, dormitories are facilities where people cohabitate with others for extended amounts of time and share interpersonal images that change over time. The people who live in dorms under this definition could be considered as a family unit. These groups of people should not be considered as a family unit because dorm residents lack the permanence that is needed within a family structure. Once an academic year is over, the people go their directions, and many people will never see or talk to those people with whom they once lived. A family has an ongoing relationship that is constantly functioning even when the individuals are forced to live apart from the family of origin. Once again, here is a definition that does not allow for a concise explanation that can be easily applied when analyzing a family unit.

To understand the concept of a family, the definitions should be combined in such a way that all types of family structures (e.g., single parent, LGBTQIA+, non-married parents) are included. For our purposes a **family** is defined as two or more people tied by marriage, blood, adoption, or choice; living together or apart by choice or circumstance; having interaction within family roles; creating and maintaining a common culture; being characterized by economic cooperation; deciding to have or not to have children, either own or adopted; having boundaries; and claiming mutual affection. This does not necessarily say that all types of families are healthy or legal, but that all cohabiting groups that consider themselves to be families should be researched as such to understand the specific interactions within the group. Though one may disagree with a specific family group, understanding the group through a family filter can lend itself to a better understanding than could be reached by analyzing the group through an organizational filter. To understand this definition of family, an analysis of the various aspects of this study's definition shall be done to help clarify this definition.

Marriage, Blood, Adoption, or Choice

The first part of the definition says that a family is "two or more people tied by marriage, blood, adoption, or choice." This part of the definition allows for a variety of family options that would not be accepted otherwise. This definition also allows for children who become part of a foster family to have a family that they can consider their own, even if they are switched from family to family. Nonmarried couples who consider themselves a family should also be researched as such. This aspect of the definition does open itself to some family types that are seen as illegal (e.g., family members marrying each other). This definition does not attempt to create a legal definition of family as much as it attempts to create a definition under which the family can be studied. As

mentioned earlier, not all forms of family are necessarily healthy or legal. This part of the definition broadens the field of family study while the remaining criteria narrows the focus so that not just any group can call itself a family.

Cohabitation

The second part of the definition of family indicates that the cohabitants may live together or apart by choice or circumstance. There are a variety of married couples who are not able to live in the same place because of occupation. According to Naomi Gerstel and Harriet Engel Goss, a commuter family is such a family:

> The existence of marriages in which spouses separate in the service of divergent career demands at least suggests a need to question both the presupposition that coresidence is necessary for marital viability and its corollary that husbands and wives necessarily share economic fates. Dubbed "commuter," "longdistance" or "two location" families, these marriages entail the maintenance of two separate residences by spouses who are apart from one another for periods ranging from several days per week to months at a time.[10]

These marriages, seen as nontraditional by many, are becoming an increasingly common occurrence within the United States. Any member of the military who is stationed in the United States and sent to other parts of the world without their family experiences the problems caused by commuter marriages. Just because these families are not able to live under the same roof does not mean that they are not a family.

Family Roles

The third criterion of the definition of "family" suggests that the persons interact within family roles. These roles include such terms as mom, dad, son, daughter, wife, husband, spouse, and offspring. When an adult decides to be the guardian either by birth, adoption, or choice, the adult has taken on the role of a father or mother. When a group takes on the roles of parental figures and child figures, they have created a family system within which they can operate. Some of these roles can be related to the understanding of extended family as well, such as grandmother, aunt, uncle, niece, nephew, and the like. These roles and the rules that cultures associate with them have a definite impact on how a family will function.

Common Culture

The fourth aspect, creating a common culture, stems directly from Burgess' definition.[11] Couples bring other aspects (communicative acts, history, cultural differences, etc.) of their lives into the family to create the new subculture that exists in the new family. This can be done whether you have two men, a mother and daughter, or a husband and wife. When a couple joins to create a family unit, they are bringing both of their cultural backgrounds to the union, thus creating a unique third family culture that combines the two initial family cultures.

Economic Cooperation

The fifth trait of a family deals with economic cooperation, or the general pooling of family resources for the benefit of the entire family. Economic cooperation is typically thought of in the context of nuclear families, but in commuter families both units typically pool their resources in order to keep both living establishments operational. Even though the family is unable to live together, the funds from both parties are used for the proper upkeep and maintenance of each location. In many instances, overseas military men and women will send their paychecks to their families back in the States because they will not need the money while they are out at sea or abroad, and their families still have bills that must get paid. Economic cooperation allows families who have dual earners to establish a more egalitarian relationship between the spouses since no one person is seen as the worker and the other as the non-worker.

Children

The sixth component of the definition of a family deals with children as a part of a family. Many researchers (Burgess, 1926; Murdock, 1949; Bailey, 1988) have said that for a family to exist, it must have offspring.[12] This would mean that a couple who is infertile and only wants to raise children if they are biologically related would not be considered a family. This also prevents couples who do not desire to have children from achieving a family status. There are many unions of people who are not able to have children or do not desire to have children who are clearly families.

Established Boundaries

The seventh characteristic of a family deals with the need for the family to establish boundaries. Family boundaries is a concept that stems from family systems theory. According to Janet Beavin Bavelas and Lynn Segal, boundaries are those aspects of a family that prevent the family from venturing beyond the family unit.[13] Boundaries function as a means for a family to determine the size and the scope of family interactions with the greater system or society. The family can let information into the family or exclude it from the family.

An example of this can be seen in religious parents/guardians who are coming to terms with the fact that their son is gay. These parents/guardians often reject information from the family system that would indicate that homosexuality is natural. In this example, the parents/guardians draw an informational boundary and refuse to let information that could contradict their position into the family system. Also, families do not function entirely in conjunction with the system of which they are a part. Families must filter information or risk information overload. Families have naturally occurring and created boundaries that decide how a family should and should not operate. Many families create boundaries that deal with religious discussion, or they do not allow for any rejection of the family's religious beliefs on any level. This is an example of a boundary that a family can create. Conversely, there are boundaries that a family must respect because of societal laws. Understanding these boundaries is necessary because it allows the researcher a greater understanding of the context in which the family lives.

Love and Trust

The eighth, and final, trait of a family, mutual affection, deals with the concept of love and trust that a family tends to possess to help them journey through conflict situations. Mutual affection also means that an individual must have a desire to be within the family or possess the freedom to leave the family system when they are of age. Families are not coercive entities but entities in which all participants can freely make personal decisions to belong. Leaving the family system does not guarantee that a member of a family will be able to lose all connections to the family itself. Besides, the family will have had an impact on members that will affect them even if they leave the family of origin and cut all ties.

Understanding the definitions presented about the family and their obvious limitations will help in understanding of the usefulness of this new definition. Too often, definitions of the word "family" have been so narrow in scope that only some families were studied, and thus the research into the family came from only a very narrow and rigid perspective. Defining what constitutes a family is a difficult task, but without a clear definition, the study of family communication cannot be done effectively.

Family Communication Patterns

Two communication researchers, Jack M. McLeod and Steven H. Chaffee, found that most models of families relied on dichotomous ideas (e.g., autocratic/democratic, controlling/permissive, modern/ traditional).[14] Instead of relying on these perspectives, McLeod and Chaffee realized that family communication happens along two different continuums: socio-orientation and concept-orientation. In a series of further studies, David Ritchie and Mary Anne Fitzpatrick identified two family communication patterns: conformity orientation and conversation orientation.[15, 16]

Socio-Orientation

To McLeod and Chaffee, **socio-oriented** (conformity oriented) families are indicated by "the frequency of (or emphasis on) communication that is designed to produce deference, and to foster harmony and pleasant social relationships in the family."[17] Families high in socio-orientation tend to communicate a similarity of attitudes, beliefs, and values. Similarity and harmony are valued while conflict s avoided. Family members maintain interdependence within a hierarchical structure. One of the authors comes from a family where similarity and harmony were valued to the extent that any amount of disagreement was frowned upon. The parents never (literally) argued or disagreed in front of the children. Despite the desires of her parents, the personalities of the children soon emerged and revealed that neither child could go along with total similarity and harmony. One child dealt with this difference by learning to keep his opinions to himself. The other sibling, who happened to be the oldest child, never learned to keep her opinion to herself. Her communication style simply did not align with the conformity orientation and friction was the result. You may have similar experiences if your communication style is different from your family's communication orientation.

Concept-Orientation

To McLeod and Chaffee, **concept-oriented** (conversation oriented) families use "positive constraints to stimulate the child to develop his own views about the world. and to consider more than one side of an issue."[18] High concept-orientation families engage in open and frequent communication. Family life and interactions are perceived to be pleasurable. Self-expression is encouraged when attempting to make family decisions. Parents/guardians and children communicate in such a way that parents/guardians socialize and educate their children. Understanding the communication pattern within a family can lead to the ability to adapt to the family communication pattern rather than consistently communicating in a manner that is uncomfortable within the family structure.

Four Combinations

To further explain the concepts of socio- and concept-orientations, Jack M. McLeod and Steven H. Chaffee broke the combinations into four specific categories (Figure 11.1.1).

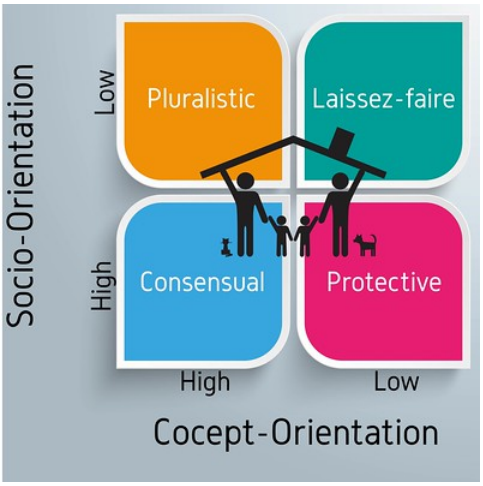


Figure **6.6.1.1**: Family Communication Pattern

Consensual

The first family communication pattern is the consensual family, which is marked by both high levels of socio- and concept-orientation. The term "consensual" is used here because there is a tendency in these families to strive for or have pressure for agreement between parents/guardian and children. Children are encouraged to think outside the box as long as it doesn't impact the parents/guardians' power or the family hierarchy. However, "These conflicting pressures may induce the child to retreat from the parent/ guardian-child interaction. There is some evidence of 'escape' by consensual children, such as strikingly heavy viewing of television fantasy programs."[19]

Protective

The second type of family communication pattern is the protective family, which is marked by high levels of socio-orientation and low levels of concept-orientation. In these families, there tends to be a strong emphasis on child obedience and family harmony. As such, children are taught that they should not disagree with their parents/guardians openly or engage in conversations where differences of opinion may be found. McLeod and Chaffee noted that parents/guardians strive to protect their children from any kind of controversy, which may actually make them more vulnerable to outside pressures and persuasion because they have not been taught how to be critical thinkers.

Pluralistic

The third type of family communication pattern is pluralistic, which is the opposite of the protective family and marked by high levels of concept-orientation and low levels of socio-orientation. In these families, "The emphasis in this communication structure seems to be on mutuality of respect and interests: the combination of an absence of social constraint plus a positive impetus to self-expression should foster both communication and competence."[20] Some parents/guardians worry that this type of openness of thought actually creates problems in their children, but McLeod and Chaffee noted that these families have children who are more likely to say they want to grow up and be like their parents/ guardians than the other three types.

Laissez-faire

The final family communication pattern, laissez-faire, is marked by both low concept- and socioorientations. In these families, there tends to be a lack of parent-child interaction or co-orientation. Instead, these children are more likely to be influenced by external factors like the media, peers, and other forces outside of the family unit. McLeod and Chaffee said that these children are more like a control group in an experiment because of the hands-off nature of their communicative relationships with their patterns. As such, it's somewhat difficult to discuss the effectiveness of this study of family communication.

Research Spotlight



In a 2018 study by Kelly G. Odenweller & Tina M. Harris, the researchers set out to examine the relationship between family communication patterns and adult children's racial prejudice and tolerance. The researchers used a mostly college-aged sample of 190 adults.

Parental use of socio-oriented family communication patterns was positively related to an adult child's reported levels of prejudice and bias towards their own group, and negatively related to being racially tolerant. As for concept-orientation, there were no relationships found at all.

Ultimately, a parent's conformity oriented family communication style can affect their children's racial biases.

Odenweller, K. G., & Harris, T. M. (2018). Intergroup socialization: The influence of parents' family communication patterns on adult children's racial prejudice and tolerance. Communication Quarterly, 66(5), 501–521. https://doi.org/10.1080/01463373.2018.1452766

Family Systems Theory

At the turn of the 20th Century, philosophers started questioning how humans organize things and our understanding of organizing. One critical theorist was Belarusian-born Alexander Aleksandrovich Bogdanov, who wrote a philosophical treaty on the nature of organization in 1922.[21] Bogdanov's ideas ultimately influenced Ludwig von Bertalanffy's general systems theory. In a series of works, Bertalanffy conceptualized what has become known as general systems theory.[22] Bertalanffy defined a system as "sets of elements standing in interrelation."[23] A classic mechanical system is a non-digital watch. Figure 11.1.2 shows the basic layout of a watch's innards.

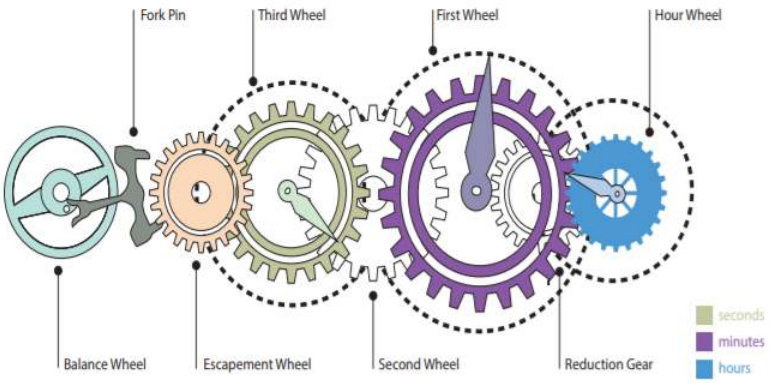


Figure **6.6.1.2**: Watch System

In this illustration, we see how the balance wheel causes the fork pin to move, which turns the escapement wheel. The escapement wheel turns the third wheel (seconds), which turns the second wheel, which turns the first wheel (minutes), which turns the reduction gear, which turns the hour wheel. All of these different parts must work together to tell time. If a problem arises at any part of this process, then it will effect the entire system and our ability to tell time accurately.

So, how does this ultimately help us understand family communication? A psychiatrist named Murray Bowen developed family systems theory in the 1950s while working at the National Institute of Mental Health. His theory stemmed from the work of general systems theory discussed by Bertalanffy.[24] Like Bertalanffy, Bowen's theory started by examining how everything exists within nature and is governed by natural processes. Two of these processes, individuality and togetherness, became central to these ideas.[25] **Individuality** is a "universal, biological life force that propels organisms toward separateness, uniqueness, and distinctiveness."[26] **Togetherness**, on the other hand, is "the complementary, universal, biological life force that propels organisms toward relationship, attachment, and connectedness." [27] This essential dialectical tension creates an organism's differentiation, or its drive to be both individualistic while maintaining intimate connections with others in the larger environment. This more ecological view of how humans exist becomes a central tenant of Bowen's family systems theory. Bowen argues that human behavior was not greatly determined by social-construction or intra-psychically generated. Instead, Bowen believes that a great deal of human behavior is habitual and rooted in billions of years of evolutionary history.

In his earliest work, Bowen examined schizophrenic patients as he was interested in the development and treatment of schizophrenia. Instead of focusing just on the schizophrenic patient, Bowen started analyzing the broader range of relationships within the individual family units. Ultimately, Bowen argued that schizophrenia might be an individual diagnosis, but is in reality, "a symptom manifestation of an active process that involves the entire family."[28] Dr. Bowen goes on to rationalize, "When schizophrenia is seen as a family problem, it is not a disease in terms of our usual way of thinking about disease…When the family is viewed as a unit, certain clinical patterns come into focus that are not easily seen from the more familiar individual frame of reference." [29] In essence, when we stop to think about a family as a system, it's much easier to understand the manifestations of behaviors of family members.

Characteristics of Family Systems

Over the years, numerous researchers have furthered the basic ideas of Murray Bowen to further our understanding of family systems. Part of this process has been identifying different characteristics of family systems. According to Kathleen Galvin, Fran Dickson, and Sherilyn Marrow,[30] there are seven essential characteristics of family systems: interdependence, wholeness, patterns/regularities, interactive complexity, openness, complex relationships, and equifinality.

Interdependence

The term interdependence means that changes in one part of the system will have ramifications for other parts of the system. For example, if one of the gears in your watch gets bent, the gear will affect the rest of the watch's ability to tell time. In this idea, the behaviors of one family member will impact the behaviors of other family members. To combine this idea with family communication patterns described earlier, parents/guardians that are high in socio-orientation and low in concept-orientation will impact those children's willingness and openness to communicate about issues of disagreement.

On the larger issue of pathology, numerous diseases and addictions can impact how people behave and interact. If you have a family who has a child diagnosed with cancer, the focus of the entire family may shift to the care of that one child. If the parents/guardians rally the family in support, this diagnosis could bring everyone together. On the other hand, it's also possible that the complete focus of the parents/guardians turns to the ill child and the other children could feel unattended to or unloved, which could lead to feelings of isolation, jealousy, and resentment.

Wholeness

The idea of wholeness or holism is to be able to see behaviors and outcomes within the context of the system. To understand how a watch tells time, you cannot just look at the fork pin's activity and understand the concept of time. In the same way, examining a single fight between two siblings cannot completely let you know everything you need to know about how that family interacts or how that fight came to happen. How siblings interact with one another can be manifestations of how they have observed their parents/guardians handle conflict among themselves or even extended family members like aunts/ uncles, grandparents, and cousins.

Holism is often discussed in opposite to reductionism. Reductionists believe that the best way to understand someone's communicative behavior is to break it down into the simplest parts that make up the system. For example, if a teenager exhibits verbal aggression, a reductionist would explain the verbally aggressive behavior in terms of hormones (specifically testosterone and serotonin). Holistic systems thinkers don't negate the different parts of the system, but rather like to take a larger view of

everything that led to the verbally aggressive behavior. For example, does the teenager mirror their family's verbally aggressive tendencies? Basically, what other parts of the system are at play when examining a single behavioral outcome.

Patterns/Regularities

Families, like any natural organism, like balance and predictability. To help with this balance and predictability, systems (including family systems) create a complex series of both rules and norms. Rules are dictates that are spelled out. Many children grow up hearing, "children are to be seen and not heard." This rule dictates that in social situations, children are not supposed to make noise or actively communicate with others. Norms, on the other hand, are patterns of behavior that are arrived at through the system. For example, maybe your mother has a home office, and everyone knows that when she is in her office, she should not be disturbed.

Of course, one of the problems with patterns and regularities is that they become deeply entrenched and are not able to be changed or corrected quickly or easily. When a family is suddenly faced with a crisis event, these patterns and regularities may prevent the family from actively correcting the course. For example, imagine you live in a family where everyone is taught not to talk about the family's problems with anyone outside the family. If one of the family members starts having problems, the family may try to circle the wagons and ultimately not get the help it needs. This is an example of a situation that happened to one of our coauthors' families. In this case, one of our coauthor's cousins became an alcoholic during his teen years. We'll call him Jesse. Very few people in the immediate family even know about Jesse's problems. Jesse's mother was a widely known community leader, so there was a family rule that said, "don't make mom or our family look bad." When Jesse's parents found out about his alcoholism (through a DUI), they circled the wagons and tried to deal with the problem as a family. Unfortunately, dealing with a disease like alcoholism by closing ranks is not the best way to get someone treatment. One night Jesse's mother was called out to an accident at a local night club where a drunk driver had hit several people. When Jesse's mother showed up, it was only then that she learned that the drunk driver had been her son.

In this case, the rule about protecting the family's image had become so ingrained, that the family hadn't taken all of the steps necessary to get Jesse the help he needed. Although no one died in the accident, one young woman hit by Jesse was paralyzed for the rest of her life. Jesse ended up going to prison for several years.

Interactive Complexity

The notion of interactive complexity stems back to the original work conducted by Murray Bowen on family systems theory. In his initial research looking at schizophrenics, a lot of families labeled the schizophrenic as "the problem" or "the patient," which allowed them to put the blame for family problems and interactions on the schizophrenic. Instead, Bowen realized that schizophrenia was one person's diagnosis in a family system where there were usually multiple issues going on. Trying to reduce everything down to the one label, essentially letting everyone else "off the hook" for any blame for family problems, was not an accurate portrayal of the family.

Instead, it's important to think about interactions as complex and stemming from the system itself. For example, all married couples will have disagreements. Some married couples take these disagreements, and they become highly contentious fights. These fights are often repetitious and seen over and over again. Mary asks Anne to take out the trash. The next day Mary sees that the trash hasn't been taken out yet. Mary turns to Anne at breakfast and says, "Are you ever going to take out the trash?" Anne quickly replies, "Stop nagging me already. I'll get it done when I get it done." Before too long, this becomes a fight about Anne not listening to Mary from Mary's point-of-view, while the conversation becomes about Mary's constant nagging from Anne's point-of-view. Before long, the argument devolves into an argument about who started the conflict in the first place. Galvin, Dickson, and Marrow argue that trying to determine who started the conflict is not appropriate from a systems perspective, instead, researchers should focus on "current patterns serve to uncover ongoing complex issues."[31]

Openness

The next major characteristic of systems is openness. The term openness refers to how permissive system boundaries are to their external environment. Some families have fairly open boundaries. In essence, these families allow for a constant inflow of information from the external environment and outflow of information to the external environment. Other families are considerably more rigid about system boundaries. For example, maybe a family is deeply religious and does not allow television in the home. Furthermore, this family only allows reading materials that come from their religious sect and actively prevents any ideas that may threaten their religious ideology. In this case, the family has a very rigid and closed boundary. When families close themselves off

from the external environment, they essentially isolate themselves. Children who are reared in highly isolated family systems often have problems interacting with other children when they come into contact with them in the external environment (e.g., school). Some families will choose to homeschool their children as another tool to close the family system to foreign ideas and influences.

Complex Relationships

It's important to remember that all family systems also have multiple subsystems. One of the areas that Murray Bowen became very interested in was how family subsystems develop and function during times of crisis. In Bowen's view, a couple may be the basic unit within an emotional relationship. Still, any tension between the couple will usually result in one or both parties turning to others. If there are not others within the family itself, partners will bring external people into the instability. For example, James and Ralph just got married. After a recent argument, Ralph ended up talking to his best friend, Shelly, about the argument (Figure 11.1.3). Bowen argues a two-person system under stress will draw in a third party to provide balance, which ultimately creates a two-helping-one or a two-against-one dynamic. It's also possible that James decides to talk to his mother, Polly, which creates a different triangle.

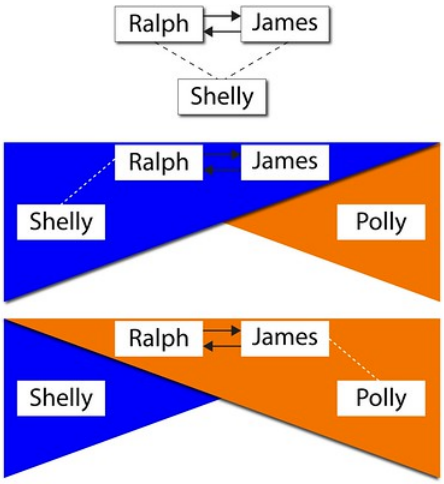


Figure **6.6.1.3**: Nature of Three

Families are filled with relationship triangles. We could describe Ralph and James as parents and Shell and Polly as their daughters just as easily. These triangles are always being created and defined within a family unit when there is instability between two people. During times of crisis, these triangles take on a solution to the instability in the two-person relationship. Unfortunately, this "solution" is either two-helping-one or a two-against-one.[32] Basically, in a triangle, there are now two people on one side and one on the other, so it gives a sense of balance. The more family members we start to include, the more complicated these triangle structures become.

Equifinality

The final characteristic of family systems is equifinality. Equifinality is defined as the ability to get to the same end result using multiple starting points and paths. Going back to the basic definition of "family" discussed earlier in this chapter, there are many different ways for people to form relationships that are called families. Within family systems theory, the goal is to see how different family systems achieve the same outcomes (whether positive or negative).

Mindfulness Activity



Research has demonstrated that parental mindfulness has an indirect impact on children's internalizing or externalizing of problems.[33] As such, mindful parenting is an extremely useful tool when raising children (specifically being attentive, non-judgmental, and non-reactive). Furthermore, Jill Suttie recommends three specific factors for successful mindful parenting:

1. Noticing your own feelings when you're in conflict with your child,
2. Learning to pause before responding in anger,
3. Listening carefully to a child's viewpoint even when disagreeing with it.[34]

Myla and Jon Kabat-Zinn define mindful parenting as "Seeing if we can *remember* to bring this kind of attention and openness and wisdom to our moments with our children. It is a true *practice*, its own inner discipline, its own form of meditation."[35] The essence of mindful parenting is about being present in one's day-to-day interactions with their children. For this activity, answer the following questions. If you are not a parent, think about how your own parents and/or guardians would answer these questions.

1. When you are spending time as a family, are you free from distractions (e.g., cell phones, television)?
2. Does your family have a clear schedule that creates a stable routine (e.g., family mealtimes, bedtimes for children)?
3. Does your family engage in "family time" that does not involve technology?
4. How often do you dedicate time to focus purely on your child's needs?
5. When engaging in a conflict with your child, do you remove yourself when you start to get angry (taking a "time out")
6. How often do you apologize to your child when you're wrong?
7. When watching your children's behavior, do you find yourself observing them or judging them? 8. When was the last time you considered your intentions, judgments, and attitude towards your child during an interaction?

Mapping Family Systems

One of the revolutionary tools created by Murray Bowen to understand complicated family relationships is the **genogram**. A genogram a pictorial representation of a family across generations. Unlike a traditional family tree, a genogram is designed to detail family data and not just basic demographic information (biological sex, birth dates, death dates, etc.). When used effectively, you can track generations of family interactions, medical issues, psychological issues, relationship patterns, and any other variable a researcher or clinician may be interested in studying.[36]

The standard genogram starts with a couple pairing of some kind. In a genogram, males are represented by squares and females are represented by circles. Figure 11.1.4 is a key for common elements in a genogram. Please understand that this is not an exhaustive list. Researchers commonly add symbols to illustrate specific issues of interest. Furthermore, not all of the symbols below are necessarily agreed upon by all researchers who utilize genograms. As such, it's essential to know the key an individual is using when attempting to understand a genogram.

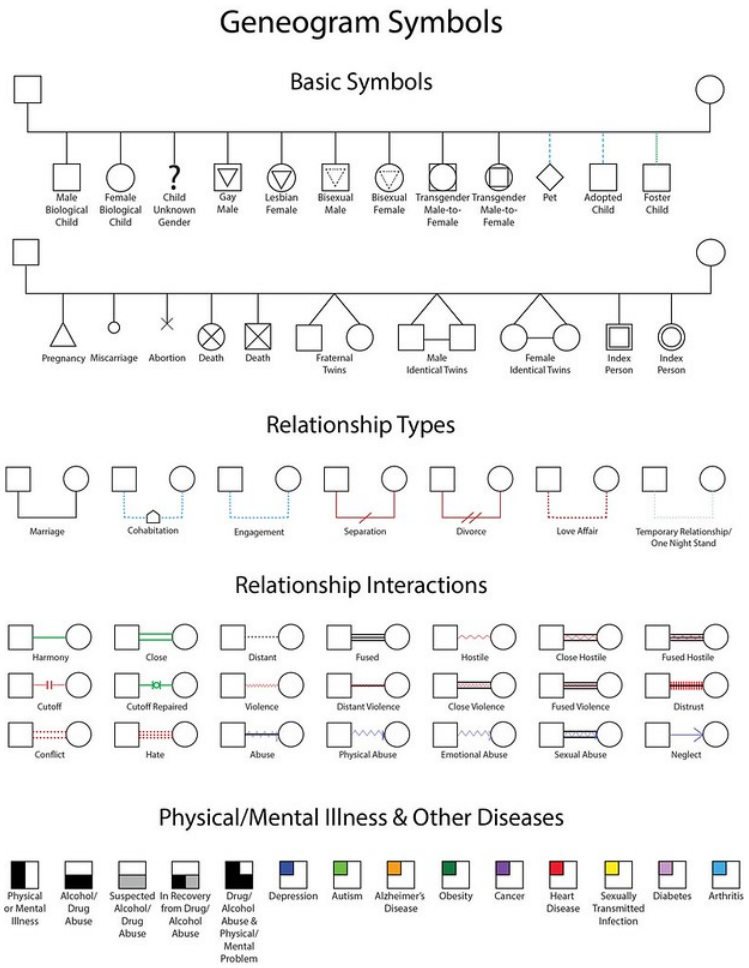


Figure **6.6.1.4**: Genogram Key

As you can see in Figure 11.1.4, your basic genogram allows individuals to look at various basic characteristics of individuals within a family, the types of relationships, types of relationship interactions, and any physical/mental illness and other diseases. When thinking about your average family, many people think of the idyllic family represented in Figure 11.1.5. In this genogram, we have two heterosexual couples who each have a boy and a girl, who then turn around and have a boy and a girl of their own (and, of course, one dog and one cat). However, most families don't look like this. Families are complicated and messy.

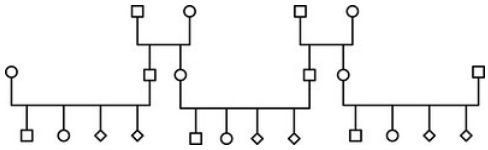


Figure **6.6.1.5**: Idyllic Family

To help us understand genograms, let's look at your typical family, The Skywalkers (Figure 11.1.6). As you can see, there is a lot going on in this genogram. We have three general familial lines in play within this genogram: The Solo's (to the left), the Skywalker's (in the middle), and the Naberrie's (to the right). We have four generations represented within this genogram. For our purposes, the "index person" is Luke Skywalker (highlighted in the yellow box). For those of you who are unaware, the first trilogy of Star Wars centers around Luke Skywalker, so it makes sense to see him as the index person for our genogram.

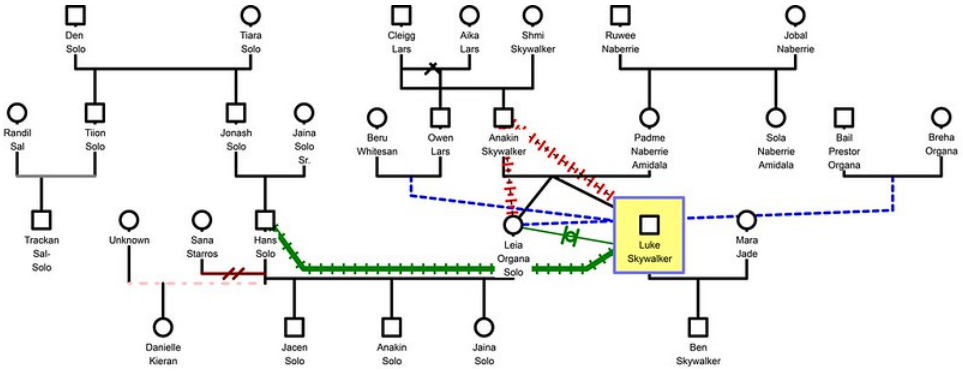


Figure **6.6.1.6**: The Skywalkers

Let's examine some of the family interactions. Let's start with Luke and Leia. They are fraternal twins who were separated by birth. Luke is adopted by his uncle Owen Lars and his wife Beru Whitesan. Leia, on the other hand, is adopted by Bail Prestor Organa and Queen Breha Organa. Ultimately, the two do find each other and establish a close relationship as adults, which is why the "cut off repaired" symbol was used between them. Luke also happens to be best friends with Leia's future husband Han Solo. Han has an interesting life before Leia. From what we know, he may have been previously married to Sana Starros (she said they were, he said they weren't). There's also the possibility that Han had an affair with an unknown woman and had a child out of wedlock named Danielle Kieran.

Of course, the bulk of the original trilogy of Star Wars movies centers on the triangle relationship between Luke, Leia, and their father, Anakin Skywalker (also known as Darth Vader). To put it mildly, Vader is a slightly distant father figure and prone to acts of violence. His acts of violence are not only targeted at his children, but also at anyone he perceives to get in his way. During one of his more dramatic acts of violence, Darth Vader destroys the entire planet of Alderaan, which kills Leia's adopted parents in the process. Of course, this is after he gives the order to kill his half-brother Owen and his wife, who were Luke's adopted parents. As we said earlier, families are complicated and messy.

Now, we used the Star Wars world as a tool to help illustrate how genograms can help us breakdown family histories and understand family dynamics. Let's look at a genogram from a real family. The following genogram is created without names, but all parts of the genogram represent an actual family (Figure 11.1.7).

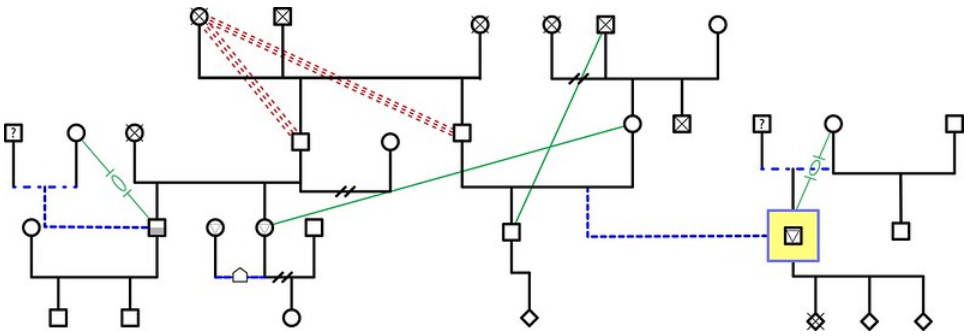


Figure **6.6.1.7**: Real Family Genogram

Take a few moments and look at this genogram. What do you see? How would you characterize this family? You have a number of close relationships. You have two children who were adopted. Both of whom have repaired the relationships with their birthmothers, but have no apparent connection with their birth fathers. You have single adults with pets. You have three marriages that ended in divorce. For a couple of people, we have no information, which is why we have question marks for two males in the genogram. We have a situation where two male siblings had an intense hatred for their stepmother. We have one gay man who is single and a bisexual woman who is now living with another bisexual woman. We also have one male suspected of alcohol abuse.

We show you this genogram because it's more realistic of how modern families look. Modern family systems aren't always clean and easy to follow. Sure, we could put all of these people on leaves in a family tree, but you would only get a fraction of the picture of what this family looks like. Genograms are an excellent tool for getting a bird's eye view of how a family functions.

Research Spotlight



In 2014, Justin Parent, Jessica Clifton, Rex Forehand, Andrew Golub, Megan Reid, and Emily R. Pichler set out to examine the relationships among parental mindfulness, relationship quality, and parental firm control ("degree to which the parent consistently regulates and monitors the child's activities and conduct"[37]). For this study, the researchers specifically examined Black children who had a single mother and the mother had a cohabitating male partner (CMP) who lived with them. The average age of the children participants was 13 years old; the average age of the mother was 39; and the average age of the CMP was 41.

First, the research did not find a relationship between a mother's mindfulness and her CMP's mindfulness. For the mothers, mindfulness was positively related to relationship quality, and positively related to parental firm control. For the CMP, mindfulness was positively related to relationship quality, but was not related to parental firm control. We should also mention that mother and CMP relational quality was positively related, and there was a positive relationship between mother and CMP use of parental firm control.

The researchers used family systems theory to help explain the CMP's role within the family system. Specifically, the researchers argue, "It is also important to note that the MCP's role in different family subsystems may be, at least in part, determined by how a mother defines her male partner's role. For example, his main role may be to meet her relationship needs and/or contribute to completing general household responsibilities (e.g, grocery shopping, cleaning) rather than setting limits on an adolescent aged child." [38]

Parent, J., Clifton, J., Forehand, R., Golub, A., Reid, M., & Pichler, E. R. (2014). Parental mindfulness and dyadic relationship quality in low-income cohabiting black stepfamilies: Associations with parenting experienced by adolescents. *Couple & Family Psychology*, *3*(2), 67–82. https://doi.org/10.1037/cfp0000020

Key Takeaways

- Although there are numerous definitions for the term "family," this book uses the following definition: two or more people tied by marriage, blood, adoption, or choice; living together or apart by choice or circumstance; having interaction within family roles; creating and maintaining a common culture; being characterized by economic cooperation; deciding to have or not to have children, either own or adopted; having boundaries; and claiming mutual affection. The family structure is represented by single-mothers, single-fathers, two-parents, and adults living together without children. The idea of family has shifted away from the notion that a family is made up of a mother, father, and children.
- Jack M. McLeod and Steven H. Chaffee originally coined the term "family communication patterns" and broke the concept into two different patterns of family communicative behavior: socio-orientation and concept-orientation. Concept-orientation is the pattern of family communication where freedom of expression is encouraged, communication is frequent, and family life is pleasurable. Conversely, socio-orientation is the pattern of family communication where similarity is valued over individuality and self-expression, and harmony is preferred over expression of opinion.
- Murray Bowen's family systems theory is an extension of Ludwig von Bertalanffy's general systems theory. Bowen argued that human behavior is not determined by social-construction or intra-psychically generated, but is habitual and rooted in billions of years of evolutionary history. As such, to understand how someone behaves or communicates today, it's important to see how this behavior/ communication can be understood through generations of family members.

Exercises

- Reflect on your experiences as a family member. How does your own family compare to other families in communication patterns and structure?
- Describe your idea of the ideal family. How would your ideal family communicate? Is this different from your own family?
- Use conformity orientation and conversation orientation to describe two families you know.

- Create your own genogram for your family, including at least three generations. You can create this using a pen and paper, graphic arts software, or genogram software. The genograms used in this book were created using Genogram Pro, https://www.genopro.com/. There is also a paired down free version of this software: https://www.genopro.com/free/.

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6.6.2: Family Changes

Learning Outcomes

- Differentiate among the different stages of a family's life cycle.
- Explain some of the common problems researchers have identified with family life cycle approaches.

One of the fascinating parts of the study of interpersonal relationships in families is that they are always changing. As the dynamics of a family change, so do the communication networks. For example, a family that starts with a pair of committed adults suddenly becomes a group when they either have their first child, foster their first child, adopt their first child, etc. With the addition of one other life into the family household, the nature and dynamics change almost overnight.

Family Life Cycle

The notion that families go through systematic cycles that resemble other families is nothing new.[39] Early research attempted to focus on the differences in families between those that existed in rural and urban settings. One such researcher, Charles Loomis, broke families down into four general categories:

1. Childless couples of child-bearing age
2. Families with children under the age of 14
3. Families with at least one child over the age of 14 but under 36
4. Old families.

Other characteristics that Loomis found could impact the family life cycle were those from the addition of both parents' children and non-parental children (nieces, nephews, etc.). Of course, the age breakdown shown by Loomis primarily had to do with work. Generally, children under the age of 14 were not considered fully capable of work; whereas, those over the age of 14 were considered work-aged. You'll also notice that stage three is generally viewed as the time when a family has the most working adults within the family unit. At this time, especially in rural America, it was assumed that adult children would stay on the homesteads and help with the upkeep and day-to-day duties, whether it was a farm or ranch. These were multi-generational endeavors. Eventually, a family became "old," and the next generation continued the cycle by having their children keep the homesteads running.

Of course, our understanding of how families function has changed quite a bit since the 1930s. Studying family life cycles has been a consistent endeavor across generations of family scholars. For our purposes, we are going to discuss the more recent family life cycle, discussed by David Weaver and Laura Lawton, along with some problems inherently associated with this type of research.[40]

Understanding how families generally function is essential for scholars because it lets us know what major events in someone's life can be predicted. For our purposes, we are going to quickly examine David Weaver and Laura Lawton's Family Life Cycle (Figure 11.2.1).

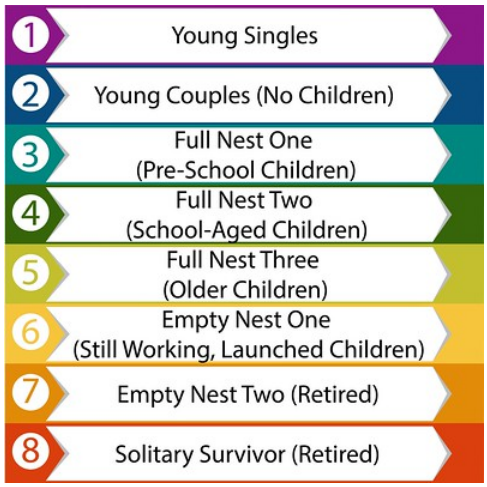


Figure **6.6.2.1**: Family Life Cycle

Young Singles

The first stage of any family starts when single people enter in the world and start looking for potential partners. Most people begin to think about this stage when they are around 18 years of age and enter into the world outside of their parents/ guardians' house. They go out looking for potential partners through dating and eventual mating. However, we know that in our modern world, this isn't always how this works.

Young Couples (No Children)

Eventually, a couple starts to self-identify as a couple. In today's modern world, we see the couple stage as one that exists with no children. During this time, the focus of the couple is often on developing themselves by going to college or starting a career. Some marketers refer to a couple at this stage as "dinks," dual incomes, no kids. As you can imagine, dinks are often sought out by marketers because they generally have a higher expendable income level compared to those who do have children or are just starting out.

As couples come together, they enter into a period that many family scholars call third-culture building. Each member of the couple brings with her/him/them a distinct cultural background and upbringing. The more distinct the cultural differences, the easier it is to see where these differences are. For example, maybe you have a couple where one was raised in the Middle East and the other in South America. These two distinct parts of our world have countless numbers of cultural differences that even outsiders can quickly pinpoint. However, all couples' members can come from different cultural backgrounds, even if the cultures themselves are very similar. For example, you could have a Baptist and a Methodist who were both born and raised in the same town in rural Louisiana. Generally speaking, there may be some minor cultural differences between these two people because of denominational distinctions in their Christian upbringing. Still, these differences aren't huge (though some may overexaggerate them). But even in these cases where people are very similar, there will be cultural differences that exist that must be dealt with as the couple comes together

When a couple negotiates their cultural background with the cultural background of their partner, they are building a new "**third-culture**." Sometimes these cultural differences can be very small. Maybe one member of the couple always opens presents on Christmas Day, and the other member of the couple always opens presents on Christmas Eve. The couple could decide to open one present on Christmas Eve and the rest on Christmas Day. In this case, the couple has negotiated their cultural differences to create a new pattern. Other cultural differences can be much larger. In our example of the couple from the Middle East and South America, we could have the need to negotiate the religious upbringing of a children in the Islamic and Roman Catholic faiths. Maybe the couple is atheist, and will not include any kind of religious teaching into the rearing of children, or the couple could opt for some type of combination of both. It's also entirely possible that one member of the couple will convert to the other member's religion to ensure religious upbringing in a specific faith.

Ultimately, third-culture building is a unique part of any couple. Some couples will have fairly minor cultural differences to negotiate, while other couples could have very large cultural differences to negotiate. The important part is that this is a negotiation by the couple.

Full Nest One (Pre-School Children)

Once a couple decides to involve children, Weaver and Lawton break this phase into three distinct categories or stages depending on the age of the children. The first stage with children (full nest one) occurs when a couple has pre-school aged children. Pre-school age children require more parental oversight. We also see couples with children starting to associate more and more with other couples who also have children, which can cause changes to a couple's social network. Other couples may become very dependent on both their nuclear and extended family for child-rearing help. In contrast, others depend on paid help in the forms of nannies or daycare facilities. When the initial couple consists of dual-income earners, these extended networks become paramount for the ability of the couple to maintain their occupations.

Full Nest Two (School-Aged Children)

In full nest two, the couple has children who are now in school. Once kids go to school, a good chunk of their day is spent in the care of adults outside of the nuclear or extended family. For this reason, the traditional workday tends to be somewhat more flexible for these parents/guardians, but their evenings and weekends are often filled with family functions. As children grow older,

parental oversight and direction become less necessary, but children also start taking on their own busy lives and schedules that often conflict with their parents/guardians' lives and schedules.

Full Nest Three (Older Children)

In full nest three, the couple's children are older and more and more independent; however, they are still somewhat dependent upon their families for food and shelter. As children try to increasingly demand their own identities apart from their parents/guardians, parent/guardian-child relationships are often fraught with various degrees of conflict. On the one hand, you have parents/guardians who have been in a parental oversight role for many years, and on the other, you have children who are seeking their own independence and autonomy. Finding the balance between these polarizing forces is often easier said than done for many families.

Empty Nest One (Still Working, Launched Children)

The next stage is empty nest one, which happens once children are launched, but the parents/guardians are still working. The **launching stage** occurs when late adolescents leave the parental home and venture out into the world as young singles themselves. Historically, late adolescents started the launching stage when they exited the home and went off to college.

However, it's possible that going to college is only a partial-launch. In today's world, many adolescents go off to college and then after college find it almost impossible to function in many large cities on a single salary, so they end up back at home living with their parents/guardians. At the same time, adolescents seek to achieve economic security, but some find it impossible to do so, depending on what's going on within our economy. For example, after the economic downturn of 2008, many recent college graduates had a tough time finding entry-level jobs because they were competing against people with decades of experience who had lost their jobs and desperately needed work (even entry-level work). As I'm writing this, we're seeing the same problem once again as a result of the 2020 Pandemic.

As I'm writing this sentence, we're just at the beginning of the global economic disaster stemming from the COVID-19 outbreak of 2019-2020. Many experts are predicting that we could be looking at a period of economic unease not seen since the Great Depression started in 1929. If this economy does dive into a depression, we'll see more and more late adolescents forced to live longer and longer with their parents/guardians out of economic necessity. Although it was simply too early, in March 2020, to tell what would happen, experts predicted that 80 million jobs are at moderate to high risk of disappearing (more than half the jobs in the U.S. today).[41] By the height of the first wave, around 31 Million U.S. Citizens were filing for unemployment as a result of COVID-19.[42]

Eventually, most parents/guardians will experience a period when their adult children have launched, and the parents/guardians, themselves, are still working

Empty Nest Two (Retired)

Empty nest two occurs once both parents/guardians have decided to retire. Now, retirement is one of those options that may not be viable for everyone, so some couples never end up in empty nest two as a necessity. Other couples spend almost the last third of their lives in retirement. In many ways, couples in retirement have a lot of the same flexibility they had when they were young couples.

Solitary Survivor (Retired)

The typical final stage in the family life cycle is when one partner passes away, leaving the other partner on her/his/their own. In essence, an individual suddenly finds her/him/themself older, and yet again, single.

Problems with Life Cycle Research

Probably the most apparent problem with the traditional approach to the family life cycle is that it does not take into account a wide range of differing family possibilities. For example, Elisa Backer noted several other options that could exist outside of the traditional family cycle:

- Young singles (less than 35 years old)
- Young couples (no children) (female less than 35 years old)
- Gay couple (no children)
- Gay couple (with children)

- Older couple (no children) (female 35+ years of age)
- Older retired couple (no children from current marriage)
- Age-gap couple (children from current relationship; with or without children from previous relationship)
- Age-gap couple (no children from current relationship; with or without children from previous relationship)
- Older divorced single (no children)
- Single parent (children still at home)
- Older single (never been married, no children) (35+ years old)
- Couple with pre-school children (youngest child not at school)
- Couple with school-aged children (youngest child at school) • Couple with older children (all children finished school)
- Empty Nest I (still working, children left home)
- Empty Nest II (retired, children left home)
- Widower (widower who is not working and partner is deceased)
- Widower (still working)[43]

Another commonly discussed problem with this approach to understanding the family life cycle is that many individuals do not walk through the family life cycle in an exact sequence. For example, someone could be single, get married, get divorced, get married again, have a child, lose a partner, get remarried, have another child (one child is pre-school age one is recently launched), etc. Suddenly, we've gone from a path that seems highly "normalized" and straightforward to one that contains a lot more uncertainty and diversions from the typical path of "family."

As a whole, family life cycles are an excellent tool for having a general understanding of how many families function within society, but many families do not experience the life cycle as a linear process from singlehood to death.

Key Takeaways

- David Weaver and Laura Lawton's Family Life Cycle consists of eight distinct stages: 1) young singles, 2) young couples (no children), 3) full nest one (preschool children), 4) full nest two (school-aged children), 5) full nest three (older children), 6) empty nest one (still working, launched children), and 7) empty nest two (retired).
- Although the concept of family life cycles is a useful tool for examining families, there are some inherent limitations to this approach. First, the life cycle doesn't allow for different types of family units. Additionally, many individuals do not walk through the family life cycle in an exact sequence.

Exercises

- Use the idea of a family life cycle to map out the cycle of a famous family. You want to choose a family that has completed the full cycle to make this activity easier. Once you've mapped out the family, answer the following questions. Did the life cycle fit this family? How easy was it to determine the different parts of the family life cycle? What critiques would you have of the applicability of the family life cycle approach to this specific family?
- Think about your own family's life cycle. Attempt to plot out the life cycle of your family through at least three generations: your grandparents (or equivalent), your parents (or equivalent), and yourself and any siblings (or equivalent).

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6.6.3: Sibling Types

Learning Outcomes

- Explain the two main concepts Shirley McGuire, Susan M. McHale, and Kimberly Updegraff found in research related to siblings.
- Differentiate among Shirley McGuire, Susan M. McHale, and Kimberly Updegraff's different sibling relationship types.
- Describe different ways that siblings maintain their relationships.

After examining the literature related to siblings, Shirley McGuire, Susan M. McHale, and Kimberly Updegraff realized that two main concepts were commonly discussed in the literature: hostility and warmth.[44] Sibling hostility was characterized by such sibling behaviors as causing trouble, getting into fights, teasing/name-calling, taking things without permission, etc.[45] Sibling warmth, on the other hand, was characterized by sibling behaviors such as sharing secrets, helping each other, teaching each other, showing physical affection, sharing possessions, etc.[46] Research has shown us that warmth and hostility have an impact on sibling relationships. For example, individuals who have higher levels of sibling warmth are more likely to engage in prosocial behavior.[47] Individuals who have sibling relationships that are high in hostility are more likely to report higher levels of aggression, anxiety, depression, and loneliness.[48]

Sibling Relationship Types

McGuire, McHale, and Updegraff knew that these two dimensions were distinct from one another, so they set out to create a typology of sibling relationships based on hostility (high vs. low) and warmth (high vs. low). You can see this typology in Figure 11.3.1.

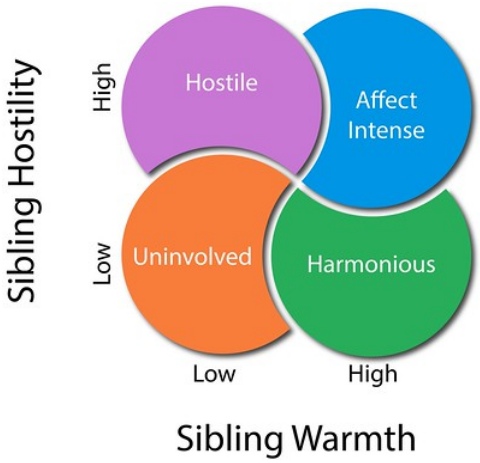


Figure **6.6.3.1**: Sibling Relationships

Harmonious

The first type of sibling relationship is the harmonious relationship. Harmonious sibling relationships are characterized by low levels of hostility and high levels of warmth. In these relationships, the siblings get along very well and have very low levels of problematic conflict. Often siblings in this category get along so well that they are very close friends in addition to being siblings. When it comes to long-term outcomes, harmonious siblings were found to have lower feelings of loneliness and higher self-esteems.[49] Research has also found gender effects. When sibling pairs are both female, they are more likely to report harmonious relationships than the other three sibling relationship types. At the same time, the combination of gender and birth-order also makes a difference. Males who are the firstborn are less likely to report harmonious sibling relationships.[50]

Hostile

The opposite type of the harmonious sibling relationship is the hostile sibling relationship, which is characterized by high levels of hostility and low levels of warmth. These relationships are marked by high levels of conflict between the siblings, which can often be highly physically and verbally aggressive. Furthermore, individuals in hostile sibling relationships are more likely to internalize

problems as well as experience lower academic success, social competence, and feelings of self-worth.[51] These people often perceive their siblings as rivals within the family unit, so there is an inherent competition for scarce resources. Often these resources are related to parental attention, respect, and love.

Affect-Intense

The third sibling type is the affect-intense relationship. Affect-intense sibling relationships are marked by both high levels of hostility and warmth. These sibling relationships are as nurturing as harmonious relationships and as dominating as hostile relationships. These relationships are also perceived as more satisfying than hostile sibling relationships.[52] In one study examining affect-intense sibling relationships, researchers found that 38% of siblings from divorced families reported their sibling relationships as affect-intense as compared to only 22% of siblings from intact families.

Uninvolved

The last type of sibling relationship is called the uninvolved, which is characterized by low levels of both hostility and warmth. Uninvolved sibling relationships typically don't have any of the problems associated with affect-intense or hostile sibling relationships. They also do not report any of the benefits that have been found with harmonious sibling relationships.[53] Uninvolved sibling relationships also appear to develop later in life. "Perhaps the separation processes and increased focus on peers that begin during adolescence stimulate the development of an uninvolved sibling relationship." [54]

Sibling Relationship Maintenance

One area where communication scholars have been instrumental in the field of sibling relationships has been in relationship maintenance, or the communicative behaviors that one engages in to preserve a relationship with another person. In one of the earliest studies to examine sibling relationships in the field, Scott Myers and a group of students explored the connection between relationship communication and sibling communication satisfaction, liking, and loving.[55] Equality, receptivity, immediacy, similarity, and composure were all positively related to communication satisfaction. Composure, equality, similarity, and receptivity were all positively related to sibling liking. Equality, similarity, and receptivity were positively related to loving one's sibling. The researchers also noted that individuals who perceived their relationships as more formal reported lower levels of loving their siblings. This first study helped pave the way for future research in examining how relationship communication impacts sibling relationships.

In a follow-up study, Scott Myers and Keith Weber set out to construct a measure for analyzing how individuals use communication to maintain their sibling relationships.[56] In their research, Myers and Weber found six distinct ways that siblings maintain their relationships through communication: confirmation, humor, social support, family visits, escape, and verbal aggression

Confirmation

The first way that siblings engage in relational maintenances is through confirmation. Confirmation messages help a sibling communicate how much they value the sibling. Sometimes it's as simple as telling a sibling, "I'm pretty lucky to have a brother/sister like you." This sentence can be an easy way to demonstrate how much someone means to you. These types of messages help validate the other sibling and the relationship.

Humor

A second relational maintenance tool that siblings can use is humor. Being able to laugh with one's sibling is a great way to enjoy each other's company. Often siblings find things completely hilarious that outsiders may not understand because of the unique nature of sibling relationships. Siblings also can lovingly make fun of each other. Now, we're not talking about making fun of someone in a demeaning or mean-spirited manner. For example, one of our coauthors has an older brother who loves to give him a hard time. Recently, our coauthor misspelled something on Facebook, and his brother was right there to point it out and give him a hard time. In some relationships, this could be viewed as criticism, but because of the nature of their relationship, our coauthor knew the incident should be taken in jest.

Social Support

The third way siblings engage in relational maintenances is through social support. Social support is an individual's perception and the actuality that an individual is loved and cared for and has people he/she/ they can turn to when assistance or help is needed. Between siblings, this could involve conversations about one's romantic life or even about parental concerns. Another way that siblings often provide social support is by giving and seeking advice from her/his/their sibling(s).

Family Events

The fourth way that families engage in social support is through family events. Not all families are big on family events, but some families participate in close-knit gatherings regularly. Some siblings will avoid these events to avoid seeing their other siblings, but many siblings see these opportunities as a way to keep their sibling relationships going. One of our coauthor's family has problems getting together each year during the holidays because of how busy their schedules are in December. Instead, our coauthor and family go on family trips. Over the years, they've gone to Australia, Alaska, Hawaii, The Bahamas, San Francisco, New York City, New Zealand, and many other places. Currently, they're planning trips to Belize and back to Hawaii. The family looks forward to these vacations together. In addition to these trips, our coauthor's father also arranges periodic family reunions for his side of the family. Our coauthor and their sibling often end up rooming together because both are single. Ultimately, both look forward to these reunions because it gives them a chance to catch up.

Escape

It's often great to attend family events, but we usually only like to attend when we know our sibling will be there. In these cases, we often use our siblings as a form of escape. In fact, some siblings will only attend family get-togethers when they know their sibling(s) will be there. We often have a range of reasons for why we need to escape when we're interacting with our family, but we are sure glad our sibling(s) are there when we need that escape.

Verbal Aggression

The final relational maintenance strategy that siblings have been found to use is verbal aggression. Verbal aggression is generally not viewed as a positive tool for communication. However, some sibling pairs have realized over time that verbally aggressive behavior allows them to get their way or vent their frustrations. However, in the original study by Weber and Myers, the researchers did find that all of the other relational maintenance strategies were positively related to sibling liking, commitment, and trust, but verbal aggression was not.[57]

Key Takeaways

- Shirley McGuire, Susan M. McHale, and Kimberly Updegraff examined the literature related to siblings and found that there were two common variables: hostility and warmth. Sibling hostility is characterized by such sibling behaviors as causing trouble, getting into fights, teasing/name-calling, taking things without permission, etc…. Sibling warmth, on the other hand, is characterized by sibling behaviors such as sharing secrets, helping each other, teaching each other, showing physical affection, sharing possessions, etc.
- Shirley McGuire, Susan M. McHale, and Kimberly Updegraff found four sibling relationship types. The four different types of sibling relationships are based on the degrees to which they exhibit the combination of hostility and warmth. First, harmonious sibling relationships are characterized by low levels of hostility and high levels of warmth. Second, hostile sibling relationships are characterized by high levels of hostility and low levels of warmth. Third, affect-intense sibling relationships are characterized by both high levels of hostility and warmth. Lastly, uninvolved sibling relationships are characterized by low levels of both hostility and warmth.
- Scott Myers and Keith Weber discovered that siblings generally maintain their relationships using several relational maintenance strategies: confirmation, humor, social support, family visits, escape, and verbal aggression.

Exercises

- Think about your sibling relationships. How would you describe your sibling relationships using the four different types of sibling relationships discussed by Shirley McGuire, Susan M. McHale, and Kimberly Updegraff? If you don't have siblings, think of a famous pair of siblings. Based on what you know about their relationship, how would you describe their

relationship using the four different types of sibling relationships discussed by Shirley McGuire, Susan M. McHale, and Kimberly Updegraff?

- Think about your sibling relationships. What relational maintenance strategies discussed by Scott Myers and Keith Weber do you use with your siblings? If you don't have siblings, think of a famous pair of siblings. Based on what you know about their relationship, what relational maintenance strategies do these famous siblings use?

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6.6.4: Marriage Relationships

Learning Outcomes

- Describe the marriage relational dimensions discussed by Mary Anne Fitzpatrick.
- Explain the three different types of marital relationships described by Mary Anne Fitzpatrick.
- Discuss the application of Mary Anne Fitzpatrick's relational dimensions to same-sex marriages.

Earlier in this text, we discussed dating and romantic relationships. For this chapter, we're going to focus on marriages as a factor of family communication. To help us start our conversation of marriage, let's look at some sage wisdom on the subject:

- "Marriage has no guarantees. If that's what you're looking for, go live with a car battery." — Erma Bombeck
- "The trouble with some women is that they get all excited about nothing – and then marry him." — Cher
- "I love being married. It's so great to find that one special person you want to annoy for the rest of your life." — Rita Rudner
- "By all means, marry. If you get a good wife, you'll become happy; if you get a bad one, you'll become a philosopher." — Socrates
- "Marriage is an endless sleepover with your favorite weirdo." — Unknown
- "Many people spend more time in planning the wedding than they do in planning the marriage." — Zig Ziglar

Many writers, comedians, political figures, motivational speakers, and others have all written on the subject of marriage. For our purposes, we are going to examine marital types and the research associated with the Prepare/ENRICH studies.

Marital Types

One of the most important names in the area of family communication and marital research, in general, is a scholar named Mary Anne Fitzpatrick. Fitzpatrick was one of the first researchers in the field of communication to devote her career to the study of family communication. Most of her earliest research was in the area of marriage. The culmination of her earliest research on the subject was the publication of her important book, *Between Husbands and Wives: Communication in Marriage* in 1988.[58] Although this book is over 30 years old now, the information she found and discussed in this book is still highly relevant to our understanding of marital relationships and marital communication.

Relational Dimensions

One of the earliest projects undertaken by Mary Anne Fitzpatrick was the creation of the Relational Dimensions Instrument. The creation of the measure started as part of her dissertation work in 1976,[59] and was originally fleshed-out in a series of articles.[60,61]The RDI originally consisted of 200 items based on different ideas expressed in the literature about marriage at the time. Through her research, Fitzpatrick was able to fine-tune the measure to identify eight dimensions of marriage measured by 77 items. These eight dimensions fall into three larger categories: conventional versus nonconventional ideology, interdependence/autonomy, and conflict engagement/avoidance. The RDI can be seen in its entirety in a couple of different locations.[62]

Conventional vs. Nonconventional Ideology

The first large category of relational dimensions is what Fitzpatrick called ideologies. In this category, Fitzpatrick recognized two different ideologies traditionalism and uncertainty and change.

Ideology of Traditionalism

The first dimension is referred to as the **ideology of traditionalism**. Traditionalism is the idea that a couple has a very historically grounded and conservative perspective of marriage. For example, couples who see themselves as more traditional are more likely to believe that a wife should take her husband's name when they get married. They are also more likely to think that the family should adhere to specific religious traditions and that children should be taught those traditions when growing up. Generally speaking, people with a traditional ideology are going to believe in a more rigid understanding of both the male and female roles within a marriage. As for specific communication issues associated with this ideology, there is a strong belief that families should look composed and keep their secrets to themselves. In other words, families should strive to keep up appearances and not talk about any of the issues going on within the family itself.

Ideology of Uncertainty and Change

The underlying idea of the ideology of uncertainty and change is basically the notion that people should be open to uncertainty. “Indeed, the ideal relationship, from this point-of-view, is one marked by the novel, the spontaneous, or the humorous. The individuals who score highly on this factor seem open to change. They believe that each should develop their potential, and that relationships should not constrain an individual in any way.”[63]

Interdependence vs. Autonomy

The second large category of relational dimensions is what Fitzpatrick called the struggle of interdependence versus autonomy. In every relationship, as people grow closer, there is the intertwining of people’s lives as they become more interdependent. At the same time, some people prefer a certain amount of individuality and autonomy outside of the relationship itself. “To figure out how connected spouses are, one has to look at the amount of sharing and companionship in the marriage as well as at the couple’s organization of time and space. The more interdependent the couple, the higher the level of companionship, the more time they spend together, and the more they organize their space to promote togetherness and interaction.”[64]

Sharing

The third dimension of marriage relationships is sharing. Sharing consists of two basic components. The first component involves discussing the affective or emotional health of each of the partners and the relationship while exhibiting nonverbal affective displays (e.g., touching holding hands in public). The second component expands across the other dimensions. “A high score on this factor would suggest an open sharing of love and caring, and the tendency to communicate a wide range and intensity of feelings. There is a sharing of both task and leisure activities, as well as a considerable degree of mutual empathy. Finally, these relational partners not only visit with friends but also seek new friends and experiences.”[65]

Autonomy

Autonomy is an individual’s independence in their own behaviors and thoughts. In a marriage relationship, autonomy can include having a “man cave” or a home office that is specified as “personal” space for one of the marriage partners. Some couples will even go on separate vacations from one another. In any relational dialectic, there is always the struggle between connectedness and autonomy. Different couples will place differing degrees of importance on autonomy.

Undifferentiated Space

The fifth dimension of marital relationships is **undifferentiated space**, or the idea that there are few constraints on physical spaces within the home. This undifferentiated space means that spouses do not see her/his/their ownership of personal belongings as much as they do ownership as a couple. Furthermore, individuals who score high in undifferentiated space are also more willing to open their homes to family and friends. On the other hand, individuals who have a low undifferentiated space generally see belongings in personal terms. “That’s my room.” “That’s my pen. “This is my mail.” Etc. These individuals are also more protective of their personal space from outsiders. When they do allow outsiders (e.g., family and friends) into the house, they want to forewarn the outsiders that this will happen and may limit access to parts of the house (e.g., office spaces, workshops, master bedrooms, master bathrooms).

Temporal Regularity

The next dimension, **temporal regularity**, examines strict a schedule couples stick to. Do they always get up at the same time? Do they always go to bed at the same time? Do they always eat their meals at the same time? Some marriages run like a well-scheduled train, while other marriages fluctuate temporally daily.

Conflict Engagement vs. Avoidance

The final broad category of relational dimensions examines how couples handle conflict. Some couples will actively avoid conflict, while others openly engage in conflict.

Conflict Avoidance

The seventh dimension of marital relationships is conflict avoidance. Couples who engage in conflict avoidance do not openly discuss any conflicts that occur within the marriage. Individuals who avoid conflict will even avoid expressing their true feelings about topics that could cause conflict. If, and when, they do get angry, they will hide that emotion from their spouse to avoid the conflict.

Assertiveness

The final relational dimension is assertiveness. When analyzing the items on the Relational Dimensions Instrument, Fitzpatrick noticed that two different patterns emerged. First, she saw a pattern of the use of persuasion or influence to get a partner to do specific things (e.g., watch a TV show, read a book/ magazine). At the same time, there is a sense of independence and the desire to stand up for oneself even front of friends. Ultimately, Fitzpatrick believed that "assertiveness" was the best term to capture both of these phenomena.[66]

The Relational Definitions

After creating the relational dimensions, Fitzpatrick then further broke this down into a marriage typology that included three specific marriage types: traditional, independents, and separates.[67] Figure 11.4.1 illustrates how the three relational definitions were ultimately arrived at.

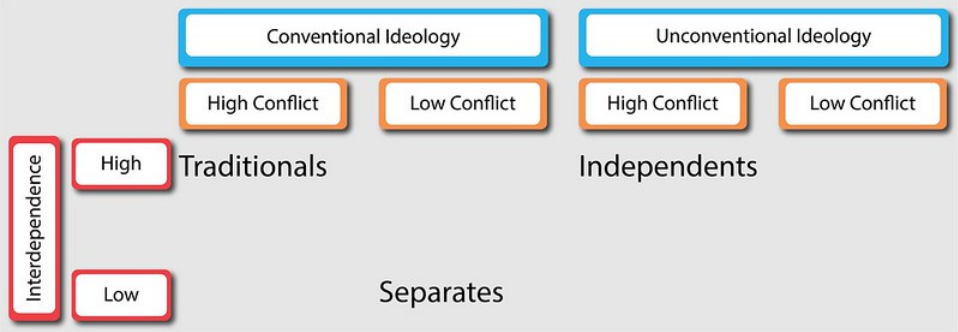


Figure **6.6.4.1**: Relational Definitions

Traditionals

The first relational definition that Fitzpatrick arrived at was called traditionals. **Traditionals** are highly interdependent, have a conventional ideology, and high levels of conflict engagement. First, traditional lives are highly intertwined in both the use of space and time, so they are not likely to feel the need for autonomous space at home or an overabundance of "me time." Instead, these couples like to be with each other and have a high degree of both sharing and companionship. These couples are more likely to have clear routines that they are happy with. These couples are traditionals also because they do have a conventional ideology. As such, they believe that a woman should take her husband's name, keep family plans when made, children should be brought up knowing their cultural heritage, and infidelity is never excusable. Lastly, traditionals report openly engaging in conflict, but they do not consider themselves overly assertive in their conflict with each other. Of the three types, people in traditional marriages report the greatest levels of satisfaction.

Independents

The second relational definition that Fitzpatrick described was called independents. **Independents** have a high level of interdependence, an unconventional ideology, and high levels of conflict engagement. The real difference is their unconventional values in what a marriage is and how it functions. Independents, like their traditional counterparts, have high levels of interdependency within their marriages, so there is a high degree of both sharing and companionship reported by these individuals. However, independents tend to need more "me time" and autonomous space. Independents are also less likely to stick with a clear daily family schedule. To these individuals, marriage is something that compliments their way of life and not something that constrains it. Lastly, independents are also likely to openly engage in conflict and report moderate levels of assertiveness and do not avoid conflicts.

Separates

The final relational definition that Fitzpatrick described was called separates. Separates have low interdependence, have a conventional ideology, and low levels of conflict engagement. "Separates seem to hold two opposing ideological views on relationships at the same time. Although a separate is as conventional in marital and family issues as a traditional, they simultaneously support the values of independents and stress individual freedom over relational maintenance."[68] Ultimately, these couples tend to focus more on maintaining their individual identity than relational maintenance. Furthermore, these individuals are

also likely to report avoiding conflict within the marriage. These individuals generally report the lowest levels of marriage satisfaction of the three.

Same-Sex Marriages

Up to this point, the majority of the information discussed in this section has been based on research explicitly conducted looking at heterosexual marriages. In one study, Fitzpatrick and her colleagues specifically set out to examine the three relational definitions and their pervasiveness among gay and lesbians.[69] Ultimately, the researchers found that among "gay males, there are approximately the same proportion of traditionals, yet significantly fewer independents and more separates than in the random, heterosexual sample. For lesbians, there were significantly more traditionals, fewer independents, and fewer separates than in the random, heterosexual sample."[70] However, it's important to note that this specific study was conducted just over 20 years before same-sex marriage became legal in the United States.

The reality is that little research exists thus far on long-term same-sex marriages. The legalization of same-sex marriages in July 2015 started a new period in the examination of same-sex relationships for family and family communication scholars alike.[71] As a whole, LGBTQIA+ families, and marriages more specifically, is an under-researched topic. In a 2016 analysis of a decade of research on family and marriage in the most prominent journals on the subject, researchers found that only.02% of articles published during that time period directly related to LGBTQIA+ families.[72] For scholars of interpersonal communication, the lack of literature is also problematic. In an analysis of the *Journal of Family Communication*, of the 300+ articles published in that journal since its inception in 2001, only nine articles have examined issues related to LGBTQIA+ families. This is an area that future scholars, maybe even you, will decide to study.

Key Takeaways

- Mary Anne Fitzpatrick started researching marriage relationships in the late 1970s. Her research found a number of specific relational dimensions that couples can take: conventional/nonconventional ideology, interdependence/autonomy, and conflict engagement/avoidance.
- Mary Anne Fitzpatrick described three specific relational definitions. First, traditional are couples who are highly interdependent, have a conventional ideology, and high levels of conflict engagement. Second, independents are couples who have a high level of interdependence, an unconventional ideology, and high levels of conflict engagement. Lastly, separates are couples who have low interdependence, a conventional ideology, and low levels of conflict engagement.
- Little research has examined how LGBTQIA+ couples interact in same-sex marriages. Research has shown that in a decade of studies about family and marriage, only.02% articles had to do with LGBTQIA+ families. In the field of communication, out of the 300+ studies published in the *Journal of Family Communication*, only nine of them involved LGBTQIA+ families. In the one study that examined Mary Anne Fitzpatrick's relational dimensions among same-sex couples, the researchers found that gay males had approximately the same proportion of traditionals, yet significantly fewer independents and more separates than in the random, heterosexual sample. Conversely, among lesbian women there were significantly more traditionals, fewer independents, and fewer separates than in the random, heterosexual sample.

Exercises

- Think about a marital relationship where you know the couple fairly well. Examining the three relational dimensions (conventional/nonconventional ideology, interdependence/autonomy, and conflict engagement/avoidance), how would you categorize this couple? Why?
- Access a copy of Mary Anne Fitzpatrick's Relational Dimensions Instrument (www.researchgate.net/publica...trumental_and_ expressive_domains_of_marital_communication), have a married couple that you know to complete the instrument separately. How similar were their responses? How different were their responses?
- Think about a marital relationship where you know the couple fairly well. Based on what you know about this couple, would you consider them traditional, independents, or separates? Why? Please be specific with your answer to demonstrate your understanding of these three marital types.

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6.6.5: Chapter Wrap-Up

As we discussed at the beginning of this chapter, families are a central part of our lives. Thankfully, several communication scholars have devoted their careers to understanding families. In this chapter, we started by exploring the nature of family relationships with a specific focus on family communication patterns and family systems. Next, we explored the family life cycle. We then discussed the nature of sibling relationships. Lastly, we ended the chapter by discussing marriage.

End of Chapter

Key Terms

- Autonomy
- Concept-Orientation
- Family
- Genogram
- Ideology of traditionalism
- Independents
- Individuality
- Launching Stage
- Separates
- Sibling hostility
- Sibling warmth
- Socio-Orientation
- System
- Third-Culture
- Togetherness
- Traditionals
- Undifferentiated space

Real World Case Study

Nick and Diane were strangers flying on Continental flight 05 from London's Gatwick Airport to Houston, TX, when the terrorist attacks on 9-11 struck in the United States. Their plane, along with 38 other wide-body jets, was diverted to Gander International Airport in Newfoundland, Canada. Gander is a city of approximately 10,000 people. What the town lacked in size, the airport made up for in capacity.

Gander International Airport was at one point one of the busiest airports in the world because it was the refueling stop for all planes flying from the United States to Europe and from Europe to the United States. In fact, over the years, Gander played host to Winston Churchill, Frank Sinatra, President Ronald Reagan, Marilyn Monroe, Elvis Presley, and many others who had stop-overs at the airport. As airlines switched to planes with larger fuel capacities, the need for Gander as the refueling stop faded into a thing of the past.

On 9-11, 38 planes, along with 6,122 passengers and 473 flight crew members, suddenly joined the small community. As you can imagine, most cities are not prepared for a population growth of 66% in a matter of hours. Thankfully, the community members of Gander rallied and took care of those passengers and flight crew for four days in what was dubbed Operation Yellow Ribbon.

On the flight, Diane was in the front of the plane while Nick was at the back of the plane. The two had never met or even really laid eyes on each other. Both were taken to a place called Gambo, about 20 minutes outside of Gander. At the shelter there, the two met in line waiting to get blankets. One of them commented about how the blankets smelled, and the two just started talking. Nick, sensing the possibility of a new friend, ended up bunking next to Diane in the shelter. The two shared stories and trail mix. Over the next few days, the two started to fall in love.

One night, the two, along with other passengers, went to a local pub where the two became official Newfoundlanders, by drinking Screech and kissing a cod. During the midst of the festivities, a local justice of the peace made the mistake of assuming the two

were a couple. When he found out they weren't, the justice said, "I can marry the two of you." To which Diane responded, "sure!" Admittedly, it was probably the Screech talking, but in that moment, Diane realized that she really was starting to like Nick and that she could see him romantically.

After four days, a hurricane was quickly approaching Newfoundland, so there was a short time period to get the planes off the ground once the U.S.'s airspace was reopened. On the bus heading back to the airport, Diane started to tear up, realizing that this side journey in life was ending. Nick leaned in to comfort her and kiss her on the forehead, but Diane took the opportunity to turn it into a more romantic experience.

Nick ultimately proposed to Diane over the phone in November, and the two were married on September 7, 2002, and they honeymooned in Newfoundland. Nick and Diane Marson are very much real people. You can even follow them on Twitter, @RealNickanDiane. Their story is actually one of the main plot-points in the awarding winning Broadway musical *Come From Away*, which explores the generosity of the people of Gander and the ones who come from away.

1. What do you think it was about this situation that drew the couple together?
2. How would you describe their relationship using the family life cycle?
3. Why do you think Nick and Diane Marson's story has been so captivating to millions of people around the world?

End of Chapter Quiz

1. Socio-orientation is characterized by all of the following except _____.
   a. Harmony
   b. Similarity of values
   c. Relatively little communication
   d. Self-expression
2. Concept-orientation is characterized by all of the following except _____.
   a. Self-expression
   b. Open communication between parent and child
   c. Frequent communication between parent and child
   d. Harmony
3. A _____ is a pictorial representation of a family across generations that can be used to track generations of family interactions, medical issues, psychological issues, relationship patterns, and any other variable a researcher or clinician may be interested in studying.
   a. Family life cycle
   b. Family system chart
   c. Genogram
   d. Genealogy tree
4. In which stage of David Weaver and Laura Lawton's Family Life Cycle are adolescents "launched?"
   a. Full nest two
   b. Full nest three
   c. Empty nest one
   d. Empty nest two
5. Which of Mary Anne Fitzpatrick's marital types is marked by being highly interdependent, having conventional ideology, and having high levels of conflict engagement.
   a. Traditionals
   b. Independents
   c. Separates
   d. Temporals

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End of Chapter Quiz Answer Key

1. D
2. D
3. C
4. D
5. A





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6.7: Importance of Communication

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Interpersonal Communication: A Mindful Approach to Relationships helps readers examine their own one-on-one communicative interactions using a mindfulness lens. The writing team of Jason S. Wrench, Narissra M. Punyanunt-Carter, and Katherine Thweatt incorporates the latest communication theory and research to help students navigate everyday interpersonal interactions. The 14 chapters in this book cover topics typically taught in an undergraduate interpersonal communication course: family interactions, interpersonal dynamics, language, listening, nonverbal communication, and romantic relationships, as well as exploring emerging areas such as self-compassion, body positivity, friendships, and “the dark side”. The writing takes on a purposefully informal tone to engage readers. Each chapter is broken into different sections that have unique instructional outcomes, key takeaways, and exercises, and concludes with real-world case studies and sample quiz questions.

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CHAPTER OVERVIEW

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7.1: Relationship Development

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7.1.1: The Future of a Relationship

Learning Objectives

- Express that relationships can change through time and what that signifies about any given time in the relationship.



Watch this video or scan the QR code to see how love can change.

In most of this book, I consider the amount of value, joy, and attraction in a relationship at some particular time. But you can also use these dimensions to think about and analyze likely future trends in a relationship. One can, even in the midst of a powerful attraction, realize that that attraction may (soon) fade or change its form. One may realize that ***present satisfaction*** is due only to temporary circumstances and that when those circumstances change, so probably will the joy the relationship brings. One may fairly well predict in what ways a relationship will get better or worse.

As people mature and acquire knowledge about how they respond to various kinds of situations and conditions, they become better able to predict how their tastes and feelings will likely change even though they do not "feel" at the time that they will change. This is in all areas, not just relationships. Wisdom reminds you how sick you felt the past times you ate the food that you now crave, and it teaches you ways to ignore or work around the craving so that you do not give in to it. Wisdom lets you know past strong romantic passions have tended to cloud your reason before and let you get hurt when you rushed into some areas just on the basis of those feelings, so you tend to pursue your feelings with caution and awareness rather than in just blind faith. Those who learn from experience and from their former mistakes can attain a measure of wisdom; unfortunately learning from mistakes requires making them first.

But there are other ways to learn, sometimes films and literature dramatize in powerful and meaningful ways the mistakes others have made or that anyone could make. Sometimes we see people who set negative examples, and something in us tells us not to emulate them but instead to avoid becoming like them, to avoid making the kinds of mistakes and choices they seem to have made in their lives. Bad examples are often as instructive as good ones; sometimes, more instructive. Sometimes people's own stories will be so vivid that we will learn from them as much as if we had had the experience of our self. Sometimes we can extrapolate knowledge gleaned from our own limited experiences to those we have not yet had. For example, if you have ever kissed someone, not because you really liked them or really wanted to kiss them, but because you were experimenting to see what it was like, and if you found that kissing with just that motivation was quite dissatisfying and not anywhere near as pleasant as kissing someone you really like or really want to kiss, you will probably be less likely to experiment, just for the sake of experimenting, with more involved physically or sexually intimate behavior.

It is very important for people to know that they might be affected by changes in their circumstances so that they can minimize those changes or the undesirable consequences of those changes as much as possible. For example, two teenagers who love each other (make each other happy, are good for each other now, and who are attracted to each other) may realize that many people whose marriages did not long survive were once in the exact same situation as they are now. They may realize that their love may not survive taking on family, financial, and employment obligations they have never really had before. This may give them serious concern about having a child right away, even though they may want to. They may want to marry but to wait until later to have a child. Others may want to postpone marriage altogether until their lives have taken on more familiar and predictable patterns in a more stable environment, or at least until they know they are flexible and capable enough to be likely to handle negative surprises in positive ways. This will not, of course, guaranty success, but it gives it a more reasonable chance.

It is also important for people to realize that since relationships often change through time, particularly through changing environment and changing needs, changing desires and half- desires, changing feelings, etc. that they may someday not love each other the way they do now, if at all; but that growing "out" of love or losing love for each other does not then mean there never was any love. People seem to think that real love lasts forever so that whatever does not last forever must not have been real love. But I think this is not true. There are too many cases where one can see objectively how circumstances changed in such a way that it would be very unlikely for a relationship to remain satisfying or good — a company relocation to an area where a spouse may be most lonely, unhappy, and unable to cope, particularly if the mate transferred has been promoted to a job that requires an inordinate

amount of work away from home; important career changes that take spouses away from each other for too long periods of time; educational growth of one or both spouses that make their interests so divergent it is difficult for them to become very involved in areas of (particular) importance to each other; drastic personality changes in one person due to alcoholism, financial loss, war experiences, business experiences, the influence of new friends, or whatever changes that are unable to be resolved. There are all kinds of forces at work that can weaken or destroy an otherwise flawless relationship, particularly when the people involved have no idea those forces are acting upon them. And there are too many similar situations where the same kinds of forces help destroy the same kinds of relationships for it to be just accident or an indication that there was no love, or insufficient love, in the first place.

Therefore, though people whose relationships fail may be hurt or angry, they should not necessarily also think the whole relationship has been a sham, a farce, or a lie, or that their partner has never loved them. Because a relationship does not retain sufficient attraction, joy, or good for it to remain an active or viable partnership, that does not mean that it never had enough to be one and that it never, in fact, was one.

And similarly, just because adults may have every reason to believe that teenage love will not weather enough external changes to last as their children go to college, take on jobs, move to new environments and make new friends, that is no reason to hold the teenagers do not now love each other. They may be quite suited to each other now — quite attracted, quite satisfying, and quite good for each other — in their environment, at their level of maturity, and with their particular present interests and abilities. Parents need to understand it would most likely be unproductive, ill-advised, and misunderstood (and I think incorrect) to tell a child he or she is not really in love or that he or she should not be so serious yet or for this person. Rather they should realize how satisfying, good, and emotionally strong the relationship may be and only seek to help their children realize it is likely or possible to change as the partners mature and their circumstances, environment, abilities, and responsibilities change. Further, they want to try to ensure that behavior is appropriate to the stage of the relationship and the maturity level of the partners by at least making certain the children understand what is appropriate and why, and by making certain the children understand feelings for each other alone are not what determine the correctness of their behavior toward each other. This is, of course, in regard to sex that risks pregnancy and future heartbreak, but it is also in regard to things like sacrificing college (where college is more appropriate) in order to support the partner through law school or some such.

Now knowledge about the future can affect the present, and in different ways. One person expecting to face a severe crisis may be unperturbed by otherwise intruding minor annoyances; another may find those intrusions to be tremendous additional aggravations. Nothing else in the morning may bother a person sentenced to the gallows for that afternoon; but, on the other hand, few people would be able to enjoy the freefall from a plane if they had no parachute or knew their chute would not open. Knowing or believing a relationship likely to be impermanent may make it more important and enjoyable at the time or may spoil or ruin it altogether. Impending disaster can spoil the present or make its pleasures that much more intense and more valuable.

Also, some publicized prophecies (like “bank Z will fail”, or “the rate of inflation will increase”) are self- fulfilling; others (like predicting overcrowded dorms next year, before people have chosen their colleges or residences), are self- defeating; and still others (such as horse race predictions) have no effect on the outcome at all. Predicting or thinking about the future of a relationship may or may not alter how that relationship will actually turn out, but I suspect that more often than not foresight, preparation, precaution, and planning would make more people much happier and better off than reflex reaction to circumstance, feelings, and unexpected accident. Though in some cases dire predictions are self-fulfilling, in many cases they may make possible sufficient preparation and response to render them false.

In some cases, it seems to me it is not too much information or too much understanding of the probability of the future, but the uncertainty or unpredictability of the future, that makes life’s decisions more difficult. One might justifiably delay gratification that has some personal risk to one’s future, whereas if one knew there was not going to be much future for them, one probably would justifiably not delay such gratification. Sometimes a relationship that is known by both people about to end — say one person is moving away or dying — may be more intense, less superficial, more loving than one which seems to have no near end. With relationships, as with life in general, there would probably be fewer difficult problems and decisions if we knew whether there would be no tomorrow or infinite tomorrows, or if we knew just exactly how many tomorrows there would be. Fortunately or unfortunately, however, we have to both plan for the future and plan for the possibility of there being no or little future.

That is sometimes difficult, for how we would and should act if there were no or little future is often quite different from how we should act if there were an assured long future. And it is particularly difficult, I think, for children and teenagers, because without

the self-knowledge that can come with experience they sometimes have too little patience (feeling like the future may never arrive or that it takes too long to arrive) and sometimes have too much patience (for procrastination) because they feel there will always be time to do the things they need to do.

Key Takeaways

- Changes through time which decrease or end love, do not mean it did not exist at the time it was perceived. Oppositely, but not as problematic or perhaps even interesting, the flowering of a relationship into love does not mean love existed from the beginning. The general framework of love as attraction, satisfaction, and goodness (and their opposites) helps make understanding the nature of changes over time easier and can put them into perspective, both in regard to past actual changes and future potential ones.

Key Terms

- One may realize that ***present satisfaction*** is due only to temporary circumstances and that when those circumstances change, so to, may the joy the relationship brings.

Review Questions

- **Question:** Do relationships change as people mature and acquire knowledge about how they respond to various kinds of situations and conditions?
- **Question**: Does predicting or thinking about the future of a relationship affect how that relationship will actually turn out?

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7.1.2: The Satisfaction Aspect

Learning Objectives

- Explain how satisfactions can be in different degrees and can arise from the satisfaction of three different kinds of wants: those of 1) felt desires or expectations, 2) half-expectations or half-desires, and 3) totally unexpected pleasures. Discuss the similarities that can arise from lack of fulfillment of the first two (above) and from totally unexpected disappointment or displeasure.
- Argue that meeting common interests is not necessarily the same thing as having mutual satisfaction.



Watch this video or scan the QR code to learn more about healthy relationships.

Simply being attracted to someone, even in cases where there are no outside impediments thwarting your being together, does not ensure that they and their actions will bring you any happiness or satisfaction. In fact, in far too many cases quite the opposite is the result. One of the hardest kinds of relationships to end or endure is that which hangs on because the two people have some sort of attraction for each other even though whenever they are together, one or both make the other thoroughly miserable.

Equally but opposite, finding someone unattractive does not necessarily dispose you to find all their actions unpleasant, disappointing, or dissatisfying. You may, for example, enjoy playing tennis with someone you have no feelings for one way or the other, or even with someone you do not like. (In fact, when you play well against someone you dislike, win, and have to work very hard to do so because they are a good player, it might be a rather exhilarating experience.)

I wish to call the aspect of a relationship in which you find the other person's behavior on the one hand agreeable, fun, pleasant, satisfying, heart-warming, engaging, heavenly, ecstatic, etc., or, on the other hand, unpleasant, disagreeable, irritating, offensive, nauseating, heartbreaking, tormenting, etc., the satisfaction- dissatisfaction aspect, or for short, the satisfaction aspect.

In a sense, this is really a number of aspects which often, but not always, coincide. It is a number of aspects because we can have satisfactions and/or dissatisfactions in different areas and because our satisfactions and dissatisfactions, being feelings, can often both occur without there being any overriding feeling of either satisfaction or of dissatisfaction; that is, neither feeling takes precedence. For example, in the over- simple case of the person who finds his or her partner sexually gratifying but intellectually stultifying, or vice versa, an evening may be spent alternating between the sublime and the intolerable, without any sort of average able to be felt, calculated, or, for any meaningfully informative purpose, given. There may be nothing one can say in terms of one point on one satisfaction-dissatisfaction scale about the entire evening, but only point out that during the evening there were times with much satisfaction (of certain sorts), other times with much dissatisfaction (of certain sorts), and still other times with some of each (of whatever sorts).

Sometimes, of course, we feel that we can put an entire period of time on one point on one scale, simply because we actually feel that the annoyances were totally overridden by the pleasantries (or vice versa) and that on the whole, the occasion was quite satisfactory. Or we can demarcate such a point on one scale because the time in question was either wholly pleasant or wholly unpleasant. It is important to remember though that this is not always the case — that sometimes our feelings are mixed, and there is no point, and often no sense, in trying to "average" them on one point of one satisfaction-dissatisfaction scale.

Now there may be times and areas when one is neither particularly satisfied nor dissatisfied. If it is general or overall, one might call this a state of the blahs. I do not call it that, however, because I consider a state of lethargy, bored inactivity, doldrums, or the blahs as being distinctly dissatisfying. But whatever it might be called then, if there is (are) such a middle state(s), I would put it (them) on the "center" of any satisfaction- dissatisfaction scale that runs from one end of most intense dissatisfaction to the other end of most intense satisfaction, centered between weakest satisfaction and weakest dissatisfaction. What matters is to be able to recognize the condition and to be able to discuss it in application to relationships if it should occur. It is not important that we

discuss relationships in the fewest number of terms, distinctions, or depictions, but it is important that we make distinctions which are accurate and which reflect the significant things we want and need to consider in relationships.

Similarly, with regard to feelings, it is not important how exactly we may want to describe the case where we have no particular feelings about someone in terms of *the attraction-aversion scale(s)*; whether it is in between attraction and aversion or at one end of either side, or to consider such indifference as something altogether different. I myself tend to think of attractions and aversions as being able to be depicted on one, or a number, of continuous scales, from intense repugnance or aversion (in general, or in one or more specific areas — physical, sexual, intellectual, artistic, etc.) to intense attraction (in general, or in one or more areas), with "having no feelings", or feeling indifferent, about someone, lying "in the middle" between the mildest attraction and the mildest aversion. But the point is simply to be able to recognize such a state of having no attraction or aversion to someone should it occur and to be able to think about it's significance, if any, for your relationship with that person.

When I said at the beginning of chapter 3 that all relationships have the potential to involve emotional, satisfaction-dissatisfaction, and ethical aspects, I was including cases where those emotions, satisfaction, and benefits (or dissatisfactions or harms) were zero or non-existent. The *categories* apply to every relationship, whatever the contents, or the lack of contents, of those categories. It can be just as important to know there are no feelings, no benefits, or no joys in (areas of) a relationship (and no harms or dissatisfactions) as to know there are and to know what they are (and in what areas).

With most people whom we know over a period of time, we come to have a good idea of which kinds of activities we enjoy with them and which we do not. Cards or golf with Jones might be enjoyable, but he is not the person with whom to discuss serious personal problems or anxieties. Sally may be a good company when you feel lighthearted and want to kid around or just have some small talk for a few hours without having to be serious; she may not be the person with whom you want to play chess or discuss serious matters about work. Mary may be a great chess opponent for you and may enjoy the same kind of movies you do, but she may not be very good company at a basketball game or fashion show. Martin may be someone you want to build your house or repair your car, but not to have over for a dinner party. We generally do not set out to pigeonhole our friends and acquaintances but we do often find out that we don't enjoy doing the same things with all of them. Sometimes, as with regard to sports and games, they may simply not be close enough to your level of (in)competence to enjoy playing with them unless you are in the mood for giving or taking lessons rather than simply playing.

Likewise with regard to specialized areas of interest such as your field of work or one of your hobbies. Sometimes people's personalities or general abilities tend to cause you to avoid or include whole kinds of areas with them. A know-it-all, argumentative type is generally not much fun to talk politics, religion, social criticism, etc. with, even though participating in sports with him or her might be quite enjoyable, as long as the sport does not allow much time for lectures. Some people are not very introspective, so introspective persons might tend to avoid areas of discourse with them they would love to discuss with someone sensitive to such matters. Devout liberals and devout conservatives may have difficulty discussing certain matters without getting one another upset, and yet still be the best of friends. In fact, sometimes it is because they are otherwise the best of friends that they find it so unnerving that the other person is so ignorant, stubborn, blind, unreasonable, and insensitive about such matters.

And though whether one is attracted to the other person or not sometimes influences what one likes to do with them, generally it does not. Kissing, making love, etc. for most people most of the time in our culture often depend in part for their satisfaction on one's being at least somewhat attracted to the other person. But one can enjoy doing many things with people one is not attracted to. One certainly can enjoy talking or playing tennis with a relative without having incestuous motives; or with a person of the same sex, without thereby being homosexual.

One can enjoy the company of one's friends without having any particular attractions or feelings other than feelings of friendship and enjoyable companionship with them. One might even sometimes enjoy an activity with, or the company of, strangers one has no particular attractions for. One may prefer, in fact, to discuss certain problems with a stranger rather than a friend, or may prefer to play tennis, when in a very aggressive mood, with someone he does not much like at all.

And on the opposite side, having strong feelings of attraction for someone does not in any way assure that you will enjoy doing some particular activity with them. Having a strong sexual or physical attraction for someone else certainly does not ensure they will be able to discuss in any interesting way, issues of interest to you nor be much fun at the tennis court, bowling alley, art museum or some particular movie. It may not even guaranty finding them enjoyable in bed. Even having strong emotional and physical attractions for each other does not guaranty that there will not be some activities that one would prefer doing with

someone else, or alone. Many men who love their wives would just rather play golf with other men and often their golfing wives equally prefer playing their golf with other women. I generally prefer to watch serious television productions alone rather than with most people I am very close to because I find, if we watch together we often tend to interrupt each other's' reveries with comments at the wrong times.

There are people though who, it seems, are very happy doing about anything with someone they like just because they are with that person. They enjoy being at otherwise boring or deplorable movies, conventions, sports events, concerts, whatever, as long as they are spending time with a loved one or one for whom they have strong feelings of attachment.

From informal surveys I have taken on this matter, it appears most often to be single girls and young women who fall into this category, and whether their views will change as they get older, I do not know. But it remains that for such people, what they will most often find satisfying about activities they share in a relationship will have less to do with their abilities or interests in those activities, or with how well the activities go, than it will with the fact they are sharing them with the one for whom they have strong feelings of attraction. Hence, it will be important for them that their loved ones be able and willing to spend time with them, more time perhaps than most couples might tend to want to share just for the sake of being together, rather than doing something together that is interesting to both.

I am talking here about general tendencies since most people find they want simply to be around a loved one at times even though they really have nothing they particularly want to say or to do. Most people will periodically enjoy sharing an activity with a loved one more for the sake of the sharing than of the activity. For example, a championship bowler who loves the competition of the sport might go bowling with a less competent friend or loved one just for the sake of their company, not even feeling compelled to give lessons, rather than for any exhilaration that might come from competition. And conversely, I would suspect that even the most companion- loving people find times that their partner's or opponent's ability, or their own (lack of) interest, in some activity is more important than whether they have strong feelings for them or not. There must be times, I would think, when they want to talk with someone who understands something better than a loved one might, or want to go somewhere or do something with someone else whose interests and/or abilities might be closer to their own—at least in that particular area.

It is easy to see how dissatisfaction could easily creep in to a relationship between a "company lover" (who wants a loved one's companionship regardless of activity) and an "activity lover" (who wants a particular satisfying activity and the proper companion who makes it (even more) satisfying), particularly if they do not understand each other's' needs or desires, where the company lover is unable to satisfy the activity lover and the activity lover is unwilling to satisfy the company lover because of his or her own quest for a properly competent companion for the activity, though a less loving and less loved one.

Three Kinds of Satisfactions (Dissatisfactions)

There are, I think, three kinds of satisfactions or dissatisfactions. I will speak here only about satisfactions for the sake of brevity, but the situation is parallel with regard to dissatisfactions. The three kinds of satisfactions are:

(1) the satisfactions of conscious or (self-) known wants, hopes, or expectations,

(2) the satisfaction of what I will call half-wants, half- hopes, half-wishes, or half-expectations, and

(3) totally unexpected pleasures.

(1) Known Wants, Hopes, and Expectation

By conscious or known wants, hopes, or expectations I mean those we actually feel and of which we are aware. For example, one might have a craving for a specific kind of chocolate at some time and be very aware of it. A person might want something that catches his eye in a store window, might deliberately pass that store as often as possible to be sure the item is still there or to see whether the price has been marked down or not, and be saving every dollar he can to be able to someday purchase it. Ask him any time if there is anything he wants and immediately he will mention this item. One can expect things too; for example, that their spouse might give them a particular gift of an object they have been lavishly giving hints about for their birthday or Christmas. Likewise, we have such desires and expectations about behavior. One might be dying to meet someone with whom they can speak French, discuss their butterfly collection, go fishing, or someone who knows how to build stained glass or home television satellite receiving stations. Or one might expect certain people one has heard

or read about to behave in certain ways. I was terribly disappointed one time to attend a lecture by an author whose writings were witty, intellectual, charming, and extremely interesting. He turned out to be slovenly, slow, bumbling, and boring; he read his speech before a large group in a monotonous voice that was barely audible. Since then I have met a number of world-famous celebrities and have, more often than not, been disappointed in their attitudes, personalities, or behavior. Definite expectations were definitely not met.

(2) Half-wants, half-hopes, half-expectations

The second sort of satisfaction-dissatisfaction is more difficult to explain. It is not the case that the person will always be able to describe or know the desire or expectation beforehand that is fulfilled or unfulfilled. In some sense, they are not then perhaps desires or expectation at all; yet I will try to show shortly their sufficient resemblance to desires or expectations to give them similar names. In their negative (that is, dissatisfaction) aspects, one example is the kind of thing Betty Friedan referred to in *The Feminine Mystique* as the problem that has no name, and that Ryan's daughter, in the movie of that title, seemed to feel when, dissatisfied with her marriage, she answered the priest's question of what more she could possibly want with, "I don't know; I don't even know what more there is. But there must be something." Dissatisfaction of a half-hope or a ***half-expectation or half-desire*** often only presents itself as some vague dissatisfaction without one's being able to pinpoint the cause. Satisfaction of a half-desire may likewise only bring a welcome or good feeling for no identified reason or cause; though sometimes it is easy after such a feeling to figure out the cause. I call these satisfactions and dissatisfactions those of half-desires, half-expectations, etc. rather than unexpected pleasures because, though the person himself or herself may not know they have such a desire, or may not know what it is, others might very easily be able to tell. The person may act almost as if they had a conscious desire or expectation, but simply not realize it themselves. It may be, for example, that a child does not realize she would like a bicycle for her birthday, and were you to ask her what she wanted, she may not think of asking for a bicycle. Yet others notice how she seems (to feel) left out when other kids ride their bikes and how she lingers at department store bicycle displays though without it ever surfacing in her own mind that a bicycle is a possible gift or something that she would be much happier with if she had one. I am very difficult to buy presents for because if there is something I like that is affordable but not extravagant, I generally buy it for myself; and I do not like to be given expensive presents. But one Christmas I was given a box of stationery, something which triggered all kinds of good and appreciative feelings since the couple who gave it to me showed better insight into my mind than I had. They knew I loved to write letters and that I had been doing so on typing paper. At that time stationery would have been something of a luxury for me, though it is not terribly expensive, and so I had put it out of my mind. And even when I tried to imagine gifts I might like to receive, I simply never thought of it. Yet when I opened the package, I realized immediately what a perfect and desirable gift it was for me.

There are other examples of the fulfilling of half-expectations or half-desires. One period in my life when I was on crutches, so many people seemed to go out of their way to ignore me and leave doors closed, or even let them slam in my face, when they might easily have helped instead, that I soon gave up any conscious ideas that people would hold open a door or offer to carry packages for me. Yet it was always disappointing when I was not helped, and very refreshing when I was. Or, I found that when I was an undergraduate, girls were so routinely subjected to the kinds of dates where guys took them to a movie, then out for a pizza, hamburger, or ice cream, and then wanted to hold hands and progress to whatever sex they could "get" that the girls began to expect little else from their dates and so developed their defensive maneuvers. Hence, it was surprising and exciting for them when they went on a date with a fellow who wanted to talk about things on more than just a superficial level and who preferred a long sincere talk, in which you got to understand or know each other, to a movie or a makeout session.

Another reason that I want to call these pleasures or disappointments the satisfactions or dissatisfactions of half-wishes or half-expectation or half-desires instead of totally unexpected pleasures or totally unexpected disappointments is that there seems to be some (sort of) antecedent wish or desire or expectation, though not a conscious or known one, for the experience. It is not just an experience that pleases us out of the blue, as would the tax-free million-dollar checks Michael Anthony used to bestow for John Beresford Tipton to totally unsuspecting and unexpecting people on the fifties' television fiction, *The Millionaire*. We find it welcome, for example, for someone else to be polite to us, though no one else has been in a while, because we still, in some sense, expect politeness of people, even though our expectations may have been dulled by recent experience. And similarly, some find it welcome when strangers will talk openly in a friendly and concerned way instead of at them (or superficially only, or not at all) although they almost give up the idea that strangers will do that since so many will not. And the child finds her bicycle in some way quite welcome, and more so than she might find any other gift, even one surpassing it in monetary value, uniqueness, status, or

fun because she in some sense wanted or hoped for a bicycle though perhaps she did not know it herself though everyone else did. And I call this sense a half-hope, half-wish, half- want, etc.

In one of my closest relationships, at one point there seemed to be a problem that did not seem to rise quite to the surface. After a number of occurrences, it began to appear that my loved one and I would consistently have bad or semi-bad days the day after we would have a really great time together. At first, there was really no notice of the correlation; it seemed more just like ups and downs of life in general or of relationships in particular. The bad days were not all that bad, no fighting or anything of that sort, just days in which we did not seem all that close or on the right wave-length with each other—just a vague feeling of disappointment or of distance.

Then, even after we noticed the pattern that these kinds of bad days followed the best days of our relationship, it still seemed somewhat out of our control. It seemed then perhaps we were simply ordained to have such a pattern and that the bad days were just like that because we had expectations that were too high because of the wonderful time of the previous day. We also thought it possible that the bad days were not so bad in themselves, but simply letdowns after the heights of the good days just before.

Still, there was a nagging suspicion in my mind that this must be in our control, that there must be some specific cause of those particularly bad days that we could eliminate. One day, it suddenly dawned on me what the problem was; and it seemed obvious then, once a few otherwise isolated facts were seen together in the particular perspective of this problem.

This was the first girlfriend that I had who did a great number of stylistic and also formal things according to etiquette. She would send store-bought “thank you” notes for even the simplest or most spontaneous gifts I gave her. Flowers in my apartment had to be arranged in particular ways. If she entertained, even in the most informal circumstances, there was still a certain formality in the table arrangements, serving, etc. Furthermore, she always thanked me for the nice time she had when we had a nice time together and might even talk about it on the phone the next day. I invariably sloughed off such thanks with comments like the pleasure was all mine, or at least half mine, or just said that I had enjoyed it immensely too, or that it really had been a great time. I always felt that any time we had a wonderful time together it was because of both of us, not just one of us, certainly not just me; it was because of the lucky way our two personalities meshed, not because of anything in particular that I had done—not anything that other people would have enjoyed as well as she did, but things that we both enjoyed together and to which we both contributed. I never felt the need to be thanked and was always embarrassed by her thanking me. Furthermore, I would sometimes write poetry (to her) inspired by the good day, often even on that very day, or I would do or say things that showed I had been very pleased with the day. But I never was very formal about it nor did I dwell on it much afterward in any sort of formal or particular way. To *thank* her or even mention an appreciation for a nice time we had together on the day *before* seemed to be repetitive, unnecessary and in some way inappropriate. I just sort of expected to mention it nostalgically when appropriately reminded of the day and to go on from there to even better days, having each good day be a stepping stone to, or a part of, a supremely wonderful relationship.

But as all this just kind of came together one day in my mind, it was fairly obvious what was causing our bad days after the good days. Because I did not ever, in a formal or isolated way, express appreciation and happiness concerning the good day, on the next day, no matter how appreciative or happy I had seemed or said I was during that time, it made her feel that somehow it was not as important to me or as good for me, as it was for her. And she did not even realize she felt this way herself, or that this was the cause of her feelings. Once we discovered just how important formal expressions on succeeding days were to her, and therefore what my lack of them meant to her, I made a conscious effort to make such comments though it seemed somewhat unnatural to me; but also then when I failed to remember to do so, it provoked less anxiety on her part. I have always been one to show my enthusiasm or appreciation at the time, in a poem or just in my smile or spirits, rather than to say things like “Gee, I really had a fine time,” or “Yesterday was really a special day.” I always just wanted a day to go on as a continuation from the previous one without thinking about demarcating one from the other and then expressing thanks or joy about the prior one as such.

At any rate, this was one particular example of what seems to fit my description of a half-wish or half-expectation which, when unmet or unfulfilled, caused a certain amount of frustration, disappointment, and anxiety. There was an element of expectation involved that was easy to see after the situation was unraveled, but difficult to see before. As soon as I explained my theory to my love, she agreed she was sure that was it, though she too had never realized what had been bothering her. My wife and I have a similar kind of half-expectations that cause a problem when we do not remember. It involves gift-giving occasions such as birthdays, anniversaries, Christmas, etc. She likes to be asked what she wants and then to be given it. I don’t like to be asked; I like to be surprised. But I don’t like to be given things I need, like clothes or tools for the house. I like to get things that are inexpensive but fun or interesting to have, particularly that I might not think to buy for myself. She likes to be given things she either wants or

needs, whether they are fun or not. Hence, we both forget periodically—I, to ask or to give a necessity; her, not to ask, or to give something inexpensive and unnecessary. (Also, I hate to give things that are expected; I like to give surprise gifts; so sometimes I hate to ask, even when I know I should.) Now, this is hardly a major problem; and it is not that we each go around thinking how much we want to be asked or not asked, but we each notice the disappointment immediately—I, when she asks me what I want; and she, when I surprise her with a wrong present.

(3) Unexpected Pleasures

The third sort of satisfaction-dissatisfaction factor is that of totally unexpected pleasures or surprises or of equally unexpected disappointments. Anything could happen here. One girl I know had been married for a few years before, while on a hike with another couple, she learned for the first time that her husband was a knowledgeable birdwatcher. It was only in response to the other couple's speaking about the various birds they were seeing that he happened to show his knowledge for the first time around his wife. She was astonished. I read in a magazine one time about a woman who died but who had before that secretly stored loving and/or funny notes for various family members in places they were likely to find them after her death. I decided one did not need to die to make that an effective pleasant surprise, so one time on vacation from college, I left notes at home for my parents to find after I returned to school. For weeks, and in one case a whole year later, mother was finding the little hello's and funny messages I had hidden for her to find. She seemed to enjoy that.

Of course, some initially unexpected pleasures turn out to become expected or half-expected ones. Familiar is the lament, for example, that "you never bring me flowers any more like you used to," when the first batch of flowers might have been a total surprise. One might even come to expect the unexpected from a friend or mate who is continually providing unexpected pleasures. Further, of course, there can be unexpected disappointments or displeasures as when, say, one's mate or friend becomes terribly angry unjustifiably because of some frustration rather than because of anything the object of his wrath has actually done. Or one who is not given to asking for favors might find the one time they do ask, their partner is not very open to providing favors.

Depth of Satisfaction(s)

I have been writing mainly about the kinds and number of satisfactory or enjoyable things that may be involved in a relationship. But it is also important to remember that the amount of satisfaction depends not only on the number of satisfying or enjoyable or pleasing things that people do for each other but also on how satisfying (that is, the depth of satisfaction or enjoyment) any given thing is.

For example, one couple might play tennis in the morning, visit friends in the afternoon, go to dinner in the evening, then on to a movie, afterward make love, and finally retire for the night, awakening the next morning to a good breakfast. There might be a certain amount of joy and satisfaction in such a day for each of the partners. But suppose their tennis abilities and pleasure at tennis not that great or suppose it was somewhat chilly while they played and that took some of the fun out of it. And suppose that the visit with their friends was pleasant but not exciting, that dinner was adequate but not superb, the movie cute but not particularly great, and the sex pleasurable but somewhat perfunctory. Suppose another couple (or this same couple on another day) spent (a part of) a day doing only one or two of these things, say, spent the whole day just talking and cuddling and making love and talking some more, or played the most fantastic tennis of their lives for four or five hours until they practically dropped from exhaustion. It makes sense to compare how much satisfaction each person or each couple had under these different circumstances, though, since we do not have precise pleasure measures, this would only be in rough estimates.

We can all think of days or times that were more satisfying, or less satisfying than others. Cleaning a marine latrine in the rain would certainly be less enjoyable than making a game-winning touchdown for your team. Some movies or vacations are more enjoyable than others; some meals, some dates, and some football games better than others. Sex is better sometimes than at others. We ask our co-workers how their weekends were and we ask our spouses how their day was. We do not expect or desire an exact answer, but we expect some sort of rating or indication (great, lousy, boring, more fun than catching on fire, about as exciting as watching four-man bobsled races on television, on a scale of 1 to 10 it was an absolute 20). And that answer will depend not just on how many things they did (or that happened to them) that were enjoyable or disagreeable, but also on just how enjoyable or unpleasant each thing was. One or two extremely pleasant experiences might make the time more enjoyable than a lot of only slightly pleasant experiences. And one or two extremely unpleasant experiences might make the time more unpleasant than a lot of only slightly unpleasant experiences.

A further distinction to be made is that of further subdividing (or being more specific about) activities. For example, it may not be that a person just wants to play tennis but that they want to play aggressive tennis or highly competitive tennis, or maybe just easy-going, knock the ball around a bit tennis. He or she may prefer singles, or may prefer doubles, that day; may even prefer mixed doubles, and/or some particular opponent, say, in a rematch. One may only want to work on his or her services, maybe even just one particular kind of service, even to a particular location.

Or one may not only want to have sex, but a specific kind of sex, say, lots of caressing foreplay, or very little foreplay (a "quickie"). One may want playful sex at one time, or teasing sex at another, or loving, tender, touching, quiet sex at another. One may want to be a more active partner or a more passive one (at one time or another), or to alternate roles, or may want both partners to be active simultaneously. One may want to seduce someone or to be seduced, or one may not want to "play (such) games." Some people might like their sex the same way each time; others, not.

One may not only want to listen to music at some particular time but classical music; perhaps even a particular artist's recording of one particular adagio movement of a particular piano concerto; possibly even one particular recorded version by that artist in case there is more than one performance on record.

Hence, when you, I, or anyone speaks simply of tennis, sex, dining, dancing, poker, or whatever, you should keep in mind that these activities can be further subdivided or specified and that sometimes that could be important. Sex or tennis or conversation of one sort may not be the desired, expected, or satisfactory kind of sex, tennis, or conversation. People rarely describe their desires as specifically as they perhaps should, and sometimes they don't even realize themselves how specific those desires are. Then we disappoint them when we try to do what they said but not what they really meant. Or they become frustrated or angry with us even though we were trying to be nice. For example, they suggest the two of you play some tennis; you think that means to play hard and go all out to win, but they just wanted to knock the ball around a little bit to get some exercise and think you are just trying to show off or show them up.

Another thing to keep in mind in the area of satisfying actions is that sometimes it is not only what you say or do that is important, but your attitude and manner as well. For example, a grudging apology is virtually no apology. (I remember the time a maid who used to help my working mother once a week, with the ironing, scorched and ruined my absolute favorite T-shirt—she burned up the cotton bear that was sewn to the front of the shirt. I was five years old at the time; I was crushed. I told the maid she was stupid. My mother heard this, spanked me, and made me tell the maid I was sorry. Defiantly, and now really upset, I did— I told the maid I was sorry she was stupid! Somehow, as you might imagine, that did not count, and I got spanked again.) Sometimes we want someone not only to talk with us or to have sex with us but to enjoy talking with us or having sex with us. That is why sometimes some people are so disappointed even though we did the activity we thought they wanted; we did not do it in the way or with the attitude of the end result they wanted. One may want one's mate not only to attend a party or concert with them, but to want to attend, and not just to go, reluctantly and sullenly, "as a favor".

This sometimes makes for difficulties since one cannot always control one's attitudes. In one dramatic television movie after a girl had been raped, her boyfriend tried very hard to be supportive, but he was having all kinds of psychological difficulty adjusting to it himself. So even though he was saying kind things and being sympathetic to her, he also tried to be honest, and he could not disguise his own reactions. She became upset with him and he was also hurt and said it was not fair that he not only had to say the right thing but that he also had to feel the right way too.

I knew one couple who had lived together for years but the woman had for some time really wanted them to get married. But she wanted her mate to decide for himself that was what he wanted too, and then to suggest it to her, or ask her. So it was difficult for her and for her friends who knew this because no one wanted to "make" or pressure her mate to propose to her just to *do* the "right" thing; the right thing was not only something that had to be done but something that had to be done with the right attitude.

It also makes for difficulties when, for example in sex, someone asks you what they should do (to please or arouse you), but what you want them to do is either to joyfully explore in order to figure it out themselves, or to be spontaneous, inventive, creative, or imaginative; so telling them specifically would be self-defeating and counter-productive. Even just asking them to be imaginative or spontaneous may be self-defeating since in a sense you are still more or less having to guide their ideas and behavior even though not their specific actions. And it is not just their actions, but their state of mind as well that is important.

Reciprocity of Satisfaction Is Not Necessarily Having “Common Interests”

It would be a mistake to think having mutual satisfactions in a relationship means, or requires, having “common interests.” Certainly people who enjoy the same kinds of things (the same kinds of movies, the same kinds of sports or games, the same kind of topics of conversation, or whatever) might find satisfactions in doing those things with each other. This may be particularly true if they are evenly matched in ability or knowledge. But it is not always the case that common interests will provide mutual satisfactions and it is also not the only case.

One couple I knew both were avid and excellent golfers. Both enjoyed the game immensely but not while playing it with each other since he could hit the ball much farther than she could. He could generally beat her, even though she had been the women’s champion of a fairly large city a number of times. They loved each other and they loved golf, but they just did not enjoy playing golf with each other. This kind of case may even be more prevalent in tennis where differences in ability and strength can often lead to monotonously similar results. And this might be just as easily true of two friends of the same sex as of husband-wife combinations. Two men (or two women) may both enjoy tennis, but just not with each other, even though they might perfectly well like each other or even enjoy being spectators together at tennis matches. Also, particularly in doubles, personality and teamwork are very important, and friction in those categories may override individual skills. Many couples know not to play mixed doubles with each other as partners for that very reason; it is far too easy to turn a tennis court into a divorce court. Two persons with the same interests simply may not like participating in those interests with each other, even though they may like each other considerably.

And of equal or greater importance, two people may get along quite satisfactorily where they are each getting something different from out of what they are doing together. Suppose one person is teaching another person something, whether it is golf, philosophy, engineering mathematics, making paper airplanes, preparing quiche, or whatever. One might get great joy out of teaching; the other, out of learning, even with no prior interest in the particular subject. Or suppose a couple has a day in which each lets the other do what they want, one plays tennis while the other works on a book they are writing. They can each be happy for the time and grateful for the opportunity and support. Or suppose one person likes to talk and another likes to listen. Or suppose a man likes to open doors for a woman and she likes to have doors opened for her. Or that one person likes to buy presents for another who likes to receive them (some people like to give presents more than they like to receive them). Or that a father likes to give piggyback rides to a child who delights in getting them. Or imagine a sadist and masochist (though the old joke is that when the masochist asks to be beaten, the sadist, in order to torment, refuses). Or suppose, as often happens in our society, that a husband enjoys being the breadwinner and his wife enjoys being domestic or enjoys doing women’s auxiliary work or enjoys supporting his work by making social contacts, throwing parties, entertaining clients at dinner, etc. These two might satisfy each other, though they do not have the same interests; it is just that their interests nicely mesh and are satisfying to each other as well as to themselves.

Even just considering an activity that both enjoy, such as caressing each other, there may be moments when one prefers to stroke the other person and the other person prefers to be stroked rather than do any stroking. Both may quite enjoy such a moment, though in different ways. Joys may be reciprocated or reciprocal without their, therefore, being the same joy or the joy of some common interest. Not having common interests will not necessarily prevent enjoyment of each other and having them will not insure it.

In short, with regard to satisfactions and dissatisfactions then, you may be satisfied or dissatisfied in one or more ways, each to a stronger or lesser degree, by other's actions and/or feelings, actions and/or feelings that you either (1) expected or wanted (or expected or wanted not to happen), (2) half-expected or half-wanted (or half didn’t want or expect), or (3) were not looking for or expecting in any way at all. And these actions or feelings may be satisfying or dissatisfying independently of whether you have any attraction or aversion to the other person or not, and independently of whether they stem from a common interest or not.

Key Takeaways

- Understanding better one’s own desires and reactions to their fulfillment or lack of fulfillment.

Key Terms

- *A **half-expectation or half-desire*** is the sort of wanting of something that one might not realize one wants as much as they do or would enjoy as much as they would (or find disappointing or upsetting to be thwarted or unfulfilled) but which is fairly obvious to other people who know them well, or that they themselves after finding the want met or thwarted realizes how important it is or has been to them.

Chapter Review Questions

- **Question**: What is important to remember in regard to the satisfaction-dissatisfaction scale?
- **Question**: What are the three kinds of satisfactions or dissatisfactions?

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7.1.2.1: Importance of Various (Kinds of) Satisfactions

Learning Objectives

- Explain at least three different senses of what it means for something to be important in or for a relationship.



Watch this video or scan the QR code to learn some skills for healthy romantic relationships.

The question may arise as to whether certain (types of) satisfactions may be more important than others. For example, is it more important to have a good sexual relationship or to have a good intellectual relationship?

This question has three different senses. It asks (sense 1), are there some (kinds of) satisfactions that are (ethically) better than others for the people involved, or (sense 2) are there some (kinds of) satisfactions that make a relationship more enjoyable or happier than other (kinds of) satisfactions. It also asks (sense 3) whether there are some (kinds of) satisfactions that make the relationship more likely to continue in the same manner it is now, fade and perhaps be less loving, or grow better and perhaps be more loving; whether there are some that might make it more likely to fail or grow stronger, more likely to end or endure.

I will leave the answer to sense 3 for sociologists to determine, for they, if anyone, would be the ones to discover in some sort of scientific fact-finding manner what sorts of joys (and/or dissatisfactions) in what sorts of relationships between what sorts of people correlate with what sort of changes that take place in those relationships. That is, if there are any such correlations. It is primarily (but not totally) an empirical matter to determine which personal traits and relationship characteristics, if any, correlate with long-time satisfaction in relationships.

With regard to sense 1, I will point out in the chapter on ethics what some of the things are which I think are necessary or important for a good life. Anything in a relationship that helps people attain these things will then be what I consider more important in this sense.

In this chapter, I wish to discuss sense 2, the question of which joys, if any, might be more enjoyable or more essential for happiness than others.

First, Some Cases:

When you are driving alone at night on a superhighway, it can be a very lonely experience, with cars zooming by you or you zooming by other cars without you or their occupants acknowledging each other. Some people do not even bother to put on turn signals when they change lanes to pass you and then cut back in. But quite often, after a time of this, someone you may not even be able to see very well, if at all, might drive along with you, signal appropriately, slow down or speed up just enough to be sure you and they can continue driving together. Of course, with CB radios there may be further communication, but I am talking of even the simplest case without such verbal contact. Such a meeting on a long drive can be a very heartwarming thing, and when one of you finally exits the highway, you might wave or flashlights at each other to say goodbye, never to knowingly cross paths again. On a short drive or on a busy freeway with most drivers driving courteously and well, one would probably not even notice some other particular driver that drove courteously even in prolonged proximity.

When you are hungry, you feel like eating, and certain foods may be quite satisfying. When you are not hungry, neither food nor the thought of food may be very satisfying. When you are nauseated, it may be downright unpleasant.

Sex or the thought of sex may be very pleasant at some times and not pleasant at all at other times. Sex and food are not too different in this regard; when you are fully satisfied by either, the thought of more of it is not always pleasurable. Likewise, when

you are distinctly not in the mood or the right condition, the idea of either might be quite unpleasant. Once at the beginning of one of those 48-hour stomach flu bouts, I just barely was able to drive back 200 miles from a weekend with my parents to my college apartment that I shared with three other fellows. I was suffering from all sorts of chills and nausea. I felt like I wanted to throw up but I seemed unable to, and I was not about to force it. I knew I needed some aspirin, but the thought of trying to swallow and retain aspirin was itself sickening. I wanted to sleep but was too chilled and too sick to my stomach. My roommates were having a party that night, which luckily I was able to completely ignore. I went to bed, in heavy pajamas and a robe, and under twelve thousand blankets. Still, I lay there freezing and shivering. One of my roommates came in to see how I was. After I told him, he jokingly (I hope) said, “What you need in there is a nice, warm girl. Let me just go out to the party and see if I can find you one; then I’ll just bring her back to snuggle up in there with you.” Well, the very thought of such a thing made me so sick that I was able to lose my supper and my nausea in the bathroom simultaneously and immediately. I then took my two aspirins, finally started to warm up, went to sleep, alone, and felt not too terrible the next day. At least I no longer felt both about to die and afraid I might not. Sex and sickness don’t always mix. (A get well card I saw once said, “People sick in the hospital normally don’t keep trying to seduce their nurses — so either you are not sick or you are not normal.”)

In the *Iliad* of Homer, the protagonist Achilles quite clearly has the choice to fight in battle, be a hero, lead his troops to victory, and die in the process, or to quit the battlefield and go back to his homeland and be like a tender of sheep or woman at home while the “real” men of Greece fight, earn glory, and, in some cases, die at Troy. He makes the agonizing choice to fight though it will mean his death. Yet in the *Odyssey* when Odysseus talks to Achilles in the underworld, Achilles hates it there so much that he says he would rather be a manservant to the lowliest of men than to remain where he is.

Yet one gets the feeling that Achilles, if granted that option, would after a while no more wish to remain such a manservant than he had wished to come home and tend sheep in obscurity. The point of all this is the often forgotten, though hardly difficult, notion that under different conditions and circumstances, what people want, or find important (in sense 2) to make them happy or satisfied often varies with different circumstances, and/or with different moods.

Someone turning on their turn signal lights to signal a lane change may be hardly noticed most of the time; yet after long stretches on a lonely dark drive when no one else has courteously signaled, someone’s doing so may be very gratifying. Sex or food when you are in the mood might be super, otherwise sickening or simply not palatable.

In relationships, it is often the same way. What might be satisfying, desired, important, or very pleasant at one time or at one period in your life, may not be at another. To a teenager (or any insecure person) who feels unloved and inadequate, someone who simply likes them and perhaps likes to go out or make out with them might seem the most satisfying and important of people. But at some later stage in one’s life, where other problems or cares arise, that may not be very satisfying or important behavior at all. After a bad day at the office that makes you hostile and aggressive, an evening of knocking the hell out of a tennis ball may be the perfect thing, whereas on another night, going out to a quiet restaurant with nice quiet conversation may be the perfect evening for a quietly gratifying day.

Where I once worked as a photographer, one of the people in the business office became passionately interested all of a sudden in doing photography. He bought a camera and electronic flash and some various lenses, after reading all the photography magazines he could get hold of. He was shooting all kinds of color and black and white film to see what he liked best, constantly posing his wife and kids and in-laws, analyzing the results, reading more magazines, talking to me about his results, problems, etc. In short, he found photography very interesting, satisfying, and important to him. For birthday and holiday presents his wife and family started giving him photographic equipment — lenses and other various accessories and he was more than delighted with each one. Yet two months earlier, her giving him something like a tripod would have been a joke. He had no interest in photography whatsoever then. Photography, once not important to him, had suddenly become very important to him.

Just the other day I chided a friend (who is soon going to be divorced for the second time) for swearing that she is sure she will never ever want to marry again. I laughed at her and told her that she was old enough and wise enough to know that was probably an idle vow and that since she was an intelligent, beautiful, and caring person, undoubtedly she would someday in the not too distant future fall in love again and, being “certain” she was not making the same kind of mistakes she had in the past, she would want to be married, after she has been single long enough to learn to hate it as much as she now hates a marriage that has become untenable.

Some people go through their whole lives without their interests changing much; and what might be important and satisfying to them at age 16, like getting a new car, might also be their biggest thrill at age 56. Others, however, do change. And what might be satisfying or important at sixteen might seem unimportant or trivial at fifty. While my friend at the office is suddenly going berserk about photography, another acquaintance I know gave it up shortly after the birth of their second child, some twenty years ago. He had done lots of photography before getting married, then also took lots of pictures of his first child when she was very little.

But finally, he simply grows tired of it and moved into other areas of interest. One of the more hotly disputed disagreements I had with my college German teacher (for whom I had the most passionate crush) concerned a point she made relating to a play we had just finished studying. She claimed that it was more important to love than to be loved. I saw that it was important to love, but since I had spent all of high school in love with a girl to whom I was only a friend and since I found my freshman year at college a very lonely experience, loving someone else did not seem half as important as being loved. ***Unrequited love*** was not something I highly recommended to anyone. Just one year later I was disputing something with a roommate when I found myself concluding in the vehement argument that it was more important to love than to be loved. Suddenly I stopped talking, realizing I was now arguing against my own position of a year earlier and taking my former teacher's side (my teacher had concluded our discussion by teasing that if I were not so young I would see her point and I had not been smart enough to tease back that if she were not so old she would see mine and now here I was a year older and she was right. Damn!). Had it not been 1:30 a.m. on a Sunday at the time, I think I would have telephoned my former teacher at home to tell her she had been right after all.

However, by the next morning, I came to my senses before seeing her and realized that we had both been right or half-right. At some times and for some people, it is more important to love, and at other times it is more important to be loved. For example, when you are demonstrably loved by someone whose affection you cannot honestly return and/or when you have gone a long time feeling no stirrings of passion and are starting to wonder if you are not jaded or partly dead, it might be more important to love than to be loved. When you are easily caring or loving toward others but feeling lonely or unloved in return, as I had been through high school or my freshman year at college, the opposite might be true. Sometimes both are equally important, finding someone to love and to be loved by. My teacher thanked me for my insight and for not sharing it with her at 1:30 by phone that morning. She also seemed pleased that a class discussion had meant enough to me for me to remember it.

In *The Philanderer*, Shaw wrote "the fickleness of the women I love is only equaled by the infernal constancy of the women who love me" (Shaw, 1906)." If one loves or finds oneself attracted to others, but finds that feeling (love, attraction, or infatuation) unreturned, then being loved may be far more important than loving. But as in the kind of case mentioned in Harrison's "Is Romance Dead?" and in my friend's seeking the magic in a relationship, it sometimes happens that one needs to be able to find passion for another more than one needs to have another's passion directed toward oneself. Francoise Duc La Rochefoucald's maxim might appropriately describe such a time: "The pleasure of love is in loving. We are happier in the passion we feel than in what we excite" (cited in Roberts, 1940, p. 471). Then there is Byron's: "He who loves, raves…but the cure is bitterer still" (cited in Roberts, 1940, p.466). Or to repeat, Bailey: I cannot love as I have loved, And yet I know not why; It is the one great woe of life, To feel all feeling die.

Certainly, the stirring of feelings toward another, feelings long thought dead and missed, can be a wonderful and important experience, whether love then is returned or not. I once wrote a woman to whom I was attracted for no good reason at all, and told her of my crush on her, making certain to say I neither expected nor really wanted it to come to anything but that I simply wanted her to know how exciting I found her and that it was a nice feeling for me to experience, particularly since "there were so few worthy objects of infatuation" around. I hope she took that in the right way and was pleased by it. I think it is nice to let someone know you feel affection for them if you can do it without making them feel you are making demands on them and if you do not embarrass them. Also, verbally expressing an infatuation can help prevent it from becoming an obsession. And though obsessions can themselves be bittersweet when feelings have long been missing and missed, generally obsessions are not fun.

Unrequited love or even unrequited desire may be too frustrating to bear at times; but being loved by those who excite no passion in you may be a bore or an embarrassment. And so each might find its complement equally important. (Or equally unimportant… when other concerns are of more immediate interest and consequence than loving or being loved.)

In the ethics chapter, I will mention some things that I think are important (ethical) values to have and/or to pursue. But in the areas of interest or joy or satisfaction, there are many things that are perhaps of equal ethical value, though of different satisfaction or importance at different times or to different people. As long as one leads a morally good life, it makes little difference which particular good (as opposed to destructive or evil) interests one finds fun or satisfying. Sharpening one's physical skills at tennis or

one's creative skills at photography may be equally good if both are fun recreation for different people. So may be just sitting around relaxing, or any of hundreds of other harmless things people do for fun.

Of any activities which are equally good, that which is most important (sense 2) or most satisfying is what is most important (sense 2) to some particular individual at that time and under those circumstances. It is pointless to ask what activities are, or should be, most important (sense 2) or most satisfying in general.

Hence, one may play the violin as a child, hate it, give it up, then later take it up again and find it terribly satisfying. One may find sexual satisfaction an important value at one time in one's life and not at another. One person may like sports better than intellectual activity; another, just the reverse. A third may like or dislike both equally. Even in sports, a person may find fencing more of a passion than swimming, hockey more exciting to watch than football, or running more fun to do than playing golf. Even more specifically, a golfer may love tournament golf and hate social golf. An intellect may love history but be bored by chemistry or psychology. Even in a given field, such as math, someone may like one specialty far more than another. In medicine, a doctor may love endocrinology and hate pediatrics. I like certain kinds of philosophy but not others. I am much more interested in certain areas of ethics, aesthetics, philosophy of mind and philosophy of religion than I am in higher theoretical kinds of symbolic logic; with an interest somewhere in between for metaphysics, theories of knowledge, and philosophy of language. And, even in the subjects I have interest in, I have almost no interest in certain kinds of works by Kant, Spinoza, Hegel, and others that other philosophers might appreciate a great deal.

Some general interests may outlive specific interests, though not always. For example, someone's interest in sports, in general, may outlive their interest in playing basketball or even in spectating in basketball. Many men who grew up in basketball of a different era have lost interest in the kind of hectic, sometimes out of control, much faster-paced basketball of today. Many of them have turned to other sports to watch or to play for enjoyment, still finding excitement in seeing individuals or teams playing against each other in a contest of athletic skill where winning and losing and championships are important. Sometimes it works the other way around; a person with an interest in sports in general may grow weary of watching so many contests that have become to him a predictably tiresome, repetitive, indistinguishable blur and simply focus his athletic interests on playing tennis or golf for fun and watch matches and tournaments only in order to learn from them, not because he gets excited about competition.

Especially Significant or Meaningful Satisfactions

Now I think that even among areas that are personally important at a given time there are some areas for at least some people that are of very special importance or significance to them. These are what I refer to as particularly psychologically important or meaningful areas. These are areas of psychological importance as opposed to ethical importance because remember I am speaking here, as in this entire chapter, of areas of interest, in terms of their personal satisfaction, not in terms of their overall ethical value, a subject that I will address later. I am assuming these are areas that are not ethically wrong for a person to enjoy but are worthwhile or simply ethically neutral areas in which to seek satisfaction. I am not talking about the pursuit of activities that are cruel or destructive or even self-limiting or self-victimizing, but of things which there is no reason for a given person not to find enjoyable. They do not necessarily have to be things which are of any great value outside of the interest and enjoyment they provide the person in question; they simply must not be things which are ethically wrong (for whatever reason) for her or him to pursue or enjoy.

It is easiest for me to speak here of my own most important or most meaningful areas. I have always been a fairly inquisitive person about how things work and about how people think and why they do the things they do. I like to understand people and to understand at least the basic principles, if not always the particular details, of physics and engineering. My interest in the thinking processes of people tends to be the greater of these, and often even my interest in scientific matters is not so much a question of how things work as it is why scientists think that is how things work — the theoretical basis for believing the scientific principles. I tend to get very excited about reasonable insights into people's minds concerning the reasons for their behavior, their ideas and views about the universe, and about things like ethics. And I tend to appreciate and often like people who discuss and share such insights, particularly if they do so especially ingeniously, cleverly, or knowledgeably, whether they are drawing on knowledge from psychology, literature, art, history, personal reflection, philosophy, or whatever. I even prefer doctors and dentists who will discuss the reasons for their diagnosis and treatment and who have insight into your feelings and concerns rather than those who only silently treat your body without much if any explanation about what they are doing and why. One series of interesting, though perhaps rather conjectural, lectures I once attended had to do with historical medical detective work, trying to relate certain aspects

of behavior and thought patterns of historically important figures to medical conditions they may have had, as diagnosed from unintentional clues about them in biographies, in their own writings, and in chronicles and histories about their era.

I even like sports better when coaches or announcers display expertise about, and put emphasis on, strategy and tactics more than on raw athletic talent such as speed, strength, agility, coordination, peripheral vision, and reflexes.

I like photography and art, but I like particularly those portraits or portrayals of people that give insight into their character and do not just show their features. I often get the chance to photograph beautiful women, but almost without exception, I enjoy that more (or only at all) when the woman I am photographing is intelligent or perceptive and intellectually interesting. Though photography most obviously is of a person's looks, still somehow one's character and one's mind, come through in some important way, if not in the photograph, at least in the photography session. And I have invariably found that photographing someone who is externally beautiful but immature, naive, or vacant is not nearly as exciting or as much fun as photographing someone even less objectively or obviously physically attractive who is interesting, witty, or perceptive. And I think the latter kind of person (almost) always comes out even more attractive looking in my photographs as well.

Even regarding sex, I personally find silent sex, regardless of how physically pleasurable it might be, a fairly empty experience compared to sex, even less physically pleasurable sex, that also includes witty, teasing, playful, and/or intense serious conversation that gives insights into each others' minds and ideas. Touching each other is nice; but touching each other and talking with each other can be sublime.

I live a great deal in my head and I find that I can often get through many otherwise boring or painful experiences by simply concentrating on interesting things in a way that blocks out unwanted sensations. (I practice at the dentist's, for example, since I am more afraid of Novocain and a dental error I cannot detect until after his office closes than of pain while he works. Unfortunately, this does not work as well at cocktail parties as it does at places where your thinking and your reveries can be uninterrupted.)

As I have grown older, finding people with perceptive insights and interesting intellectual knowledge they can explain in reasonable ways, has become increasingly important to me, particularly when I worked at jobs or was thrown unavoidably into a company that seemed to frustrate or prevent any kind of thinking.

President Kennedy admired the scope and genius of Thomas Jefferson's intellect and once told an invited party of illustrious Nobel laureates that theirs was the greatest collection and concentration of intellect ever assembled in the White House with the possible exception of when Thomas Jefferson dined alone.

There have been many days after being around all the wrong kinds of people at work that many people have felt their level of intellectual companionship greatly increased when they got home from their jobs and closed the door to be alone or to be just with their spouse or even their younger children. I have often felt that way, and at those times in particular, finding intelligent companionship was far more important than finding any other kind of companionship.

I have not always felt this way, and I do not know how much longer I will feel this way, but for a very long time now I have primarily sought, and still primarily seek, companions with intelligent insights into the kinds of areas I find interesting, along with, or regardless of, any other satisfying characteristics they might have. These, to me, are the most enjoyable and exciting people to be with. And even previously when I was single, unattached, and lonely, if I became romantically or passionately attracted to someone who was not like this, I tended to shy away from any serious involvement with them since I knew it would not be a particularly enduringly enjoyable or fulfilling relationship for me.

Hence, with me, through most of my adult life, though sex and affection have always or often been important, and though I enjoy art, music, and a number of sports, the most meaningful and psychologically important area of life, and the area in which I have most sought and enjoyed companionship, is the area of intellectual kinship. Although I never needed for all my relationships to include this aspect (for example, I had some buddies I only played tennis with, but we had a great time and a lot of laughs on the tennis court and never tried to get together for anything else), if this area turned out to be missing in romantic relationships or in those other relationships that I wished to be more than just temporary or compartmentalized (like the tennis relationship), they were not as satisfying, full, or complete a relationship as I would like to have had them be. And although I became attracted to women who were not intellectual in this way, and have not always been attracted to women who were, it seems to be a quality that makes attraction more likely to develop in me for someone generally, and certainly one that makes romance and friendship more likely to be satisfying to me, gratifying to me, enduring, and successful. Regardless of what other important qualities or traits other people

and relationships might have that I find satisfying, this one is (and has most enduringly been) the most important and the most necessary for my general happiness with the people and relationships.

That is why I have included in my characterization of love, pertaining to satisfactions, that if (and as long as) A has particularly personally important areas, whatever they might be, B must satisfy them to some extent and at least not disappoint, dissatisfy, or frustrate A in them. Whatever other areas, even whatever important areas, there may in which B makes A happy, if B does not satisfy A in these most important areas or, worse, if B frustrates or disappoints A in those areas, there is something crucial missing in the relationship for A, something that makes it less of a love relationship than it could be, and perhaps not fully a love relationship at all.

Deprivation

Sometimes something like good sex might be more important when you do not have it then when it is readily available. Some things are more psychologically important in a state of deprivation than in a state of fulfillment or easy access. Being deprived of something such as sex or food may be far more dissatisfying than having it is satisfying when it is easily available. Starving is much more of an ill or dissatisfaction than eating a normal meal or grabbing a sandwich, just because it is lunchtime, is a good or satisfaction. One takes breathing for granted and does not consider it a particular satisfaction at all, but not being able to breathe fresh air is particularly dissatisfying and can make the first few gasps of fresh air very satisfying indeed after an almost asphyxiating experience.

And not just sex, but sex of a certain sort, may be more important at some times than at others. Sometimes, or to some people, romantic, loving sex is important. At other times, teasing or playful sex. Contrived sex, spontaneous sex, fast sex, or slow sex, or just sex itself of any sort may be more important at any time of deprivation of (that kind of) sex than when it is abundantly available. Or a gentle touch, nice personality, or someone whom you like liking your children and being kind to them, may assume monumental importance when not easily found or not readily available. Divorced women with children often particularly appreciate a date who likes their children, especially after going out with men who do not. People having a bad time or a bad relationship may overreact to and over-appreciate a person who supplies the needed missing aspects; though under normal circumstances such traits might not be quite so satisfying, stimulating, attracting, or even noticeable.

It is difficult to tell what may become so monumentally important under deprivation conditions. A simple hello may provoke the strongest affection or satisfaction in a lonely, depressed, or shy person. Finding an intelligent mind belonging to a person who is stimulated by ideas you have that so many others have ignored or belittled may be tremendously exhilarating. The deprivation of a normally unimportant satisfaction may trigger an obsession for its satisfaction that makes it difficult, or even wrong, to deny. As a desire (one which is not ethically bad or immoral) grows, it demands fewer reasons other than itself for seeking its fulfillment, and it demands greater negative reasons for its denial; the more you want something which is not somehow wrong to have, the fewer other reasons you need to pursue it.

Hence, it is extremely important to be aware of how the changing environment affects one's own, and others', scales of the importance of desires. Anyone may all too readily seek or accept (though often only temporarily) what would under normal circumstances be unimportant or unacceptable. For example, one often sees a divorced person marry a person only because that person is nice to them whereas their former spouse was not (perceived to be) nice to them. In such a case, just being nice may not be enough at a slightly later time when it turns out there are other needs or desires that are not being met. Or a person might fall in love during a lonely and terrifying "final exam" week at college, only to find out when the loneliness and terror of such a time passes, that they have "fallen in love" with someone they would never have under normal circumstances, and whom they cannot love now. Loneliness or fear can make one seek comfort with someone whom one would not find so appealing if one were happier or more secure. It might, in some cases, be the emotional equivalent of seeing someone at closing time in a bar through 'beer goggles' when they seem much more appealing than they will in the morning when one is sober; only instead of seeing them through beer goggles, one is seeing them through 'fear goggles' because under those conditions someone who seems comforting will be important.

(This is one reason why I think it important for children to learn that there are many people they can like who can like them and treat them nicely. This is why it is important for adolescents and adults to realize, as some people crudely and cruelly put it, "there are many fish in the sea" — that is, there are many, many people whom they can like and who will like them, so that they need not fear, or become dejected by, rejection from some, that they need not view such rejection as an objective sign of their unworthiness

to everyone, that they need not become terribly infatuated with the first person, or every person, who is nice to them or shows an interest in them. There is certainly nothing wrong with young love or infatuations of this sort, but it would probably be less painful in the long run to realize that if the relationship is based mainly or solely on this sort of liking someone simply because they like you, accept you, show an interest in, you, or are nice to you, it may be ill-fated because of the lack of other satisfactions or goods; and/or it may be ill-fated because the infatuation may cease when the person finds out many others may also show the same interest and consideration.)

What is important then, in terms of satisfaction, is what is important to a particular person at a particular time under particular circumstances. No satisfaction of equal ethical value can be or should be considered to be any more important than any other without reference to people, time, and circumstance.

I used to think some areas were more important for (continued) happiness than others — that, for instance, people who mostly enjoyed talking to each other were somehow better off or somehow potentially better off in terms of their relationship's enduring happily than say people who just mostly enjoyed having silent sex with each other. But I am no longer certain about that. I no longer believe that being able to discuss problems will always help you solve them in a relationship; it also takes goodwill and empathy or sympathy for the other person, and it takes both partners wanting to work out problems and having some insight and understanding how to do that. If the two of you have no need nor desire to talk much with each other, then enjoying dancing, sex, or bowling frequently might be every bit as satisfying as having discussions is to more cerebrally inclined people. And I am not certain that people who have good sex but other sorts of problems they cannot solve are any worse off than people who have sexual or emotional problems they cannot solve no matter how much they are able to discuss things.

A relationship with strong sexual gratification and little else may be doomed to failure in terms of being completely satisfying, but then so may one involving little but intellectual gratification. One can have few new ideas every day, certainly too few to be able to provide terribly much conversation for very long with a constant companion. And I am not sure which relationship in general, if either, would be likely to grow old and stale faster. Perhaps for the longevity of a relationship, it is important to have a number of areas you enjoy with each other. Perhaps sociologists can determine that.

It is, of course, better not to have problems, or to have the abilities to solve as many problems as can arise; but given normal human limitations, difficult problems will arise in relationships. I would be interested to know whether some are inherently more destructive than others. Of course, there have been statistics available on such supposed causes of divorce as drinking, financial disagreements or problems, religious differences, etc. but these problems may only be symptomatic ones or ones aggravated or caused by other more basic defects in relationships, such as an inability to express feelings or even know one's own feelings or inability to understand a partner's problems or feelings. Are there some abilities or inabilities that are more important for (prolonging) happiness in relationships? I am not as certain as I used to be. It would be nice if social scientists could provide clues about what kinds of gratifications are more likely to remain gratifying for what kinds of people and relationships, if any. And hopefully, these clues would be accompanied by insights into their causal, and not just their statistically probable, nature.

In terms of satisfaction alone, not total value of the relationship, the somewhat perhaps simplistic relationship between Archie and Edith Bunker is perhaps a very satisfying relationship for them, though it would not be for people such as Gloria Steinem or Alan Alda.

But if Archie and Edith are happy with each other, and if they are doing the best they can, given where they are in life, what more, if anything, can be reasonably asked or wanted in their relationship?

Is the Most Enjoyable Relationship The Best Relationship?

The distinction between satisfaction on the one hand and other kinds of ethical goodness or value on the other prompts a question that is like the question to be raised in the ethics chapter — whether happiness (or call it satisfaction or contentment) is the single most important, or ultimately only, goal of people's lives. I will try to show there that it is not, that the person with the happiest existence is not, therefore, the person leading the best life. But here let me just say that the people with the most satisfactory or satisfying relationships are not, therefore, the persons with the best relationships necessarily. For example, the soppy-dependent housewife who may be happy, but who has given up even unknowingly any opportunity for personal growth and development and/or accomplishment at the expense of that happiness.

But again, just in regard to the area of satisfaction alone, certainly physical beauty and sexual gratification can, and in many cases do, fade; but so can intellectual satisfactions as well as emotional ones. I am not certain that there is any one or any set of satisfactions that will necessarily guaranty to happily or satisfactorily sustain a relationship such as marriage through a long period of time. It might also vary for different people. It might be the ability not to change (if that is an ability) or, more likely I would think, the ability to adapt to each others' changes in a successful way that does not make either party unhappy. And if each person changes in a way that makes them even more satisfying to the other, then all the better for the relationship. This is one way in which love or a loving relationship can grow more loving. It is all too rare perhaps, but it does happen.

Sometimes in a relationship, a woman, say, if she was not this way before, may start to grow independent in many of her actions from her husband. She may begin to work outside the home, becoming successful; may learn to play new sports such as tennis or golf, etc. In short, she may not depend on him for her achievements or for her emotional needs in the way she did before. Now, this may cause a boon to their marriage if he likes her all the more as a person this way and if she is a better person to him as well as to herself because of it. Or, as in too many cases, it can wreak havoc in the marriage because either the husband becomes insecure or jealous and cannot handle it or because the woman feels she has outgrown her husband with her new life and finds she is not interested in him anymore. Or she may simply become too busy to be able to meet some of his legitimate needs or desires. Or he may have too many unreasonable and selfish needs to be able to cope with her new independence.

I used to think non-contemplative or ignorant people were less likely to have happiness or happy relationships — that somewhere in their lives something bad would happen they could not cope with and that they had not prepared for. But I don't any longer think life always works that way. Some people are just dumb lucky. They often don't even notice things that would bother other people, or they just incorrectly accept them as inevitable and go on about their business. They may not have the best lives but they may have happier or more satisfying lives or relationships. For some, ignorance is bliss, though just not best.

In some cases where stability and sameness are due to unwavering traditions, no matter how unreasonable or bad the traditions, long term happiness is more easily achieved because what happens is expected and what is expected and (thought to be desirable and therefore) desired happens. In contrast, change, no matter how much for the better it might be, may cause difficult adjustment and may be dissatisfying to some who are less flexible and less interested in surprise.

People who are neither dumb nor lucky often do need some guidance in working out relationship problems or knowing how and when to terminate in the most agreeable way a relationship which, perhaps not through anybody's fault, has grown irreparably bad, either through loss of feelings of attraction, loss of satisfactions, or loss of goodness. Certainly, many people change throughout their lives and the changes may bring dissatisfactions or problems to their relationships. And these may be dissatisfactions that are insurmountable without more sacrifice or harm than is fair to ask or allow. But it seems to me that most of the problems that arise in relationships, even those that may call for "ending" a relationship do not call for any particularly great intelligence nor for deep or endless analysis to solve. It seems to me that most people with anywhere near normal intelligence and verbal ability can deal with each other about their relationship if they have some understanding of ethical behavior and some psychological insight into their, and their partner's, needs and joys and wants. And if both want to try to work out their problems rationally, amicably, and fairly.

On one *All in the Family* episode, Archie mistakenly tried to pursue a romantic attraction for a waitress who had repeatedly flirted with him. It was at a time that he was particularly vulnerable to someone else's interest in him because he was feeling ignored and abandoned by Edith who was doing time-consuming work that was exciting to her at a nursing home. Edith found out about the waitress, and told Archie she saw why he liked the girl — because the girl was younger looking and prettier than she. But Archie had already come to his senses and simply told Edith he had simply done a stupid thing, having momentarily lost his head, and that Edith did not have to worry about her looks to him at all because (in his characteristic backhanded complimentary and sensible explanation) "the good Lord saw to it that as he and other people got older, their eyes lost the ability to see things that weren't any more important anyway." It was not the waitress's looks that had flattered and tempted Archie, but her interest in him at a time when he felt Edith had lost that interest. That was what was important to him then. And he knew that and tried to tell it to Edith.

Of course, *All in the Family* was written by people with insight, but people with less verbal or analytic ability often do have the kind of knowledge, if not wit, to explain their feelings, their actions, and their concerns to their loved ones and then solve the problems they face. I no longer think an intellectually gratifying relationship is necessarily likely to be happier longer than one that is primarily say sexually gratifying. There will probably be enough intellect involved, or at least there could be, in the sexually gratifying relationship to solve problems that can be solved in it.

“I didn’t really believe you when you said sex was not necessarily the most important thing in love. But now that I have been married for a year, I have to admit that you were right. Sex is great, but the thing I appreciate and enjoy even more is that when I wake up in the middle of the night and cannot get back to sleep [my husband], even if he is very tired, will keep himself awake and just talk to me until I am relaxed and comforted enough to fall back to sleep. That is the nicest thing.” — a friend of mine.

Key Takeaways

- Figuring out what is important in a relationship to you, and in what way(s) it or they are important.
- Sex or the thought of sex may be very pleasant at some times and not pleasant at all at other times. Sex and food are not too different in this regard; when you are fully satisfied by either, the thought of more of it is not always pleasurable.

Key Terms

- ***Unrequited love*** is being loved by those who excite no passion in you.

Review Questions

- **Question**: What are three different issues related to the importance of satisfactions in relationships?
- **Question**: What is sometimes at least as bad as the frustrations of your unrequited love or even unrequited desire for someone else?

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7.1.3: Personal Versus Professional Relationships

Learning Objectives

- Recognize that whether a relationship is personal or professional does not necessarily determine which acts are right or wrong within it.



Watch this video or scan the QR code to learn more about business versus personal relationships.

The distinction is usually made between ***personal relationships*** and professional ones. I think it is an unimportant distinction for improving one's relationships with other people. I shall make little use of it since I believe that anything one might want to cover under professional ethics or professionally proper behavior will also fall under the more general category simply of ethical behavior or proper behavior. I will dwell more on this in the chapter on ethics. Let me just say for now that ***professional relationships*** between people, simply because they are between people, are also personal relationships though they may be of a different, or more or less involved, scope than one's normally considered personal relationships. That is, one may see one's doctor for only thirty minutes, say once a year, but see a friend more. One might appear disrobed in front of a doctor but not in front of a friend.

These kinds of differences are made right or feasible because of what is involved in the relationship, not because it is a professional or social relationship as such. For example, if a person has medical knowledge and the proper degrees (for legal purposes) but chooses not to practice medicine professionally (chooses not to make a living from it), it would be just as right for her or him to examine the unclothed anatomy (for health reasons) of another as it would be for a professional doctor. With the proper knowledge, even without the proper degrees, it might be right in some sort of emergency situation. The "right-making" characteristics involved in the action here are the patient's consent, and the proper knowledge of the examiner, and the proper use of that knowledge in this particular situation, not whether the relationship is professional or not. A doctor does not have the right to make sexual advances toward a nude patient, not because it is unprofessional (that is a result of its being wrong, not a cause), but because the patient is not, by being nude for a medical examination, thereby giving consent for sexual license, is not expecting it, is likely to be offended, scared or embarrassed because of it, and is in a disconcertingly vulnerable state for such an advance (or virtual attack).

Likewise, though an employer may angrily chew out an employee for an error of some sort, it seems to me this act is only right if the employee deserves it due to his prior character faults and if this is the least harmful way of curbing or curing those faults. The chewing out is warranted only if it is deserved and/or is the least damaging way of correcting the situation or preventing recurrences. It is not made right because employers should be able to treat employees any way they want (they shouldn't be) and therefore in a different manner from the way they treat friends. If a person should be chewed out, then it might be right for an employer, friend, mother, or, in some cases, even a stranger to do it. And if the chewing out is undeserved, or unfair, then it is wrong for anyone, including the employer, to do it.

Different Kinds of Professional Relationships

There are a number of different kinds of relationships that may be described as professional or derived from professional sources. There are employer-employee relationships, say between a dentist and a dental assistant he employs, or between a store owner and clerk. There are relationships of service like these, but where a third party does the employing— for example, a secretary and boss who both work for a corporation. There are relationships of service which are of more temporary durations, such as doctor-patient, lawyer-client, student-teacher, salesman-customer, barber-client, photographer-subject, etc.

There are also professional relationships which are not based on a servant-boss type of distinction, but on a more equal basis; for example, people working together in an area or profession who come together because of their profession or place of work — say different secretaries of equal rank, different executives of equal rank, or different clerks of equal rank working in the same company; different teachers at the same school.

In short, a person's job may bring her or him into contact with somebody they work for or who works for them (either through direct employment or a third party's), and a person's job might bring them into contact with people they work with but whom they neither supervise nor are supervised by. Some of these relationships might be intended for a long duration; others for short, one time, or occasional periods.

Now there are different legal, organizational, and company stipulations concerning professional relationships and conduct. For example, two people making a contractual business agreement thereby have legal obligations (and enforcing sanctions) the usual friendly agreement does not have. (But a friendly agreement is just as morally binding as a business agreement. Both need to be honored unless special circumstances arise allowing either agreement to be rightfully dissolved.) Or, say, a doctor has the obligation to report to the police gunshot wounds of patients, an obligation that the patients' friends do not have. Examples of organizational restrictions are those posed by, say, a Bar Association or AMA group on its member lawyers or doctors, or by the U.S. Congress on its members whereby punishment for breaches might involve censure, loss of certain privileges, or expulsion from membership. Companies or boards may have rules concerning proper conduct for employees, such as conduct for teachers toward their students or supervisors.

In some instances, there may be conflicting obligations from different relationships — a person's company may want him/her to keep secret the impending firing of a co-worker that might be his/her spouse or spouse's close relative. This puts the person in an ethical dilemma for which there may be no easy solution. But this could be just as true if the co-worker were simply a friend or acquaintance one respected at work. There could be similar business or professional dilemmas not involving personal relationships at all, nor even involving harming the business by disobedience to its policies. For instance, situations might arise in business where important opportunities for your company could be lost if you followed company policy. (This is sometimes true in war too for a soldier faced with whether to do something he believes is beneficial to the military and his country if it means having to disobey military regulations to do it.) The decisions you make in any of these kinds of cases are always ethical ones, since you always have the choice whether to follow policy or to ignore it. That is the primary decision, and it has to be made on grounds outside of the policy itself. You have to first decide whether policy is right in a particular instance or not. Further, there can be conflicting totally personal obligations. You do not have to look to business to find such problems. People often have to choose between courses of action that will upset or disappoint either their spouse or their parents, or their spouse or children.

I am not denying there are legal and organizational distinctions between personal and professional relationships; I am only denying that the distinction between personal and professional relationships is of any use as such in understanding the relationships we have in our lives, and I am denying that the distinction and the legal and institutional rules or codes are of much use in determining our real ethical obligations or describing correct conduct toward others (which is a large aspect of the relationships we have with others). Some are not even good ethics; and some only serve the group, not the public. They are misnamed as ethics, and instead should be called sanctioned practices. This latter claim will be further supported in the chapter dealing with ethics. It is, I maintain, easier and more useful and beneficial to think of all relationships between people as being personal relationships, with some having special circumstances (whether for personal or business reasons) that may make them different from others in terms of the behavior, thoughts, and feelings that are psychologically or ethically appropriate. A dentist treats us differently from a doctor, CPA, or television repairman, not because they are not all professionals, but because their professions and their expertise (what we call on them for) are different. Well, similarly we can find reasons as to why our relationships with our mother, our mother-in-law, and our spouse are different from each other and different from our relationships with our doctor and our tv repairman without having to say only that the latter is professional and the former is not.

Key Takeaways

- All relationships, whether professional or not are also personal.
- Something wrong to do to someone is not made right by the relationship's being a professional one.

Key Terms

- ***Professional relationships*** are those involving acts done as part of at least one person's business, even if one does not charge money for it. It often involves acts requiring a licensed professional.
- ***Personal relationships*** are those in which acts generally are not based on business or commercial transactions or on the profession of one or more participants.

Review questions

- **Question:** What do you think are some differences and some similarities between personal and professional relationships?
- **Question:** What are the potential characteristics of all relationships between people?

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7.1.4: Independence of the Three Aspects of Relationships

Learning Objectives

- Explain how the three aspects of love are independent of each other.



Watch this video or scan the QR code to learn about the psychology of attraction.

Attractions, satisfactions, and the general or ethical value of relationships are independent of each other in the sense that people can, and do, sometimes become attracted to people who do not bring them much pleasure or who are not necessarily good for them, just as they sometimes do not become attracted to people whose actions they do enjoy and/or who are good for them. Of course, sometimes people do become attracted to people whose actions are good and/or satisfying, sometimes perhaps even because of that. Sometimes it can be particularly easy to become attracted to someone who treats you kindly, especially when that kindness is most needed. Yet sometimes people become attracted to others while knowing little or nothing about how satisfying or dissatisfying, good or bad, their character or actions might be; some instant attractions are like that.

Sometimes one becomes attracted to someone before discovering the other person is not good for them or displeases them; and yet the attraction may persist, simply because attractions are not always governed by rationality nor, once acquired, are they easily dispelled. (In the worst cases, they may even seem to be the work of spells.)

Sometimes people even become attracted to those they already know are bad for them or to those whose actions they know displease them. Why this is, I do not know. In some cases perhaps, it is to reform the other person or win them over out of some sense of challenge. Perhaps sometimes they become involved after feeling they are safe from involvement with such a person. Perhaps they become attracted because they can do so and yet still remain somewhat aloof, unconcerned, or uncommitted. Perhaps some people need to feel unhappy in their love life or can only be sexually attracted to someone they do not (otherwise) respect. But I am not particularly concerned here with the rationale, only with the fact that emotions, benefits, and happiness in relationships can be independent of each other in the sense that (1) people can and sometimes do become or stay attracted to people who do not make them happy or who are not good for them, and sometimes even to people who make them miserably unhappy or who are very bad for them, and/or (2) sometimes people do not become or stay attracted to those who are good for them or in whose company they are often happy. Also, (3) whether you are attracted to them or not, people can make you happy who are not otherwise in general or overall good for you; and (4) people who are good for you may not be very satisfying to you.

Further, though often you do tolerate or even come to enjoy with a loved one activities that you could not tolerate or like with someone you had no attraction for, it also sometimes happens that activities you could accept with regard to anyone else you cannot tolerate in a loved one. For example, say a person thinks golf is a waste of time and finds it hard to relate to people who spend lots of time on the golf course and who seem to be preoccupied with it. But if that person becomes tremendously attracted to someone who it turns out enjoys golf, he might even find himself taking up the game and enjoying playing it with his beloved. But in other cases, just the opposite may occur, in that one may tolerate the golfing of people one does not care about, but hate to see someone they love “wasting” their time and energy at the game.

Sometimes it is the like or dislike of an activity that influences the feelings one has for another. Jones may be unable to grow to like anyone who plays golf or smokes or…. On the other hand, if Jones does play golf, he may become terribly attracted to a girl who can keep up with him on the golf course. We often find ourselves attracted to someone because something they do pleases us. There are some times that we are more vulnerable to this than others. When one feels rejected or lonely, a person who smiles or listens with understanding and sympathy can be very attracting. When one has been unable to find companions who share some important interests, ideas, knowledge, or values, finding such a person may arouse strong feelings of attraction, if not just gratitude, for them.

But, as I have said, not all cases of attraction are like this, and this may make one wonder whether even in these cases attraction arises because of compatibility and benefit or simply beside it.

The independence of benefits from a relationship and any attraction in it can be exemplified by the case of people who learn from teachers or other adults to whom they may not be particularly attracted.

Further evidence for the ***independence of feelings*** from what is enjoyable or unenjoyable and from what is good or bad is the dual phenomena of:

1. Having different feelings toward people from whom you may get the same satisfactions or dissatisfactions and
2. Getting the same kinds of feelings from people who give you satisfactions or dissatisfactions that are different.

Likewise,

1. Getting different feelings about people who do equally good or bad things for you and
2. Getting the same kinds of feelings about people who are different in the amount of good and bad they provide you.

In this last case, one might have strong feelings of attraction for people it is the most painful to be around and even for people who intentionally treat them badly. But one might also have strong feelings of attraction for someone who treats them much better. Or one might fall in love with someone who treats them very nicely at first and remain highly or passionately attracted even after that person no longer behaves so kindly.

Or consider two people who treat you equally well and with whom you do things together that are equally good. Or two people whose company you enjoy very much. You still might have very different kinds of feelings toward them. One might be a dearly loved one for whom you have all sorts of feelings of attraction whereas the other might be described as a good friend, whose company and behavior might be very nice, but who is not a person for whom you feel passion or desire. Sometimes one may have a great conversation with an acquaintance and enjoy it very much, just as one might with a longtime friend or with a lover; it is not the joy of the conversation that is different from each of these people, but the surrounding feelings or emotions.

There may be people who do not treat you badly, but around whom you quite often have a terrible time anyway. You may still be attracted to that person. You may hate yourself for going to see them or for going out with them and each time resolve that will have been your last such time, yet not be able to keep that resolution.

There may be or may seem to be connections at times between the joy or good you get from someone and the feelings you have toward them and vice versa, but, based on the above evidence, that causal connection, if it exists, certainly seems to be indirect or quite complicated. For example, the fellow whose girlfriend taught him to play and enjoy golf might not have been able to do so had he not liked her; but perhaps other girls he had liked tried to persuade him before and were unable to; and perhaps he didn't even like some girls just because they played golf. At times, just having a person introduce themselves with a smile will brighten your whole day and make you almost instantly infatuated with them; but at other times you may simply feel you are being put upon by them. And there are instances of people feeling differently toward two very similar people (in some cases, even identical twins) who seem to others to be alike in almost all respects. The attracted one may be sure there is some difference, say a twinkle in the eye, even when no one else can see the difference.

scenario 2

Imagine your dream mate (she or he) may be your fantasy. Imagine again that your ideal mate, the person you think you want, may not be the person that you need. How do you balance your fantasy with reality?



The Happy Couple

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Even strangers for whom you have no feelings may provide goodness and/or satisfactions. There is the Mary Worth comic strip kind of relationship of the kindly stranger who helps you with a personal problem; it actually happened to me once. I had taken a long train trip to see a girl I had met the year before, had become immediately attracted to, and had since frequently and passionately corresponded with by mail and spoken with by long distance on the phone. When I finally got to visit her, it was

evident something was bothering her. She had a new boyfriend and had just not been able to bring herself to tell me. I was crushed. On the train ride back I began talking with an older lady seated next to me, told her what had happened, and felt better just because she understood and was sympathetic and said just the right kinds of reassuring things to make me feel not quite so alone, unusual, or inadequate. Yet I did not become attracted to her; I didn't even learn her name.

Others have their own "Mary Worths". A girl I met one time who had grown up and gone to school in Tuskegee talked about an old woman who lived in a house next to a vacant lot where many little kids played. Every day this woman brought out lemonade and cookies for those kids even though she was no relation to any of them. This girl had been one of those kids, and one of her hopes for herself as a person was that someday she would do the same kinds of thing for kids who would play near where she would live. She has no idea who that woman was.

One day I was walking to campus alone in the early morning when a girl in a Volkswagen Beetle drove by. I saw her coming from about half a block away and started to peer in to get a better look at her. You know how guys do. Anyway, at the time I stared in, I found her staring out, her head turned around — to check me out. Usually two people catching each other doing this both get embarrassed and turn away immediately, but somehow or other our moods in this case were both one of being pleasantly surprised and flattered, and instantaneously we each grinned at catching each other and being caught by each other, then cherishing those simultaneous grins, we each waved and kept on going our opposite directions, never knowingly to see each other again. Yet that brief second was one that to this day still makes me smile and feel good.

In the television play *Silent Night, Lonely Night*, the part played by Lloyd Bridges is that of a man whose wife is in a mental hospital, unable to do much but stare into space. Their only child had drowned. He says at one point that his mother always said the best part of a meal was sharing it, but he says that Christmas eve he finds best shared with strangers, not friends. He cannot bear to be with friends who know his sorrow and who, he feels, obligatorily have him over to try to cheer him up. He would rather spend that particular time with someone who does not know of his sadness and the particular melancholy that comes with Christmas and the new year.

And at times, even in the best of relationships, a new acquaintance, one who you may have little if any feelings for at the time, may be somebody it is more enjoyable to be around than your partner. Suppose one simply wants just to talk with someone to make them laugh or feel good.

Suppose your spouse or best friends already know all your funny jokes or deepest thoughts or most poignant stories, and you know theirs. What then might be very meaningful to a stranger most probably would just be repetitively boring to those you most care about. One simply cannot always have new and stimulating thoughts for friends or loved ones. Even the voluminous and creatively staggering works of Beethoven and Shakespeare could be performed in a two or three month period. One can imagine hearing a shrewish spouse or lover or an insensitive friend say even to them something like "But I have already heard this; can't you come up with something new?!" So if you are in a mood to talk and please and you have no new thoughts or jokes for old friends, sometimes you must find new friends for your old jokes or ideas. Or find an old friend you have not seen since discovering some of those new ideas.

In fact, often what makes the reacquaintance of old flames or old friends so exciting is that you have the best of both worlds — the bond and understanding of a longtime relationship and the excitement and freshness of a new relationship; you have interesting new things to discuss with each other but without having to start to get to know each other from scratch, learning about each others' characters and personalities. It is like meeting a fresh and exciting new person but without having to start from the beginning — without having to play any games, put on any airs, explain about yourself, sort through any trivia, or go through any sort of settling process.

Another example of the independence of feelings (particularly of passion or sexual attraction), joys, and benefits is the fact that people with particular sexual inclinations, whether heterosexual or homosexual, are not likely to become passionately or sexually attracted to anyone outside that interest no matter how happy the other person makes them or how good they are for them. Most people simply feel differently about men and women no matter how much they might enjoy or benefit from either. There was a perverse cartoon that traded on something like this one time — two homosexual fellows are in a bar talking to each other when a particularly exciting looking woman, provocatively attired, walks in. They both captivatingly stare at her and finally one of them says to the other, "Gee, that's enough to almost make you wish you were a lesbian."

But, even apart from sexual inclinations, the point remains that we can become attracted to people who treat us well or ill or both, to people we enjoy or not, or both. And we can enjoy or be treated well by people to whom we do not necessarily become attracted, whether emotionally, sexually, romantically, or physically.

And, apart from any sort of attractions, we can enjoy the company of people who are not good for us — children and adolescents often become friends with people who lead them "astray". Adults, particularly in some vulnerable states, are also susceptible though they may be more circumspect than inexperienced children. And we often do not enjoy or find pleasure from people, such as some teachers or parents, who may be very good to us and very good for us, but whose benefit to us we do not understand or appreciate. Quite often, just as the taste of foods is inversely proportional to their nutrition, and just as the most fun activities are not always the most beneficial ones, the most enjoyable people are not always the ones whose company is best for us.

Key Takeaways

- Recognize that you can be attracted, and even remain attracted, to someone who is not good for you or even very enjoyable or satisfying for you.
- Understand that you can find someone enjoyable not good for you but you may also find someone who is good for you not satisfied.

Key Terms

- Further evidence for the ***independence of feelings*** from what is enjoyable or unenjoyable and from what is good or bad are the dual phenomena of (1) having different feelings toward people from whom you may get the same satisfactions or dissatisfactions and (2) getting the same kinds of feelings from people who give you satisfactions or dissatisfactions that are different.

Review Questions

- **Question:** What does the book refer to as the 3 aspects of relationships?
- **Question:** What is a "*Mary Worth*" type of relationship?

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7.2: The importance of friendship and companionate love

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7.2.1: Infatuation, Friendship, and Love

Learning Objectives

- Compare and contrast the similarities and differences between infatuation, friendship, and love.



Watch this video or scan the QR code to understand more about the difference between love and infatuation.

Love and Infatuation

Some would hold that the difference between love and ***infatuation*** is that love lasts but infatuation does not. This is incorrect, I think, for a number of reasons. First, if there were no other differences between love and infatuation, it would make it impossible to tell whether any given relationship was a love relationship or an infatuation relationship until sometime in the future when people could look back and say whether the relationship lasted or not. Hence, no one could ever accurately say something like "those newly-weds certainly love each other" no matter how wonderful or fulfilling their relationship at the time; it could only be said on their 25th or 50th anniversary that "well, no one knew at the time, but those two certainly were in love when they married." And if either or both died young, no one could tell whether they were in love or just infatuated or not — or by unamended definition, since the state did not last, though involuntarily, it was not love. But none of this really is in keeping with common usage. We do make distinctions between love relationships and infatuation relationships that are new or that exist now without feeling the need to wait for the passage of (more) time.

It seems to me that the best way to look at the difference between love and infatuation is that infatuation is simply the attraction aspect of love without significant or much, if any, satisfaction aspect and/or goodness aspect. The attraction is generally romantic attraction, also perhaps sexual, and/or physical, and/or emotional, and/or intellectual. Infatuation is the feeling of love without necessarily (much of) the beneficial value or satisfaction of love. It is the attraction to another person accompanied by too little else. Probably in many cases, infatuation does not last simply because the relationship offers little good or satisfaction (and sometimes does offer distinct harm and dissatisfaction) along with the attraction, and so the attraction dies. But there are many cases where attraction or infatuation endures in spite of unreasonable hardships and dissatisfactions in the relationship. This endurance does not make the feelings ones of love, just ones of enduring infatuation.

The word infatuation generally is used to describe relationships that are new, and often it is applied to younger couples rather than older, though if an older man takes a fancy to, or is attracted to, a younger girl, he may be said to be infatuated. But I think the term, or at least my description of it, could be equally well applied to longer-term relationships and those between mature, reasonable people. In the movie *The Way We Were*, the characters portrayed by Streisand and Redford had genuine feelings of attraction for each other throughout the course of their long, tempestuous relationship, which included various separations and reconciliations. The separations were caused because the two simply were neither good enough nor satisfying enough for each other to be able to live, or even be, together for very long at a stretch. Both were good people but they had conflicting political, social, and moral views and conflicting career goals that they were not able to ignore, compromise, or work around sufficiently to be able to keep from hurting each others' feelings.

Yet none of that put an end to the feelings and the attraction they had for each other.

Sometimes lack of satisfaction and/or lack of goodness in a relationship will kill the feeling aspect too, but often it does not. Quite often, feelings are simply independent of other qualities or aspects of the relationship. The sad part of the movie *The Way We Were* was, it seems to me, that we often believe that any feelings, such as theirs, that can last so long and be so strong between two good people, should enable them to also be able to live together and to enjoy and satisfy and be good for each other. But this is simply

often not so, and the relationship in that movie was just one instance of it. It would not have been nearly so sad or so tragic, I think, if they had simply realized that no amount of romantic (or any sort of) attraction(s) is sufficient by itself for a relationship to be also enjoyable and satisfactory or good. Even with regard to something as strong and as potentially satisfying as sexual attraction (assuming, what is not always true, that a partner you strongly desire sexually will be satisfactory actually to be with sexually), as Zsa Zsa Gabor once remarked on television, there must be something else in the relationship because you cannot be having sex every waking moment you are together.

It is the relying solely on feeling or attraction that causes so much grief so often. Feelings can be an impetus but cannot, without luck, be a guide, and certainly not necessarily a good guide to a good and satisfactory relationship. Youth, or at least the naive, are those who often meet obstacles because they follow feelings alone so often.

"If thou remember'st not the slightest folly That ever love did make thee run into, Thou has not loved." (Shakespeare, As You Like It 2. 4. 34-36)

I would think "love" in these lines is best understood in the sense of attraction or infatuation. I remember one time one of the boys I used to caddy with was so smitten by a girl we all saw walk by carrying her own golf clubs that he immediately left us to run to her to beg to carry her clubs for her. She said she could manage all right on her own, but he insisted, and took them from her shoulder — only in his excitement and nervousness (we were all watching this episode, which added to his difficulties) he accidentally turned the bag upside down while looking at her and dumped her clubs out onto the ground. Our taunting laughter was deafening.

Sometimes, of course, as in undesirable pregnancy or undesirable marriage, an error of the heart can be far more serious or devastating than a youthful folly or embarrassment. Plautus' "He who falls in love meets a worse fate than he who leaps from a rock" need not be true, but so often is when passions cloud reason or are considered alone as a proper guide to action in pursuing a relationship.

Had Streisand's and Redford's characters recognized their relationship as one only or basically of infatuation or, if that sounds like too frivolous a description for mature people, enduring strong attraction, they may not have so futilely kept trying to have a fuller relationship that could not be and that made them so disheartened each time they realized they had to part. Had they simply accepted the attraction for what it was and enjoyed what they rightfully could from it without demanding more — such as expecting their strong feelings alone to let them be able to live happily (and beneficially) ever after — it would hardly have seemed or been a tragic situation at all. If they could have recognized what they had and been happy for that instead of being sad for what they did not have, they would have been better off. Of course, mutual infatuation or attraction is not always easy to find, nor is love, so one sometimes unfortunately and unrealistically hopes that any attraction they do find is part of love instead of just infatuation; but neither is so impossible to find that infatuation cannot provide its particular benefit and delight without thereby just being a sad reminder of what is missing from a fuller relationship. Infatuation, being only part of love — the attraction part, certainly offers less than love, but it provides more than no relationship or feelings at all. It is exciting and it stirs the soul and the blood; it takes one outside of one's self and can make one feel "alive" and invigorated, renewed and young. Infatuation or attraction is quite a nice thing in itself, as long as it is not expected or required to be more and as long as one does not expect it to carry aspects of a relationship that it cannot or should not. Neither love nor infatuation are so difficult to find that the discovery of either at any given time should seem such a miracle that all action is predicated on the belief it will never happen again and so one had better make the most of this singular (or latest) occurrence. The most may be too much.

People who expect feelings alone to solve or prevent all problems are just expecting far too much from feelings. This is not just in regard to relationships but in all kinds of areas, such as spending more money than one earns with the feeling everything will turn out all right anyway, gambling on a "hunch" more money than one can afford to lose, behaving irresponsibly in front of others, etc. Those who think of love as just a feeling or attraction may do so, ignoring my definition, but they should not then expect love as they think of it to be or to cause very good, full relationships. Feelings alone just cannot do that. At least they often do not do it.

In thinking of marriage or living together, it is important to consider, not just feelings, but present and probable future, satisfactions and good things in the relationship, since living together on a day-to-day basis tends to highlight (in ways just dating does not) bad habits, bad manners, bad moods, and boredom. Few, if any, can be exciting, new, and wonderful all the time. More than just strong feelings are usually needed to keep a relationship running smoothly. One of my friends one time said he did not see why people who were in love "just wanted to live together" since it was the living together on a daily basis that was the toughest part of a relationship or marriage. Living apart, even though seeing each other most or much of the time, at least allows for some privacy,

along with preparation for, and recuperation from, time together. And that concerns just the social aspect of marriage or living together. There are other aspects as well which I will discuss later.

And there is a tendency not only to put too much emphasis on feelings but also perhaps to believe that only the young legitimately have such feelings or have them often or deeply — that older people somehow know better (or, depending on your point of view, are not so lucky) unless one is like a "dirty old man" or some fellow in his "second childhood" or off his rocker who becomes "infatuated" with a young girl. In a sense, these two beliefs go hand in hand, for people who expect feelings to be the main factor or bond in relationships, if they try to remain monogamous, must suppress or ignore or try not to have strong or loving or romantic feelings for other people. One can get good at that with practice, and therefore, many older people do not get feelings of attraction they might otherwise. Further, if one has had some relationships that did not work out very satisfactorily, even though there were strong feelings of attraction involved, and if one still thinks attraction should be enough for relationships to work out satisfactorily, then it would be easy to see that, having been burned once or more, one might find it harder to have feelings of attraction for others. But my answer in both cases would be not to give up having feelings of attraction, but to give up expecting so much from them and to give up behaving solely upon one's feelings if and when they do occur. Feelings are, and should be, an important influence to action but not the sole guide. To expand on a comment by Antoine Bret, the first sign of passion need not be the last of wisdom; and the birth of wisdom need not signal the death of passion.

I think it is not that difficult for most of us to become very attracted, romantically or in other ways, to other people; but we need not expect a relationship to ensue or flourish just because of those feelings. One can relish the feelings without telling anyone, even the person who is the focus of the feelings. [Goethe, *Wilhelm Meister*: "*Wenn ich dich lieb habe, was geht's dich an.*" ("If I love you, what business is it of yours.") (cited in Roberts, 1940, p. 469).] Or one might tell that person they are attracted to them (intellectually, sexually, romantically, however) or smitten by them without thereby seeking or needing to become lovers or have a fuller relationship in case that is not feasible for some reason or other. The other person might be very pleased just to know you care about them — as long as neither of you behaves unreasonably or have unreasonable expectations or demands just because of the attraction. (One or both may be married or there may be aspects of the relationship, other than feelings, that might make it not such a good one.) There is no tragedy in liking someone very much whom you may rarely see or whom you simply worship from afar or to whom you try to be good in whatever small ways you can. In fact, that can be a very moving and heartwarming feeling. It is simply nice to have caring feelings about someone else, even if they are not returned or if nothing "further" can be involved in the relationship. The trouble only begins if one suspends one's life or lets it be ruined because one wants to act inappropriately on those feelings and/or have them returned in order to be appreciated.

In July 1974 *Ms.* magazine, Barbara Grizzuti Harrison, in her article "Is Romance Dead?" (her answer is it is not, or at least it does not have to be) describes quite poignantly her "emotional backlash" against romance (either sense fits — exciting or general) after experiencing the crashing, stultifying blows when falling from the heights of romances that did not end well. She and other women like her were the "pallbearers"; romance was dead. Or, echoing Philip James Bailey in *Festus*:

"I cannot love as I have loved, And I know not why. It is the one great woe of life To feel all feeling die." (cited in Roberts, 1940, p. 464)

Her article vividly deals with the problem (or evil) of a woman's giving up her own identity because of her romantic feelings for a man through whom she may live vicariously. "I know a woman, an artist who married an artist (and immediately put her paintbrushes away and became her husband's model — so much for self- fulfillment), who daydreamed, when her marriage went flat, about how wonderful it would be to be married to a photographer- writer she knew; in her fantasy, the sum of her joy was always to be at some airport, waiting for him to return from a glamorous, exciting trip; she basked in his reflected glory."

Harrison then goes to point out that romance needs not suffer for some women simply because in the past these women have mistakenly let it consume their identities to work ill on both themselves and their relationships. Correct; but this is just one area in which people tend to give their all to the feelings in the belief that the feelings will also give rise to joys and goodness. Feelings just don't always do that. And one need not just look at the Harrison kind of case, that of abandonment of the woman's self-identity and self-fulfillment. One can look at the Streisand- Redford case, where they each did or tried to fulfill their own goals in life, but that course too caused conflict and wreaked havoc in the relationship. And you can look at relationships in which one or both parties are selfish, with perceived different self-interests, and so things cannot work out. And this can be serious even over such mundane problems or disagreements as to which television programs to watch or how to spend an evening or a few dollars. Or it can be over one's being an early riser who wants a conversational company with the other who is — a slow, late, or meditating

riser, who likes their first words in the morning to be “goodbye, dear, see you later.” We do not have to have personally shattering problems, such as loss of identity, in order to get into severe problems in a relationship. That is why having sensitivity and knowledge of ethics and understanding of fairness, as well as some important shared joys and satisfactions along the way, are so important in working out a full, lasting, and loving relationship. Feelings of attraction or romance alone just won’t do the job, at least not also without luck.

Yet, mistakenly letting romance suffer or making yourself unreceptive to romantic feelings as you grow older and more experienced is to throw out the baby with the bathwater. It is not the having of romantic feelings that cause trouble in relationships, but the lack of other necessary ingredients with them — lack of areas of satisfaction and goodness, and/or lack of ability to resolve conflicts that cause or reflect areas of dissatisfaction or harm. The solution to having romantic feelings that result in bad relationships is not to kill romance but to cultivate goodness and satisfaction in relationships that are romantic and to behave appropriately in those romantic relationships that cannot be good enough or joyful enough to pursue beyond a certain, non-harming involvement.

I agree with Harrison’s conclusions that romance is not dead. I also think that for people who like people, who are open to them, and who are open to their own feelings, romance or some sorts of attraction are not very difficult to experience. The problems arise when we make moral or behavioral errors about how to act toward others when we have some feelings toward them. And problems arise when we develop irrational and harmful expectations about how others should feel or behave toward us because of our feelings toward them. Just as it would be absurd to hit people just because you might not like them, so it is equally absurd to sleep with someone or to marry someone or to try to seduce someone just on the basis of your having some feeling of attraction toward them, without considering any other (satisfaction or ethical) aspect of the relationship. We should learn to understand our feelings and to put them into perspective or into context in a relationship so that we can make more enlightened decisions about what they, and other aspects of the relationship, dictate or recommend as proper actions. Even in cases where feelings are necessary requirements for an action (such as attraction or passion might be for good sex), they seldom are sufficient reasons for it.

So I think it is proper, and not altogether far from normal usage, to think of infatuation as a relationship involving feelings of loving attraction without very much satisfaction or goodness existing or likely to continue to exist. Where I depart perhaps from normal usages is in my belief that this can happen at any age and designate a relationship that has endured — perhaps one that in common usage would be described as strong and lasting bonds of affection rather than as infatuation. Nevertheless, what keeps the relationship from being full, loving one is that there are important other ingredients (satisfactions and goods) missing.

If one thinks of a relationship’s further pursuit and enlargement as being justified not only by the feelings involved but also by the amount of good and joy or satisfaction that it brings to the people involved, then one might call love, not just attraction or infatuation, but “justified attraction” or “justified infatuation”. Attraction alone would be just infatuation. To be love, there must be attraction along with goodness and satisfaction for (and from) each other; love is justified infatuation.

Who Receives the Enjoyment and Benefit

I have said that for A to love B, it must be B that satisfies A and is good for A, rather than A that satisfies B or is good for B. In short, the loved one must be good for the loving one, rather than, as most people seem to think of it, the other way around (though, of course, in a mutually loving relationship both, on my definition, will be good for each other). Part of the reason for that is that it seems to me we would want to say A is infatuated with B (rather than in love with B) if A were the one with strong feelings who was also doing all the good things for B and not deriving much good from B. The lament that “you can’t be in love with him (her) because he (she) isn’t any good for you,” seems to me to have a point beyond just that you cannot or should not have strong feelings of attraction toward him (her), because of the way he (she) treats you. Obviously people do sometimes have strong feelings for those they should not — that is, even when having such feelings is unreasonable. We justifiably say then such feelings are not a sign of love but of folly, loneliness, self-deception, senility in second childhood, or hormonal imbalance. We may say A is not in love but in lust or in heat. We would reasonably say such feelings are blind or crazy or only infatuation, not love — whether they last or not. Some people are inexplicably attracted for a long time to someone who is bad for (and often, to) them.

Take the soppy-dependent housewife case — where she is attracted to her husband, does good for him in some ways at least, and gets satisfaction out of it. I don’t want to say that she loves him, though we might want to say she is certainly crazy for him, or self-sacrificing for him, or addicted to him, or dependent upon him. I want to say her attraction is not one of love, but one of naive sacrifice or dependence. It is like that of naive young people who are romantically attracted to the first person who shows any

interest in them at all and who then think that they are in love and who think the other person is good for them, regardless of how good or ill the other person actually is for them. Regardless of intentions, this is not love, however romantic it might be; it is only infatuation or loving *feelings*, perhaps accompanied by some amount of joy or satisfaction, particularly at having those feelings, but accompanied by no, little, or insufficient goodness. Love is beneficial for a lover, not sacrificial — at least not continuously, unnecessarily, wastefully, and wrongfully sacrificial. Sacrifice is sometimes necessary for a (love) relationship, but not this kind of sacrifice. Needless, pointless sacrifice is not love.

It seems to me that if someone to whom you are attracted makes you very happy, but you recognize they are not otherwise very good for you — no matter how attracted to you they are, how happy you make them, and how good you are for them — it would be foolish for you to say you love them. It would be better to say you really care for them and about their well- being, and that they make you happy in many ways, but that you cannot say you love them, since you do not feel the relationship is good for you — even though they love you, and even though they may try or want to do what is right for you.

Love's Growing (or Diminishing)

Though I wrote earlier that love could increase through an increase in attraction, goodness, and/or joy in the relationship (without some equal or greater decrease in one or two of the other areas), there is a difference between when the increase is in attraction and when it is in goodness and/or joy.

First, though an increase in any area may accompany or even cause an increase in another (that is, more joy or goodness may cause greater attraction or vice versa), it need not. So what I mean by love's growing through an increase in goodness or satisfaction for one or both in the relationship is not necessarily that there is an increase in feelings of attraction, but that the existing feelings of attraction are more worthy of being called loving ones — the feelings are more ones of love than of just infatuation.

I point this out because it is easy to understand how love increases when the feelings of attraction for the partner increase; but it is not so easy to see how love has increased when the feelings perhaps remain the same and just the other dimensions improve or increase. In such a case, the relationship has improved and (both by my definition and, I think, by intuition or common usage) is a more loving one, though the feelings of attraction are not by themselves more loving. I would think it entirely reasonable in ordinary usage, as well as by my definition, for a woman, who has matured from being a soppy-dependent housewife into being a wife who has a more equal and more equitably beneficial relationship with her husband, to be described as more in love and less infatuated and dependent than she was before, even if the amount and kind of attraction she feels for her husband may not have changed substantially.

Love and Friendship

The other side of the coin then is a relationship in which there are joys and goods to some (even large) extent, but little if any feelings of attraction (other than perhaps just "liking"), particularly, little, if any, romantic or loving feelings. This seems to me to characterize friendship. (Or if the friendship has a feeling of attraction, it is simply a different feeling from feelings of love or romance. How it feels to be a friend is different from how it feels to love — regardless of how much else in terms of enjoyment and benefit is similar in the relationship.)

Many of us know people with whom we get along perfectly well, with whom we perhaps enjoy being or doing some or many things, people we respect and like, and people about whose well- being we care, but people for whom we feel no particular (romantic) attraction. There may be no particular reason for the attraction's being missing; it just simply is not there. Or maybe the other person reminds us of a sister or brother for whom the thought of romantic attraction is unthinkable. People who have no homosexual interests find no romantic or sexual attraction for others of their gender no matter how satisfactory or enjoyable or good the relationship is; hence, they will simply be friends with whomever they share such good relationships.

This in no way belittles friendship. To find another who is good for you and a joy to you (and for whom you reciprocate these qualities) is no small achievement in this world and no small treasure. And since one has little control over what or whom one finds attracting, there is no reason to feel shame at not finding another alluring nor to feel hurt at not being found alluring to another. Romantic feelings are often very capricious and very elusive. They often come where there is no other good in the relationship (hence, infatuation) and they just as often do not arise where there is some (even great) value (hence, friendship).

Now some adolescent, immature, or insecure people might often acquire romantic feelings for someone just because that person has been friendly or good to them, even in just a somewhat superficial or normally polite way; but many times people simply accept these good things as friendship or as normally polite behavior without thereby feeling attraction or feeling the need for there to be attraction. I said earlier that attraction can be independent of the amount of joy or other good in a relationship; and I think friendship is one case in which it is, a case in which attraction does not exist though joys or other goods do.

I have a friend who once wrote me a troubled letter about no longer being able to find the magic in relationships. She wondered whether she should "settle" for a fellow that she was dating whom she liked and with whom she got along well. He loved her. But she did not feel the "magic". Yet her previous marriage to a fellow she had felt the enthralling magic of enchantment with, and for whom she still felt some magic, had not been good for her at all; and her ex-husband still caused her grief when he was around, even though she still cared, in the way of feelings, for him. Perhaps magic was not the answer. Yet she hated to think love had to be dispassionate and just logical and simply nice.

I wrote to her that, of course, one often got into difficulty by letting only one's feelings be his or her guide. (The song "Smoke Gets In Your Eyes" said it well enough:

"They asked me how I knew my true love was true. I simply replied something here inside cannot be denied. Now laughing friends deride tears I cannot hide." (Harbach, 1933)

But that did not mean one should then repress or ignore all feelings, nor that one should not expect them to be in some relationships. Love without the "magic" for her[1] is not love but friendship. And friendship, no matter how rare nor how valuable it is, is simply not the same thing as love. If she was looking for love and magic, then she should keep on looking. I advised she not settle for anything, since from knowing her it seemed she would be unhappy if she did, but I told her that magic alone was not enough, as she should well know from past experience, and that perhaps in time it would even arise in this relationship she had written about that was otherwise so good. After all, romantic passion sometimes does occur even in the best of relationships.

Further, I suggested she not worry too much about not being able to seem to find romance so easily any more, since after all, now that she was older and wiser, and had been so badly burned one time, she did not simply any longer fall head over heels for the first good looking body attached to a smile that said hello in her direction, as she may once have. Youth may more easily find romance, may more easily find the magic, but that is often only because youth is often so much less discriminating. It is so much less difficult to find romance than it is to find romance with the right person in a good and satisfying relationship. And the latter is what one seeks as one gets older, or after one has had bad experiences. That is what she sought now; that is more difficult to find. She should not despair then that magic was less available than when she was younger, more naive, and more easily impressed.

A Little Bit of Love — Combining Some Infatuation and Some Friendship

Sometimes one will have an attraction for a friend or get along well with (enjoy and benefit from) someone one is attracted to, yet one will feel like they are not "in love" or will feel that something is missing. I think what is occurring in these cases is that though there are some attraction(s), some benefit(s), and some satisfaction(s), there are not enough or enough of the right (or important or desired) kinds for one to want to marry or live with the other one, devote a lot of time and energy to the relationship, and/or pursue the other person monogamously, excluding pursuing another potential, and potentially more fulfilling, relationships.

In some cases, the balance in these relationships is weighted more on the side of the friendship aspects (enjoyment and goods) then on the infatuation or attraction part, in which case one seems to feel some attraction, affection, or desire for a friend. In some cases, the balance may be more weighted toward the attraction, in which case one feels somewhat more than just infatuation. In some cases, the balance may be fairly equal, and both aspects — friendship and infatuation — combining attraction, joy, and benefit may even be fairly strong. In all such cases, then, by my definition, there is a little bit or even a considerable bit of love, just not enough to make one want to commit to, or desire, an exclusive or more fully involved or more fully active relationship.

Just as there can be degrees of attraction, enjoyment, and satisfaction, there can be degrees of love; and there can be love that is weighted more strongly toward one or two of the three aspects instead of being equally divided among all three. In some cases, one might even be able to more or less measure the degree and/or kind of commitment, involvement, exclusivity, time and energy one wants to devote to the other person.

I need to emphasize this "for her", since many people have loving feelings or feelings of attraction without feeling (or needing to feel) excitement or a "tingle" or the "magic". They can have romance in the general sense without requiring it in the sense of

aroused, exciting, passion.

Key Takeaways

- Love involves attraction (particularly ‘romantic’ attraction in romantic love, as distinguished from brotherly, sisterly, maternal, paternal, friendly feelings or love) but it also involves more.
- The difference between infatuation and love is not about their duration but about whether there is more valuable substance to the relationship than just the attraction.

Key Terms

- ***Infatuation*** is a romantic attraction without sufficient goodness or satisfaction in the relationship to qualify as being love.

Review Questions

- **Question**: What is the significance of the analysis of love (in this book) on Antoine Bret’s statement: “The first sign of passion need not be the last of wisdom; and the birth of wisdom need not signal the death of passion”?
- **Question**: What are some typical causes of trouble in relationships that have merely attraction for each other?

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7.2.2: The Meaning of Love

Learning Objectives

- Examine the plausibility of the initial definition of love and the three elements that can help one analyze and evaluate all relationships, whether they involve love or not.



Watch this video or scan the QR code to see what other people feel that love is.

With the previous chapters about feelings, satisfactions, and ethics as prologue, I will try to show that it is plausible to mean by "A loves B" that:

1. A has strong feelings of attraction in general, or to some reasonable extent, for B,
2. A, in general or to some reasonable extent, enjoys B (that is, A in general or to some reasonable extent is satisfied by B and by the things B does), particularly in areas of psychological importance (or meaningfulness) to A, and without particular disappointment or dissatisfaction in other such psychologically important (meaningful) areas, and
3. B is good for (or to) A; that is, the things B does are good for A. [This last condition will be stated more correctly after the section on ethics, but for now, this is a sufficient statement of the ethical content of a love relationship.]

To say then that A and B love *each other* is to say that 1, 2, and 3 are reciprocal — that A and B both have strong feelings of attraction for each other in general, that they satisfy (or enjoy) each other, and that they are good for each other.

Some Remarks About The Analysis

Notice that the criteria are stated in terms of what actually is the case, not in terms of what A or B, or anyone else, believes to be the case. Insofar as one believes A and B are attracted to each other, satisfy each other, and are good for each other, one will believe A and B love each

other; but if one is wrong in any of those beliefs, one is then also wrong about their loving each other. This is true even if the believer is A or B themself. Certainly, people can be mistaken about whether the above conditions actually are met and whether they are in love; and many times people have said things like: "I thought I loved him, but I know now I was just infatuated." One easy way someone might mistakenly believe they are in love is to incorrectly think the other person is good for them just because they enjoy that person's company and are deeply attracted to them. Hence, in the kind of case mentioned earlier where a parent and child disagree about whether the child really is in love with someone or not, a parent might point out specifically why he or she thinks the other person is not good for the child. Or the child may be unknowingly neglecting things important to its well-being because of the relationship. The

parent would have to point out what this is specifically and hope the child will understand it and believe it in order to see the point. This, of course, is not always easily accomplished; but it at least gives better focus to the disagreement than just continually simply disagreeing about whether it is "really love" or not. In such a case, there is not a disagreement about what love is; there is a disagreement about whether it exists — whether the conditions that constitute it all apply. The child believes the conditions (1-3 above) for love are met; the parent believes not all of them are. The discussion should be focused on the particular condition that is the center of disagreement. Just (incorrectly) believing the conditions are met does not make them so, and does not mean you are in love; it only means you (incorrectly) think you are.

The analysis puts love on a continuous scale or on many different continuous scales — one scale for the amount of each kind of attraction-aversion, satisfaction-dissatisfaction, and benefit-harm, with "sums" or overall balancing points or impressions in each of

these areas; and I think love is that way. We do think in terms of loving one person more than another, of love growing, of love becoming stronger or weaker or fading or dying out. By my analysis or criteria, "A loves B more than A loves C" any time that:

1. A has stronger feelings for B than for C (and/or, more strong feelings),
2. Any time that A is satisfied more by B than by C (and more in areas of psychological importance to A), and/or
3. B is better for (to) A than C is; the things B does are better for A than the things C does, [as long, of course, as there is not some equal or greater loss in one or both of the other two areas]. Likewise, A's love for B can grow or diminish in time as there is growth or diminution in the feelings of attraction, satisfaction, and goodness of the relationship.

When one aspect of the relationship increases and the other decreases, it is then perhaps difficult to say whether the love has grown or not. For example, A might have stronger feelings of attraction toward B than before, but might find fewer satisfactions in the relationship or might find fewer things good for himself or herself than before. Just in the area of satisfaction alone, A might become more deeply satisfied in some areas over time but have fewer different areas of satisfaction than before. By my criteria or definition then it might be difficult to say whether the love is stronger or weaker, but this is all right since it reflects the difficulty one has in the ordinary usage of the term love as well anyway in such cases. Yet even then my criteria or analysis has the benefit of allowing specific ideas and communication about how the relationship has changed (or how different relationships differ). And it also allows for greater specific description in comparing relationships (to others, or to themselves through time) as to which is more loving when one person loves the other more but the other loves the first less.

In such cases, nothing is lost by my use of the word *love*, but much is gained by conceiving and communicating about relationships in these primary aspects of feelings, joys, and benefits, since one can say precisely how a relationship has changed or how two relationships differ (for example, more or stronger attraction of a certain specified sort, but less joy of a certain specified sort) and thereby use that to point out why it is difficult or impossible to say whether love has grown or diminished or in which relationship it is greater. In many cases of marriage, for example, certain kinds of sexual attraction may diminish over time for one partner while emotional attraction or a different kind of sexual attraction may increase.

In the analysis, I use the word ***strong*** and the phrases "in general" and "to some reasonable extent". It is difficult, if not impossible, to say how much attraction, satisfaction, and/or good there must be. Certainly, there has to be more than just a slight attraction, slight satisfaction, and slight goodness (and the more, the better) for saying there is love. There are other concepts in ordinary language that are like love in this regard of becoming less well defined in borderline cases — how much money is required to be rich, how little hair does one need to be bald, how little dirt does laundry need in order to be clean. It is easy to distinguish the very rich from the very poor, the very hairy from the very bald, the very loving from the very hateful. In many areas of classification, borderline cases may be difficult to distinguish or classify, but not all cases are borderline, and so distinction and classification are often possible and useful. But more useful than classification in cases, such as the amount of love in a relationship, is being able to specify in what ways love exists or what more is needed or is important to improve the relationship or make it more loving, perhaps particularly if some purpose like marriage, living together, sex, child-bearing, or divorce is under consideration.

Love Changing

There are a number of ways to satisfy a person more — (1) doing more things that are satisfying, (2) doing the same (number of) things but in a more satisfying way, or (3) satisfying them in more areas of psychological significance or importance (meaningfulness) to them, (4) satisfying them more deeply in such areas, or (5) any combination of the above, without some equal or greater decrease in one or more of them. (Similar, but opposite, with regard to less satisfaction.) My analysis does not make any distinctions for comparing amount of change or amount of difference in love when comparing couples, or one couple at different times, when the depth of satisfactions is different from the number of satisfactions; but I do not think this is any different from our inability to make intuitive comparisons in such cases ordinarily. If there are two couples, one of which enjoys doing more kinds of things together, but the other of which, though doing fewer things, enjoys them more, we do not often find it necessary or even possible to describe one as therefore being more loving than the other. Or the same if one couple through time changes in a way that has them doing fewer satisfactory things together but has them enjoying more the things they do together.

Likewise with regard to improving or impairing (the goodness of) a relationship or in comparing the goodness of two relationships. It is difficult or impossible to say whether one relationship at different times is better or worse, or whether one relationship is better or worse than another, when the difference is between doing more good things that are each less valuable or fewer good things that

are each better. At least this analysis lets you describe the differences quite specifically, even if you cannot use the simplistic general label “better” or “worse”.

With regard to the change of feelings, one may develop deeper (or less intense) feelings of one sort toward another, or one may develop more (or fewer) kinds of feelings of attraction (such as intellectual, emotional, magically romantic, sexual, brotherly, maternal, paternal,…).

Or some sorts of attraction may grow in intensity while others diminish. As in the cases of joys and other benefits, when changes occur in opposite directions at the same time, for example, more emotional attraction but less enchantingly romantic attraction, it is not particularly easy or possible to compare, simply in terms of the word *love* alone, whether love has grown or diminished. Similarly, it is difficult or impossible to compare which is more loving of two different relationships where the only difference is that one contains deeper feelings than another which contains more different kinds of feelings of attraction.

Still, it is in this area of love’s changing — or in comparing how a relationship is with how it could be better or with how it should be — that the analysis is the most fruitful, I believe. It is not so important that we are able to identify a relationship as one of love or not as it to be able to tell how to improve a relationship or how to make it more loving. It is important that we are able to perceive in what areas (goodness, joy, attraction) our relationships are strong and in what areas they are flawed or weak. And it is important that we are able to understand in each of these areas what specific kinds and quantities of attractions, joys, and benefits exist, especially ones that are important, and which ones are missing, especially ones that are important.

In writing before of being attracted “in general”, of being satisfying “in general” or “to some reasonable extent”, and of being good to one another, it was certainly difficult or impossible to specify how frequent or intense attraction and satisfaction should be or how much dissatisfaction or bad can be in a relationship for us to (still) call it love. I think there are extremes we would clearly want to call loving or unloving relationships. Some of the middle regions we might hesitate to characterize. The idea then of the continuous scales for each kind or area of satisfaction-dissatisfaction, attraction- aversion, benefit-harm is more important here. For it is usually not too difficult to point out how a relationship could be more loving — could be better for the partners and/or more satisfying and/or more full of feelings of attractions. It is easier to specify what there is and what there could be and that there should be in terms of the kinds, quantity, and balance of satisfaction, attraction, and goodness than it is to specify whether there is sufficient satisfaction, goodness, and attraction to call it love. Labeling a relationship as being a loving one or not is not as accurate or as meaningful in many cases as pointing out what kinds, frequency, and depth of attractions, satisfactions, and goodness it has and what kinds it lacks, and how important this is. Simply to label a relationship as one of love or not is not to be as clear as one could be about it, nor really to provide much specific information about it at all.

It is less likely to point out problem areas or areas of potential improvement and it is not likely to help people be able to make a relationship become more loving when they want it to be. It is generally better simply to the state where on the different ladders or continuous scales of satisfaction, attraction, and goodness the relationship is, where it is going, and where it should be or where you would like it to be. This framework for viewing relationships and thinking about love will allow problem areas or areas of disagreement to be more easily spotted, communicated, discussed, and, where necessary, debated.

No longer need there be unproductive, idle disputes over whether she loves him or not; loves him enough or not; or whether their love is strong enough to get them through some difficult time or other. One will not have simply to introspect about how one *feels* to answer such questions. There will be more valid, more easily answered, more fruitful questions to ask; for example, how strong are the feelings of attraction; in what areas; in what areas (sexual, intellectual, physical, etc.) are they lacking; what kinds of pleasure or joys does each lover get; how strong are they; how important are they to them; which kinds are lacking or weak; how reciprocal is the relationship in these terms; what areas of joy are likely to dwindle or increase with time and probable circumstances; how is each person good for the other, or bad; how is that likely to change in time or different likely circumstances. These are the more important kinds of questions and yet are also more easily answered than “Do I love him/her?” especially for determining such things as marriage, childbearing, continued dating, steady dating, living together, having sex, etc.

The question of whether to marry or not can be asked, not just in terms of “Do we love each other enough?” but in the more realistic and fruitful questions of, are we good enough to each other, do we make each other happy enough, and would we under the conditions of living together or having children or spending all the time together married people often do. What would we need to improve along those lines? Could we improve that? Are we attracted enough, satisfying enough, and good enough to each other on a day-to-mundane-day basis to make marrying worthwhile? How important is it to get married versus continuing unmarried, or

continuing to wait to find someone with whom one might have a better or more loving relationship? What are the odds of finding such a better relationship at this time in one's life? Are the odds worth the wait? Would a possibly temporary and/or childless marriage be beneficial at this time given our goals, wants, and the quality of the relationship? What are the legal differences concerning things like estate inheritance, etc. between being married and living together? The emotional differences? Etc., etc., etc.

I have two friends, now married, who lived together for four or five years before that. At first, they were both afraid of marriage for different reasons. Later, she wanted to be married, but only if he wanted to. He sort of did but inertia seemed to keep him putting it off. They both made fairly good salaries and had a number of joint assets, yet those assets were not in joint names, and neither had a will or agreement listing who owned what or in what proportions. Luckily nothing happened to either of them before they married but it seemed to me that their situation is one that marriage simply made better — not in terms of joy or emotions, but in terms of doing things that were right for each other in purely legal terms. They probably could have effected this sort of change through contracts, wills, and accurate record and receipt keeping, but the marriage was an easier way and there was no particular reason in this case other than inertia and the unwarranted fear that the relationship would somehow change in other ways if it were legalized. I suspect that there are not even hospital family visiting privileges or decision-making rights for long-time lovers not married. In their particular case, because they had, after the first few years of living together at least, every intention of living just like married people for as far in the future as they could see, it seemed better and simply easier from a legal and societal viewpoint for them to marry. Here was a case where just talking about "love" would not have been particularly helpful in deciding what they should do; they knew how they felt about each other and how much they enjoyed each other; what they needed to consider was how fair they were being toward each other, particularly in case of accident, illness, or death.

The Universality of This Analysis

This analysis is meant to apply to *all* relationships and all love relationships, not just ones that are romantic (in the general sense). Certainly, there are appropriate and right or wrong ways for parents to treat children, children to treat parents or brothers and sisters, for people to treat friends or even strangers, employers, employees, customers, salespeople, doctors, patients, clients, etc.

Ethics concerns some of this; emotions do also, for how we feel about people often determines some of the appropriate behavior toward them and some of the kinds of joys we can derive. It is a legal and/or biological link that makes someone, say, our child, but it is a kind of feeling we have about a person that makes us feel about them in some maternal or paternal way, or not, whether they are our child or not. Being a spouse is a legal designation that may or may not coincide with being in love. Marriage and love can each be a contributing factor toward determining what is proper behavior. One has obligations toward even a spouse one may not love and loving someone in some cases justifies treating them in a special way that would otherwise be unfair to others. Even incest prohibition involves both an ethical or societal and legal component as well as an emotional component; and it seems to me that the legal or cultural prohibitions against incest (which are different in different cultures to some extent) do not prevent it as significantly as the fact that it is normally very difficult to be sexually attracted to someone whose diaper you used to change and whose nose you had to keep wiping, or to someone who made you eat peas, come in when you wanted to stay out, go to bed when you wanted to stay up and get up when you wanted to sleep in, or with a sibling who provided, as you grew up together, numerous disagreements and disappointments. That so many of the stories in literature which deal with romantic or marital incest, such as Oedipus, concern partners who do not know their biological relationship because of early separation, is probably not accidental.

At any rate, all relationships can be analyzed in terms of feelings, joys, and ethics, so though I will be dealing in many cases with romantic relationships, what I have to say will often not be limited to them. There are right and wrong ways to treat people whatever your (lack of) relationship to them (and some of these ways are common to all relationships) and certainly there are joys and satisfactions or dissatisfactions and grievances or grief that people can give each other no matter what their legal, biological, or social relationships are. Most of the kinds of things I will have to say will be generalizable or transferrable though many of the particulars will concern relationships where the feeling of attraction is primarily romantic (in general) in nature.

And by romantic in general, I do not necessarily mean to imply nor to deny the existence of feelings that are passionate, magical, or stirring, but simply to distinguish the kind of love people have that is not parental, brotherly, etc. Romantic love in this (general) sense may involve attractions that are emotional and/or sexual and/or intellectual. They may be of great excitement and passion or they may not be. It is meant to embrace passionate lovers as well as those people whose love for each other is of a more sedate or quiet nature. All are the kinds of relationships with which so many magazine articles, romantic movies, plays, stories, and advice columns are concerned.

W. Newton-Smith, in an article called “A Conceptual Investigation of Love” in Alan Montefiore’s *Philosophy and Personal Relations*, talks of paradigm cases such as Romeo and Juliet, Abelard and Heloise, and Caesar and Cleopatra to describe the kinds of love relationships he is talking about. I am not that sure I know how these people felt or acted toward each other but I think Newton-Smith gets the point across that he means to talk about the kind of relationships that I call “romantic” in the general sense. However, he goes on to make what I think is an error in trying further to describe this kind of love in order to make clear he is not speaking of cases of parental or other sorts of non-romantic love. I think his paradigm cases perhaps mislead him to this error, but it is an error many people make without that excuse. He writes “… so attention will be confined to cases of love which involve sexuality … sexual feelings, desires, acts and so on. Thus the stipulation excludes from … consideration cases of fraternal love, paternal love and other cases not involving sexuality” (Montefiore, 1973, p. 116) He later says that sexuality can serve as a criteria mark for distinguishing the sorts of paradigm cases he mentioned earlier.

Even with his later refinements of this criteria, I think he has made an error, has eliminated too many of the kinds of relationships he has wanted to discuss, and has injected sex into the analysis of relationships far too early and made it far more important than it needs to be or is. Certainly, I do not mean by romance all those or just those attractions which are sexual in nature. Some romantic feelings may include some sort of sexual desire, but not all do; and even of those that do, the desire may not be for intercourse but perhaps simply kissing, hugging, or holding hands.

For example, most “young love” or first love may involve wanting to be around the other person or to be with them, but may not involve necessarily wanting to be in a physical embrace, and certainly does not always involve wanting to have intercourse or genital stimulation. Such a thought may even be frightening or seem stupid or repulsive to many young people. And it was not long ago (if we are even past it yet) that many people thought that people they did not love were more properly the object of sexual advances than those they did, which if even a wrong, perverse, or perverted value, nevertheless helps show there is a difference between romantic attraction and sexual attraction.

Further, certainly one can have a sexual attraction for a person one cares little about romantically or in any other way. And the attraction can be a real one or just a fantasy one. By a fantasy one, I mean one that one knows is obviously better just to think about than actually to want to fulfill — one that is more fun to think about thinking about than to think about actually enacting. Sexual attractions or fantasies could be about almost anyone — a movie star, a teacher, a person seen walking down the street. They do not have to be about someone you know personally or someone with whom you would like to become romantically involved. Sexual attraction and/or lust are not always indications of love.

And, conversely, there are numerous relationships that seem to me fully romantic loving ones where two people perhaps like to cuddle closely without any need or desire to have (further) sexual stimulation. In some cases that might even spoil things, or may just be a temporary desire that, once fulfilled, allows them to get back to the primary fulfillment of just holding each other and perhaps talking and cuddling. Cuddling, in this case, seems emotional in some way without seeming to be properly described or thought of as sexual. The desire is not even sexual. Some older people with lowered sexual drive, some young people with low sexual drive to begin with, some perhaps handicapped or impotent or even frigid people may certainly love others romantically and/or even want some close cuddling without in any way having sex as a primary desire or sexual play as a primary goal or pleasure.

Again, intellectual stimulation and attraction or artistic stimulation and attraction might be the primary attraction between two people without sex being that important or even necessary. Yet such people might have full, romantic, loving relationships.

Finally, even in a loving relationship where sex is an important attraction, goal, or feeling, still there might be quite loving, romantic, tender, wonderful feelings and attractions other than sexual desires, or after the fullest of sexual experiences so that these feelings are themselves not feelings of sexual desire. After one has fulfilled all the physical or sexual urges one can possibly tolerate (assuming for most people there is some satiating limit, at least at a particular time), if one still wants to be close to the loved one and one still wants to touch, cuddle, talk, go to a movie, have dinner, go for a walk on the beach with, or write a poem to, the loved one, then the primary or paradigmatic feeling then is not one of sexual attraction.

I will say more about sex later. At this point, I only want it understood again that by romance or romantic feelings or romantic attraction, I am in no way necessarily implying or necessarily meaning sexual attractions, feelings, or desires. I am not ruling them out, of course; but I certainly do not think they are (always) a precondition for, or “criterial mark” of, love or romance, or even of infatuation.

Key Takeaways

- Seeing that **all** relationships involve (potential) emotional, satisfaction, and ethical aspects

Key Terms

- ***Love changing*** suggests that there are a number of ways to satisfy a person more — (1) doing more things that are satisfying, (2) doing the same (number of) things but in a more satisfying way, or (3) satisfying them in more areas of psychological significance or importance (meaningfulness) to them, (4) satisfying them more deeply in such areas, or (5) any combination of the above, without some equal or greater decrease in one or more of them.

Review Questions

- **Question**: What are 5 ways to satisfy a person more?
- **Question**: Are sexual attraction and/or lust always indications of love?

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7.2.2.1: Care and Concern

Learning Objectives

- Describe when, and in what ways, care or concern matter.



Watch this video or scan the QR code to learn how you can show empathy in a relationship.

To some extent, ***care and concern*** could be treated under feelings but they also have something to do with ethics and with how much people try to satisfy each other too.

Perhaps we should care equally about all people, or at least about all good or deserving people, or all potentially good people, but in fact, most people do not care about all others equally. They have particular people about whose happiness and or well-being they are concerned; people whose happiness or well-being they want to preserve, promote, and see preserved and promoted.

Sometimes, however, people are jealously protective about who promotes and preserves another's welfare; they want to be the (only) ones to do it and to get credit for it. If someone else does good for or satisfies a loved one, such people may be hurt or may question the motives or intentions of the benefactor, or they may feel their loved one's affections are being alienated. Sometimes such feelings are well-founded, but often not.

For now, let me say about jealousy that it is unwarranted if its cause is not something that detracts from the original relationship, but it is reasonable if its cause is something that undeservedly detracts from the original relationship or promotes the well-being of the one partner only at the undeserved expense of the other. (I say *undeserved* because there are some cases, such as where one partner is abusing the other, that someone — whether friend, counselor, lover, or whatever — *should* intervene in the relationship to promote the victim's well- being even at the expense of the jealous "lover.") For example, I think one has a right to be angry or hurt if their partner stands them up or leaves them to be otherwise avoidably lonely or to do some undesirable task alone that was supposed to be worked on together while the partner has a good time with some third person or group of friends. It is not that the stood up person has a right to resent the happiness of the offending partner, but that he or she has a right to resent that it happened at his or her undeserved expense. More about jealousy later, however.

My main point about care and concern is that they are, except in certain circumstances, no substitute for proper actions — actions that promote or preserve well-being and satisfaction, regardless of whether they are accompanied or brought about by care and concern or not. If one is ill or drowning, it would be better to be properly diagnosed or rescued by an uncaring computer or robot than to be in the presence of the most concerned person with no medical knowledge or swimming ability. Similarly, in a relationship; in general, good intentions are insufficient when better or more satisfying actions are needed or desired. Just as attractions do not insure satisfying or good actions toward each other, neither does caring or being concerned just by themselves.

I have seen parents who are concerned about their children's well-being but who, in their concern to keep the children happy, actually spoil their children and end up making them less happy and less well off than they would have been otherwise. They give them too much junk food for their health, do not force them to get enough sleep for their health and mental alertness, and do not teach them enough about how to behave properly to let them make and keep friends and make favorable impressions on others. This kind of parental concern for immediate gratification is a short-sighted concern that in the long run is almost as bad as no concern at all. Similarly some adults are so concerned about the immediate satisfaction or happiness of a loved one that they treat their loved ones in ways that are harmful in the long run — harmful for the loved one (as in serving them too many fatty foods just because they like the taste of them) or harmful for the relationship. For example, if one of the partners gives in to the unfair demands of another just to keep peace or to keep the other partner happy, the partner who gives in may be fostering or reinforcing immature behavior in the other and also may be preventing the relationship from becoming a more mature and more equally satisfying one. Care and concern (particularly when they are misdirected, but even when they are not) do not by themselves mean you will act correctly nor promote the well-being of your partner or improvement in your relationship.

One time while my wife and I were discussing installing some sort of wooden flooring in our home, I knew she was disappointed that it was too expensive for us to have it done. I tried to tease her out of her depressed mood by saying that I would do it myself to save money and just hope that it came out correctly and evenly put down. That got a rise out of her (my handiwork usually leaves

more than a little to be desired) and she said we simply would have to wait until a time we could afford to have it done by a professional. I asked “Why? He probably wouldn’t hope as hard as I would!” That got the laugh out of her I had wanted — since obviously care, concern, and hope were not nearly so important in this case as was the skilled competence of someone who would do the job right, regardless of how much or how little he or she cared about it.

Now it is usually nice to have someone care about you or be concerned about your well-being.

And this, coupled with the right or satisfying actions then, is preferable (all other things being equal) to the same activity by people who are devoid of such feelings. Likewise, if no action can help, as in the case of a terminal illness or accident, it is generally nicer to have people around who care or are concerned even though everyone is powerless to help. But even then there are right and wrong ways to behave — for example, excessive hand wringing, crying, or cursing fate may not do the victim any emotional good and may bring her or him even further grief or agony.

Care and concern are certainly nice to have in relationships, but they are not so important, I don’t believe, as correct (good and/or satisfying) behavior. I have intentionally left out of the analysis that for A to love B, A must care about B’s well-being. First, it should be noted most people would probably not want to say that for A to love B, A actually has to benefit B, since one can love another and want to do and try to do what is right for the other without being successful in that attempt. A may not even know what would be good for B, let alone be able to bring it about if he or she did know. But I believe that it is not even a necessary condition for A to (be correctly said to) love B that A even tries to satisfy or do good things for B. I will argue later, concerning Harry Stack Sullivan’s definition of love given in Lederer and Jackson’s Mirages of Marriage, that concern for another is not sufficient for there to be love, other than in some Christian or humanistic or humanitarian sense, if that. What I wish to explain here is that it is also not a necessary condition.

Certainly, it is psychologically normal that if one is attracted to another (and especially if one is satisfied by and knowingly benefitted by him or her) one will want to be good to them, satisfy them, and have them be attracted to you in return. This is simply to say on my terms that if one loves another, one will usually want to be loved in return. But this is not always the case. Even just considering attraction, one may perfectly well be content to be attracted to another without caring about whether the attraction is felt in return or not.

One may also not want to do what is best or most pleasing for one’s partner; an unreasonably jealous lover is still a lover even though he or she may not want anyone else pleasing or helping his loved one, even if that is in the loved one’s overall best interest. (If the loved one prefers having the jealousy of such a partner to having help or satisfaction from a third person, then the partner’s jealously denying the love’s potential joy by the third party actually increases the love’s overall joy. Some people like to have very jealous and over-protective mates; some do not especially appreciate such jealous behavior by their partner.) If a lover had to have his or her partner’s best interest in mind, an unreasonably jealous lover would be a contradiction in terms. So would perhaps even a reasonably jealous lover.

Of course, we could say this; and, of course, it would be easy to add as the fourth condition to the analysis of “A loves B” that “4) A in general wants to or tries to improve B’s well-being and B’s satisfaction.”

But I believe it does not belong in the analysis and would be added incorrectly because (1) I do not think all people require those who love them to care about their well-being or satisfaction, especially if they provide it for whatever reason, whether intentionally or caringly or not (as in the case of someone who loves for their mate to be jealous and over-protective even though the mate is not doing it for the loved one’s own good) (2) I think everyone should care about the well-being of others in general, so that not doing so shows more about what kind of person you are in general than whether you are a lover or person in love or not; (3) I think you can be attracted to another from afar, receive benefit from them, and receive joy from them — in short, love them from afar — without making any effort to have that love returned; that is, without trying to benefit or satisfy the one you love or without trying to have them become attracted to you (or even know you); you are the one loving, or in love, not them; (4) most importantly, insofar as you feel unloved or unhappy because you feel the other person does not care about your happiness or well-being (a feeling usually brought about, by the way, probably because he or she does not make you feel happy or well-off, whether intending to or not), then your happiness is diminished and therefore it is your love for them, not their love for you, that is diminished. It is diminished (and if diminished too far, extinguished) by either of two ways — either in causing your attraction to be diminished (or extinguished) or in causing that attraction to be less (or not at all) one of love, but more one of infatuation, sacrifice, masochism, or something else.

Whatever your attraction is for someone who harms you or makes you unhappy, it is not love and any part of your attraction that is unjustified by the actions or character of your loved one is a part of the attraction that has nothing to do with love. So if your attraction is diminished by continuous dissatisfaction or harm because your loved one does not care about you, you love your partner less, and if attraction is undiminished but you are dissatisfied or harmed because your partner does not care about you, then your attraction has that much less right to be thought of as totally an attraction of love. Insofar as your partner's lack of care and concern (in spite of their being good for you and good to you) bothers you, you are the one who is less loving, not they.

(5) Also consider the following case, called to my attention as a protest to this position by Priscilla Eggleston and Carol Milner. They claim that for a person to treat their mate shabbily, even after they have been told that they are disappointing and hurting their mate, means that they are doing it intentionally and with no consideration for their mate's feelings. "And that is not very loving behavior. How can they say they still love their mate when they treat him or her like dirt!" My response to this is (a) first you want to make sure the treatment really is bad treatment and not just unreasonably disappointing treatment. You don't want to say someone has to prove their love by doing everything their mate wants, particularly if what their mate wants is unreasonable to demand — for example, "if you loved me you would quit playing tennis with your friends." But assuming we are talking about unreasonable or bad, actually shabby, treatment. Then (b) there are still certain cases we could say A still could love B even though A treats B badly. For example, if A has some pathological physical condition, such as a tumor, that causes A to act irrationally and reprehensibly toward B even though A honestly professes love (attraction, etc.) for B, we might want to say A cannot help how he or she acts but he or she really does love B.

Similarly, if A were an alcoholic who had not learned to cope with it; A's alcoholism might be terribly painful to B, but it is not true that if A loved B, A would stop drinking. A's drinking may have nothing at all to do with B and/or A's feelings for B and the value and joy A receives from B. A friend of mine knows a couple where the man continually disparages his wife's intelligence, even in front of other people. He has been told it hurts his wife's feelings, but he is a rather sarcastic and cynical person in general, and he seems unable to stop this for any length of time and he seems to do it naturally, and he also does it more or less about everybody else too. Some people do all kinds of wrong things and act badly, sometimes intentionally toward others, and I do not always understand why they do that. But I think it is often more a problem with their (moral) character (or sometimes with their physiology) than it is a problem with their feelings (or love) or than it is a sign that they do not have loving feelings or even concern for their mate. An alcoholic may feel terribly upset with how his behavior hurts his mate but he/she may not (be able to) remedy that behavior.

Likewise, a person who treats others badly may treat his or her mate badly, not because they do not love their mate, but because, for whatever reason, they do not behave properly toward people. (c) In some cases, a person may have reasonable interests and strong urges that conflict with their mate's reasonable desires. Claus von Bulow claimed that he and his wife fought, not over his mistresses, but over the kind of job he held. She wanted him, he said, to work 9 to 5 seven months a year so they could party with her friends and summer in Newport, etc., and he couldn't get any sort of job (he felt comfortable with) that fit that description. Or if a person does not have the sexual interests his/her partner does but does not want the partner having extra-marital sex, nor is the first willing to compromise somehow about sexually satisfying the partner with the stronger (or more frequent) sex drive, is the second any less loving if he/she discreetly cheats, even if it hurts the other's feelings? In some cases, perhaps not. I doubt you would want to argue that if A loved B more A would want sex more often, and if B loved A more, B would want sex less often. I would not want to argue that was necessarily or even usually true.

I don't know why a person would treat someone they loved shabbily, but I suspect it is not always because they do not love them. But I also do not know why anyone would treat even strangers shabbily; love is not a prerequisite for good behavior or for civility. I see shabby treatment more as a (sometimes physiological problem, but often simply as a) character problem, or moral and moral character problem. It is not necessarily a sign of lack of love on A's part. A may treat B like scum just because A is a scummy person. Or A may just be in a scummy mood and for some irrational reason takes such moods out on B (kicks the dog and abuses the wife and kids after frustration at the office or the unemployment line, etc.). Or A may be testing B's love for her/him or may just be acting badly because "the devil is making him/her do it." There are times one finds oneself saying things one does not want to say — knowing they are hurtful, and maybe even false, statements. One regrets it even before and while one is saying it, yet one says it anyway. "The devil makes you do it" is about the way it feels. (People also say things they know are stupid and that will make them look stupid — and they do not want to say these things, but they say them anyway. Who knows why? I don't.) People do all kinds of bad and stupid things they know better than to do and that consciously they don't even want to do. Why? I don't

know, but I don't believe lack of love has a whole lot to do with it generally. Even not loving someone would not justify nor explain treating them shabbily.

Finally, (6) It is possible that two people can be especially good and satisfying for each other because of their personality, character, interests, knowledge, skills, habits, desires, outlooks, etc. without either one especially trying to please the other or trying to benefit the other — at least no more so than they would try to please or benefit anyone else. This is, I think, what in fact does happen where people fall in love or are in love. It is not that there is some particular effort to please or benefit, though that may occur at times, but it is that satisfaction and good result because of the way each of you interacts and responds naturally to the other. Each of you happens to need, want, appreciate, or is improved by what the other happens naturally or already to do, to have, or to offer. It is this mutual satisfaction and good that are important, rather than whether it was intentional or not, and rather than whether it occurs because you each try to make it occur or because you try harder to make it occur with each other than you would with anyone else. Insofar as my attraction for you is accompanied (or warranted) by your being good for me and satisfying or enjoyable to me, then that attraction is one of love for you. And insofar as I am good for you and satisfying for you and you are attracted to me, your attraction is love for me. And both are true whether either of us tries to satisfy and benefit the other to any particular extent out of concern and caring (or trying to any extent more than we would try to satisfy or benefit anyone else), or whether it just happens because we simply mesh in the right way and were lucky to meet.

Insofar as lovers and loved ones continue to satisfy and benefit each other and continue to be attracted to each other, they will justifiably be said to love each other, regardless of whether they are working at it for each other, for themselves (A might work to please B for A's own advantage, say, in order to keep B's love so that B will remain in the relationship), or whether they are not working at it at all but are just lucky to "mesh" or "fit" with each other naturally with no (unusual) work required.

Now insofar as one does not care at all about the other's well-being and joy, one may not continue to provide or accomplish it; but in not providing or accomplishing it, it means the other loses love for them, not that they lose love for the other. Not caring about your mate's well being or joy may cause a lack of love — but toward you; it does not mean a lack of love on your part toward them.

If I make you happy and benefit you and you are attracted to me, I can believe you feel love for me without also expecting or demanding that you seek my well-being or joy or my attraction toward you. You may seek all these things, and generally, you would want to but not because of the definition of what love is. If anything, it is simply a psychological phenomenon that commonly accompanies love. Often one does want to please and benefit one that one likes — is attracted to — but one need not.

Now, though I think care and concern for another's well-being and satisfaction are not necessary conditions for love itself to exist, I do think part of what it is to be a good person is to at least take into consideration other people's well-being and satisfaction. And this is particularly true in cases of commitment such as marriage, living together, being engaged, going steady, rearing children, etc. In making commitments, by placing ourselves in special relationships with others, we create and incur special obligations. Apart from some overriding exception or overriding circumstance, one owes one's mate, one's children, and sometimes one's friends more than one owes a stranger. You owe people with whom you are interdependent in various ways, and especially those who have benefitted you (even more especially if you had then allowed them to have sacrificed for your benefit) at your request, more than you owe a stranger. And this is so whether there is love or not.

Being married to someone, being on a date with someone, being the parent of someone, even playing tennis with someone, puts special obligations (again, barring some special circumstances to the contrary) on one to act differently in certain cases from how one might be justified in acting toward a stranger. For example, at a dance, it is polite to dance and spend time with your date rather than to ignore them. So to that extent, such relationships do require special actions or special considerations about ethical behavior which will often appear to involve special concern for the person whether they do or not. And since such relationships as marriage usually involve people in love, it appears that love requires special concern for others, when really it is the obligation or commitment to the specially incurred relationship that requires special considerations. Even a spouse who does not love their mate still has special ethical obligations to that mate (barring overriding circumstances) apart from how little other good or satisfaction there is left in the relationship. Even a date has a general obligation to take home the one they took out, regardless of how disappointing the occasion is.

Fulfillment of obligations does not require care and concern for those a person is obligated to; nor does the consideration of other people's rights. One need not care about others in some special personal way when one is just considering and caring about how it

is right to act — caring about what is the right thing to do.

As to the psychological connection between loving someone and wanting to please and benefit them, I think this is perhaps a general correlation though not a universal nor logically necessary one. I suspect it is more like the kind of general psychological correlations of romantic lovers usually wanting to have sex with each other, usually being happy around each other, grinning around each other, or giving gifts to each other at special occasions. Hence, thinking this is some essential correlation may cause one to feel unloved when one's mate does not do one or all of these things. (People who do not pay much attention to the calendar might forget an anniversary, not because they do not remember the date of the anniversary, or because they are no longer in love, but because they do not even realize that date is upon them. Hence, "forgetting" an anniversary is not a sign of lack of love or lack of caring.) Because there is a general psychological conjunction or correlation between romantic love and sexual desire, desire for proximity, grinning in each others' company, or present-giving, people mistakenly sometimes think that such conjunction is then universal or true by definition.

And furthermore, even when A loves B and is concerned for B's well-being just because A loves B, I suspect that concern is a consequence of A's love for B, not a part of it. Those who hold (I think incorrectly) that love is always accompanied by concern for the partner's well- being, over and above any strictly ethical or humanistic concern, do not have to hold that this is part of the definition of love. In fact, they probably do not. They probably hold that such concern is a natural (psychological) outgrowth of loving another. But being a result, a consequence, or an outgrowth of a condition is not the same as being the condition or a part of its definition. Even if thunder always accompanied lightning, lightning is the flash; thunder is the sound that (sometimes) accompanies it. The day always follows night, and vice versa, but neither is part of the definition of the other.

Hence, even if it were true that there could not be love if there was no concern, it would not follow that concern was a part of love. It could be just a natural consequence of it. Even if lovers always remembered to give birthday presents to their loved ones, giving a birthday present would be a consequence of loving, not part of the definition of loving.

Finally, I think in the kinds of cases where one feels unloved because one's mate would rather be at work, does not grin in your proximity, does not give presents, does not want to have sex, etc., there really is more an element of feeling unloving rather than unloved. One can feel unloving because one has been disappointed by one's partner; but because the disappointment or dissatisfaction seems caused by the other person, one misreads being unloving as being unloved. This is perhaps like believing someone who hurts you (though it may be accidental) is angry with you because you are then angry with them. It is perhaps clearest in the case of a lover's accidentally forgetting your birthday when they have been busy and are not particularly cognizant of dates generally anyway; they may love you very much but you feel they do not because you are disappointed and hurt and feel less loving toward them at the time.

In contrast, someone who always remembers your birthday with cards or presents may be just very polite, very efficient, and very charming, or may be selfishly courting you without thereby really caring or being concerned about you. In general, the fact that someone behaves correctly does not necessarily mean they have the best motives, and incorrect behavior does not necessarily show bad motives. As I will explain further in discussing ethics, motivation is not always easily identified by behavior. Feelings too are not always accurately discernible from outward appearance and behavior. People make all kinds of errors reading caring or uncaring feelings into other people's external behavior. People view mistakes in work to mean the lack of responsibility or conscientiousness; they may just be mistakes. People sometimes mistakenly think counselors and teachers who are simply conscientiously doing their jobs have special (possibly romantic) feelings for them.

Key Takeaways

- Care and concern are less important normally than the effects of one's behavior toward another person. Normally if one had to choose between caring people who are incompetent and competent people who uncaring, one would choose competence over caring. There can be exceptions, but both love and ethics involve far more than just being caring.

Key Terms

- ***Care and concern*** are actions that promote or preserve well-being and satisfaction of another, regardless of whether they are accompanied or brought about by care and concern or not.

Review Questions

- **Question**: What trait is unwarranted if its cause is not something that detracts from the original relationship, but is reasonable if its cause is something that undeservedly detracts from the original relationship or promotes the well-being of the one partner only at the undeserved expense of the other?
- **Question**: Does meeting obligations require care and concern for people? Does caring and being concerned about other people mean you will be good for them or meet your obligations to them?

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7.2.3: Care and Concern

Learning Objectives

- Describe when, and in what ways, care or concern matter.



Watch this video or scan the QR code to learn how you can show empathy in a relationship.

To some extent, ***care and concern*** could be treated under feelings but they also have something to do with ethics and with how much people try to satisfy each other too.

Perhaps we should care equally about all people, or at least about all good or deserving people, or all potentially good people, but in fact, most people do not care about all others equally. They have particular people about whose happiness and or well-being they are concerned; people whose happiness or well-being they want to preserve, promote, and see preserved and promoted.

Sometimes, however, people are jealously protective about who promotes and preserves another's welfare; they want to be the (only) ones to do it and to get credit for it. If someone else does good for or satisfies a loved one, such people may be hurt or may question the motives or intentions of the benefactor, or they may feel their loved one's affections are being alienated. Sometimes such feelings are well-founded, but often not.

For now, let me say about jealousy that it is unwarranted if its cause is not something that detracts from the original relationship, but it is reasonable if its cause is something that undeservedly detracts from the original relationship or promotes the well-being of the one partner only at the undeserved expense of the other. (I say *undeserved* because there are some cases, such as where one partner is abusing the other, that someone — whether friend, counselor, lover, or whatever — *should* intervene in the relationship to promote the victim's well- being even at the expense of the jealous "lover.") For example, I think one has a right to be angry or hurt if their partner stands them up or leaves them to be otherwise avoidably lonely or to do some undesirable task alone that was supposed to be worked on together while the partner has a good time with some third person or group of friends. It is not that the stood up person has a right to resent the happiness of the offending partner, but that he or she has a right to resent that it happened at his or her undeserved expense. More about jealousy later, however.

My main point about care and concern is that they are, except in certain circumstances, no substitute for proper actions — actions that promote or preserve well-being and satisfaction, regardless of whether they are accompanied or brought about by care and concern or not. If one is ill or drowning, it would be better to be properly diagnosed or rescued by an uncaring computer or robot than to be in the presence of the most concerned person with no medical knowledge or swimming ability. Similarly, in a relationship; in general, good intentions are insufficient when better or more satisfying actions are needed or desired. Just as attractions do not insure satisfying or good actions toward each other, neither does caring or being concerned just by themselves.

I have seen parents who are concerned about their children's well-being but who, in their concern to keep the children happy, actually spoil their children and end up making them less happy and less well off than they would have been otherwise. They give them too much junk food for their health, do not force them to get enough sleep for their health and mental alertness, and do not teach them enough about how to behave properly to let them make and keep friends and make favorable impressions on others. This kind of parental concern for immediate gratification is a short-sighted concern that in the long run is almost as bad as no concern at all. Similarly some adults are so concerned about the immediate satisfaction or happiness of a loved one that they treat their loved ones in ways that are harmful in the long run — harmful for the loved one (as in serving them too many fatty foods just because they like the taste of them) or harmful for the relationship. For example, if one of the partners gives in to the unfair demands of another just to keep peace or to keep the other partner happy, the partner who gives in may be fostering or reinforcing immature behavior in the other and also may be preventing the relationship from becoming a more mature and more equally satisfying one. Care and concern (particularly when they are misdirected, but even when they are not) do not by themselves mean you will act correctly nor promote the well-being of your partner or improvement in your relationship.

One time while my wife and I were discussing installing some sort of wooden flooring in our home, I knew she was disappointed that it was too expensive for us to have it done. I tried to tease her out of her depressed mood by saying that I would do it myself to save money and just hope that it came out correctly and evenly put down. That got a rise out of her (my handiwork usually leaves

more than a little to be desired) and she said we simply would have to wait until a time we could afford to have it done by a professional. I asked “Why? He probably wouldn’t hope as hard as I would!” That got the laugh out of her I had wanted — since obviously care, concern, and hope were not nearly so important in this case as was the skilled competence of someone who would do the job right, regardless of how much or how little he or she cared about it.

Now it is usually nice to have someone care about you or be concerned about your well-being.

And this, coupled with the right or satisfying actions then, is preferable (all other things being equal) to the same activity by people who are devoid of such feelings. Likewise, if no action can help, as in the case of a terminal illness or accident, it is generally nicer to have people around who care or are concerned even though everyone is powerless to help. But even then there are right and wrong ways to behave — for example, excessive hand wringing, crying, or cursing fate may not do the victim any emotional good and may bring her or him even further grief or agony.

Care and concern are certainly nice to have in relationships, but they are not so important, I don’t believe, as correct (good and/or satisfying) behavior. I have intentionally left out of the analysis that for A to love B, A must care about B’s well-being. First, it should be noted most people would probably not want to say that for A to love B, A actually has to benefit B, since one can love another and want to do and try to do what is right for the other without being successful in that attempt. A may not even know what would be good for B, let alone be able to bring it about if he or she did know. But I believe that it is not even a necessary condition for A to (be correctly said to) love B that A even tries to satisfy or do good things for B. I will argue later, concerning Harry Stack Sullivan’s definition of love given in Lederer and Jackson’s Mirages of Marriage, that concern for another is not sufficient for there to be love, other than in some Christian or humanistic or humanitarian sense, if that. What I wish to explain here is that it is also not a necessary condition.

Certainly, it is psychologically normal that if one is attracted to another (and especially if one is satisfied by and knowingly benefitted by him or her) one will want to be good to them, satisfy them, and have them be attracted to you in return. This is simply to say on my terms that if one loves another, one will usually want to be loved in return. But this is not always the case. Even just considering attraction, one may perfectly well be content to be attracted to another without caring about whether the attraction is felt in return or not.

One may also not want to do what is best or most pleasing for one’s partner; an unreasonably jealous lover is still a lover even though he or she may not want anyone else pleasing or helping his loved one, even if that is in the loved one’s overall best interest. (If the loved one prefers having the jealousy of such a partner to having help or satisfaction from a third person, then the partner’s jealously denying the love’s potential joy by the third party actually increases the love’s overall joy. Some people like to have very jealous and over-protective mates; some do not especially appreciate such jealous behavior by their partner.) If a lover had to have his or her partner’s best interest in mind, an unreasonably jealous lover would be a contradiction in terms. So would perhaps even a reasonably jealous lover.

Of course, we could say this; and, of course, it would be easy to add as the fourth condition to the analysis of “A loves B” that “4) A in general wants to or tries to improve B’s well-being and B’s satisfaction.”

But I believe it does not belong in the analysis and would be added incorrectly because (1) I do not think all people require those who love them to care about their well-being or satisfaction, especially if they provide it for whatever reason, whether intentionally or caringly or not (as in the case of someone who loves for their mate to be jealous and over-protective even though the mate is not doing it for the loved one’s own good) (2) I think everyone should care about the well-being of others in general, so that not doing so shows more about what kind of person you are in general than whether you are a lover or person in love or not; (3) I think you can be attracted to another from afar, receive benefit from them, and receive joy from them — in short, love them from afar — without making any effort to have that love returned; that is, without trying to benefit or satisfy the one you love or without trying to have them become attracted to you (or even know you); you are the one loving, or in love, not them; (4) most importantly, insofar as you feel unloved or unhappy because you feel the other person does not care about your happiness or well-being (a feeling usually brought about, by the way, probably because he or she does not make you feel happy or well-off, whether intending to or not), then your happiness is diminished and therefore it is your love for them, not their love for you, that is diminished. It is diminished (and if diminished too far, extinguished) by either of two ways — either in causing your attraction to be diminished (or extinguished) or in causing that attraction to be less (or not at all) one of love, but more one of infatuation, sacrifice, masochism, or something else.

Whatever your attraction is for someone who harms you or makes you unhappy, it is not love and any part of your attraction that is unjustified by the actions or character of your loved one is a part of the attraction that has nothing to do with love. So if your attraction is diminished by continuous dissatisfaction or harm because your loved one does not care about you, you love your partner less, and if attraction is undiminished but you are dissatisfied or harmed because your partner does not care about you, then your attraction has that much less right to be thought of as totally an attraction of love. Insofar as your partner's lack of care and concern (in spite of their being good for you and good to you) bothers you, you are the one who is less loving, not they.

(5) Also consider the following case, called to my attention as a protest to this position by Priscilla Eggleston and Carol Milner. They claim that for a person to treat their mate shabbily, even after they have been told that they are disappointing and hurting their mate, means that they are doing it intentionally and with no consideration for their mate's feelings. "And that is not very loving behavior. How can they say they still love their mate when they treat him or her like dirt!" My response to this is (a) first you want to make sure the treatment really is bad treatment and not just unreasonably disappointing treatment. You don't want to say someone has to prove their love by doing everything their mate wants, particularly if what their mate wants is unreasonable to demand — for example, "if you loved me you would quit playing tennis with your friends." But assuming we are talking about unreasonable or bad, actually shabby, treatment. Then (b) there are still certain cases we could say A still could love B even though A treats B badly. For example, if A has some pathological physical condition, such as a tumor, that causes A to act irrationally and reprehensibly toward B even though A honestly professes love (attraction, etc.) for B, we might want to say A cannot help how he or she acts but he or she really does love B.

Similarly, if A were an alcoholic who had not learned to cope with it; A's alcoholism might be terribly painful to B, but it is not true that if A loved B, A would stop drinking. A's drinking may have nothing at all to do with B and/or A's feelings for B and the value and joy A receives from B. A friend of mine knows a couple where the man continually disparages his wife's intelligence, even in front of other people. He has been told it hurts his wife's feelings, but he is a rather sarcastic and cynical person in general, and he seems unable to stop this for any length of time and he seems to do it naturally, and he also does it more or less about everybody else too. Some people do all kinds of wrong things and act badly, sometimes intentionally toward others, and I do not always understand why they do that. But I think it is often more a problem with their (moral) character (or sometimes with their physiology) than it is a problem with their feelings (or love) or than it is a sign that they do not have loving feelings or even concern for their mate. An alcoholic may feel terribly upset with how his behavior hurts his mate but he/she may not (be able to) remedy that behavior.

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Fulfillment of obligations does not require care and concern for those a person is obligated to; nor does the consideration of other people's rights. One need not care about others in some special personal way when one is just considering and caring about how it

is right to act — caring about what is the right thing to do.

As to the psychological connection between loving someone and wanting to please and benefit them, I think this is perhaps a general correlation though not a universal nor logically necessary one. I suspect it is more like the kind of general psychological correlations of romantic lovers usually wanting to have sex with each other, usually being happy around each other, grinning around each other, or giving gifts to each other at special occasions. Hence, thinking this is some essential correlation may cause one to feel unloved when one's mate does not do one or all of these things. (People who do not pay much attention to the calendar might forget an anniversary, not because they do not remember the date of the anniversary, or because they are no longer in love, but because they do not even realize that date is upon them. Hence, "forgetting" an anniversary is not a sign of lack of love or lack of caring.) Because there is a general psychological conjunction or correlation between romantic love and sexual desire, desire for proximity, grinning in each others' company, or present-giving, people mistakenly sometimes think that such conjunction is then universal or true by definition.

And furthermore, even when A loves B and is concerned for B's well-being just because A loves B, I suspect that concern is a consequence of A's love for B, not a part of it. Those who hold (I think incorrectly) that love is always accompanied by concern for the partner's well- being, over and above any strictly ethical or humanistic concern, do not have to hold that this is part of the definition of love. In fact, they probably do not. They probably hold that such concern is a natural (psychological) outgrowth of loving another. But being a result, a consequence, or an outgrowth of a condition is not the same as being the condition or a part of its definition. Even if thunder always accompanied lightning, lightning is the flash; thunder is the sound that (sometimes) accompanies it. The day always follows night, and vice versa, but neither is part of the definition of the other.

Hence, even if it were true that there could not be love if there was no concern, it would not follow that concern was a part of love. It could be just a natural consequence of it. Even if lovers always remembered to give birthday presents to their loved ones, giving a birthday present would be a consequence of loving, not part of the definition of loving.

Finally, I think in the kinds of cases where one feels unloved because one's mate would rather be at work, does not grin in your proximity, does not give presents, does not want to have sex, etc., there really is more an element of feeling unloving rather than unloved. One can feel unloving because one has been disappointed by one's partner; but because the disappointment or dissatisfaction seems caused by the other person, one misreads being unloving as being unloved. This is perhaps like believing someone who hurts you (though it may be accidental) is angry with you because you are then angry with them. It is perhaps clearest in the case of a lover's accidentally forgetting your birthday when they have been busy and are not particularly cognizant of dates generally anyway; they may love you very much but you feel they do not because you are disappointed and hurt and feel less loving toward them at the time.

In contrast, someone who always remembers your birthday with cards or presents may be just very polite, very efficient, and very charming, or may be selfishly courting you without thereby really caring or being concerned about you. In general, the fact that someone behaves correctly does not necessarily mean they have the best motives, and incorrect behavior does not necessarily show bad motives. As I will explain further in discussing ethics, motivation is not always easily identified by behavior. Feelings too are not always accurately discernible from outward appearance and behavior. People make all kinds of errors reading caring or uncaring feelings into other people's external behavior. People view mistakes in work to mean the lack of responsibility or conscientiousness; they may just be mistakes. People sometimes mistakenly think counselors and teachers who are simply conscientiously doing their jobs have special (possibly romantic) feelings for them.

Key Takeaways

- Care and concern are less important normally than the effects of one's behavior toward another person. Normally if one had to choose between caring people who are incompetent and competent people who uncaring, one would choose competence over caring. There can be exceptions, but both love and ethics involve far more than just being caring.

Key Terms

- ***Care and concern*** are actions that promote or preserve well-being and satisfaction of another, regardless of whether they are accompanied or brought about by care and concern or not.

Review Questions

- **Question**: What trait is unwarranted if its cause is not something that detracts from the original relationship, but is reasonable if its cause is something that undeservedly detracts from the original relationship or promotes the well-being of the one partner only at the undeserved expense of the other?
- **Question**: Does meeting obligations require care and concern for people? Does caring and being concerned about other people mean you will be good for them or meet your obligations to them?

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SECTION OVERVIEW

7.2.4: Liking and Loving

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7.2.4.2: Thinking Like a Social Psychologist About Liking and Loving

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7.2.4.1: Initial Attraction

Learning Objectives

1. Summarize the variables that lead to initial attraction between people.
2. Outline the variables that lead us to perceive someone as physically attractive, and explain why physical attractiveness is so important in liking.
3. Describe the ways that similarity and complementarity influence our liking for others.
4. Define the concept of mere exposure, and explain how proximity influences liking.

When we say that we like or love someone, we are experiencing interpersonal attraction—*the strength of our liking or loving for another person*. Although interpersonal attraction occurs between friends, family members, and other people in general, and although our analysis can apply to these relationships as well, our primary focus in this chapter will be on romantic attraction—for instance, between boys and girls, between men and women, and between people in same-sex relationships. There is a large literature on the variables that lead us to like others in our initial interactions with them, and we'll review the most important findings here (Sprecher, Wenzel, & Harvey, 2008).

Physical Attractiveness

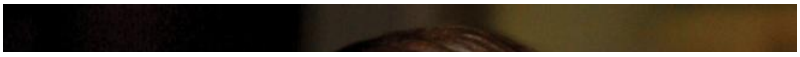
Although it may seem inappropriate or shallow to admit it, and although it is certainly not the only determinant of liking, people are strongly influenced, at least in initial encounters, by the physical attractiveness of their partners (Swami & Furnham, 2008). Elaine Walster and her colleagues (Walster, Aronson, Abrahams, & Rottman, 1966) arranged a field study in which college boys and girls were randomly paired with one another at a "computer dance." After the partners had danced and talked for a couple of hours, they were interviewed separately about their own preferences and characteristics as well as about their perceptions of their date. Walster and her colleagues found that the only important determinant of participants' liking for their date was his or her physical attractiveness. None of the other characteristics—even the perceived intelligence of the partner—mattered.

Perhaps this finding doesn't surprise you too much, given the importance of physical attractiveness in our culture. Movies and TV shows feature attractive people, TV ads use attractive people to promote their products, and we spend millions of dollars each year to make ourselves look more attractive. Even infants who are only a year old prefer to look at faces that adults consider attractive rather than at unattractive faces (Langlois, Ritter, Roggman, & Vaughn 1991).

People who are attractive are also seen as having a variety of positive characteristics, and these traits are activated quickly and spontaneously when we see their faces (Olson & Marshuetz, 2005; van Leeuwen & Macrae, 2004). Attractive people are seen as more sociable, altruistic, and intelligent than their unattractive counterparts (Griffin & Langlois, 2006). Attractive people also have more choices of sex partners (Epstein, Klinkenberg, Scandell, Faulkner, & Claus, 2007), are more likely to be offered jobs (Dubois & Pansu, 2004), and may even live longer (Henderson & Anglin, 2003).

Although it is sometimes said that "beauty is in the eyes of the beholder" (i.e., that each person has his or her own idea about what is beautiful), this is not completely true. There is good agreement among people, including children, and within and across cultures, about which people are most physically attractive (Berry, 2000; Ramsey, Langlois, Hoss, Rubenstein, & Griffin, 2004). If your instructor asked the students in your class to rate each other on their attractiveness, there would be general agreement among them on which students are most and least attractive. This agreement is in part due to shared norms within cultures about what is attractive, but it is also due to evolutionary predispositions to attend to and be influenced by specific characteristics of others.

Leslie Zebrowitz and her colleagues have extensively studied the tendency for both men and women to prefer facial features that have youthful characteristics (Zebrowitz, 1996). These features include large, round, and widely spaced eyes, a small nose and chin, prominent cheekbones, and a large forehead. Zebrowitz has found that individuals who have youthful-looking faces are more liked, are judged as warmer and more honest, and also receive other positive outcomes. Parents give baby-faced children fewer chores and punishments, and people with young-looking faces are also required to pay lower monetary awards in courtroom trials (Zebrowitz & McDonald, 1991). On the other hand, baby-faced individuals are also seen as less competent than their more mature-looking counterparts (Zebrowitz & Montpare, 2005).





...ular in part because he has a youthful-looking face. Wikimedia Commons – CC BY-SA 3.0.

...is found in our perceptions of both men and women but is somewhat stronger for our perceptions of ... This is because for men, although we do prefer youthful faces, we also prefer masculine faces—those with ... pronounced bone ridges and cheekbones—and these men tend to look somewhat older (Rhodes, 2006). ... people because they remind us of babies, or perhaps because we respond to baby-faced people positively, they may act ... tively to us.

... faces are ... symmetrical than others. People are more attracted to faces that are more symmetrical in comparison with those that are less ...mmetrical. This may be in part because of the perception that people with symmetrical faces are more healthy and thus make better reproductive mates (Rhodes, 2006; Rhodes et al., 2001) and in part because symmetrical faces seem more familiar and thus less threatening to us (Winkielman & C... ...). The attraction to symmetry is not limited to face perception. Body sy...etry is also a likely indicator of ge... ...omen favor more symmetrical men as sexual partners (Gangestad & Th... ..., 1997). If you would like to see ... ...ace would look like if it were perfectly symmetrical, check this webs... http://www.symmeter.com/symfacer.htm

Figure ... ...ymmetrical Faces Are Attractive

This model is perhaps seen as so attractive because her face is so perfectly symmetrical.

David Reed – Virginia Beach Model Photography – CC BY-NC-ND 2.0.

Although you might think that we would prefer faces that are unusual or unique, in fact the opposite is true (Langlois, Roggman, & Musselman, 1994). Langlois and Rodman (1990) showed college students the faces of men and women. The faces were composites made up of the average of 2, 4, 8, 16, or 32 faces. The researchers found that the more faces that were averaged into the stimulus, the more attractive it was judged (see Figure 8.2). As with the findings for facial symmetry, one possible explanation for our liking of average faces is that because they are more similar to the ones that we have frequently seen, they are thus more familiar to us (Grammer, Fink, Juette, Ronzal, & Thornhill, 2002).

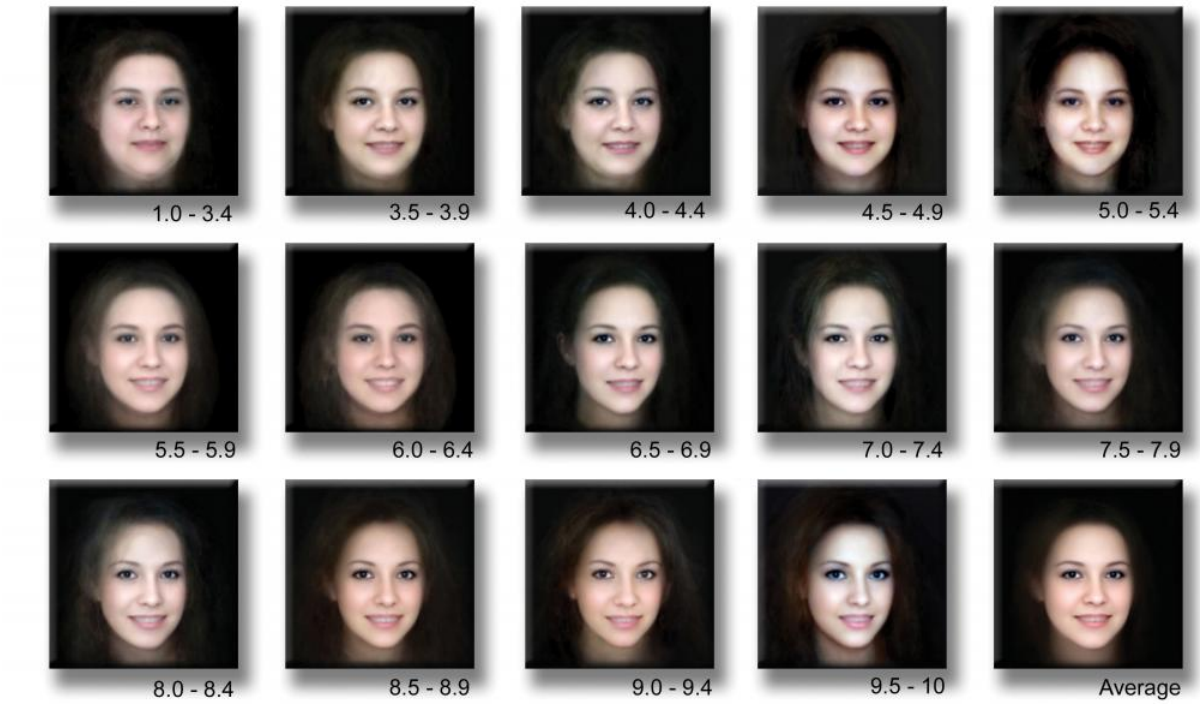


Figure 8.2 Facial Averageness

These images, from http://www.hotornot.com, present differences in facial averageness. The images at the bottom are more average than those at the top.

Pierre Tourigny – Attractive Face Scale – CC BY 2.0.

Other determinants of perceived attractiveness are healthy skin, good teeth, a smiling expression, and good grooming (Jones et al., 2004; Rhodes, 2006; Willis, Esqueda, & Schacht, 2008). These features may also have evolutionary significance—people with these characteristics probably appear to be healthy.

Although the preferences for youth, symmetry, and averageness appear to be universal, at least some differences in perceived attractiveness are due to social factors. What is seen as attractive in one culture may not be seen as attractive in another, and what is attractive in a culture at one time may not be attractive at another time. To consider one example, in modern Western cultures, "thin is in," and people prefer those who have little excess fat and who look physically fit (Crandall, Merman, & Hebl, 2009; Hönekopp, Rudolph, Beier, Liebert, & Müller, 2007; Weeden & Sabini, 2005).

However, the norm of thinness has not always been in place. The preference for women with slender, masculine, and athletic looks has become stronger over the past 50 years in Western cultures, and this can be seen by comparing the figures of female movie stars from the 1940s and 1950s with those of today. In contrast to the relatively universal preferences for youth, symmetry, and averageness, other cultures do not show such a strong propensity for thinness (Anderson, Crawford, Nadeau, & Lindberg, 1992).

Gender Differences in Perceived Attractiveness

You might wonder whether men and women find different mates attractive. The answer is yes, although as in most cases with gender differences, the differences are outweighed by overall similarities. Overall, both men and women value physical attractiveness, as well as certain personality characteristics, such as kindness, humor, dependability, intelligence, and sociability; this is true across many different cultures (Berry, 2000; Li, Bailey, Kenrick, & Linsenmeier, 2002). For men, however, the physical attractiveness of women is most important; women, although also interested in the attractiveness of men, are relatively more interested in the social status of a potential partner. When they are forced to choose one or the other, women from many different cultures have been found to prioritize a man's status over his physical attractiveness, whereas men prioritize a woman's attractiveness over her status (Li, Bailey, Kenrick, & Linsenmeier, 2002).

The differences between the preferences of men and women for opposite-sex romantic partners have been demonstrated in archival research that has analyzed the ads placed in the classifieds of U.S. newspapers. The personal ads that men place when they are searching for women tend to focus on the preferred physical appearance of the desired partner. Personal ads placed by women seeking men, on the other hand, are more likely to specify the preferred partner's status and material resources (Harrison & Saeed, 1977; Wiederman, 1993). Furthermore, women actually respond more to men who advertise their (high) income and educational levels, whereas men are less interested in this information in women's ads (Baize & Schroeder, 1995). These findings seem to be due to universal preferences of men and women, because similar patterns have been found across cultures, and even in ads seeking same-sex partners (Buss, 1989).

Age also matters, such that the preference for youthful partners is more important for men than for women. Women have been found to be more likely to respond to personal ads placed by relatively older men, whereas men tend to respond to ads placed by younger women—men of all ages (even teenagers) are most attracted to women who are in their 20s. Younger people (and particularly younger women) are more fertile than older people, and research suggests that men may be evolutionarily predisposed to like them for this reason (Buunk, Dijstra, Kenrick, & Warntjes, 2001; Dunn, Brinton, & Clark, 2010; Kenrick & Li, 2000).

Another research finding consistent with the idea that men are looking for cues to fertility in their partners is that across many cultures, men have a preference for women with a low waist-to-hip ratio (i.e., large hips and a small waist), a shape that is likely to indicate fertility. On the other hand, women prefer men with a more masculine-appearing waist to hip ratio (similar waist and hip size; Singh, 1995; Swami, 2006). Recent research, however, has suggested that these preferences, too, may be in part due to a preference for averageness, rather than to a specific preference for a particular waist-to-hip ratio (Donohoe, von Hippel, & Brooks, 2009).

Men are much more willing to have casual sex than are women, and their standards for sex partners is lower (Petersen & Hyde, 2010; Saad, Eba, & Sejan, 2009). And when asked about their regrets in life, men are more likely to wish they had had sex with more partners, whereas women wish they had tried harder to avoid getting involved with men who did not stay with them (Roese et al., 2006). These differences may be due to differential evolutionary-based predispositions of men and women. Evolutionary arguments suggest that women should be more selective than men in their choices of sex partners because they must invest more time in bearing and nurturing their children than do men (most men do help out, of course, but women simply do more; Buss & Kenrick, 1998). Because they do not need to invest a lot of time in child rearing, men may be evolutionarily predisposed to be more willing and desiring of having sex with many different partners and may be less selective in their choice of mates. Women on the other hand, because they must invest substantial effort in raising each child, should be more selective.

But gender differences in mate preferences may also be accounted for in terms of social norms and expectations. Overall, women have lower status than men, and as a result, they may find it important to attempt to raise their status by marrying men who have more of it. Men who, on average, already have higher status may be less concerned in this regard, allowing them to focus relatively more on physical attractiveness. Some studies show that women's preference for men of high status, rather than for physically attractive men, is greatest in cultures in which women are less well educated, poorer, and have less control over conception and family size (Petersen & Hyde, 2010).

Why Is Physical Attractiveness So Important?

You might find yourself wondering why people find physical attractiveness so important when it seems to say so little about what the person is really like as a person. If beauty is really only "skin deep," as the proverb goes, why are we so concerned with it?

One reason that we like attractive people is because they are rewarding. We like being around attractive people because they are enjoyable to look at and because being with them makes us feel good about ourselves. Attractiveness implies high status, and we naturally like being around people who have it. Furthermore, the positive features of attractive people tend to "rub off" on those around them as a result of associational learning (Sigall & Landy, 1973).

We may also like attractive people because they are seen as, and in fact may actually be, better friends and partners. The physical attractiveness stereotype refers to *the tendency to perceive attractive people as having positive characteristics, such as sociability and competence*, and meta-analyses have found substantial support for it (Dion, Berscheid, & Walster, 1972). Physically attractive people are seen as more dominant, sexually warm, mentally healthy, intelligent, and socially skilled than are physically unattractive people (Eagly, Ashmore, Makhijani, & Longo, 1991). One outcome of the physical attractiveness stereotype is that attractive

people receive many social benefits from others. Attractive people are given better grades on essay exams, are more successful on job interviews, and receive lighter sentences in court judgments in comparison with their less attractive counterparts (Hosoda, Stone-Romero, & Coats, 2003). We are all of course aware of the physical attractiveness stereotype and make use of it when we can. We try to look our best on dates, at job interviews, and (not necessary, we hope!) for court appearances.

As with many stereotypes, there may be some truth to the physical attractiveness stereotype. Research has found at least some evidence for the idea that attractive people are actually more sociable, more popular, and less lonely in comparison with less attractive individuals (Diener, Wolsic, & Fujita, 1995; Langlois et al., 2000). These results are probably the result of self-fulfilling prophecies. Because people expect attractive others to be friendly and warm, and because they want to be around them, they treat attractive people more positively than they do unattractive people. In the end, this may lead attractive people to develop these positive characteristics (Zebrowitz, Andreoletti, Collins, Lee, & Blumenthal, 1998). However, as with most stereotypes, our expectations about the different characteristics of attractive and unattractive individuals are much stronger than the real differences between them.

Similarity: We Like Those Who Are Like Us

Although it is a very important variable, finding someone physically attractive is of course only the first stage in developing a close relationship with another person. If we find someone attractive, we may want to pursue the relationship. And if we are lucky, that person will also find us attractive and be interested in the possibility of developing a closer relationship. At this point, we will begin to communicate, sharing our values, beliefs, and interests, and begin to determine whether we are compatible in a way that leads to increased liking.

Relationships are more likely to develop and be maintained to the extent that the partners share values and beliefs. Research has found that people tend to like and associate with others who share their age, education, race, religion, level of intelligence, and socioeconomic status. It has even been found that taller people tend to like other tall people, that happy people tend to like other happy people, and that people particularly enjoy others who have the same birthday and a similar sense of humor (Jones, Pelham, Carvallo, & Mirenberg, 2004; Pinel, Long, Landau, Alexander, & Pyszczynski, 2006). One classic study (Newcomb, 1961) arranged for male undergraduates, all strangers, to live together in a house while they were going to school. The men whose attitudes were similar during the first week ended up being friends, whereas those who did not initially share attitudes were significantly less likely to become friends.

Why Does Similarity Matter?

Similarity leads to attraction for a variety of reasons. For one, similarity makes things easier. You can imagine that if you only liked to go to action movies but your girlfriend or boyfriend only liked to go to foreign films, this would create difficulties in choosing an evening activity. Things would be even more problematic if the dissimilarity involved something even more important, such as your attitudes toward the relationship itself. Perhaps you want to have sex but your partner doesn't, or perhaps your partner wants to get married but you don't. These dissimilarities are going to create real problems. Romantic relationships in which the partners hold different religious and political orientations or different attitudes toward important issues such as premarital sex, marriage, and child rearing are of course not impossible—but they are more complicated and take more effort to maintain.

In addition to being easier, relationships with those who are similar to us are also reinforcing. Imagine you are going to a movie with your very best friend. The movie begins, and you realize that you are starting to like it a lot. At this point, you might look over at your friend and wonder how she is reacting to it. One of the great benefits of sharing beliefs and values with others is that those others tend to react the same way to events as you do. Wouldn't it be painful if every time you liked a movie, your best friend hated it, and every time she liked it, you hated it? But you probably don't need to worry too much about this, because your friend is probably your friend in good part because she likes the same things you like. Odds are that if you like the movie, your friend will too, and because she does, you can feel good about yourself and about your opinions of what makes a good movie. Sharing our values with others and having others share their values with us help us validate the worthiness of our self-concepts. Finding similarities with another makes us feel good and makes us feel that the other person will reciprocate our liking for them (Singh, Yeo, Lin, & Tan, 2007).

Status Similarity

We all naturally want to have friends and form relationships with people who have high status. We prefer to be with people who are healthy, attractive, wealthy, fun, and friendly. But our ability to attract such high-status partners is limited by the principles of social exchange. It is no accident that attractive people are more able to get dates with other attractive people, or that men with more money can attract more attractive women. The basic principles of social exchange and equity dictate that there will be general similarity in status among people in close relationships because attractiveness is a resource that allows people to attract other people with resources (Kalick & Hamilton, 1986; Lee, Loewenstein, Ariely, Hong, & Young, 2008). You can do the test for yourself. Go to a movie or a concert, and watch the couples who are together. You'll find that the attractive people are together, as are the less attractive ones. It seems surprising to us when one partner appears much more attractive than the other, and we may well assume that the less attractive partner is offering some type of (perhaps less visible) social status in return.

There is still one other type of similarity that is important in determining whether a relationship will grow and continue, and it is also based on the principles of social exchange and equity. The finding is rather simple—we tend to prefer people who seem to like us about as much as we like them. Imagine, for instance, that you have met someone and you are hoping to pursue a relationship with them. You begin to give yourself to the relationship by opening up to the other person, telling him or her about yourself and making it clear that you would like to pursue a closer relationship. You make yourself available to spend time with the person and contact him or her regularly. You naturally expect the same type of behaviors in return, and if the partner does not return the openness and giving, the relationship is not going to go very far.

Relationships in which one person likes the other much more than the other likes him or her are inherently unstable because they are not balanced or equitable. An unfortunate example of such an imbalanced relationship occurs when one individual continually attempts to contact and pursue a relationship with another person who is not interested in one. It is difficult for the suitor to give up the pursuit because he or she feels passionately in love with the other, and his or her self-esteem will be hurt if the other person is rejecting. But the situation is even worse for the person who is being pursued because they feel both guilty about rejecting the suitor and angry that the suitor continues the pursuit (Baumeister & Wotman, 1992). Such situations are not uncommon and require that the individual who is being pursued make it completely clear that he or she is not interested in any further contact.

There is a clear moral to the importance of liking similarity, and it pays to remember it in everyday life. If we act toward others in a positive way, this expresses liking and respect for them, and the others will likely return the compliment. Being liked, praised, and even flattered by others is rewarding, and (unless it is too blatant and thus ingratiating) we can expect that others will enjoy it.

In sum, similarity is probably the most important single determinant of liking. Although we may sometimes prefer people who have different interests and skills from ours (Beach, Whitaker, Jones, & Tesser, 2001; Tiedens & Jimenez, 2003), when it comes to personality traits, it is similarity that matters—complementarity (being different from the other) just does not have much influence on liking.

Proximity

If I were to ask you who you might end up marrying (assuming you are not married already), I would guess that you'd respond with a list of the preferred personality traits or an image of your desired mate. You'd probably say something about being attractive, rich, creative, fun, caring, and so forth. And there is no question that such individual characteristics matter. But social psychologists realize that there are other aspects that are perhaps even more important. Consider this:

You'll never marry someone that you never meet!

Although that seems obvious, it's also really important. There are about 7 billion people in the world, and you are only going to have the opportunity to meet a tiny fraction of those people before you marry. This also means that you are likely to marry someone who's pretty similar to you because, unless you travel widely, most of the people you meet are going to share your cultural background and therefore have some of the values that you hold. In fact, the person you marry probably will live in the same city as you, attend the same college, take similar classes, and be pretty similar to you in most respects (Kubitschek & Hallinan, 1998).

Although meeting someone is an essential first step, simply being around another person also increases liking. People tend to become better acquainted with, and more fond of, each other when the social situation brings them into repeated contact. This is the basic principle of *proximity liking*. For instance, research has found that students who sit next to each other in class are more likely

to become friends, and this is true even when the seating is assigned by the instructor (Back, Schmukle, & Egloff, 2008). Festinger, Schachter, and Back (1950) studied friendship formation in people who had recently moved into a large housing complex. They found not only that people became friends with those who lived near them but that people who lived nearer the mailboxes and at the foot of the stairway in the building (where they were more likely to come into contact with others) were able to make more friends than those who lived at the ends of the corridors in the building and thus had fewer social encounters with others.

Mere exposure refers to *the tendency to prefer stimuli (including, but not limited to, people) that we have seen frequently*. Consider the research findings presented in Figure 8.3. In this study, Moreland and Beach (1992) had female confederates attend a large lecture class of over 100 students 5, 10, or 15 times or not at all during a semester. At the end of the term, the students were shown pictures of the confederates and asked to indicate if they recognized them and also how much they liked them. The number of times the confederates had attended class didn't influence the other students' recognition of them, but it did influence their liking for them. As predicted by the mere-exposure hypothesis, students who had attended more often were liked more.

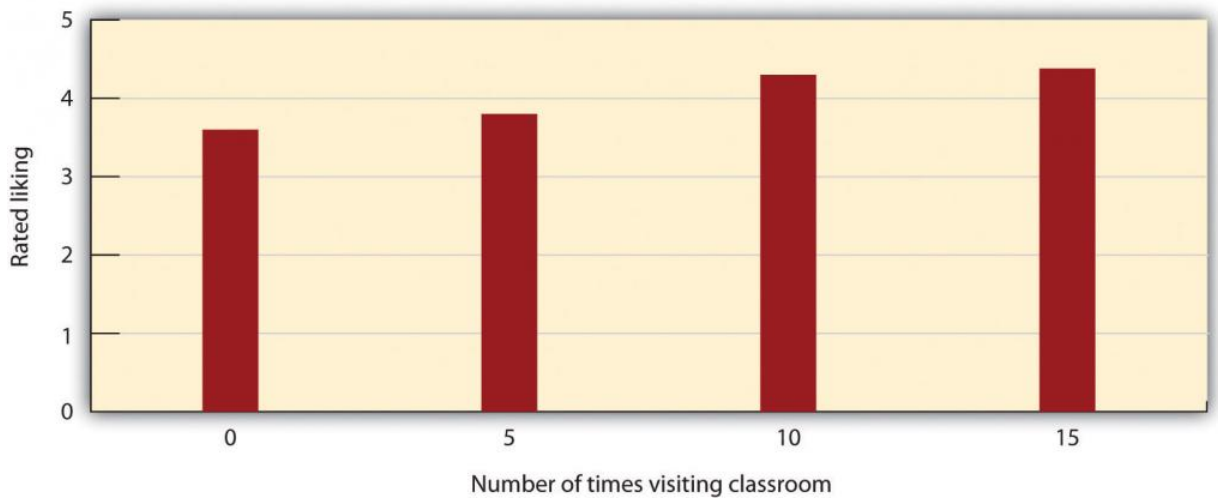


Figure 8.3 Mere Exposure in the Classroom

Richard Moreland and Scott Beach had female confederates visit a class 5, 10, or 15 times or not at all over the course of a semester. Then the students rated their liking of the confederates. The mere-exposure effect is clear. Data are from Moreland and Beach (1992).

The effect of mere exposure is powerful and occurs in a wide variety of situations (Bornstein, 1989). Infants tend to smile at a photograph of someone they have seen before more than they smile at someone they are seeing for the first time (Brooks-Gunn & Lewis, 1981). And people have been found to prefer left-to-right reversed images of their own faces over their normal (nonreversed) face, whereas their friends prefer their regular face over the reversed one (Mita, Dermer, & Knight, 1977). This also is expected on the basis of mere exposure, since people see their own faces primarily in mirrors and thus are exposed to the reversed face more often.

Mere exposure may well have an evolutionary basis. We have an initial and potentially protective fear of the unknown, but as things become more familiar, they produce more positive feelings and seem safer (Freitas, Azizian, Travers, & Berry, 2005; Harmon-Jones & Allen, 2001). When the stimuli are people, there may well be an added effect—familiar people are more likely to be seen as part of the ingroup rather than the outgroup, and this may lead us to like them even more. Leslie Zebrowitz and her colleagues showed that we like people of our own race in part because they are perceived as familiar to us (Zebrowitz, Bronstad, & Lee, 2007).

It should be kept in mind that mere exposure only applies to the change that occurs when one is completely unfamiliar with another person (or object) and subsequently becomes more familiar with him or her. Thus mere exposure applies only in the early stages of attraction. Later, when we are more familiar with someone, that person may become too familiar and thus boring. You may have experienced this effect when you first bought some new songs and began to listen to them. Perhaps you didn't really like all the songs at first, but you found yourself liking them more and more as you played them more often. If this has happened to you, you have experienced mere exposure. But perhaps one day you discovered that you were really tired of the songs—they had become

too familiar. You put the songs away for a while, only bringing them out later, when you found that liked them more again (they were now less familiar). People prefer things that have an optimal level of familiarity—neither too strange nor too well-known (Bornstein, 1989).

Affect and Attraction

Because our relationships with others are based in large part on emotional responses, it will come as no surprise to you to hear that affect is particularly important in interpersonal relationships. The relationship between mood and liking is pretty straightforward. We tend to like people more when we are in good moods and to like them less when we are in bad moods. This prediction follows directly from the expectation that affective states provide us with information about the social context—in this case, the people around us. Positive affect signals that it is safe and desirable to approach the other person, whereas negative affect is more likely to indicate danger and to suggest avoidance.

Moods are particularly important and informative when they are created by the person we are interacting with. When we find someone attractive, for instance, we experience positive affect, and we end up liking the person even more. However, mood that is created by causes other than the other person can also influence liking. Alice Isen and her colleagues (Isen & Levin, 1972) created a variety of situations designed to put people in good moods. They had participants unexpectedly find a coin in a phone booth, played them some soothing music, or provided them a snack of milk and cookies at an experimental session. In each of these cases, the participants who had been provided with the pleasant experience indicated more positive mood in comparison with other participants who had not received the positive experience—and they also expressed more liking for other things and other people. The moral of the story is clear—if you want to get someone to like you, put them in a good mood. Furthermore, it is pretty easy to do so—simply bringing flowers, looking your best, or telling a funny joke might well be enough to be effective.

Research Focus

Arousal and Attraction

Although the relationship between mood and liking is very simple, the relationship between our current state of physiological arousal and liking is more complex. Consider an experiment by Gregory White and his colleagues (White, Fishbein, & Rutsein, 1981) in which the participants, male college students, were asked to complete a number of different tasks in a laboratory setting. In one part of the study, the men were asked to run in place for either a short time (15 seconds) or a longer time (120 seconds). Then the men viewed a videotape of either an attractive or an unattractive woman who was supposedly a sophomore at the college. In the video, she talked about her hobbies and career interests and indicated that she was interested in meeting people and did not have a boyfriend. The men, who thought that they would soon be meeting the woman, rated how romantically attracted they were to her.

Confirming that the experimental manipulation had created high and low levels of arousal, White and his colleagues found that the heart rate and other signs of physiological arousal were higher for the participants who had exercised longer. They did not find that the arousal created by running in place for 2 minutes increased or decreased liking directly, but they did find an interaction between arousal level and the attractiveness of the woman being judged. As you can see in the following figure, the men who had been aroused by running in place liked the attractive woman more and the unattractive woman less than the men who were less aroused.

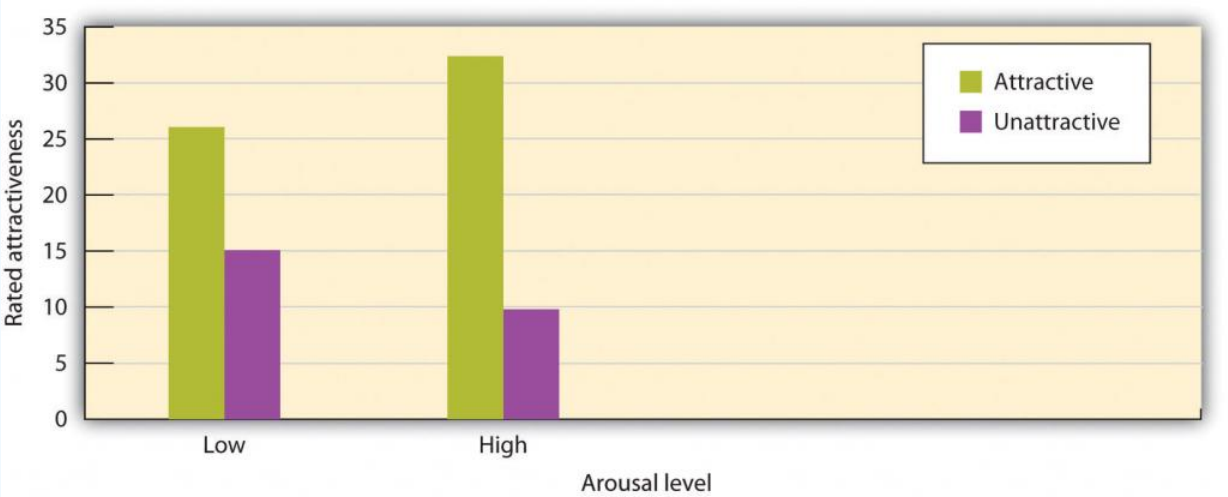


Figure 8.4

Arousal polarizes judgments. In this experiment, male college students rated an attractive or an unattractive woman after they had run in place for 15 seconds (low arousal) or for 120 seconds (high arousal). The judgments under arousal are polarized. Data are from White, Fishbein, and Rutstein (1981).

In another interesting field study, Dutton and Aron (1974) had an attractive young woman approach individual young men as they crossed a long, wobbly suspension bridge hanging over 200 feet above the Capilano River in British Columbia. The woman asked each man to help her fill out a questionnaire for a class project. When he had finished, she wrote her name and phone number on a piece of paper and invited him to call if he wanted to hear more about the project. Over half of the men who had been interviewed on the bridge later called her. In contrast, men who were approached on a low solid bridge by the same experimenter or who were interviewed on the suspension bridge by men called the woman significantly less frequently. One interpretation of this finding is that the men who were interviewed on the bridge were experiencing arousal as a result of being on the bridge but that they misattributed their arousal as liking the interviewer.



Figure 8.5

Arousal caused by the height of this bridge was misattributed as attraction by the men who were interviewed by an attractive woman as they crossed the bridge.

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What these studies and many others like them demonstrate is that arousal polarizes liking (Foster, Witcher, Campbell, & Green, 1998). When we are aroused, everything seems more extreme. This effect is not unexpected because the function of arousal in emotion is to increase the strength of an emotional response. Love that is accompanied by arousal (sexual or otherwise) is stronger love than love that has a lower level of arousal. And our feelings of anger, dislike, or disgust are also stronger when they are accompanied by high arousal.

As with mood states, arousal may sometimes come directly from the partner. Both very attractive and very unattractive people are likely to be more arousing than are people who are more average in attractiveness, and this arousal may create strong feelings of like or dislike. In other cases, the arousal may come from another source, such as from exercising, walking across a high bridge, or a roller-coaster ride.

The strong feelings that we experience toward another person that are accompanied by increases in arousal and sexual attraction are called *passion*, and the emotionally intense love that is based on passion is known as passionate love—*the kind of love that we experience when we are first getting to know a romantic partner*. Again, there is a clear take-home for you: If you like a person and think that the person likes you in return, and if you want to get that person to like you more, then it will be helpful to create some extra arousal in that person, perhaps by going to a scary movie, doing in-line skating, or even meeting for a workout at the gym. On the other hand, you need to be sure that the other person is initially positively inclined toward you. If not, arousing experiences could make matters even worse.

Key Takeaways

- Particularly in initial encounters, people are strongly influenced by the physical attractiveness of the other person.
- We prefer people who are young, who have symmetrical facial features and bodies, and who appear average. These preferences may be because these features suggest to us that the person is healthy.
- Although men and women agree on many aspects of what they find attractive, women are relatively more focused on the social status of their romantic partners, whereas men are more focused on the youth and attractiveness of their partners.
- We tend to like people who share our values and beliefs, both because similarity makes things easier and because similarity reinforces our own values and beliefs.
- Proximity and the principle of mere exposure are two important determinants of interpersonal attraction.
- We tend to like people more when we are in good moods.
- Our current state of physiological arousal tends to polarize our liking.

Exercises and Critical Thinking

1. Consider some people that you find most attractive. Do they match the characteristics that social psychologists have found to be important?
2. Describe a time when you saw or knew a couple in which one person was much more attractive than the other. Do you think this was an exception to the rule of status similarity, or was there a reason for it?
3. Consider some features that your culture finds attractive. Why do you think these features make people look attractive?
4. Describe a time when you experienced the mere exposure effect or polarization of arousal.

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7.2.4.2: Thinking Like a Social Psychologist About Liking and Loving

There is no part of human experience that is more important to our survival than our close relationships with others. Without close relationships, we could not successfully reproduce, and without the social support provided by others who care about us, our lives would be less meaningful and we would be less mentally and physically healthy. I hope this chapter has reminded you of the importance of your relationships with others or perhaps taught you to think differently about those relationships.

Perhaps you are already in a happy close relationship, and this chapter may have given you some ideas about how keep that relationship happy and healthy. Perhaps you are thinking more now about your commitment to the relationship, the benefits and costs you receive from the relationship, the equity between you and your partner, and the costs or benefits you and your partner gain from the relationship. Is your relationship a communal relationship or is it more of an exchange relationship? What can you do to help ensure that you and your partner remain together as one interrelated pair?

Or perhaps you are not currently in a relationship and are hoping to develop a new close relationship. In this case, this chapter may have provided you with some ideas about how to get someone to like you and to see you as an appropriate partner. Maybe you will think more about the important role of physical attractiveness in initial liking, the influence of similarity and reciprocal disclosure on liking, and the role of proximity in attraction. I hope that you have learned some new ideas about how to be more attractive to others that you are interested in.

In any case, I hope you can now see that even close relationships can be considered in terms of the basic principles of social psychology, the ABCs of affect, behavior, and cognition, and the goals of self-concern and other-concern. Close relationships are particularly interesting in terms of the latter because they are one of the ways that we can feel good about ourselves by connecting with others.

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7.2.4.3: Chapter Summary

Relationships between or among people that are characterized by loving, caring, commitment, and intimacy, such as those between adult friends, dating partners, lovers and married couples, are known as close relationships.

Our close relationships make us happy and healthy. We experience higher self-efficacy, self-esteem, and positive mood when we believe that our friends and partners are responding to us supportively and with a concern for our needs and our welfare.

When we say that we like or love someone, we are experiencing interpersonal attraction. People are strongly influenced by the physical attractiveness of their partners in initial encounters. On average, we find younger people more attractive than older people, we are more attracted to faces that are more symmetrical in comparison with those that are less symmetrical, and we prefer faces that are more, rather than less, average. Although the preferences for youth, symmetry, and averageness appear to be universal, there is evidence that at least some differences in perceived attractiveness are due to social and cultural factors.

Overall, both men and women value physical attractiveness. However, for men, the physical attractiveness of women is more important than it is for women judging men, whereas women are relatively more interested in the social status of men. These gender differences may have evolutionary origins.

The tendency to perceive attractive people as having positive characteristics, such as sociability and competence, is known as the physical attractiveness stereotype.

Relationships are more likely to develop and be maintained to the extent that the partners share values and beliefs. The basic principles of social exchange and equity dictate that there will be general similarity in status among people in close relationships. And we tend to prefer people who seem to like us about as much as we like them.

Simply being around another person also increases our liking for them. The tendency to prefer stimuli (including, but not limited to, people) that we have seen more frequently is known as mere exposure.

We tend to like people more when we are in good moods and to like them less when we are in bad moods. And it has been found that arousal polarizes our liking of others. The strong feelings that we experience toward another person that are accompanied by increases in arousal are called passion, and the emotionally intense love that is based on arousal and sexual attraction is known as passionate love.

As partners stay together over time, cognition becomes relatively more important than passion, and close relationships are more likely to be based on companionate love than on passionate love. As a relationship progresses, the partners in the relationship come to know each other more fully and care about each other to a greater degree—they become closer to each other. Intimacy is marked in large part by reciprocal self-disclosure—that is, the tendency to communicate frequently and openly.

The partners in close relationships increasingly turn to each other for social support and for other needs. The members of a close relationship are highly interdependent and rely to a great degree on effective social exchange. When partners are attentive to the needs of the other person, and when they help the other meet his or her needs without explicitly keeping track of what they are giving or expecting to get in return, we say that the partners have a communal relationship.

In relationships in which a positive rapport between the partners is developed and maintained over a period of time, the partners are naturally happy with the relationship and they become committed to it.

The triangular model of love proposes that there are different types of love, each made up of different combinations of the basic components of passion, intimacy, and commitment.

Children have been found to develop either a healthy or an unhealthy attachment style with their parents, and individual differences in these styles remain to a large extent stable into adulthood. People with secure attachment styles may make better partners.

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7.2.4.4: Close Relationships- Liking and Loving Over the Long Term

Learning Objectives

1. Outline the factors that define close relationships.
2. Explain how people can best maintain their close relationships.

To this point in the chapter, we have focused upon the attraction that occurs between people who are initially getting to know one another. But the basic principles of social psychology can also be applied to help us understand relationships that last longer. When good friendships develop, when people get married and plan to spend the rest of their lives together, and when families grow closer over time, the relationships take on new dimensions and must be understood in somewhat different ways. Yet the principles of social psychology can still be applied to help us understand what makes these relationships last. Although humans seem to be the only animals that are able to develop close relationships in which partners stay sexually faithful to each other for a lifetime (Barash & Lipton, 2002), these relationships do not come easily. About one half of contemporary marriages in the United States and Canada end in divorce (CDC, 2010).

The factors that keep people liking each other in long-term relationships are at least in part the same as the factors that lead to initial attraction. For instance, regardless of how long they have been together, people remain interested in the physical attractiveness of their partners, although it is relatively less important than for initial encounters. And similarity remains essential. Relationships are also more satisfactory and more likely to continue when the individuals develop and maintain similar interests and continue to share their important values and beliefs over time (Davis & Rusbult, 2001). Proximity also remains important—relationships that undergo the strain of the partners' being apart from each other for very long are more at risk for breakup.

But what about passion? Does it still matter over time? Yes and no. People in long-term relationships who are most satisfied with their partners report that they still feel passion for their partners—they still want to be around them as much as possible, and they enjoy making love with them (Simpson, 1987; Sprecher, 2006). And partners report that the more they love their partners, the more attractive they find them (Simpson, Gangestad, & Lerma, 1990). On the other hand, the high levels of passionate love that are experienced in initial encounters are not likely to be maintained throughout the course of a long-term relationship (Acker & Davis, 1992). Over time, cognition becomes relatively more important than emotion, and close relationships are more likely to be based on companionate love, defined as *love that is based on friendship, mutual attraction, common interests, mutual respect, and concern for each other's welfare*. This does not mean that enduring love is less strong—it just has a different underlying structure than initial love.

Closeness and Intimacy

Although it is safe to say that many of the variables that influence initial attraction remain important in longer-term relationships, other variables also come into play over time. One important change is that as a relationship progresses, the partners come to know each other more fully and care about each other to a greater degree. In successful relationships, the partners feel increasingly close to each other over time, whereas in unsuccessful relationships, closeness does not increase and may even decrease. The closeness experienced in these relationships is marked in part by reciprocal self-disclosure—*the tendency to communicate frequently, without fear of reprisal, and in an accepting and empathetic manner.*

When the partners in a relationship feel that they are close, and when they indicate that the relationship is based on caring, warmth, acceptance, and social support, we can say that the relationship is intimate (Sternberg, 1986). Partners in intimate relationships are likely to think of the couple as "we" rather than as two separate individuals. People who have a sense of closeness with their partner are better able to maintain positive feelings about the relationship while at the same time being able to express negative feelings and to have accurate (although sometimes less than positive) judgments of the other (Neff & Karney, 2002). People may also use their close partner's positive characteristics to feel better about themselves (Lockwood, Dolderman, Sadler, & Gerchak, 2004).

Arthur Aron and his colleagues (Aron, Aron, & Smollan, 1992) have assessed the role of closeness in relationships directly, using the simple measure shown in Figure 8.6. You might try completing the measure yourself for some different people that you know—for instance, your family members, your friends, your spouse, or your girlfriend or boyfriend. The measure is simple to use and to

interpret. If a person chooses a circle that represents the self and the other as more overlapping, this means that the relationship is close. But if they choose a circle that is less overlapping, then the relationship is less so.

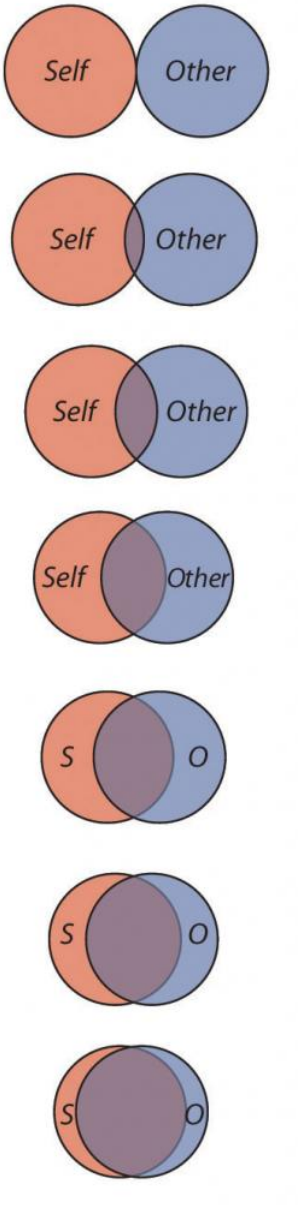


Figure 8.6 Measuring Relationship Closeness

This measure is used to determine how close two partners feel to each other. The respondent simply circles which of the figures he or she feels characterizes the relationship. From Aron, Aron, and Smollan (1992).

Although the closeness measure is simple, it has been found to be highly predictive of people's satisfaction with their close relationships and of the tendency for couples to stay together. In fact, the perceived closeness between romantic partners can be a better predictor of how long a relationship will last than is the number of positive feelings that the partners indicate having for each other. In successful close relationships cognitive representations of the self and the other tend to merge together into one, and it is this tie—based on acceptance, caring, and social support—that is so important (Aron, Aron, Tudor, & Nelson, 1991).

Aron and his colleagues (Aron, Melinat, Aron, & Vallone, 1997) used an experimental design to test whether self-disclosure of intimate thoughts to others would increase closeness. In a laboratory, they paired college students with another student, one whom they did not know. Some of the students were asked to share some intimate thoughts with each other by asking and answering questions such as "When did you last cry in front of another person?" In comparison with control participants who only engaged in

small talk with their partners (answering questions such as “What is your favorite holiday?”), the students who disclosed more intimate experiences reported feeling significantly closer to each other at the end of the conversation.

Communal and Exchange Relationships

In intimate close relationships, the partners can become highly attuned to each other’s needs, such that the desires and goals of the other become as important as, or more important than, one’s own needs. When people are attentive to the needs of others—for instance, parents’ attentiveness to the needs of their children or the attentiveness of partners in a romantic relationship—and when they help the other person meet his or her needs without explicitly keeping track of what they are giving or expecting to get in return, we say that the partners have a communal relationship. Communal relationships are *close relationships in which partners suspend their need for equity and exchange, giving support to the partner in order to meet his or her needs, and without consideration of the costs to themselves.* Communal relationships are contrasted with exchange relationships, *relationships in which each of the partners keeps track of his or her contributions to the partnership.*

Suggesting that communal relationships can be beneficial, research has found that happier couples are less likely to “keep score” of their respective contributions (Buunk, Van Yperen, Taylor, & Collins, 1991). And when people are reminded of the external benefits that their partners provide them, they may experience decreased feelings of love for them (Seligman, Fazio, & Zanna, 1980).

Although partners in long-term relationships are frequently willing and ready to help each other meet their needs, and although they will in some cases forgo the need for exchange and reciprocity, this does not mean that they always or continually give to the relationship without expecting anything in return. Partners do keep track of their contributions and received benefits. If one or both of the partners feel that they are unfairly contributing more than their fair share, and if this inequity continues over a period of time, the relationship will suffer. Partners who feel that they are contributing more will naturally become upset because they will feel that they are being taken advantage of. But the partners who feel that they are receiving more than they deserve might feel guilty about their lack of contribution to the partnership.

Members of long-term relationships focus to a large extent on maintaining equity, and marriages are happiest when both members perceive that they contribute relatively equally (Van Yperen & Buunk, 1990). People stay in relationships longer when they feel that they are being rewarded by them (Margolin & Wampold, 1981). In short, in relationships that last, the partners are aware of the needs of the other person and attempt to meet them equitably. But partners in the best relationships are also able to look beyond the rewards themselves and to think of the relationship in a communal way.

Interdependence and Commitment

Another factor that makes long-term relationships different from short-term ones is that they are more complex. When a couple begins to take care of a household together, has children, and perhaps has to care for elderly parents, the requirements of the relationship become correspondingly bigger. As a result of this complexity, the partners in close relationships increasingly turn to each other not only for social support but also for help in coordinating activities, remembering dates and appointments, and accomplishing tasks (Wegner, Erber, & Raymond, 1991). The members of a close relationship are highly interdependent, *relying to a great degree on each other to meet their goals.*

It takes a long time for partners in a relationship to develop the ability to understand the other person’s needs and to form positive patterns of interdependence in which each person’s needs are adequately met. The social representation of a significant other is a rich, complex, and detailed one because we know and care so much about him or her and because we have spent so much time in his or her company (Andersen & Cole, 1990). Because a lot of energy has been invested in creating the relationship, particularly when the relationship includes children, breaking off the partnership becomes more and more costly with time. After spending a long time with one person, it may also become more and more difficult to imagine ourselves with anyone else.

In relationships in which a positive rapport between the partners is developed and maintained over a period of time, the partners are naturally happy with the relationship and they become committed to it. Commitment refers to *the feelings and actions that keep partners working together to maintain the relationship*. In comparison to those who are less committed, partners who are more committed to the relationship see their mates as more attractive than others, are less able to imagine themselves with another partner, express less interest in other potential mates, are less aggressive toward each other, and are less likely to break up (Simpson, 1987; Slotter et al., 2011).

Commitment may in some cases lead individuals to stay in relationships that they could leave, even though the costs of remaining in the relationship are very high. On the surface, this seems puzzling because people are expected to attempt to maximize their rewards in relationships and would be expected to leave them if they are not rewarding. But in addition to evaluating the outcomes that one gains from a given relationship, the individual also evaluates the potential costs of moving to another relationship or not having any relationship at all. We might stay in a romantic relationship, even if the benefits of that relationship are not high, because the costs of being in no relationship at all are perceived as even higher. In short, when considering whether to stay or leave, we must consider both the costs and benefits of the current relationship and the costs and benefits of the alternatives to it (Rusbult, Olsen, Davis, & Hannon, 2001).

Although the good news about interdependence and commitment is clear—they help relationships last longer—they also have a potential downside. Breaking up, should it happen, is more difficult in relationships that are interdependent and committed. The closer and more committed a relationship has been, the more devastating a breakup will be.

What Is Love?

Although we have talked about it indirectly, we have not yet tried to define love itself—and yet it is obviously the case that close relationships are all about love. Social psychologists have studied the function and characteristics of romantic love, finding that it has cognitive, affective, and behavioral components and that it occurs cross-culturally. Romantic love is found in all cultures, although how it is experienced may vary.

Robert Sternberg and others (Arriaga & Agnew, 2001; Sternberg, 1986) have proposed a triangular model of love, *an approach that suggests that there are different types of love and that each is made up of different combinations of cognitive and affective variables, specified in terms of passion, intimacy, and commitment*. The model, shown in Figure 8.7, suggests that only *consummate love* has all three of the components (and is probably experienced only in the very best romantic relationships), whereas the other types of love are made up of only one or two of the three components. For instance, people who are good friends may have liking (intimacy) only or may have known each other so long that they also share commitment to each other (*companionate love*). Similarly, partners who are initially dating might simply be infatuated with each other (passion only) or may be experiencing *romantic love* (both passion and liking but not commitment).

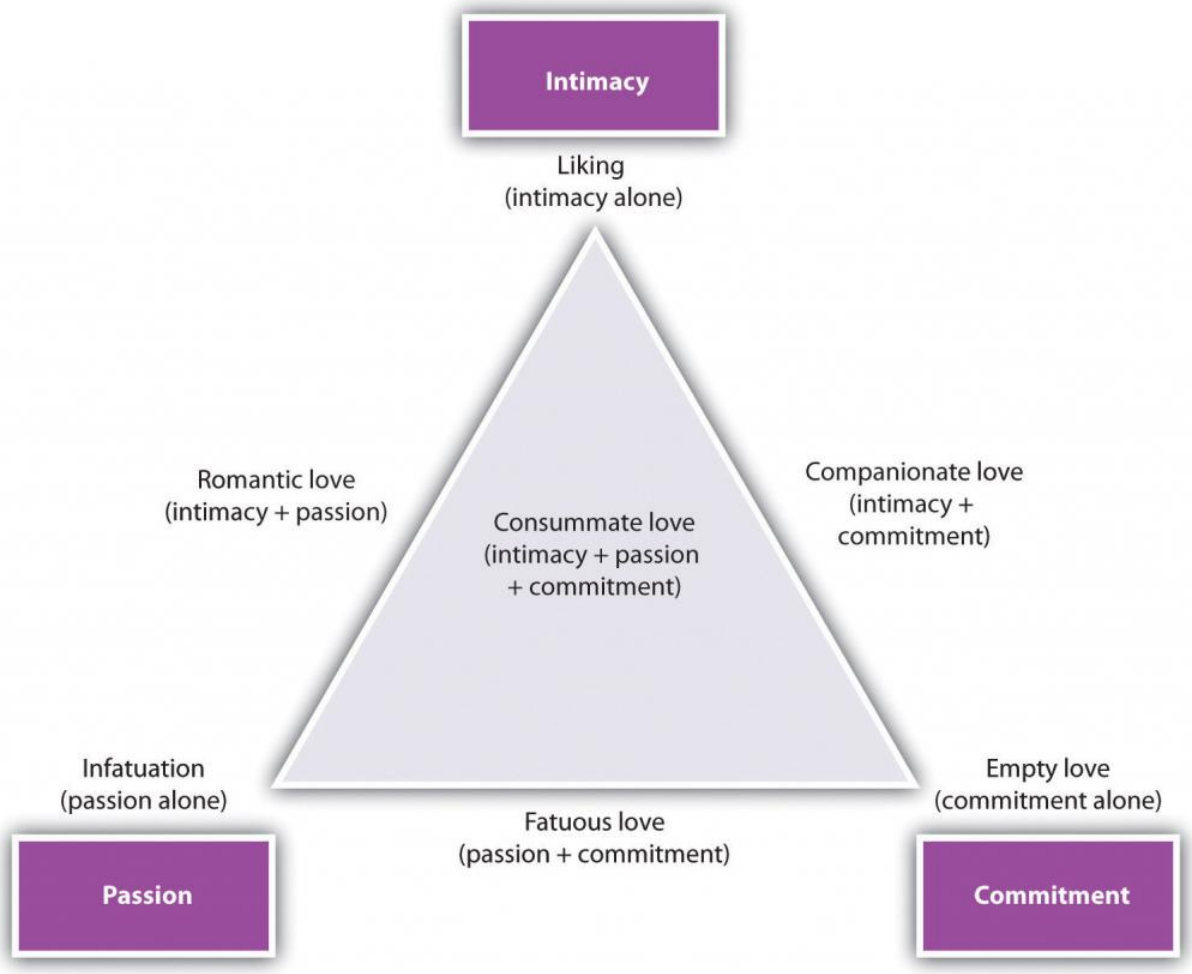


Figure 8.7 Triangular Model of Love

The triangular model of love, proposed by Robert Sternberg. Note that there are seven types of love, which are defined by the combinations of the underlying factors of intimacy, passion, and commitment. From Sternberg (1986).

Research Focus

Romantic Love Reduces Our Attention to Attractive Others

Evolutionary psychologists have proposed that we experience romantic love to help increase our evolutionary fitness (Taylor & Gonzaga, 2006). According to this idea, love helps couples work together to improve the relationship by coordinating and planning activities and by increasing commitment to the partnership. If love acts as a "commitment device," it may do so in part by helping people avoid being attracted to other people who may pose a threat to the stability of the relationship (Gonzaga, Haselton, Smurda, Davies, & Poore, 2008; Sabini & Silver, 2005).

Jon Maner and his colleagues (Maner, Rouby, & Gonzaga, 2008) tested this idea by selecting a sample of participants who were currently in a committed relationship and manipulating the extent to which the participants were currently experiencing romantic love for their partners. They predicted that the romantic love manipulation would decrease attention to faces of attractive opposite-sex people.

One half of the participants (the *romantic love condition*) were assigned to write a brief essay about a time in which they experienced strong feelings of love for their current partner. Participants assigned to the *control condition* wrote a brief essay about a time in which they felt extremely happy. After completing the essay, participants completed a procedure in which they were shown a series of attractive and unattractive male and female faces. The procedure assessed how quickly the participants

could shift their attention away from the photo they were looking at to a different photo. The dependent variable was the reaction time (in milliseconds) with which participants could shift their attention.

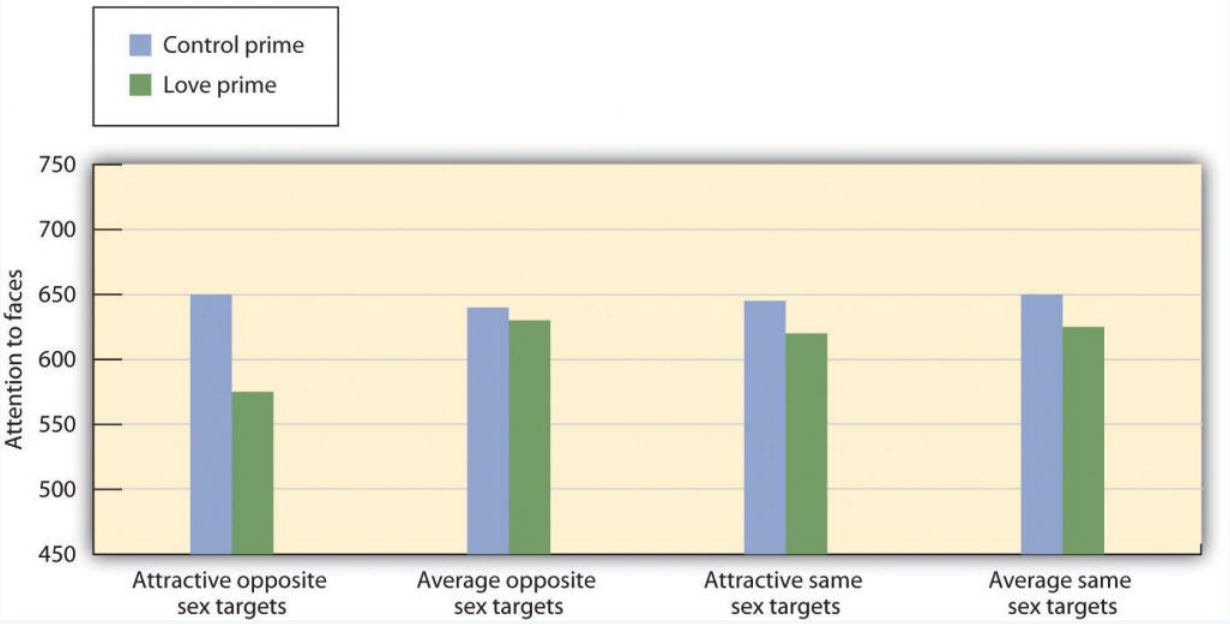


Figure 8.8 Romantic Love and Attention to Faces

Activating thoughts and feelings of romantic love reduced attention to faces of attractive alternatives. Attention to other social targets remained unaffected. Data are from Maner et al. (2008).

As you can see in the preceding figure, the participants who had been asked to think about their thoughts and feelings of love for their partner were faster at moving their attention from the attractive opposite-sex photos than were participants in any of the other conditions. When experiencing feelings of romantic love, participants' attention seemed repelled, rather than captured, by highly attractive members of the opposite sex. These findings suggest that romantic love may inhibit the perceptual processing of physical attractiveness cues—the very same cues that often pose a high degree of threat to the relationship.

Individual Differences in Loving: Attachment Styles

One of the important determinants of the quality of close relationships is the way that the partners relate to each other. These approaches can be described in terms of attachment style—*individual differences in how people relate to others in close relationships*. We display our attachment styles when we interact with our parents, our friends, and our romantic partners (Eastwick & Finkel, 2008).

Attachment styles are learned in childhood, as children develop either a healthy or an unhealthy attachment style with their parents (Ainsworth, Blehar, Waters, & Wall, 1978; Cassidy & Shaver, 1999). Most children develop healthy or *secure attachment styles*. These children perceive their parents as safe, available, and responsive caregivers and are able to relate easily to them. For these children, the parents successfully create appropriate feelings of affiliation and provide a secure base from which the child feels free to explore and then to return to. However, for children with unhealthy attachment styles, the family does not provide these needs. Some children develop an *anxious/ambivalent attachment style*, becoming overly dependent upon the parents and continually seeking more affection from them than they can give. These children are anxious about whether the parents will reciprocate closeness. Still other children become unable to relate to the parents at all, becoming distant, fearful, and cold (the *avoidant attachment style*).

The attachment styles that we develop in childhood remain to a large extent stable into adulthood (Caspi, 2000; Collins, Cooper, Albino, & Allard, 2002; Rholes, Simpson, Tran, Martin, & Friedman, 2007). Fraley (2002) conducted a meta-analysis of 27 studies that had looked at the relationship between attachment behavior in infants and in adults over 17 years of age and found a significant correlation between the two measures.

The consistency of attachment styles over the life span means that children who develop secure attachments with their parents as infants are better able to create stable, healthy interpersonal relationships with other individuals, including romantic partners, as adults (Hazan & Diamond, 2000). They stay in relationships longer and are less likely to feel jealousy about their partners. But the relationships of anxious and avoidant partners are more problematic. Anxious men and women tend to be less warm with their partners, are more likely to get angry at them, and have more difficulty expressing their feelings (Collins & Feeney, 2000). Anxious types also tend to worry about their partner's love and commitment for them, and they interpret their partner's behaviors more negatively (Collins & Feeney, 2004; Pierce & Lydon, 2001). Anxious partners also see more conflict in their relationships and experience the conflicts more negatively (Campbell, Simpson, Boldry, & Kashy, 2005).

On the other hand, people with avoidant personality types simply have trouble creating close relationships at all (Gabriel, Carvallo, Dean, Tippin, & Renaud, 2005). They have difficulty expressing emotions, and experience more negative affect in their interactions (Tidwell, Reis, & Shaver, 1996). They also have trouble understanding other's emotions (Fraley, Garner, & Shaver, 2000) and show a relative lack of interest in learning about their romantic partner's thoughts and feelings (Rholes, Simpson, Tran, Martin, & Friedman, 2007).

One way to think about attachment styles, shown in Table 8.1, is in terms of the extent to which the individual is able to successfully meet the important goals of self-concern and other-concern in his or her close relationships. People with a secure attachment style have positive feelings about themselves and also about others. People with anxious/ambivalent attachment styles feel good about themselves (the goal of self-concern is being met), but they do not have particularly good relations with others. People with avoidant attachment styles are primarily other-concerned. They want desperately to be liked, but they do not have a very positive opinion of themselves; this lack of self-esteem hurts their ability to form good relationships. The fourth cell in the table, lower right, represents people who are not meeting goals of either self-concern or other-concern. We can call this attachment style *fearful-avoidant*.

This way of thinking about attachment shows, again, the importance of both self-concern and other-concern in successful social interaction. People who cannot connect with others do not make good partners. But people who do not feel good about themselves also are not good partners—self-concern goals must be met before we can successfully meet the goals of other-concern.

Table 8.1 Attachment as Self-Concern and Other-Concern

	Other-concern	
Self-concern	Goals are met	Goals are not met
Goals are met	*Secure attachment* (Healthy feelings about the self and about important others)	*Avoidant attachment* (Healthy feelings about the self but fears about connecting with others)
Goals are not met	*Anxious/ambivalent attachment* (Desires to reach out to others but also anxious about the self)	*Fearful attachment* (Relationships with others are poor but so is the self-concept)

Because attachment styles have such an important influence on relationships, you should think carefully about your potential partner's interactions with the other people in his or her life. The quality of the relationships that people have with their parents and close friends will predict the quality of their romantic relationships. But although they are very important, attachment styles do not predict everything. People have many experiences as adults, and these interactions can influence, both positively and negatively, their ability to develop close relationships (Baldwin & Fehr, 1995; Scharfe & Bartholomew, 1994).

Social Psychology in the Public Interest

Internet Relationships

Most of us are spending more time connecting with others electronically, and online close relationships are becoming more popular. But you might wonder whether meeting and interacting with others online can create the same sense of closeness and

caring that we experience through face-to-face encounters. And you might wonder whether people who spend more time on Facebook, Twitter, and the Internet might end up finding less time to engage in activities with the friends and loved ones who are physically close by (Kraut et al., 1998).

Despite these potential concerns, research shows that using the Internet actually has a positive influence on our close relationships (Bargh, 2002; Bargh & McKenna, 2004). In one study, Kraut et al. (2002) found that people who reported using the Internet more frequently also reported spending more time with their family and friends and indicated having better psychological health.

The Internet also seems to be useful for helping people develop new relationships, and the quality of those relationships is as good as or better than those formed face-to-face (Parks & Floyd, 1996). McKenna, Green, and Gleason (2002) found that many people who participated in news and users groups online reported having formed a close relationship with someone they had originally met on the Internet. Over half of the participants said that they had developed a real-life relationship with people they had first met online, and almost a quarter reported that they had married, had become engaged to, or were living with someone they initially met on the Internet.

McKenna, Green, and Gleason (2002) studied how relationships developed online using laboratory studies. In their research, a previously unacquainted male and female college student met each other for the first time either in what they thought was an Internet chat room or face-to-face. Those who met first on the Internet reported liking each other more than those who met first face-to-face—even when it was the same partner that they had met both times. People also report being better able to express their own emotions and experiences to their partners online than in face-to-face meetings (Bargh, McKenna, & Fitzsimons, 2002).

There are probably a number of reasons why Internet relationships can be so successful. For one, relationships grow to the extent that the partners self-disclose by sharing personal information with each other, and the relative anonymity of Internet interactions may allow people to self-disclose more readily. Another characteristic of Internet relationships is the relative lack of physical cues to a person's attractiveness. When physical attractiveness is taken out of the picture, people may be more likely to form relationships on the basis of other more important characteristics, such as similarity in values and beliefs. Another advantage of the Internet is that it allows people to stay in touch with friends and family who are not nearby and to maintain better long-distance relationships (Wellman, Quan Haase, Witte, & Hampton, 2001). The Internet also may be helpful in finding others with shared interests and values. Finally, the major purpose of many Internet activities is to make new friends. In contrast, most face-to-face interactions are less conducive to starting new conversations and friendships.

Overall, then, the evidence suggests that rather than being an isolating activity, interacting with others over the Internet helps us maintain close ties with our family and friends and in many cases helps us form intimate and rewarding relationships.

Hormones and Close Relationships

Because liking and loving are so central to human experience, they are determined in large part by fundamental human biological mechanisms. And one important determinant of our responses to others is the release of hormones. The one that is most directly involved in interpersonal attraction is oxytocin, *a hormone that is important in female reproduction and that also influences social behaviors, including the development of long-term romantic attachments*. Levels of oxytocin increase when mothers nurse their infants, and its presence helps mothers and infants bond (Feldman, Weller, Zagoory-Sharon, & Levine, 2007; Penton-Voak et al., 2003; Pedersen, 2006). But oxytocin also binds us to others in adult close relationships (Floyd, 2006). Oxytocin leads us to trust and cooperate with others (Kirsch et al., 2005; Kosfeld, Heinriches, Zak, Fischbacker, & Fehr, 2005) and, particularly, to respond positively to others who are members of our ingroups. The experience of romantic love is also associated with the release of oxytocin (Gonzaga, Turner, Keltner, Campos, & Altemus, 2006).

The hormones that are released during the female menstrual cycle influence women's attraction to men. Women become more attracted to men, especially to those with symmetrical and particularly masculine characteristics, during the times in their menstrual cycles when they are most likely to become pregnant (Gangestad, Thornhill, & Garver-Apgar, 2005; Pillsworth & Haselton, 2006). It is likely that these preferences were selected evolutionarily because the men who have these characteristics are also more genetically fit (Johnston, Hagel, Franklin, Fink, & Grammer, 2001; Pawlowski & Jasienska, 2005).

The male sex hormone testosterone also relates to liking, but particularly for passionate love. Testosterone is related to an increased sex drive in both men and women. However, over the long term, testosterone does not help people stay together. In comparison with men who are in short-term sexual relationships, those in long-term relationships have relatively lower levels of testosterone, and people who are married have lower levels of testosterone in comparison with people who are single (Dabbs & Dabbs, 2000; Gray et al., 2004).

Making Relationships Last

Now that you have a better idea of the variables that lead to interpersonal attraction and that are important in close relationships, you should be getting a pretty good idea of the things that partners need to do to help them stay together. It is true that many marriages end in divorce, and this number is higher in individualistic cultures, where the focus is on the individual, than it is in collectivistic cultures, where the focus is on maintaining group togetherness. But even in the West, the number of divorces is falling, at least for the most educated segments of U.S. society (Marriage Project, 2011). Successful relationships take work, but the work is worth it. People who are happily married are also happier overall and have better psychological and physical health. And at least for men, marriage leads to a longer life (Kiecolt-Glaser & Newton, 2002).

In part, the ideas of Britain's long-married couple Frank and Anita Milford about what made their relationship so successful are probably correct. Let's look at some of the things that they seem to have done and compare them with what we might expect on the basis of social psychological research.

- **Be prepared for squabbles.** Every relationship has conflict. This is not unexpected or always bad. Working through minor conflicts can help you and your partner improve your social skills and make the relationship stronger (Pickett & Gardner, 2005).
- **Don't be negative.** Negative cognitions and emotions have an extremely harmful influence on relationships (Gottman, 1994). Don't let a spiral of negative thinking and negative behaviors get started. Do whatever you can to think positively.
- **Be fair in how you evaluate behaviors.** People in close relationships, as do most people in their everyday lives, tend to inflate their own self-worth. They rate their own positive behaviors as better than their partner's, and rate their partner's negative behaviors as worse than their own. Try to give your partner the benefit of the doubt—remember that you are not perfect either.
- **Don't do something dumb.** Relationships break up when one or both of the partners betray the relationship. Of course sexual infidelities create a major strain, but women are also concerned about emotional infidelity in their partners. (Men: Stop flirting; it will make your partner jealous!) Marriages are happier when the partners focus on each other and not on other potential mates (Maner et al., 2009).
- **Do things that please your partner.** The principles of social exchange make it clear that being nice to others leads them to be nice in return.
- **Have fun.** Relationships in which the partners have positive moods and in which the partners are not bored tend to last longer (Tsapelas, Aron, & Orbuch, 2009).
- **Stop fighting.** Conflict in relationships leads to divorce (Birditt, Brown, Orbuch, & McIlvane, 2010). Learn to talk with your partner in positive, rather than negative, ways.

Partners who are able to remain similar in their values and other beliefs are going to be more successful. This seems to have been the case for Frank and Anita—they continued to share activities and interests. Partners must also display positive affect toward each other. Happy couples are in positive moods when they are around each other—they laugh together, and they express approval rather than criticism of each other's behaviors. Partners are happier when they view the other person in a positive or even "idealized" sense rather than in a more realistic and perhaps more negative one (Murray, Holmes, & Griffin, 1996). Anita and Frank talked in their interview about how their time together was characterized by positive feelings and romance, and perhaps that helped them stay together.

Next, the partners must share, in the sense that they are willing to express their thoughts about each other. Successful relationships involve self-disclosure of one's own needs and desires, which allows the partner to become aware of the needs of the other and attempt to meet them if possible. If the partners are not able to express their concerns, then the relationship cannot become more intimate. Successful relationships have successful communication patterns.

Finally, but not least important, are social behaviors. Many people think (based in part on what they see on TV and read about) that extramarital affairs are a common part of close relationships. But research suggests that this is not the case. A survey by the Chicago Social Health and Life Survey (Chicago Health and Social Life Survey, 2011) found not only that 87% of married partners

believe that extramarital sex is wrong but that the partners also seemed to act in accordance with these values. In answering the survey, 75% of the men and 90% of the women claimed to have been completely faithful to their partner over their entire marriage. And extramarital affairs, when they do occur, are likely to be one-time events.

These data confirm that partners must refrain from engaging in behaviors that are harmful to the relationship, such as cheating on a partner, because these are naturally disruptive to a happy relationship. Partners do not expect or tolerate cheating. “Open marriages” do not work; infidelity in relationships is strongly associated with divorce (Wiederman, 1997).

Even if a person does not actually cheat by having sex with someone else, his or her partner may still be jealous, and jealously can harm relationships. Jealousy is a powerful emotion that has been evolutionarily selected to help maintain close relationships. Both men and women experience jealousy, although they experience it to different extents and in different ways. Men are more jealous than women overall. And men are more concerned than women about sexual infidelities of their partners, whereas women are relatively more concerned about emotional infidelities of their partners (Buss, Larsen, Westen, & Semmelroth, 1992). Men’s concern with sexual cheating is probably due in large part to evolutionary factors related to kin selection: Men need to be particularly sure that their partners are sexually faithful to them to ensure that the time they spend raising children is spent on raising their own children, not those of others. And women’s concern with emotional fidelity fits with a focus on maintaining the relationship intact. Flirting suggests that the man is not really committed to the relationship and may leave it.

When Relationships End

Inevitably, some relationships do break up, and these separations may cause substantial pain. When the partners have been together for a long time, particularly in a relationship characterized by interdependence and commitment, the pain is even greater (Simpson, 1987). The pain of a breakup is in part due to the loneliness that results from it. People who lose someone they care about also lose a substantial amount of social support, and it takes time to recover and develop new social connections. Lonely people sleep more poorly, take longer to recover from stress, and show poorer health overall (Cacioppo et al., 2002).

The pain of a loss may be magnified when people feel that they have been rejected by the other. The experience of rejection makes people sad, angry, more likely to break social norms, and more focused on self-concern. The ability to effectively self-regulate is lowered, and people are more likely to act on their impulses (Baumeister, DeWall, Ciarocco, & Twenge, 2005). But people who have been rejected are also more motivated by other-concern; they are particularly likely to try to make new friends to help make up for the rejection (Gardner, Pickett, & Brewer, 2000). Although people who have been rejected are particularly hurt, people who have rejected others may feel guilty about it.

Breaking up is painful, but people do recover from it, and they usually move on to find new relationships. Margaret Stroebe and her colleagues (Stroebe, Hansson, Schut, & Stroebe, 2008) found that people adjusted to the loss of a partner, even one with whom they had been together for a long time, although many did have increased psychological difficulties, at least in the short term.

Key Takeaways

- The factors that keep people liking each other in long-term relationships are at least in part the same as the factors that lead to initial attraction.
- Over time, cognition becomes relatively more important than passion, and close relationships are more likely to be based on companionate love than on passionate love.
- In successful relationships, the partners begin to feel close to each other and become attuned to each other’s needs.
- Partners in close relationships become interdependent and develop a commitment to the relationship.
- Attachment styles, formed in infancy, predict how people relate to others in close relationships as adults.
- Close relationships are influenced by fundamental human biological mechanisms, particularly the release of hormones, such as oxytocin.

Exercises and Critical Thinking

1. Imagine that you are in a romantic relationship with someone you really care about and that you would really like the relationship to last. List three strategies that you might use to help keep the relationship happy and harmonious.
2. Analyze a well-known Hollywood romance that has lasted (or that has not lasted). Do the variables that we have considered in this chapter seem to help explain the outcome of the relationship?

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7.3: Building and Maintaining Effective Relationships

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7.3.1: Independence and Sharing

Learning Objectives

- Distinguish between the need for a certain level of maturity, independence, and self-fulfillment of each partner in a relationship for it to thrive rather than being a mutually dependent kind of relationship.



Watch this video or scan the QR code to view ways to be independent in a relationship.

Famous quote

"Let there be spaces in your togetherness,

And let the winds of the heavens dance between you. Love one another, but make not a bond of love:

Let it rather be a moving sea between the shores of your souls.

Fill each other's cup but drink not from one cup. Give one another of your bread but eat not from the same loaf.

Sing and dance together and be joyous, but let each one of you be alone,

Even as the strings of a lute are alone though they quiver with the same music.

Give your hearts, but not into each other's keeping. For Only the hand of Life can contain your hearts. And stand together yet not too near together: For the pillars of the temple stand apart,

And the oak tree and the cypress grow not in each other's shadow."

from *The Prophet* — Kahlil Gibran (1923)

I have already claimed that it is generally better for both partners in a love or marriage relationship to be fully functioning, capable, independent people for the reason that if one dies or is incapacitated, the other should not then also have to be incapacitated. Grief does not entail prolonged incapacitation. "Some grief shows much of love, but much of grief shows still some want of wit." — from Romeo and Juliet. Further, I stated that people should be independent so that they do not waste whatever potential for good they, as human beings, might be capable of fulfilling. The ads on television say that a mind is a terrible thing to waste. That is true, but so are other potential qualities toward the good — artistic ability, athletic ability, development in matters of taste and appreciation, etc. I sometimes wonder how many people, particularly women, with the potential to have been like Bach, Einstein, or da Vinci are now living or have anonymously lived and died without being able to develop the talents they were born with and without therefore being able also to make the contribution to civilization they could have, had "civilization" only been kinder and more respectful to them.

But there is a further reason that I think it is important for people to be independent, or capable of independence, from each other; and that is that two whole, fully functioning people can bring far more to a relationship and to each other (as well as to themselves) than can two dependent "half" people. Two people who share full or "whole" lives and characters, bring to a relationship more than two people who share "half" lives.

Now, of course, in most areas of modern civilization, people are not totally independent of others, not for their food, their plumbing, their transportation, electricity, working materials, their jobs, etc. Nor would that generally be a very efficient and desirable state of affairs. And in the homes, though it may be possible for either to get along perfectly well without the other, still it is easier and more efficient and generally better if tasks are divided and shared reasonably and fairly. I believe in fairly appropriated interdependence and in taking care of each others' deserved needs and reasonable desires, so I am not talking about some remote or hermit-like, Spartan, lonely, ascetic type of independent lifestyle. Rather, I am speaking about being free from an ***incapacitating type of dependence*** where one person is unable to function in some sort of normal way without the other's companionship or direction. And I am also talking about an emotional independence, an independence of the spirit, an independence that allows one to live an active and productive life, developing one's good talents and abilities and one's own interests and happiness as much as

possible without being stifled (whether one realizes it or not) because one has to unreasonably submerge one's identity to another, needlessly and unfairly sacrifice one's energy and time to another's undeserved needs, or depend on another's successes, joys, and values for one's own successes, joys, and values. Then the moments you do share together can be ones in which both of you bring things to each other to share — new ideas, new insights, new experiences, new feelings, new creations, and in general simply a vibrant new freshness and vitality that continually expand the foundation and the comfortable old areas of togetherness you now enjoy.

Relationships can easily get into a rut and can get bogged down in the business pursuits of either of you or in tending to wet diapers, runny noses, car-pooling, and keeping up with the latest fashions and fads. It is perhaps hard enough to avoid that if you try to; it is nearly impossible if you do not. Relationships can be hard to hold on to if there is little stability amidst incessant change, but they can also grow monotonous, brittle, and stale with incessant routine and little change or growth. Independence, where needed, for individual pursuit of growth and achievement by each partner should provide some of the growth for the relationship; commitment and sharing, some of the stability. I say "where needed" because there are some rare couples who can grow best in each others' nearly constant companionship because they each serve as a stimulus and catalyst and as a source of ideas and energy for the other. And by "sharing" I mean with curiosity and enthusiasm and by attentive discussion between both concerning the areas of interest they each have and the areas of growth they each achieve. If two people in a relationship are each contributing exciting and worthwhile things to each other, both can benefit. When either or both are stifled from achieving and contributing, both can suffer, or at least not be as well off as they might be.

This is not to say one must be continually active, creative, reflective or studious; but there is some happy medium, I am sure, between that and never growing or expanding your horizons, or your and your partner's horizons as a couple.

Now when I speak of independence, I am not speaking of sexual independence or licentiousness nor of any sort of unethical dismissal or denial of one's obligations to his or her partner.

And I am definitely not speaking of the kind of financial independence so many people in the 1980's seemed to be needlessly or futilely pursuing, too often at the expense of their relationships and/or their children, often at the expense of their more important talents and abilities, and often even at the expense of a more durable kind of happiness or satisfaction or other things of greater value than money. To work at a job that you really do not need whose only benefit is financial, as so many jobs are, seems to me almost as bad as being a slave to unfair, unaided, and unrelenting housework and chauffeuring. It is a change of masters without a change of merit. Of course, no one who could afford to do otherwise should have to stay home in order just to do mindless tasks; but going out to do mindless tasks for money is not a significant lifestyle improvement over staying home to do them, particularly if conditions at home could be improved by sharing chores, getting some help, and/or doing things that are worthwhile in between, during, or before or after chores. I read once where Robert Kennedy used to play recordings of Shakespearian works to listen to while he showered. The study of any topic at home with books, audiotapes, or videotapes is fairly easy. Audiotapes are even good to listen to in the car while chauffeuring children or otherwise driving around. If a job has merit above just its money, that is one thing, but if the job is oppressive or prevents the development of your talents and important growth, is of no real value to society, is only a means of redistributing society's wealth, and drains your energy and spirits, then the money hardly makes up for that — unless you absolutely need the money to live and cannot get a better job. If a man or woman works at a socially valueless, oppressive, and stifling job just for some unnecessary additional material gain, then he or she is probably missing many things of higher value, even though in a materialistic and consumer-oriented society they may not be of popular value. To be able to afford the best stereo but unable to have the desire or the time and energy to learn to appreciate good music; to be able to afford distant travels but unable to appreciate different people's customs, civilizations, psychologies, and philosophies and to disparage them because they are not like your own; to be able to build the finest homes that you never get to enjoy; to be able to afford good daycare for your children or the finest schools but not be able to spend time with them yourself and then wonder why they turn out different from you or not the way you wanted — seems to be a misuse of your most valuable resources, your time, energy, and talent. Parents may honestly try to better their children's lives by working hard to be able to buy things the children might like, but the children might benefit far more from their parents' time and energy than from the money obtained at the expense of that time and energy.

Jobs can take on undeserved importance just from the time and effort they require, or because they are an improvement over what you were used to, or because you are good at it. But you have to continue to question whether the job is really affording you the kind of life you really want or ought to have, whether it is allowing you to make the kind of contribution to society and/or to your

family you ought to be making, and whether there might not be a better job for you or a better means of attaining the life that would be the best you can reasonably achieve.

How sad it is to speak with intelligent people of moderate or better material means who can only speak of money or the (implied) costs of acquisitions and not their more edifying characteristics. It is particularly sad or disappointing because these are the people with the ability, resources, position, and potential leisure to have easily attained some wisdom. After a tremendous performance by a world-renowned violinist, invited to help celebrate a city orchestra's 75th anniversary, the only idea the president of one of the orchestra's prominent auxiliary groups would discuss at a post-concert party, and he did that obsessively, was "Do you know how much per minute we had to pay that guy to perform here today?"

And too many such people can only have conversations about the latest resort they visited, their new decor, or their children's or spouse's latest accomplishments. Of course taking a helpful interest in one's family and some deserved pride in their worthwhile accomplishments is a good thing but not at the total sacrifice of self and certainly not for hollow achievements that are just a gain of (additional) money and power for the use of which you have no personally or socially particularly good end.

Finally, in a different vein, a number of people think that love for others must begin with some sort of self-love or self-respect. In the usual context for this sort of claim, love for others seems to mean respect, concern, and decent behavior toward others, not just some kind of attraction. I suspect this claim is better expressed as advice to be an independent, fully functioning, constantly maturing and developing an individual with something to offer both oneself and others in terms of traits and deeds that are good and that are satisfying, with the desire to bring deserving others the benefits and joys one can. Otherwise I do not see the point, for there are many unloving (that is, inconsiderate) persons who respect and love themselves beyond merit and who always give themselves first or sole consideration; and there are some people who have low self-esteem and poor self-image who are yet (and perhaps in some cases because of it) very considerate, kind, competent, loving people with a great deal to offer others.

Key Takeaways

- A loving relationship should generally be between partners who each contribute to enrich the life of the other beyond a normal level one should achieve independently, not a mere symbiotic relationship between two people who cannot function sufficiently either emotionally or practically on their own.
- A love relationship should be a relationship between two 'whole' people, not two 'half people'.

Key Terms

- An ***incapacitating type of dependence*** *is* where one person is unable to function in some sort of normal way without the other's companionship or direction.

Review Questions

- **Question**: What are the reasons it is better for both partners in a love or marriage relationship to be fully functioning instead of just mutually dependent on each other?

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CHAPTER OVERVIEW

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CHAPTER OVERVIEW

9: Social Psychology

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9.1: Introduction to Social Psychology

6.1: Introduction to Social Psychology

Learning Objectives

1. Define *social psychology*.
2. Review the history of the field of social psychology and the topics that social psychologists study.
3. Summarize the principles of evolutionary psychology.
4. Describe and provide examples of the person-situation interaction.
5. Review the concepts of (a) social norms and (b) cultures.

The field of social psychology is growing rapidly and is having an increasingly important influence on how we think about human behavior. Newspapers, websites, and other media frequently report the findings of social psychologists, and the results of social psychological research are influencing decisions in a wide variety of areas. Let's begin with a short history of the field of social psychology and then turn to a review of the basic principles of the science of social psychology.

The Person and the Social Situation

Social psychology is the study of the dynamic relationship between individuals and the people around them (see Figure 1.1 "The Person-Situation Interaction"). Each of us is different, and our individual characteristics, including our personality traits, desires, motivations, and emotions, have an important impact on our social behavior. But our behavior is also profoundly influenced by the social situation—*the people with whom we interact every day*. These people include our friends and family, our fraternity brothers or sorority sisters, our religious groups, the people we see on TV or read about or interact with on the web, as well as people we think about, remember, or even imagine.

Figure 1.1 The Person-Situation Interaction



Social psychologists believe that human behavior is determined by both a person's characteristics and the social situation. They also believe that the social situation is frequently a stronger influence on behavior than are a person's characteristics.

Social psychology is largely the study of the social situation. Our social situations create social influence, *the process through which other people change our thoughts, feelings, and behaviors and through which we change theirs*. Maybe you can already see how the social influence provided by the members of the Heaven's Gate cult was at work in the Hale-Bopp suicide.

Kurt Lewin formalized the joint influence of person variables and situational variables, which is known as the *person-situation interaction*, in an important equation:

Behavior = *f* (person, social situation).

Lewin's equation indicates that the behavior of a given person at any given time is a function of (depends on) both the characteristics of the person and the influence of the social situation.

Evolutionary Adaptation and Human Characteristics

In Lewin's equation, *person* refers to the characteristics of the individual human being. People are born with skills that allow them to successfully interact with others in their social world. Newborns are able to recognize faces and to respond to human voices,

young children learn language and develop friendships with other children, adolescents become interested in sex and are destined to fall in love, most adults marry and have children, and most people usually get along with others.

People have these particular characteristics because we have all been similarly shaped through human evolution. The genetic code that defines human beings has provided us with specialized social skills that are important to survival. Just as keen eyesight, physical strength, and resistance to disease helped our ancestors survive, so too did the tendency to engage in social behaviors. We quickly make judgments about other people, help other people who are in need, and enjoy working together in social groups because these behaviors helped our ancestors to adapt and were passed along on their genes to the next generation (Ackerman & Kenrick, 2008; Barrett & Kurzban, 2006; Pinker, 2002). Our extraordinary social skills are primarily due to our large brains and the social intelligence that they provide us with (Herrmann, Call, Hernández-Lloreda, Hare, & Tomasello, 2007).

The assumption that human nature, including much of our social behavior, is determined largely by our evolutionary past is known as evolutionary adaptation (Buss & Kenrick, 1998; Workman & Reader, 2008). In evolutionary theory, fitness*refers to the extent to which having a given characteristic helps the individual organism to survive and to reproduce at a higher rate than do other members of the species who do not have the characteristic*. Fitter organisms pass on their genes more successfully to later generations, making the characteristics that produce fitness more likely to become part of the organisms' nature than are characteristics that do not produce fitness. For example, it has been argued that the emotion of jealousy has survived over time in men because men who experience jealousy are more fit than men who do not. According to this idea, the experience of jealousy leads men to protect their mates and guard against rivals, which increases their reproductive success (Buss, 2000).

Although our biological makeup prepares us to be human beings, it is important to remember that our genes do not really determine who we are. Rather, genes provide us with our human characteristics, and these characteristics give us the tendency to behave in a "human" way. And yet each human being is different from every other human being.

Evolutionary adaption has provided us with two fundamental motivations that guide us and help us lead productive and effective lives. One of these motivations relates to the self—the motivation to *protect and enhance the self and the people who are psychologically close to us*; the other relates to the social situation—the motivation to *affiliate with, accept, and be accepted by others*. We will refer to these two motivations as self-concern and other-concern respectively.

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9.2: The History of Social Psychology

6.2: The History of Social Psychology

The science of social psychology began when scientists first started to systematically and formally measure the thoughts, feelings, and behaviors of human beings (Kruglanski & Stroebe, 2011). The earliest social psychology experiments on group behavior were conducted before 1900 (Triplett, 1898), and the first social psychology textbooks were published in 1908 (McDougall, 1908/2003; Ross, 1908/1974). During the 1940s and 1950s, the social psychologists Kurt Lewin and Leon Festinger refined the experimental approach to studying behavior, creating social psychology as a rigorous scientific discipline. Lewin is sometimes known as "the father of social psychology" because he initially developed many of the important ideas of the discipline, including a focus on the dynamic interactions among people. In 1954, Festinger edited an influential book called *Research Methods in the Behavioral Sciences*, in which he and other social psychologists stressed the need to measure variables and to use laboratory experiments to systematically test research hypotheses about social behavior. He also noted that it might be necessary in these experiments to deceive the participants about the true nature of the research.

Social psychology was energized by researchers who attempted to understand how the German dictator Adolf Hitler could have produced such extreme obedience and horrendous behaviors in his followers during the Second World War. The studies on conformity conducted by Muzafir Sherif (1936) and Solomon Asch (1952), as well as those on obedience by Stanley Milgram (1974), showed the importance of conformity pressures in social groups and how people in authority could create obedience, even to the extent of leading people to cause severe harm to others. Philip Zimbardo, in his well-known "prison experiment" (Haney, Banks, & Zimbardo, 1973), found that ordinary male college students who were recruited to play the roles of guards and prisoners in a simulated prison became so involved in their assignments, and their interaction became so violent, that the study had to be terminated early. This research again demonstrated the power of the social setting.

Social psychology quickly expanded to study other topics. John Darley and Bibb Latané (1968) developed a model that helped explain when people do and do not help others in need, and Leonard Berkowitz (1974) pioneered the study of human aggression. Meanwhile, other social psychologists, including Irving Janis (1972), focused on group behavior, studying why intelligent people sometimes made decisions that led to disastrous results when they worked together. Still other social psychologists, including Gordon Allport and Muzafir Sherif, focused on intergroup relations, with the goal of understanding and potentially reducing the occurrence of stereotyping, prejudice, and discrimination. Social psychologists gave their opinions in the 1954 *Brown v. Board of Education* Supreme Court case that helped end racial segregation in U.S. public schools, and social psychologists still frequently serve as expert witnesses on these and other topics (Fiske, Bersoff, Borgida, Deaux, & Heilman, 1991).

The latter part of the 20th century saw an expansion of social psychology into the field of attitudes, with a particular emphasis on cognitive processes. During this time, social psychologists developed the first formal models of persuasion, with the goal of understanding how advertisers and other people could present their messages to make them most effective (Eagly & Chaiken, 1993; Hovland, Janis, & Kelley, 1963). These approaches to attitudes focused on the cognitive processes that people use when evaluating messages and on the relationship between attitudes and behavior. Leon Festinger's (1957) important cognitive dissonance theory was developed during this time and became a model for later research.

In the 1970s and 1980s, social psychology became even more cognitive in orientation as social psychologists used advances in cognitive psychology, which were themselves based largely on advances in computer technology, to inform the field (Fiske & Taylor, 2008). The focus of these researchers, including Alice Eagly, Susan Fiske, E. Tory Higgins, Richard Nisbett, Lee Ross, Shelley Taylor, and many others, was on *social cognition*—an understanding of how our knowledge about our social worlds develops through experience and the influence of these knowledge structures on memory, information processing, attitudes, and judgment. Furthermore, the extent to which humans' decision making could be flawed by both cognitive and motivational processes was documented (Kahneman, Slovic, & Tversky, 1982).

In the 21st century, the field of social psychology has been expanding into still other areas. Examples that we will consider in this book include an interest in how social situations influence our health and happiness, the important roles of evolutionary experiences and cultures on our behavior, and the field of social neuroscience—*the study of how our social behavior both influences and is influenced by the activities of our brain* (Lieberman, 2010). Social psychologists continue to seek new ways to measure and understand social behavior, and the field continues to evolve. I cannot predict where social psychology will be directed in the future, but I have no doubt that it will still be alive and vibrant.

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9.3: Self-Concern and Other Concerns

6.3: Self-Concern and Other-Concern

Self-Concern

The most basic tendency of all living organisms, and the focus of the first human motivation, is the desire to protect and enhance one's own life and the lives of the people who are close to us. Humans are motivated to find food and water, to obtain adequate shelter, and to protect themselves from danger. Doing so is necessary because we can survive only if we are able to meet these fundamental goals.

The desire to maintain and enhance the self also leads us to do the same for our relatives—those people who are genetically related to us. Human beings, like other animals, exhibit kin selection—*strategies that favor the reproductive success of one's relatives, sometimes even at a cost to the individual's own survival*. According to evolutionary principles, kin selection occurs because behaviors that enhance the fitness of relatives, even if they lower the fitness of the individual himself or herself, may nevertheless increase the survival of the group as a whole.



The evolutionary principle of kin selection leads us to be particularly caring of and helpful to those who share our genes.

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In addition to our kin, we desire to protect, improve, and enhance the well-being of our ingroup: *those whom we view as being similar and important to us and with whom we share close social connections*, even if those people do not actually share our genes. Perhaps you remember a time when you helped friends move all their furniture into a new apartment, even when you would have preferred to be doing something more beneficial for yourself, such as studying or relaxing. You wouldn't have helped strangers in this way, but you did it for your friends because you felt close to and cared about them. The tendency to help the people we feel close to, even if they are not related to us, is probably due in part to our evolutionary past: The people we were closest to were usually those we were related to.

Other-Concern

Although we are primarily concerned with the survival of ourselves, our kin, and those who we feel are similar and important to us, we also desire to connect with and be accepted by other people more generally—the goal of *other-concern*. We live together in communities, we work together in work groups, we may worship together in religious groups, and we may play together on sports teams and through clubs. Affiliating with other people—even strangers—helps us meet a fundamental goal: that of finding a romantic partner with whom we can have children. Our connections with others also provide us with other opportunities that we would not have on our own. We can go to the grocery to buy milk or eggs, and we can hire a carpenter to build a house for us. And we ourselves do work that provides goods and services for others. This mutual cooperation is beneficial both for us and for the people around us. We also affiliate because we enjoy being with others, being part of social groups, and contributing to social discourse (Leary & Cox, 2008).

What the other-concern motive means is that we do not always put ourselves first. Being human also involves caring about, helping, and cooperating with other people. Although our genes are themselves "selfish" (Dawkins, 2006), this does not mean that individuals always are. The survival of our own genes may be improved by helping others, even those who are not related to us (Krebs, 2008; Park, Schaller, & Van Vugt, 2008). Just as birds and other animals may give out alarm calls to other animals to indicate that a predator is nearby, humans engage in altruistic behaviors in which they help others, sometimes at a potential cost to themselves.

In short, human beings behave *morally* toward others—they understand that it is wrong to harm other people without a strong reason for doing so, and they display compassion and even altruism toward others (Goetz, Keltner, & Simon-Thomas, 2010; Turiel, 1983). As a result, negative behaviors toward others, such as bullying, cheating, stealing, and aggression, are unusual, unexpected, and socially disapproved. Of course this does not mean that people are always friendly, helpful, and nice to each other—powerful social situations can and do create negative behaviors. But the fundamental human motivation of other-concern does mean that hostility and violence are the exception rather than the rule of human behavior.

Sometimes the goals of self-concern and other-concern go hand in hand. When we fall in love with another person, it is in part about a concern for connecting with someone else but is also about self-concern—falling in love makes us feel good about ourselves. And when we volunteer to help others who are in need, it is in part for their benefit but also for us. We feel good when we help others. At other times, however, the goals of self-concern and other-concern conflict. Imagine that you are walking across campus and you see a man with a knife threatening another person. Do you intervene, or do you turn away? In this case, your desire to help the other person (other-concern) is in direct conflict with your desire to protect yourself from the danger posed by the situation (self-concern), and you must decide which goal to put first. We will see many more examples of the motives of self-concern and other-concern, both working together and working against each other, throughout this book.



Other-concern is a fundamental part of the behavior of humans and many animals.

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9.4: Social Situations and Social Influence

6.4: Social Situations and Social Influence

The Social Situation Creates Powerful Social Influence

When people are asked to indicate the things that they value the most, they usually mention their social situation—that is, their relationships with other people (Baumeister & Leary, 1995; Fiske & Haslam, 1996). When we work together on a class project, volunteer at a homeless shelter, or serve on a jury in a courtroom trial, we count on others to work with us to get the job done. We develop social bonds with those people, and we expect that they will come through to help us meet our goals. The importance of others shows up in every aspect of our lives—other people teach us what we should and shouldn't do, what we should and shouldn't think, and even what we should and shouldn't like and dislike.

In addition to the people with whom we are currently interacting, we are influenced by people who are not physically present but who are nevertheless part of our thoughts and feelings. Imagine that you are driving home on a deserted country road late at night. No cars are visible in any direction, and you can see for miles. You come to a stop sign. What do you do? Most likely, you stop at the sign, or at least slow down. You do so because the behavior has been internalized: Even though no one is there to watch you, others are still influencing you—you've learned about the rules and laws of society, what's right and what's wrong, and you tend to obey them. We carry our own personal social situations—our experiences with our parents, teachers, leaders, authorities, and friends—around with us every day.

An important principle of social psychology, one that will be with us throughout this book, is that although individuals' characteristics do matter, the social situation is often a stronger determinant of behavior than is personality. When social psychologists analyze an event such as a cult suicide, they are likely to focus more on the characteristics of the situation (e.g., the strong leader and the group pressure provided by the other group members) than on the characteristics of the cult members themselves. As an example, we will see that even ordinary people who are neither bad nor evil in any way can nevertheless be placed in situations in which an authority figure is able to lead them to engage in evil behaviors, such as applying potentially lethal levels of electrical shock (Milgram, 1974).

In addition to discovering the remarkable extent to which our behavior is influenced by our social situation, social psychologists have discovered that we often do not recognize how important the social situation is in determining behavior. We often wrongly think that we and others act entirely on our own accord, without any external influences. It is tempting to assume that the people who commit extreme acts, such as terrorists or members of suicide cults, are unusual or extreme people. And yet much research suggests that these behaviors are caused more by the social situation than they are by the characteristics of the individuals and that it is wrong to focus so strongly on explanations of individuals' characteristics (Gilbert & Malone, 1995).

There is perhaps no clearer example of the powerful influence of the social situation than that found in research showing the enormous role that others play in our physical and mental health. Social support *refers to the comfort that we receive from the people around us—for instance, our family, friends, classmates, and coworkers* (Diener, Suh, Lucas, & Smith, 1999; Diener, Tamir, & Scollon, 2006).

Social Psychology in the Public Interest

How the Social Situation Influences Our Mental and Physical Health

In comparison with those who do not feel that they have a network of others they can rely on, people who feel that they have adequate social support report being happier and have also been found to have fewer psychological problems, including eating disorders and mental illness (Diener, Suh, Lucas, & Smith, 1999; Diener, Tamir, & Scollon, 2006).

People with social support are less depressed overall, recover faster from negative events, and are less likely to commit suicide (Au, Lau, & Lee, 2009; Bertera, 2007; Compton, Thompson, & Kaslow, 2005; Skärsäter, Langius, Ågren, Häagström, & Dencker, 2005). Married people report being happier than unmarried people (Pew, 2006), and overall, a happy marriage is an excellent form of social support. One of the goals of effective psychotherapy is to help people generate better social support networks because such relationships have such a positive effect on mental health.

In addition to having better mental health, people who have adequate social support are more physically healthy. They have fewer diseases (such as tuberculosis, heart attacks, and cancer), live longer, have lower blood pressure, and have fewer deaths at all ages (Cohen & Wills, 1985; Stroebe & Stroebe, 1996). Sports psychologists have even found that individuals with higher levels of social

support are less likely to be injured playing sports and recover more quickly from injuries they do receive (Hardy, Richman, & Rosenfeld, 1991). These differences appear to be due to the positive effects of social support upon physiological functioning, including the immune system.

The opposite of social support is the feeling of being excluded or ostracized. Feeling that others are excluding us is painful, and the pain of rejection may linger even longer than physical pain. People who were asked to recall an event that caused them social pain (e.g., betrayal by a person very close to them) rated the pain as more intense than they rated their memories of intense physical pain (Chen, Williams, Fitness, & Newton, 2008). When people are threatened with social exclusion, they subsequently express greater interest in making new friends, increase their desire to work cooperatively with others, form more positive first impressions of new potential interaction partners, and even become more able to discriminate between real smiles and fake smiles (Bernstein, Young, Brown, Sacco, & Claypool, 2008; Maner, DeWall, Baumeister, & Schaller, 2007).

Because connecting with others is such an important part of human experience, we may sometimes withhold affiliation from or ostracize other people in order to attempt to force them to conform to our wishes. When individuals of the Amish religion violate the rulings of an elder, they are placed under a *Meidung*. During this time, and until they make amends, they are not spoken to by community members. And people frequently use the "silent treatment" to express their disapproval of a friend's or partner's behavior. The pain of ostracism is particularly strong in adolescents (Sebastian, Viding, Williams, & Blakemore, 2010).

The use of ostracism has also been observed in parents and children, and even in Internet games and chat rooms (Williams, Cheung, & Choi, 2000). The silent treatment and other forms of ostracism are popular because they work. Withholding social communication and interaction is a powerful weapon for punishing individuals and forcing them to change their behaviors. Individuals who are ostracized report feeling alone, frustrated, sad, and unworthy and having lower self-esteem (Bastian & Haslam, 2010).

Taken together, then, social psychological research results suggest that one of the most important things you can do for yourself is to develop a stable support network. Reaching out to other people benefits those who become your friends (because you are in their support network) and has substantial benefits for you.

Social Influence Creates Social Norms

In some cases, social influence occurs rather passively, without any obvious intent of one person to influence the other, such as when we learn about and adopt the beliefs and behaviors of the people around us, often without really being aware that we are doing so. Social influence occurs when a young child adopts the beliefs and values of his or her parents or when we start liking jazz music, without really being aware of it, because our roommate plays a lot of it. In other cases, social influence is anything but subtle; it involves one or more individuals actively attempting to change the beliefs or behaviors of others, as is evident in the attempts of the members of a jury to get a dissenting member to change his or her opinion, the use of a popular sports figure to encourage children to buy products, or the messages that cult leaders give to their followers to encourage them to engage in the behaviors required of the group.

One outcome of social influence is the development of social norms—*the ways of thinking, feeling, or behaving that are shared by group members and perceived by them as appropriate* (Asch, 1955; Cialdini, 1993). Norms include customs, traditions, standards, and rules, as well as the general values of the group. Through norms, we learn what people actually do ("people in the United States are more likely to eat scrambled eggs in the morning and spaghetti in the evening, rather than vice versa") and also what we should do ("do unto others as you would have them do unto you") and shouldn't do ("do not make racist jokes"). There are norms about almost every possible social behavior, and these norms have a big influence on our actions.

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9.5: Cultural Considerations

6.5: Cultural Considerations

The social norms that guide our everyday behaviors and that create social influence derive in large part from our culture. A culture represents *a group of people, normally living within a given geographical region, who share a common set of social norms, including religious and family values and moral beliefs* (Fiske, Kitayama, Markus, & Nisbett, 1998; Matsumoto, 2001). The culture in which we live affects our thoughts, feelings, and behavior through teaching, imitation, and other forms of social transmission (Mesoudi, 2009). It is not inappropriate to say that our culture defines our lives just as much as our evolutionary experience does.

Cultures differ in terms of the particular norms that they find important and that guide the behavior of the group members. Social psychologists have found that there is a fundamental difference in social norms between Western cultures (including the United States, Canada, Western Europe, Australia, and New Zealand) and East Asian cultures (including China, Japan, Taiwan, Korea, India, and Southeast Asia). Norms in Western cultures are primarily oriented toward individualism—*cultural norms, common in Western societies, that focus primarily on self-enhancement and independence*. Children in Western cultures are taught to develop and value a sense of their personal self and to see themselves as largely separate from the people around them. Children in Western cultures feel special about themselves—they enjoy getting gold stars on their projects and the best grade in the class (Markus, Mullally, & Kitayama, 1997). Adults in Western cultures are oriented toward promoting their own individual success, frequently in comparison with (or even at the expense of) others. When asked to describe themselves, individuals in Western cultures generally tend to indicate that they like to "do their own thing," prefer to live their lives independently, and base their happiness and self-worth upon their own personal achievements. In short, in Western cultures the emphasis is on self-concern.

Norms in the East Asian cultures, on the other hand, are more focused on other-concern. *These norms indicate that people should be more fundamentally connected with others and thus are more oriented toward interdependence*, or collectivism. In East Asian cultures, children are taught to focus on developing harmonious social relationships with others, and the predominant norms relate to group togetherness, connectedness, and duty and responsibility to one's family. The members of East Asian cultures, when asked to describe themselves, indicate that they are particularly concerned about the interests of others, including their close friends and their colleagues. As one example of these cultural differences, research conducted by Shinobu Kitayama and his colleagues (Uchida, Norasakkunkit, & Kitayama, 2004) found that East Asians were more likely than Westerners to experience happiness as a result of their connections with other people, whereas Westerners were more likely to experience happiness as a result of their own personal accomplishments.



People from Western cultures are, on average, more individualistic than people from Eastern cultures, who are, on average, more collectivistic.

Nathan Rupert – Single – CC BY-NC-ND 2.0; LindaDee2006 – CC BY-NC-ND 2.0.

Other researchers have studied other cultural differences, such as variations in orientations toward time. Some cultures are more concerned with arriving and departing according to a fixed schedule, whereas others consider time in a more flexible manner (Levine & Norenzayan, 1999). Levine and colleagues (1999) found that "the pace of life," as assessed by average walking speed in downtown locations and the speed with which postal clerks completed a simple request, was fastest in Western countries (but also including Japan) and slowest in economically undeveloped countries. It has also been argued that there are differences in the extent to which people in different cultures are bound by social norms and customs, rather than being free to express their own individuality without regard to considering social norms (Gelfand et al., 1996). And there are also cultural differences regarding personal space, such as how close individuals stand to each other when talking, as well as differences in the communication styles individuals employ.

It is important to be aware of cultures and cultural differences, at least in part because people with different cultural backgrounds are increasingly coming into contact with each other as a result of increased travel and immigration and the development of the Internet and other forms of communication. In the United States, for instance, there are many different ethnic groups, and the proportion of the population that comes from minority (non-White) groups is increasing from year to year. Minorities will account for a much larger proportion of the total new entries into the U.S. workforce over the next decades. In fact, minorities, which are now roughly one third of the U.S. population, are expected to become the majority by 2042, and the United States is expected to be 54% minority by 2050. By 2023, more than half of all children will be minorities (U.S. Census Bureau, n.d.). These changes will result in considerable growth in cultural diversity in the United States, and although this will create the potential for useful cooperation and productive interaction, it may also produce unwanted social conflict. Being aware of cultural differences and considering their influence on how we behave toward others is an important part of a basic understanding of social psychology and a topic that we will return to frequently in this book.

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9.6: Conformity, Compliance and Social Influence

6.6: Conformity, Compliance, and Social Influence

In this section, we discuss additional ways in which people influence others. The topics of conformity, social influence, obedience, and group processes demonstrate the power of the social situation to change our thoughts, feelings, and behaviors. We begin this section with a discussion of a famous social psychology experiment that demonstrated how susceptible humans are to outside social pressures.

Conformity

Solomon Asch conducted several experiments in the 1950s to determine how people are affected by the thoughts and behaviors of other people. In one study, a group of participants was shown a series of printed line segments of different lengths: a, b, and c (Figure 12.17). Participants were then shown a fourth line segment: x. They were asked to identify which line segment from the first group (a, b, or c) most closely resembled the fourth line segment in length.

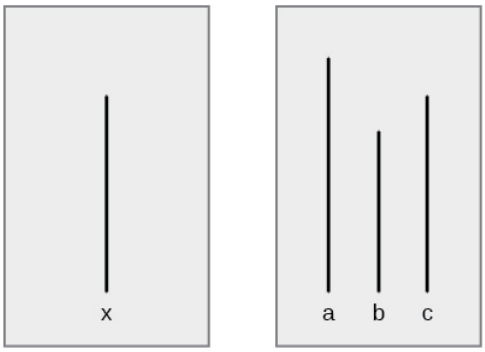


Figure 12.17 These line segments illustrate the judgment task in Asch's conformity study. Which line on the right—a, b, or c—is the same length as line x on the left?

Each group of participants had only one true, naïve subject. The remaining members of the group were confederates of the researcher. A confederate is a person who is aware of the experiment and works for the researcher. Confederates are used to manipulate social situations as part of the research design, and the true, naïve participants believe that confederates are, like them, uninformed participants in the experiment. In Asch's study, the confederates identified a line segment that was obviously shorter than the target line—a wrong answer. The naïve participant then had to identify aloud the line segment that best matched the target line segment.

How often do you think the true participant aligned with the confederates' response? That is, how often do you think the group influenced the participant, and the participant gave the wrong answer? Asch (1955) found that 76% of participants conformed to group pressure at least once by indicating the incorrect line. Conformity is the change in a person's behavior to go along with the group, even if he does not agree with the group. Why would people give the wrong answer? What factors would increase or decrease someone giving in or conforming to group pressure?

The Asch effect is the influence of the group majority on an individual's judgment.

What factors make a person more likely to yield to group pressure? Research shows that the size of the majority, the presence of another dissenter, and the public or relatively private nature of responses are key influences on conformity.

- The size of the majority: The greater the number of people in the majority, the more likely an individual will conform. There is, however, an upper limit: a point where adding more members does not increase conformity. In Asch's study, conformity increased with the number of people in the majority—up to seven individuals. At numbers beyond seven, conformity leveled off and decreased slightly (Asch, 1955).
- The presence of another dissenter: If there is at least one dissenter, conformity rates drop to near zero (Asch, 1955).
- The public or private nature of the responses: When responses are made publicly (in front of others), conformity is more likely; however, when responses are made privately (e.g., writing down the response), conformity is less likely (Deutsch & Gerard, 1955).

The finding that conformity is more likely to occur when responses are public than when they are private is the reason government elections require voting in secret, so we are not coerced by others (Figure 12.18). The Asch effect can be easily seen in children when they have to publicly vote for something. For example, if the teacher asks whether the children would rather have extra recess, no homework, or candy, once a few children vote, the rest will comply and go with the majority. In a different classroom, the majority might vote differently, and most of the children would comply with that majority. When someone's vote changes if it is made in public versus private, this is known as compliance. Compliance can be a form of conformity. Compliance is going along with a request or demand, even if you do not agree with the request. In Asch's studies, the participants complied by giving the wrong answers, but privately did not accept that the obvious wrong answers were correct.



Figure 12.18 Voting for government officials in the United States is private to reduce the pressure of conformity. (credit: Nicole Klauss)

Now that you have learned about the Asch line experiments, why do you think the participants conformed? The correct answer to the line segment question was obvious, and it was an easy task. Researchers have categorized the motivation to conform into two types: normative social influence and informational social influence (Deutsch & Gerard, 1955).

In normative social influence, people conform to the group norm to fit in, to feel good, and to be accepted by the group. However, with informational social influence, people conform because they believe the group is competent and has the correct information, particularly when the task or situation is ambiguous. What type of social influence was operating in the Asch conformity studies? Since the line judgment task was unambiguous, participants did not need to rely on the group for information. Instead, participants complied to fit in and avoid ridicule, an instance of normative social influence.

An example of informational social influence may be what to do in an emergency situation. Imagine that you are in a movie theater watching a film and what seems to be smoke comes in the theater from under the emergency exit door. You are not certain that it is smoke—it might be a special effect for the movie, such as a fog machine. When you are uncertain you will tend to look at the behavior of others in the theater. If other people show concern and get up to leave, you are likely to do the same. However, if others seem unconcerned, you are likely to stay put and continue watching the movie (Figure 12.19).



Figure 12.19 People in crowds tend to take cues from others and act accordingly. (a) An audience is listening to a lecture and people are relatively quiet, still, and attentive to the speaker on the stage. (b) An audience is at a rock concert where people are dancing, singing, and possibly engaging in activities like crowd surfing. (credit a: modification of work by Matt Brown; credit b: modification of work by Christian Holmér)

How would you have behaved if you were a participant in Asch's study? Many students say they would not conform, that the study is outdated, and that people nowadays are more independent. To some extent this may be true. Research suggests that overall rates of conformity may have reduced since the time of Asch's research. Furthermore, efforts to replicate Asch's study have made it clear that many factors determine how likely it is that someone will demonstrate conformity to the group. These factors include the participant's age, gender, and socio-cultural background (Bond & Smith, 1996; Larsen, 1990; Walker & Andrade, 1996).

Stanley Milgram's Experiment

Conformity is one effect of the influence of others on our thoughts, feelings, and behaviors. Another form of social influence is obedience to authority. Obedience is the change of an individual's behavior to comply with a demand by an authority figure. People often comply with the request because they are concerned about a consequence if they do not comply. To demonstrate this phenomenon, we review another classic social psychology experiment.

Stanley Milgram was a social psychology professor at Yale who was influenced by the trial of Adolf Eichmann, a Nazi war criminal. Eichmann's defense for the atrocities he committed was that he was "just following orders." Milgram (1963) wanted to test the validity of this defense, so he designed an experiment and initially recruited 40 men for his experiment. The volunteer participants were led to believe that they were participating in a study to improve learning and memory. The participants were told that they were to teach other students (learners) correct answers to a series of test items. The participants were shown how to use a device that they were told delivered electric shocks of different intensities to the learners. The participants were told to shock the learners if they gave a wrong answer to a test item—that the shock would help them to learn. The participants gave (or believed they gave) the learners shocks, which increased in 15-volt increments, all the way up to 450 volts. The participants did not know that the learners were confederates and that the confederates did not actually receive shocks.

In response to a string of incorrect answers from the learners, the participants obediently and repeatedly shocked them. The confederate learners cried out for help, begged the participant teachers to stop, and even complained of heart trouble. Yet, when the researcher told the participant-teachers to continue the shock, 65% of the participants continued the shock to the maximum voltage and to the point that the learner became unresponsive (Figure 12.20). What makes someone obey authority to the point of potentially causing serious harm to another person?

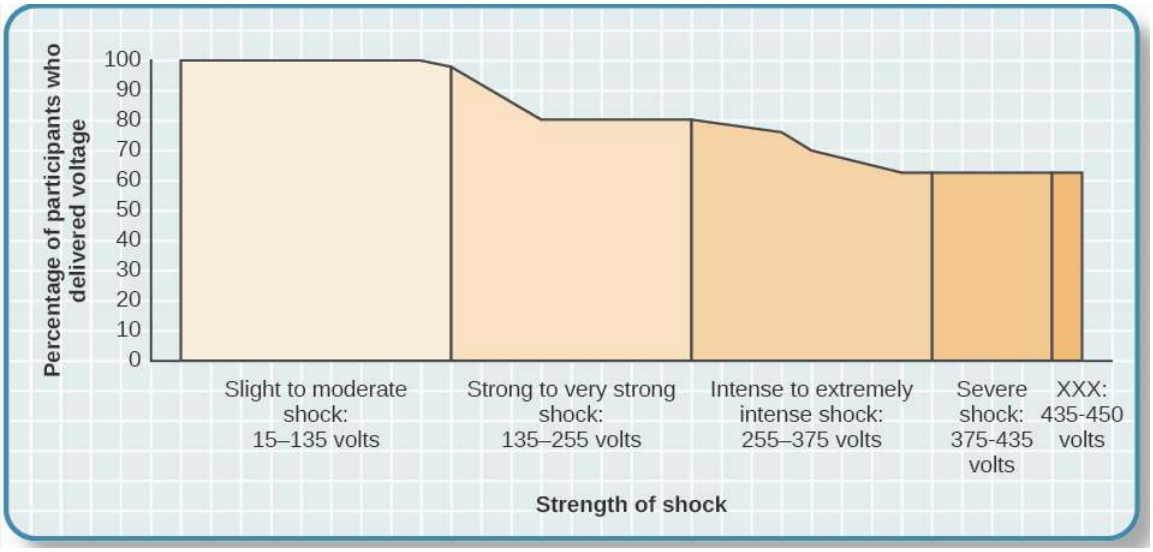


Figure 12.20 The Milgram experiment showed the surprising degree to which people obey authority. Two out of three (65%) participants continued to administer shocks to an unresponsive learner.

Several variations of the original Milgram experiment were conducted to test the boundaries of obedience. When certain features of the situation were changed, participants were less likely to continue to deliver shocks (Milgram, 1965). For example, when the setting of the experiment was moved to an office building, the percentage of participants who delivered the highest shock dropped to 48%. When the learner was in the same room as the teacher, the highest shock rate dropped to 40%. When the teachers' and learners' hands were touching, the highest shock rate dropped to 30%. When the researcher gave the orders by phone, the rate dropped to 23%. These variations show that when the humanity of the person being shocked was increased, obedience decreased. Similarly, when the authority of the experimenter decreased, so did obedience.

This case is still very applicable today. What does a person do if an authority figure orders something done? What if the person believes it is incorrect, or worse, unethical? In a study by Martin and Bull (2008), midwives privately filled out a questionnaire regarding best practices and expectations in delivering a baby. Then, a more senior midwife and supervisor asked the junior midwives to do something they had previously stated they were opposed to. Most of the junior midwives were obedient to authority, going against their own beliefs.

Groupthink

When in group settings, we are often influenced by the thoughts, feelings, and behaviors around us. Whether it is due to normative or informational social influence, groups have power to influence individuals. Another phenomenon of group conformity is groupthink. Groupthink is the modification of the opinions of members of a group to align with what they believe is the group consensus (Janis, 1972). In group situations, the group often takes action that individuals would not perform outside the group setting because groups make more extreme decisions than individuals do. Moreover, groupthink can hinder opposing trains of thought. This elimination of diverse opinions contributes to faulty decision by the group.

DIG DEEPER

Groupthink in the U.S. Government

There have been several instances of groupthink in the U.S. government. One example occurred when the United States led a small coalition of nations to invade Iraq in March 2003. This invasion occurred because a small group of advisors and former President George W. Bush were convinced that Iraq represented a significant terrorism threat with a large stockpile of weapons of mass destruction at its disposal. Although some of these individuals may have had some doubts about the credibility of the information available to them at the time, in the end, the group arrived at a consensus that Iraq had weapons of mass destruction and represented a significant threat to national security. It later came to light that Iraq did not have weapons of mass destruction, but not until the invasion was well underway. As a result, 6000 American soldiers were killed and many more civilians died. How did the Bush administration arrive at their conclusions?

Why does groupthink occur? There are several causes of groupthink, which makes it preventable. When the group is highly cohesive, or has a strong sense of connection, maintaining group harmony may become more important to the group than making sound decisions. If the group leader is directive and makes his opinions known, this may discourage group members from disagreeing with the leader. If the group is isolated from hearing alternative or new viewpoints, groupthink may be more likely. How do you know when groupthink is occurring?

There are several symptoms of groupthink including the following:

- perceiving the group as invulnerable or invincible—believing it can do no wrong
- believing the group is morally correct
- self-censorship by group members, such as withholding information to avoid disrupting the group consensus
- the quashing of dissenting group members' opinions
- the shielding of the group leader from dissenting views
- perceiving an illusion of unanimity among group members
- holding stereotypes or negative attitudes toward the out-group or others' with differing viewpoints (Janis, 1972)

Given the causes and symptoms of groupthink, how can it be avoided? There are several strategies that can improve group decision making including seeking outside opinions, voting in private, having the leader withhold position statements until all group members have voiced their views, conducting research on all viewpoints, weighing the costs and benefits of all options, and developing a contingency plan (Janis, 1972; Mitchell & Eckstein, 2009).

Group Polarization

Another phenomenon that occurs within group settings is group polarization. Group polarization (Teger & Pruitt, 1967) is the strengthening of an original group attitude after the discussion of views within a group. That is, if a group initially favors a viewpoint, after discussion the group consensus is likely a stronger endorsement of the viewpoint. Conversely, if the group was initially opposed to a viewpoint, group discussion would likely lead to stronger opposition. Group polarization explains many actions taken by groups that would not be undertaken by individuals. Group polarization can be observed at political conventions, when platforms of the party are supported by individuals who, when not in a group, would decline to support them. A more

everyday example is a group's discussion of how attractive someone is. Does your opinion change if you find someone attractive, but your friends do not agree? If your friends vociferously agree, might you then find this person even more attractive?

Social Facilitation

Not all intergroup interactions lead to the negative outcomes we have described. Sometimes being in a group situation can improve performance. Social facilitation occurs when an individual performs better when an audience is watching than when the individual performs the behavior alone. This typically occurs when people are performing a task for which they are skilled. Can you think of an example in which having an audience could improve performance? One common example is sports. Skilled basketball players will be more likely to make a free throw basket when surrounded by a cheering audience than when playing alone in the gym (Figure 12.21Links to an external site.). However, there are instances when even skilled athletes can have difficulty under pressure. For example, if an athlete is less skilled or nervous about making a free throw, having an audience may actually hinder rather than help. In sum, social facilitation is likely to occur for easy tasks, or tasks at which we are skilled, but worse performance may occur when performing in front of others, depending on the task.



Figure 12.21 The attention of the crowd can motivate a skilled athlete. (credit: Tommy Gilligan/USMA)

Social Loafing

Another way in which a group presence can affect our performance is social loafing. Social loafing is the exertion of less effort by a person working together with a group. Social loafing occurs when our individual performance cannot be evaluated separately from the group. Thus, group performance declines on easy tasks (Karau & Williams, 1993). Essentially individual group members loaf and let other group members pick up the slack. Because each individual's efforts cannot be evaluated, individuals become less motivated to perform well. For example, consider a group of people cooperating to clean litter from the roadside. Some people will exert a great amount of effort, while others will exert little effort. Yet the entire job gets done, and it may not be obvious who worked hard and who didn't.

As a college student you may have experienced social loafing while working on a group project. Have you ever had to contribute more than your fair share because your fellow group members weren't putting in the work? This may happen when a professor assigns a group grade instead of individual grades. If the professor doesn't know how much effort each student contributed to a project, some students may be inclined to let more conscientious students do more of the work. The chance of social loafing in student work groups increases as the size of the group increases (Shepperd & Taylor, 1999).

Interestingly, the opposite of social loafing occurs when the task is complex and difficult (Bond & Titus, 1983; Geen, 1989). Remember the previous discussion of choking under pressure? This happens when you perform a difficult task and your individual performance can be evaluated. In a group setting, such as the student work group, if your individual performance cannot be evaluated, there is less pressure for you to do well, and thus less anxiety or physiological arousal (Latané, Williams, & Harkens, 1979). This puts you in a relaxed state in which you can perform your best, if you choose (Zajonc, 1965). If the task is a difficult one, many people feel motivated and believe that their group needs their input to do well on a challenging project (Jackson & Williams, 1985). Given what you learned about social loafing, what advice would you give a new professor about how to design group projects? If you suggested that individuals' efforts should not be evaluated, to prevent the anxiety of choking under pressure, but that the task must be challenging, you have a good understanding of the concepts discussed in this section. Alternatively, you

can suggest that individuals' efforts should be evaluated, but the task should be easy so as to facilitate performance. Good luck trying to convince your professor to only assign easy projects.

Table 12.2 summarizes the types of social influence you have learned about in this chapter.

List of social influence descriptions

Type of Social Influence	Description
Conformity	Changing your behavior to go along with the group even if you do not agree with the group
Compliance	Going along with a request or demand
Normative social influence	Conformity to a group norm to fit in, feel good, and be accepted by the group
Informational social influence	Conformity to a group norm prompted by the belief that the group is competent and has the correct information
Obedience	Changing your behavior to please an authority figure or to avoid aversive consequences
Groupthink	Group members modify their opinions to match what they believe is the group consensus
Group polarization	Strengthening of the original group attitude after discussing views within a group
Social facilitation	Improved performance when an audience is watching versus when the individual performs the behavior alone
Social loafing	Exertion of less effort by a person working in a group because individual performance cannot be evaluated separately from the group, thus causing performance decline on easy tasks

Table12.2 Types of Social Influence

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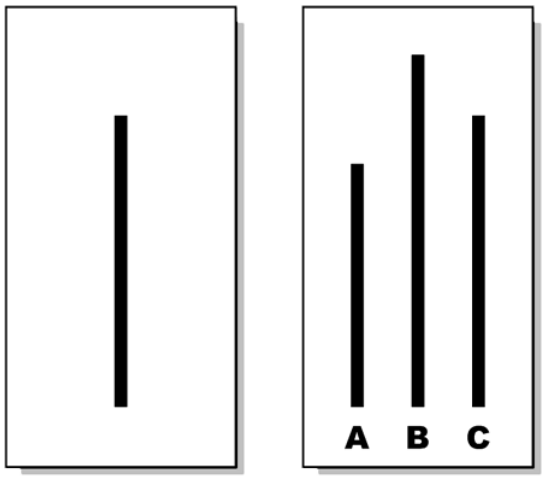
9.7: Causes of Conformity and Obedience

6.7: Causes of Conformity and Obedience

What causes conformity? To start, humans may possess an inherent tendency to imitate the actions of others. Although we usually are not aware of it, we often mimic the gestures, body posture, language, talking speed, and many other behaviors of the people we interact with. Researchers find that this mimicking increases the connection between people and allows our interactions to flow more smoothly (Chartrand & Bargh, 1999).

Beyond this automatic tendency to imitate others, psychologists have identified two primary reasons for conformity. The first of these is normative influence. When normative influence is operating, people go along with the crowd because they are concerned about what others think of them. We don't want to look out of step or become the target of criticism just because we like different kinds of music or dress differently than everyone else. Fitting in also brings rewards such as camaraderie and compliments.

How powerful is normative influence? Consider a classic study conducted many years ago by Solomon Asch (1956). The participants were male college students who were asked to engage in a seemingly simple task. An experimenter standing several feet away held up a card that depicted one line on the left side and three lines on the right side. The participant's job was to say aloud which of the three lines on the right was the same length as the line on the left. Sixteen cards were presented one at a time, and the correct answer on each was so obvious as to make the task a little boring. Except for one thing. The participant was not alone. In fact, there were six other people in the room who also gave their answers to the line-judgment task aloud. Moreover, although they pretended to be fellow participants, these other individuals were, in fact, confederates working with the experimenter. The real participant was seated so that he always gave his answer after hearing what five other "participants" said. Everything went smoothly until the third trial, when inexplicably the first "participant" gave an obviously incorrect answer. The mistake might have been amusing, except the second participant gave the same answer. As did the third, the fourth, and the fifth participant. Suddenly the real participant was in a difficult situation. His eyes told him one thing, but five out of five people apparently saw something else.



Examples of the cards used in the Asch experiment. How powerful is the normative influence? Would you be tempted to give a clearly incorrect answer, like many participants in the Asch experiment did, to better match the thoughts of a group of peers? [Image: Fred the Oyster, https://goo.gl/Gi5mtu, CC BY-SA 4.0, https://goo.gl/zVGXn8]

It's one thing to wear your hair a certain way or like certain foods because everyone around you does. But, would participants intentionally give a wrong answer just to conform with the other participants? The confederates uniformly gave incorrect answers on 12 of the 16 trials, and 76 percent of the participants went along with the norm at least once and also gave the wrong answer. In total, they conformed with the group on one-third of the 12 test trials. Although we might be impressed that the majority of the time participants answered honestly, most psychologists find it remarkable that so many college students caved in to the pressure of the group rather than do the job they had volunteered to do. In almost all cases, the participants knew they were giving an incorrect answer, but their concern for what these other people might be thinking about them overpowered their desire to do the right thing.

Variations of Asch's procedures have been conducted numerous times (Bond, 2005; Bond & Smith, 1996). We now know that the findings are easily replicated, that there is an increase in conformity with more confederates (up to about five), that teenagers are more prone to conforming than are adults, and that people conform significantly less often when they believe the confederates will not hear their responses (Berndt, 1979; Bond, 2005; Crutchfield, 1955; Deutsch & Gerard, 1955). This last finding is consistent with the notion that participants change their answers because they are concerned about what others think of them. Finally, although we see the effect in virtually every culture that has been studied, more conformity is found in collectivist countries such as Japan and China than in individualistic countries such as the United States (Bond & Smith, 1996). Compared with individualistic cultures, people who live in collectivist cultures place a higher value on the goals of the group than on individual preferences. They also are more motivated to maintain harmony in their interpersonal relations.

The other reason we sometimes go along with the crowd is that people are often a source of information. Psychologists refer to this process as informational influence. Most of us, most of the time, are motivated to do the right thing. If society deems that we put litter in a proper container, speak softly in libraries, and tip our waiter, then that's what most of us will do. But sometimes it's not clear what society expects of us. In these situations, we often rely on descriptive norms (Cialdini, Reno, & Kallgren, 1990). That is, we act the way most people—or most people like us—act. This is not an unreasonable strategy. Other people often have information that we do not, especially when we find ourselves in new situations. If you have ever been part of a conversation that went something like this,

"Do you think we should?"
"Sure. Everyone else is doing it.",

you have experienced the power of informational influence.



Efforts to influence people to engage in healthier or more sustainable behaviors have benefitted from the informational influence. For example, hotels have been able to significantly increase the numbers of people who re-use bath towels (reducing water and energy use) by informing them on signs in their rooms that re-using towels is a typical behavior of other hotel guests. [Image: Infrogmation of New Orleans, https://goo.gl/5P5F0v, CC BY 2.0, https://goo.gl/BRvSA7]

However, it's not always easy to obtain good descriptive norm information, which means we sometimes rely on a flawed notion of the norm when deciding how we should behave. A good example of how misperceived norms can lead to problems is found in research on binge drinking among college students. Excessive drinking is a serious problem on many campuses (Mita, 2009). There are many reasons why students binge drink, but one of the most important is their perception of the descriptive norm. How much students drink is highly correlated with how much they believe the average student drinks (Neighbors, Lee, Lewis, Fossos, & Larimer, 2007). Unfortunately, students aren't very good at making this assessment. They notice the boisterous heavy drinker at the party but fail to consider all the students not attending the party. As a result, students typically overestimate the descriptive norm for college student drinking (Borsari & Carey, 2003; Perkins, Haines, & Rice, 2005). Most students believe they consume significantly less alcohol than the norm, a miscalculation that creates a dangerous push toward more and more excessive alcohol consumption. On the positive side, providing students with accurate information about drinking norms has been found to reduce overindulgent drinking (Burger, LaSalvia, Hendricks, Mehdipour, & Neudeck, 2011; Neighbors, Lee, Lewis, Fossos, & Walter, 2009).

Researchers have demonstrated the power of descriptive norms in a number of areas. Homeowners reduced the amount of energy they used when they learned that they were consuming more energy than their neighbors (Schultz, Nolan, Cialdini, Goldstein, & Griskevicius, 2007). Undergraduates selected the healthy food option when led to believe that other students had made this choice (Burger et al., 2010). Hotel guests were more likely to reuse their towels when a hanger in the bathroom told them that this is what most guests did (Goldstein, Cialdini, & Griskevicius, 2008). And more people began using the stairs instead of the elevator when informed that the vast majority of people took the stairs to go up one or two floors (Burger & Shelton, 2011).

Obedience

Although we may be influenced by the people around us more than we recognize, whether we conform to the norm is up to us. But sometimes decisions about how to act are not so easy. Sometimes we are directed by a more powerful person to do things we may not want to do. Researchers who study obedience are interested in how people react when given an order or command from someone in a position of authority. In many situations, obedience is a good thing. We are taught at an early age to obey parents, teachers, and police officers. It's also important to follow instructions from judges, firefighters, and lifeguards. And a military would fail to function if soldiers stopped obeying orders from superiors. But, there is also a dark side to obedience. In the name of "following orders" or "just doing my job," people can violate ethical principles and break laws. More disturbingly, obedience often is at the heart of some of the worst of human behavior—massacres, atrocities, and even genocide.



Photographs of victims of Cambodian dictator Pol Pot. From 1975-79 the Khmer Rouge army obediently carried out orders to execute tens of thousands of civilians. [Image: ...your local connection, https://goo.gl/ut9fvk, CC BY-NC-SA 2.0, https://goo.gl/Toc0ZF]

It was this unsettling side of obedience that led to some of the most famous and most controversial research in the history of psychology. Milgram (1963, 1965, 1974) wanted to know why so many otherwise decent German citizens went along with the brutality of the Nazi leaders during the Holocaust. “These inhumane policies may have originated in the mind of a single person,” Milgram (1963, p. 371) wrote, “but they could only be carried out on a massive scale if a very large number of persons obeyed orders.”

To understand this obedience, Milgram conducted a series of laboratory investigations. In all but one variation of the basic procedure, participants were men recruited from the community surrounding Yale University, where the research was carried out. These citizens signed up for what they believed to be an experiment on learning and memory. In particular, they were told the research concerned the effects of punishment on learning. Three people were involved in each session. One was the participant. Another was the experimenter. The third was a confederate who pretended to be another participant.

The experimenter explained that the study consisted of a memory test and that one of the men would be the teacher and the other the learner. Through a rigged drawing, the real participant was always assigned the teacher’s role and the confederate was always the learner. The teacher watched as the learner was strapped into a chair and had electrodes attached to his wrist. The teacher then moved to the room next door where he was seated in front of a large metal box the experimenter identified as a “shock generator.” The front of the box displayed gauges and lights and, most noteworthy, a series of 30 levers across the bottom. Each lever was labeled with a voltage figure, starting with 15 volts and moving up in 15-volt increments to 450 volts. Labels also indicated the strength of the shocks, starting with “Slight Shock” and moving up to “Danger: Severe Shock” toward the end. The last two levers were simply labeled “XXX” in red.

Through a microphone, the teacher administered a memory test to the learner in the next room. The learner responded to the multiple-choice items by pressing one of four buttons that were barely within reach of his strapped-down hand. If the teacher saw

the correct answer light up on his side of the wall, he simply moved on to the next item. But if the learner got the item wrong, the teacher pressed one of the shock levers and, thereby, delivered the learner's punishment. The teacher was instructed to start with the 15-volt lever and move up to the next highest shock for each successive wrong answer.

In reality, the learner received no shocks. But he did make a lot of mistakes on the test, which forced the teacher to administer what he believed to be increasingly strong shocks. The purpose of the study was to see how far the teacher would go before refusing to continue. The teacher's first hint that something was amiss came after pressing the 75-volt lever and hearing through the wall the learner say "Ugh!" The learner's reactions became stronger and louder with each lever press. At 150 volts, the learner yelled out, "Experimenter! That's all. Get me out of here. I told you I had heart trouble. My heart's starting to bother me now. Get me out of here, please. My heart's starting to bother me. I refuse to go on. Let me out."

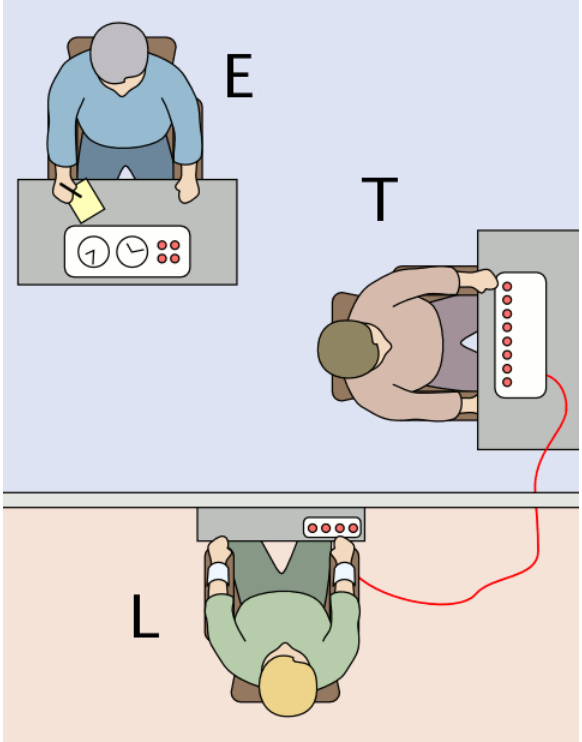


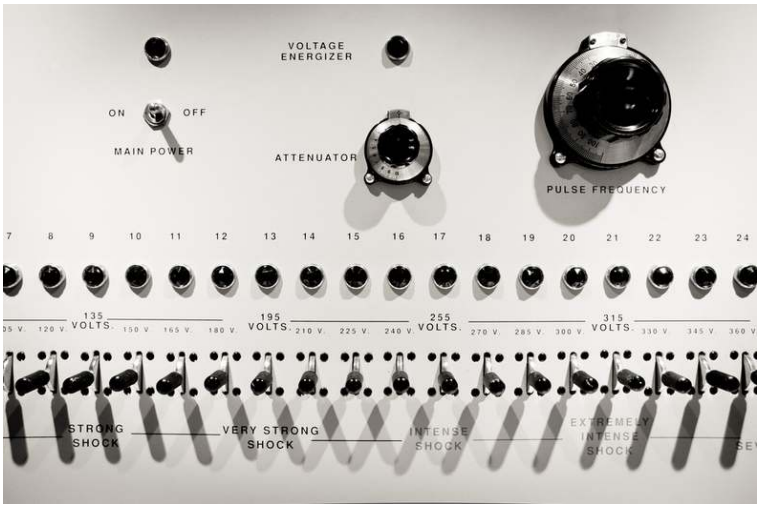
Diagram of the Milgram Experiment in which the "teacher" (T) was asked to deliver a (supposedly) painful electric shock to the "learner"(L). Would this experiment be approved by a review board today? [Image: Fred the Oyster, https://goo.gl/ZIbQz1, CC BY-SA 4.0, https://goo.gl/X3i0tq]

The experimenter's role was to encourage the participant to continue. If at any time the teacher asked to end the session, the experimenter responded with phrases such as, "The experiment requires that you continue," and "You have no other choice, you must go on." The experimenter ended the session only after the teacher stated four successive times that he did not want to continue. All the while, the learner's protests became more intense with each shock. After 300 volts, the learner refused to answer any more questions, which led the experimenter to say that no answer should be considered a wrong answer. After 330 volts, despite vehement protests from the learner following previous shocks, the teacher heard only silence, suggesting that the learner was now physically unable to respond. If the teacher reached 450 volts—the end of the generator—the experimenter told him to continue pressing the 450 volt lever for each wrong answer. It was only after the teacher pressed the 450-volt lever three times that the experimenter announced that the study was over.

If you had been a participant in this research, what would you have done? Virtually everyone says he or she would have stopped early in the process. And most people predict that very few if any participants would keep pressing all the way to 450 volts. Yet in the basic procedure described here, 65 percent of the participants continued to administer shocks to the very end of the session. These were not brutal, sadistic men. They were ordinary citizens who nonetheless followed the experimenter's instructions to administer what they believed to be excruciating if not dangerous electric shocks to an innocent person. The disturbing implication from the findings is that, under the right circumstances, each of us may be capable of acting in some very uncharacteristic and perhaps some very unsettling ways.

Milgram conducted many variations of this basic procedure to explore some of the factors that affect obedience. He found that obedience rates decreased when the learner was in the same room as the experimenter and declined even further when the teacher had to physically touch the learner to administer the punishment. Participants also were less willing to continue the procedure after seeing other teachers refuse to press the shock levers, and they were significantly less obedient when the instructions to continue came from a person they believed to be another participant rather than from the experimenter. Finally, Milgram found that women participants followed the experimenter's instructions at exactly the same rate the men had.

Milgram's obedience research has been the subject of much controversy and discussion. Psychologists continue to debate the extent to which Milgram's studies tell us something about atrocities in general and about the behavior of German citizens during the Holocaust in particular (Miller, 2004). Certainly, there are important features of that time and place that cannot be recreated in a laboratory, such as a pervasive climate of prejudice and dehumanization. Another issue concerns the relevance of the findings. Some people have argued that today we are more aware of the dangers of blind obedience than we were when the research was conducted back in the 1960s. However, findings from partial and modified replications of Milgram's procedures conducted in recent years suggest that people respond to the situation today much like they did a half a century ago (Burger, 2009).



If you had been "a teacher" in the Milgram experiment, would you have behaved differently than the majority who delivered what they thought were massive 450-volt shocks? [Image: Sharon Drummond, https://goo.gl/uQZGtZ, CC BY-NC-SA 2.0, https://goo.gl/Toc0ZF]

Another point of controversy concerns the ethical treatment of research participants. Researchers have an obligation to look out for the welfare of their participants. Yet, there is little doubt that many of Milgram's participants experienced intense levels of stress as they went through the procedure. In his defense, Milgram was not unconcerned about the effects of the experience on his participants. And in follow-up questionnaires, the vast majority of his participants said they were pleased they had been part of the research and thought similar experiments should be conducted in the future. Nonetheless, in part because of Milgram's studies, guidelines and procedures were developed to protect research participants from these kinds of experiences. Although Milgram's intriguing findings left us with many unanswered questions, conducting a full replication of his experiment remains out of bounds by today's standards.

Social psychologists are fond of saying that we are all influenced by the people around us more than we recognize. Of course, each person is unique, and ultimately each of us makes choices about how we will and will not act. But decades of research on conformity and obedience make it clear that we live in a social world and that—for better or worse—much of what we do is a reflection of the people we encounter.

Attributions:

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9.8: End of Chapter Wrap-Up

6.8: Chapter 6 Wrap-Up

Here are the key takeaways for Chapter 6:

- The history of social psychology reflects its evolution from early explorations of group behavior to sophisticated studies of cognition and neuroscience. Pioneered by figures like Kurt Lewin and Leon Festinger, social psychology emerged as a rigorous scientific discipline, investigating phenomena such as conformity, obedience, and aggression. Over time, the field expanded to encompass attitudes, persuasion, and social cognition, incorporating insights from cognitive psychology and computer technology. Today, social psychology explores diverse topics including health, happiness, evolutionary influences, and social neuroscience. Despite its complex past and uncertain future, social psychology remains dynamic, continually seeking new ways to understand and address the complexities of human social behavior.
- Self-concern and other-concern are fundamental motivations that shape human behavior. Self-concern drives individuals to protect and enhance their own lives and those of close relatives, guided by evolutionary principles such as kin selection. Meanwhile, other-concern compels humans to connect with and help others, fostering cooperation, compassion, and altruism. These motives often intersect, as seen in acts of love and volunteering, but they can also conflict, such as when deciding whether to intervene in a dangerous situation. Understanding the interplay between self-concern and other-concern illuminates the complexities of human social behavior and moral decision-making.
- Social psychology highlights the profound influence of social situations on human behavior. Individuals often prioritize their social connections, seeking support, guidance, and affirmation from others. Even when alone, people internalize societal norms and values, shaping their actions and decisions based on learned behaviors and expectations. Social support plays a crucial role in mental and physical health, with strong social networks correlating with greater happiness and well-being. Conversely, ostracism and exclusion can lead to profound psychological distress. Understanding the power of social influence and norms sheds light on the complexities of human behavior and the importance of fostering positive social connections.
- Culture profoundly shapes social norms and behaviors, influencing how individuals perceive themselves and interact with others. Western cultures prioritize individualism, emphasizing personal achievements and independence, while East Asian cultures prioritize collectivism, emphasizing harmonious relationships and group interconnectedness. These cultural differences extend to perceptions of happiness, with Westerners deriving satisfaction from personal accomplishments and East Asians finding happiness in social connections. Understanding cultural diversity is essential in an increasingly interconnected world, as it fosters cooperation and minimizes social conflicts arising from cultural misunderstandings. Social psychologists recognize the importance of cultural context in shaping human behavior and emphasize its role in understanding social dynamics.
- Conformity, driven by factors like group size and the desire to fit in or obtain accurate information, leads individuals to align their behavior with group norms. Solomon Asch's experiments illustrate how people often conform to group pressure, even when they know the correct answer. Similarly, Stanley Milgram's research highlights obedience to authority, which can lead individuals to act against their own beliefs. Group dynamics, including phenomena like groupthink and group polarization, influence decision-making processes. Social facilitation can enhance performance in the presence of an audience, while social loafing may reduce effort in group settings, particularly on easy tasks. Understanding these social influences is crucial for comprehending human behavior in social contexts.
- Conformity arises from both an inherent human tendency to imitate others and two primary psychological influences: normative and informational. Normative influence drives individuals to conform to avoid criticism and gain social rewards, as demonstrated by Asch's experiments on line judgment. Informational influence occurs when people look to others for guidance in uncertain situations, such as adopting behaviors perceived as common. Additionally, obedience to authority, highlighted by Milgram's controversial experiments, reveals that ordinary individuals can commit extreme acts under authoritative pressure. Collectively, these factors illustrate how social contexts profoundly shape human behavior.



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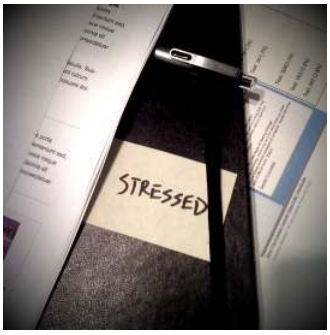
10.1: Introduction to Stress, Health and the Self

5.1: Stress, Health, and the Self

Learning Objectives

- Be able to list two internal causes of subjective well-being and two external causes of subjective well-being. Describe how happiness is typically measured.
- Explain theoretical models of health, as well as the role of psychological stress in the development of disease.
- Describe psychological factors that contribute to resilience and improved health.

In this chapter, we examine the profound connections between stress, health, and the self, emphasizing how these elements interplay to influence our overall well-being.



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Stress: Stress is a natural response to perceived threats or challenges and can significantly impact our mental and physical health. We discussed various types of stress, including acute, episodic, and chronic stress, each with distinct characteristics and effects on the body and mind. Key theories of stress, such as Hans Selye's General Adaptation Syndrome (GAS), which outlines the stages of alarm, resistance, and exhaustion, provided a framework for understanding the physiological responses to stress. Additionally, we explored the psychological aspects of stress, focusing on the role of cognitive appraisal in determining whether an event is perceived as stressful. The chapter highlighted common sources of stress, such as work, relationships, and major life changes, and introduced coping strategies, including problem-focused and emotion-focused coping, mindfulness, and relaxation techniques.

Health: The relationship between stress and health is complex and bidirectional. Chronic stress can lead to various health problems, including cardiovascular disease, weakened immune function, and mental health disorders like anxiety and depression. Conversely, poor health can increase stress levels, creating a detrimental cycle. We examined the biopsychosocial model of health, which integrates biological, psychological, and social factors in understanding health and illness. This holistic perspective underscores the importance of lifestyle factors, such as diet, exercise, sleep, and social support, in maintaining health and managing stress. The chapter also covered the concept of health psychology, which focuses on how behavioral, cognitive, and social factors influence health and illness, and how psychological interventions can promote health and well-being.

The Self: Understanding the self is crucial in managing stress and maintaining health. The self-concept, which encompasses our beliefs and perceptions about ourselves, plays a significant role in how we respond to stress. A positive self-concept and high self-esteem can buffer against stress and its negative effects. We explored how self-awareness and self-regulation contribute to health behaviors and stress management. The chapter also discussed the importance of resilience, the ability to bounce back from adversity, and the factors that contribute to it, such as optimism, social support, and coping skills. Additionally, we examined how self-compassion, the practice of being kind and understanding toward oneself, can mitigate stress and promote psychological well-being.

Through the integration of these topics, the chapter provides a comprehensive understanding of how stress affects health and the crucial role the self plays in this dynamic. By learning about the physiological and psychological mechanisms of stress, the impact of lifestyle choices on health, and the importance of a resilient and positive self-concept, readers gained valuable insights and practical strategies to enhance their well-being and navigate the challenges of life more effectively. This holistic approach empowers individuals to take proactive steps in managing stress, improving health, and fostering a healthy and resilient self.

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10.1.1: Stress the Slayer of Sanity

Learning Objectives

Evaluate how the mind and body interact to influence psychological and physical health **(APA Goal 1, SLO 1.3B)**

Describe and understand key concepts, principles, and overarching themes in psychology. **(APA Goal 1, outcome 1.1)**

Use basic psychological terminology, concepts, and theories in psychology (humanistic) to explain behavior and mental processes. **(APA Goal 1, SLO 1.1b.)**

Be able to recognize major historical events, theoretical perspectives, and figures in psychology and their link to trends in contemporary research. **(APA Goal 1, SLO 1.2c**)

Learning Objectives:

Most of us can relate to the guy in the picture above. There are times in our lives when we feel as though we simply can't take one more problem to solve; one more relationship to coddle; one more disappointment to process; or one more deadline to meet. We are a culture of stress. We spend most of our time worrying about a future, over which we have no control. We spend hours and hours catastrophizing about the outcomes of life's circumstances, for which we can't possibly predict. Stress is not a new concept. Hans Selye borrowed the term stress from physics, as he observed that many of his sick patients appeared to be under physical stress. He is often considered the Father of Stress Research. Selye's research opened the door for a better understanding of stress and how it impacts our functioning.

In this module, we will explore:

- Reading 1: The History of Stress
  - Video 1: GAS
- Reading 2: Symptoms of Stress
- Reading 3: Types of Stress
- Reading 4: The Biology of Stress: Sapolsky
- Reading 5: : The Social Neuroscience of Stress
- Reading 6: The Ace Score
- Reading 7: PTSD



Figure **10.1.1.1**: Copy and Paste Caption here. (Copyright; author via source)

Szabo, S., Tache, Y., & Somogyi, A. (September 2012) "The legacy of Hans Selye and the origins of stress research: A retrospective 75 years after his landmark brief letter to the editor of Nature." Stress, Vol 15(5), pp 472-478.

Although Hans was not the first to use the term stress, he was the first to discover the biological stress response, which he entitled, the General Adaptation Syndrome. Decades ago, in a fervent search for a new hormone, Selye serendipitously discovered the syndrome that underpins most medical diagnostic impressions. Selye demonstrated the role of the hypophysis-adrenal cortex in the stress response, thus opening the door for our understanding of how the entire body bears the brunt of even the most basic biological storm. One prolonged cold can wreak havoc on the entire body. One malfunctioning organ can wreak havoc on the entire body. One painful memory, piercing the psyche daily, can wreak havoc on the entire body. Stress is that thing that robs us of our serenity. We must understand the biology of such an enigmatic force, to understand the means by which we must fight it.

Key Concepts: stress, stressor, general adaptation syndrome, distress, eustress, catecholamines, glucocorticoids

Key Scholar: Hans Selye

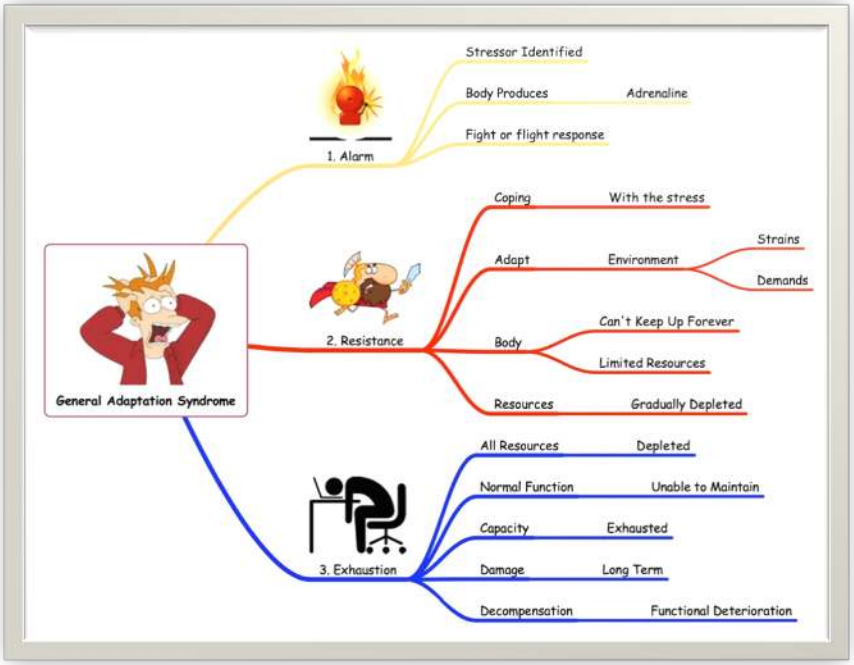


Figure **10.1.1.1**: Wakeling, T. (2017, January). Wakeling, T. (2017, January). General Adaptation Syndrome. Retrieved from https://youtu.be/gQgjHNOvXLc .

Video 1: General Adaptation Syndrome



When we experience stressors in life, we have a biological response. If we do not remove the stressors, the phase of exhaustion can insidiously degrade our functioning. What stressors do you struggle with? As you navigate this course, it is important to perform self-evaluations to determine whether you are managing the volume of stressors in your life. Remember that evaluating your life in terms of what you can control and what you cannot control is the key to investing psychic energy wisely. In other words, stressing about something over which you have no control is futile. Stressing about that which you can control is a wise investment of energy that will often lead to action as opposed to rumination. It is in the doing where we are able to thwart the impact of the resistance stage of the GAS. If the stressor is an upcoming project deadline, do something towards reaching that goal, rather than ruminating about how stressed you feel. The rumination will only prolong the resistance stage; whereas action will bring you more closely to the desired homeostatic balance. If we act against the force of stress, we will offset our body's reaction to stress.

Key Concepts: fight or flight, alarm stage, resistance stage, exhaustion stage

Key Scholar: Walter Cannon

Reading 2: Symptoms of Stress



Figure **10.1.1.1**: Copy and Paste Caption here. (Copyright; author via source)

As you read through the list of stress symptoms, it is interesting to note how encompassing our biological reaction to stress can be. When you read through the list, identify those symptoms that pertain to you. Is the list long? Are there any changes that you can make in your life that might lessen the perceived stress you are experiencing?

Reading 3: Types of Stress



Figure **10.1.1.1**: Stress: The different kinds of stress. (n.d.). Retrieved from http://www.apa.org/print-this.aspx.

Not all stress is created equally. There are different types of stress and knowing which type you are experiencing can serve to ameliorate the potentially grueling symptoms. Some stress is short- lived. Some stress is episodic. Some stress pounds, and pounds, until the body surrenders. This type of chronic stress can result from struggling within the confines of poverty, not knowing if food will be available from one day to the next; from being entrapped in a controlling and abusive relationship; or from battling the perverse dysfunction that may plague your nuclear family. The prognosis from this chronic state of stress is quite grim. Our bodies cannot survive such prolonged departures from the desired state of homeostatic balance—our organ systems will fail. We must be mindful of the complacency such discomfort breeds. If we reside within the corridors of chronic stress for too long, we become comfortably numb; our new normal is the discomfort.

Key Concepts: Acute stress, Episodic stress, Chronic stress



Figure \(\
PageIndex
{1}\):
Shwartz
, M. (March 2007). Robert
Sapolsky
discusses physiological effects of stress.” Stanford News.

Sapolsky is one of the leaders in stress research, with an interest in how cognitive sophistication and free time have tethered us to the calamitous consequences of sustained elevations of adrenaline and glucocorticoids. Sapolsky argues that humans and primates have, “…evolved to be smart enough to make ourselves sick.” Interestingly, he purports that the social hierarchy in which we live, contributes significantly to our potential for elevated stress hormones, which will wreak havoc on our health. The silver lining for humans is that we, unlike baboons, have myriad opportunities for creating experiences for ourselves where we can be at the top of the hierarchy. After decades of research, Sapolsky identified the shield that can protect us from stress-related illness in our hierarchical world: social connectedness. So, that which can kill us, can also heal and protect us.

> *“We are capable of social supports that no other primate can even dream of. For example, I might say, 'This job, where I'm a lowly mailroom clerk, really doesn't matter. What really matters is that I'm the captain of my softball team or deacon of my church—that sort of thing. It's not just somebody sitting here, grooming you with their own hands. We can actually feel comfort from the discovery that somebody on the other side of the planet is going through the same experience we are and feel, I'm not alone. We can even take comfort reading about a fictional character, and there's no primate out there that can*

> *feel better in life just by listening to Beethoven. So, the range of supports that we're capable of is extraordinary."—Sapolsky*

Key Concepts: psychosocial stress, non-life-threatening stressors, Type A personality, hippocampus, atrophy

Key Scholar: Robert Sapolsky

Reading 5: Social Neuroscience of Stress



Figure **10.1.1.1**:Ito, T. A. & Kubota, J. T. (2017). Social neuroscience. In R. Biswas-Diener & E. Diener (Eds), Noba textbook series: Psychology. Champaign, IL: DEF publishers. DOI: nobaproject.com

Social neuroscience is a new field that applies the principles of neuroscience in combination with certain theories, to understand how other people influence both mental processes and behavior. Social neuroscientists also explore how we react to social stress and which brain structures are involved in this process. In this reading, you will discover the neuroscience underlying the insidious process of social categorization. Rather than relying on self-reports, researchers evaluate the automaticity of this process using instruments such as EEG and fMRI. Social neuroscientists study how our social interactions breed stress. Neuroendocrinological findings indicate that our perception of being judged by others and categorized by others can be extremely stressful. We are stressed when we give a speech or interact with outgroup members; we are stressed when the prospect of being judged becomes palpable.

Key Concepts: amygdala, fMRI, EEG, social categorization, social neuroscience, mPFC, stereotypes, functional neuroanatomy, neuroendocrinology, outgroup, ingroup

Reading 6: The ACE Score



Figure **10.1.1.1**: Picture of a heart - Description: Picture of a heart to symbolize heart disease resulting from toxic stress.

In this landmark study, Dr. Vincent Felitti and Dr. Robert Anda surveyed upwards of 17,000 subjects, inquiring about their childhood history of trauma and familial dysfunction. With ten simple questions, researchers could assign an ACE score to each participant. This score predicted the likelihood of these participants to battle medical problems, mental health problems and social problems as adults. “The stress of severe and chronic childhood trauma – such as being regularly hit, constantly belittled and berated, watching your father often hit your mother – releases hormones that physically damage a child’s developing brain.”

Key Concepts: ACE Score, toxic stress

Key Scholars: Dr. Robert Anda, Dr. Vincent Felitti

Reading 7: PTSD

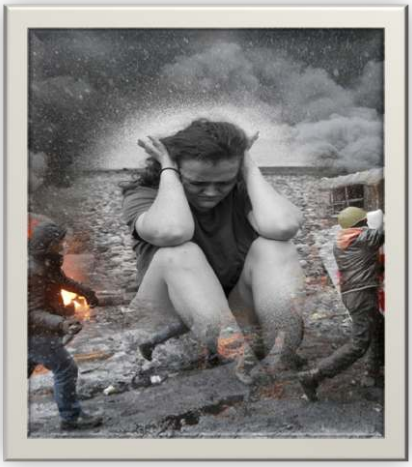


Figure **10.1.1.1**: National Center for PTSD. (June 2016). Understanding PTSD and PTSD Treatment [Brochure]. (N.P.) (n.p.).

When faced with a life-threatening experience, we may develop PTSD. For some, trauma may affect their lives for only a few weeks; for others, the effects may be felt for several months or longer. If the symptoms persist for longer than several months, a PTSD diagnosis will most likely be given. Not being able to get over a traumatic event is not a sign of weakness; we all handle trauma differently. It is of paramount importance that you seek treatment if symptoms persist. PTSD is treatable and the prognosis is quite good if you stay with the treatment.

Key Concepts: PTSD, Talk Therapy, Prolonged Exposure Therapy (PE), Cognitive Processing Therapy (CPT), Eye Movement Desensitization and Reprocessing (EMDR), Stress Inoculation Training (SIT), SSRIs

Reflections:

1. Describe what was unique about Selye's conceptualization of the stress response relative to Cannon's model.
2. As you read through the common signs and symptoms of stress, do you see any that pertain to you? How might understanding the biology of stress help you to ameliorate these symptoms?
3. Describe at least one personal example of each of the following: acute stress, episodic stress, chronic stress (if applicable). What are some environmental factors that might breed chronic stress? Do you feel that our culture serves as a petri dish for chronic stress? Explain.
4. Assess the social hierarchies to which you belong. Do you feel that your perceived ranking serves as a stressor in your life? How might you combat this force?
5. If social categorization is an automatic process, to which we all fall prey, why should we persist in trying to understand it?
6. How could knowing your ACE score benefit you? How could knowing your ACE score be harmful? Explain.

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10.2: Stress and Coping

5.2: Stress and Coping



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It's 2:00 a.m. and your head is swarming with thoughts, none of them pleasant or relaxing: Did I reply to that important email? Am I ready for the upcoming presentation? Should I have studied more for tomorrow's test? How long will it take me to fall asleep? Why is this always happening to me? All of these thoughts manifest as stress, an ever-present variable in our lives. You are not alone and as you will find out in this chapter, there are ways of coping and managing these stressors. Furthermore, there are ways that we can help communities better deal with these types of challenges.

WHAT IS STRESS?



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So what is **stress**? This shouldn't be a trick question, but why is it so hard to answer? Stress can be three things: a *stimulus event* (i.e., a stressor), a *process for understanding* the stimulus and *its context*, and a *reaction we have to this event*. Essentially, to be stressful the event has to become an overload of incoming information into our system. Stress can cause biological responses such as sweaty palms or a racing heart, as well as psychological responses such as nervousness. It is known to have effects on our behavior causing us to avoid others, and it also affects cognitive performance causing us to have difficulty concentrating.

A number of genetic studies have begun to identify candidate genes that may play a role on diverse forms of stress reactions. It is highly probable that genetics account for some of our responses to stress, but other factors are also of importance. Environmental stressors can also affect our behaviors and emotions. Environmental stressors can be grouped into different types: *Major Life*

Events (e.g., experiencing a breakup, getting married, or having a baby), *Life Transitions* (e.g., puberty or transition into high school), *Daily Hassles* (e.g., family arguments or waiting in a long line at a security checkpoint of an airport) and *Disasters* (e.g., experiencing a car accident or a computer crashing causing loss of important information). These types of environmental stressors can cause you to be fearful and have a racing heartbeat. And our perceptions of these responses can actually make the symptoms worse. It is also important to note that these stressors can be perceived differently by different people. For instance, two people can get stuck in the same elevator and while one would find the experience to be a nuisance, another will tell you it was the worse situation they have ever been in. Here is a poll about the role of stresses and stress responses in the natural world. This supplementary article explores what is the right amount of stress.

PHYSIOLOGICAL VS PSYCHOLOGICAL STRESS

While most of the time we think about stress in a negative way, some stress is adaptive and can even give us an edge. Part of the stress reaction involves the secretion of hormones, which in turn will stimulate the cardiovascular system, which includes your heart. In this way, the right amount of stress may release hormones and increase our ability to focus better on an exam or to quickly maneuver our car when we are trying to avoid an accident. Most stressors in our daily life are psychological in nature—dating, exams, presentations, and deadlines, so the adrenaline and cortisol (i.e., stress hormones) released into the bloodstream do not get burned off. These types of psychological stressors can initiate an over-activation with a tendency to make the stress response worse. So, a response to an environmental stressor may start as fear and turn into a panic attack.

Acute vs Chronic Stress



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One of the goals of our body is to maintain stability (i.e., **homeostasis**). We can, therefore, define stress as an actual or perceived threat capable of throwing our homeostasis off balance. Stress exposure starts the responses. When a person is exposed to prolonged stress, **overload** may occur. When the stress response is triggered too often and/or remains active too long, it can cause "wear and tear" on the body from lowering your immune system and bone density, to hypertension, to heart attack.

There are two different types of stressors that we typically encounter. **Acute stressors** are observable stressful events that are time-limited such as an upcoming test or a family gathering. An acute stressor brings activation to our neuroendocrine system and makes us ready to act (i.e., "fight or flight"). Remember that pumped up feeling you got the last time you were getting ready to give a speech in front of the class? **Chronic stressors**, in contrast, are persistent demands on you; they are typically open-ended, using up your resources in coping but not having any resolution. Here is a short article and podcast on stress effects on health and suggestions for stress preventive activities.

A chronic illness, poverty, and racial discrimination are all examples of chronic stressors. Prolonged stress can lead to an eventual breakdown, such as contributing to aging. A number of recent studies have shown that lower socioeconomic status is associated with higher stress load. In addition, perceptions of racism can serve as a chronic social stressor for ethnic minorities and can, in part, explain some of the health issues of African Americans and other ethnic minority groups in the US and other countries.

Everyday Hassles



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Robert Service, a Canadian Poet, cautioned, “Be master of your petty annoyances and conserve your energies for the big, worthwhile things. It isn’t the mountain ahead that wears you out—it’s the grain of sand in your shoe.”

In addition to many stressors in our lives being psychological and chronic in nature, we should pay attention to everyday hassles, which can be as harmful, if not more harmful than life-changing events. Everyday hassles may include things like worrying about one’s weight, having too much work with too little time, or a stressful commute to school or work. Major life changes usually bring about more hassles, which may lead to more physical stress symptoms.

In summary, stress can be adaptive—in a fearful or stress-causing situation, we can run away to save our lives, or we can concentrate better on a test. Biologists might even say it is necessary. But, stress can also be maladaptive. This is especially true if it is prolonged (i.e., chronic stress) because it increases our risk of illness and health problems. Thus, reducing stress, especially prolonged stress, is essential to healthcare. This video explains the effects of daily hassles on our health.

COPING AND STRESS



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To deal with stress in your life, it is important to figure out where that stress originates and notice how you tend to react to it. Later in this chapter, we will show you how community psychologists consider the environment and ecological perspectives as intertwined in stress and coping. Lazarus and Folkman (1984) have been among the most influential psychologists in the stress and coping field, and they defined coping as efforts to manage demands that could exceed our resources. It is important to highlight from this definition that when a person perceives a life circumstance as taxing and exceeding the resources they have, this person will experience stress. Therefore, coping involves your efforts to manage stress, which is illustrated in Figure 1.

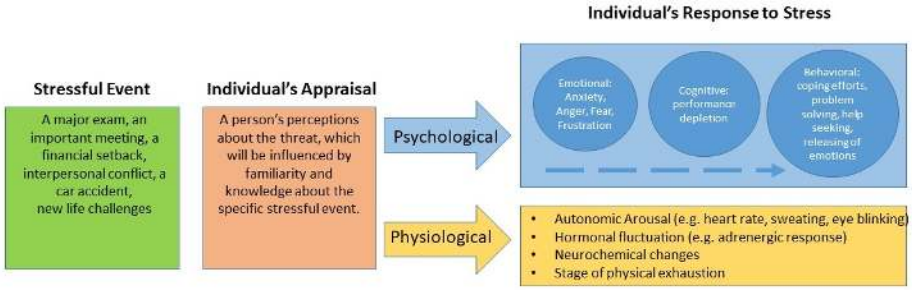


Figure 1. Overview of Stress Process and Coping Responses

Coping Defined

Lazarus and Folkman (1984) felt that when humans perceive a life circumstance as taxing and exceeding their resources, stress will be experienced, which we have already defined in the prior section as an overload of incoming information into a system. Therefore, coping involves persons' efforts to manage stress, whether the process of dealing with stress is adaptive or not (Lazarus, 1993). When we talk about coping, we will need to consider the intensity of the stressor, the context of coping, and an individual's appraisal of coping expectations.

Coping Types

Research on coping has usually found five types of **coping styles** (Clarke, 2006; Skinner, et al., 2003; Folkman & Moskowitz, 2005). These include the following: (1) **problem-focused coping style** involves addressing the problem situation by taking direct acting, planning or thinking of ways to solve the problem, (2) **emotion-focused coping style** involves expressing feelings or engaging in emotional release activities such as exercising or practicing meditation, (3) **seeking-understanding coping style** refers to finding understanding of the problem and looking for a meaning of the experience, and (4) **seeking help** involves using others as a resource to solve the problem. Finally, people might respond to stressors by (5) **avoiding the problem** and trying to stay away from the problem or potential solution to the problem.

Coping Strategies

Coping strategies are the choices that a person makes in order to respond to a stressor. A strategy can be adaptive (effective) or maladaptive (ineffective or harmful). The ideal **adaptive coping** strategy varies depending on the context, as well as the personality traits of the person responding. The coping strategies can be problem-solving or active strategies, emotional expression and regulation strategies, seeking understanding strategies, help or support-seeking strategies, and problem avoidance or distraction strategies.

Here is one example of an intervention strategy that shows how to effectively cope with daily and transitional stressors. The strategy is called **Shift-and-Persist** (Chen & Miller, 2012), and it requires individuals to first shift views of the problem. To shift, you need to (1) recognize and accept the presence of stress, (2) engage in emotional regulation and control negative emotions, and (3) practice self-distancing from the stressor to gain an outsider's perspective of the stressful context. To persist, you would need to (1) plan for the future through goal setting, (2) recognize a broader perspective when obstacles arise, (3) determine what brings meaning to your life, and (4) become flexible to determine new pathways to goals. The Center for Disease Control and Prevention and the American Heart Association offer other coping strategies. Two more discussions on coping strategies are found in these two Ted Talk Videos here and here.

Table 1 below presents a list of coping strategies and is a summary of strategies reported in Clarke, 2006; Skinner, et al., 2003; Folkman & Moskowitz, 2005. Although completed lists are more extensive, this table presents styles reported across the three studies that presented similar types of responses.

Table 1. ***Coping Strategies and Types of Responses***

Coping Strategies:	Type of Responses:
Problem Solving or Active Strategies	• Work on solving the problem in the situation • Make a plan for action and follow up
Emotional Expression and Emotional Regulation Strategies	• Let emotion out; get in touch with feelings and let them out • Let someone know about my feelings • Keep emotions under control by performing appeasing activities • Cognitive restructuring; reorganizing the way I look at the situation
Seeking Understanding Strategies	• Try to understand or find meaning of the situation; looking for learning
Help-seeking Strategies and Support-seeking Strategies	• Seeking instrumental aid or advice from others • Seeking comfort or understanding from others
Problem Avoidance Strategies and Distraction Strategies	• Acting like nothing had happened • Avoid thinking or doing anything about the problem • Leaving the scenario and staying away from the stressful situation • Efforts to avoid thinking about the problem situation by using distractions or entertainment activities

To understand coping as a process, we need to understand people's reaction to stress in context. This includes assessing whether the coping thoughts or actions are good or bad for that given challenge and given context. In addition, the process of coping includes the particular person, the particular encounters with the stressor, the time of the person's reactions, and the outcome being examined.

SUMMING UP



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We all experience stress. However, we respond to this stress in different ways. Sometimes low levels of stress can actually be helpful as it could motivate you to study for an exam. Although the experience of stress is very subjective, stress elicits physiological, emotional, and cognitive reactions in us all. To deal with these stressors, we mobilize resources for coping with the problems confronting us. The success of our coping efforts will depend on ourselves as well as the environmental challenge. For

example, most of us have the resources to deal with the stress of a thunderstorm, but we might really be challenged if we are confronted with a tornado that comes through our neighborhood. So there are different levels of stressors that we face. In this chapter, we examined the relationship between stressors and coping, we reviewed the different coping styles and the relationship between individual and context and coping outcomes, including resilience. We hope that this review of stress has provided you with some new insights about how you might use a variety of coping strategies to deal with stress and to work toward the reduction of stress among others.

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10.3: Regulation of Stress

5.3: Regulation of Stress

As we learned in the previous section, stress—especially if it is chronic—takes a toll on our bodies and can have enormously negative health implications. When we experience events in our lives that we appraise as stressful, it is essential that we use effective coping strategies to manage our stress. Coping refers to mental and behavioral efforts that we use to deal with problems relating to stress, including its presumed cause and the unpleasant feelings and emotions it produces.

Coping Styles

Lazarus and Folkman (1984) distinguished two fundamental kinds of coping: problem-focused coping and emotion-focused coping. In problem-focused coping, one attempts to manage or alter the problem that is causing one to experience stress (i.e., the stressor). Problem-focused coping strategies are similar to strategies used in everyday problem-solving: they typically involve identifying the problem, considering possible solutions, weighing the costs and benefits of these solutions, and then selecting an alternative (Lazarus & Folkman, 1984). As an example, suppose Bradford receives a midterm notice that he is failing statistics class. If Bradford adopts a problem-focused coping approach to managing his stress, he would be proactive in trying to alleviate the source of the stress. He might contact his professor to discuss what must be done to raise his grade, he might also decide to set aside two hours daily to study statistics assignments, and he may seek tutoring assistance. A problem-focused approach to managing stress means we actively try to do things to address the problem.

Emotion-focused coping, in contrast, consists of efforts to change or reduce the negative emotions associated with stress. These efforts may include avoiding, minimizing, or distancing oneself from the problem, or positive comparisons with others (“I’m not as bad off as she is”), or seeking something positive in a negative event (“Now that I’ve been fired, I can sleep in for a few days”). In some cases, emotion-focused coping strategies involve reappraisal, whereby the stressor is construed differently (and somewhat self-deceptively) without changing its objective level of threat (Lazarus & Folkman, 1984). For example, a person sentenced to federal prison who thinks, “This will give me a great chance to network with others,” is using reappraisal. If Bradford adopted an emotion-focused approach to managing his midterm deficiency stress, he might watch a comedy movie, play video games, or spend hours on Twitter to take his mind off the situation. In a certain sense, emotion-focused coping can be thought of as treating the symptoms rather than the actual cause.

While many stressors elicit both kinds of coping strategies, problem-focused coping is more likely to occur when encountering stressors we perceive as controllable, while emotion-focused coping is more likely to predominate when faced with stressors that we believe we are powerless to change (Folkman & Lazarus, 1980). Clearly, emotion-focused coping is more effective in dealing with uncontrollable stressors. For example, if at midnight you are stressing over a 40-page paper due in the morning that you have not yet started, you are probably better off recognizing the hopelessness of the situation and doing something to take your mind off it; taking a problem-focused approach by trying to accomplish this task would only lead to frustration, anxiety, and even more stress.

Fortunately, most stressors we encounter can be modified and are, to varying degrees, controllable. A person who cannot stand her job can quit and look for work elsewhere; a middle-aged divorcee can find another potential partner; the freshman who fails an exam can study harder next time, and a breast lump does not necessarily mean that one is fated to die of breast cancer.

Control and Stress

The desire and ability to predict events, make decisions, and affect outcomes—that is, to enact control in our lives—is a basic tenet of human behavior (Everly & Lating, 2002). Albert Bandura (1997) stated that “the intensity and chronicity of human stress is governed largely by perceived control over the demands of one’s life” (p. 262). As cogently described in his statement, our reaction to potential stressors depends to a large extent on how much control we feel we have over such things. Perceived control is our beliefs about our personal capacity to exert influence over and shape outcomes, and it has major implications for our health and happiness (Infurna & Gerstorf, 2014). Extensive research has demonstrated that perceptions of personal control are associated with a variety of favorable outcomes, such as better physical and mental health and greater psychological well-being (Diehl & Hay, 2010). Greater personal control is also associated with lower reactivity to stressors in daily life. For example, researchers in one investigation found that higher levels of perceived control at one point in time were later associated with lower emotional and physical reactivity to interpersonal stressors (Neupert, Almeida, & Charles, 2007). Further, a daily diary study with 34 older

widows found that their stress and anxiety levels were significantly reduced on days during which the widows felt greater perceived control (Ong, Bergeman, & Bisconti, 2005).

DIG DEEPER

Learned Helplessness

When we lack a sense of control over the events in our lives, particularly when those events are threatening, harmful, or noxious, the psychological consequences can be profound. In one of the better illustrations of this concept, psychologist Martin Seligman conducted a series of classic experiments in the 1960s (Seligman & Maier, 1967) in which dogs were placed in a chamber where they received electric shocks from which they could not escape. Later, when these dogs were given the opportunity to escape the shocks by jumping across a partition, most failed to even try; they seemed to just give up and passively accept any shocks the experimenters chose to administer. In comparison, dogs who were previously allowed to escape the shocks tended to jump the partition and escape the pain (Figure 14.22).



Figure 14.22 Seligman's learned helplessness experiments with dogs used an apparatus that measured when the animals would move from a floor delivering shocks to one without.

Seligman believed that the dogs who failed to try to escape the later shocks were demonstrating learned helplessness: They had acquired a belief that they were powerless to do anything about the noxious stimulation they were receiving. Seligman also believed that the passivity and lack of initiative these dogs demonstrated was similar to that observed in human depression. Therefore, Seligman speculated that acquiring a sense of learned helplessness might be an important cause of depression in humans: Humans who experience negative life events that they believe they are unable to control may become helpless. As a result, they give up trying to control or change the situation and some may become depressed and show lack of initiative in future situations in which they can control the outcomes (Seligman, Maier, & Geer, 1968).

Seligman and colleagues later reformulated the original learned helplessness model of depression (Abramson, Seligman, & Teasdale, 1978). In their reformulation, they emphasized attributions (i.e., a mental explanation for why something occurred) that lead to the perception that one lacks control over negative outcomes are important in fostering a sense of learned helplessness. For example, suppose a coworker shows up late to work; your belief as to what caused the coworker's tardiness would be an attribution (e.g., too much traffic, slept too late, or just doesn't care about being on time).

The reformulated version of Seligman's study holds that the attributions made for negative life events contribute to depression. Consider the example of a student who performs poorly on a midterm exam. This model suggests that the student will make three kinds of attributions for this outcome: internal vs. external (believing the outcome was caused by his own personal inadequacies or by environmental factors), stable vs. unstable (believing the cause can be changed or is permanent), and global vs. specific (believing the outcome is a sign of inadequacy in most everything versus just this area). Assume that the student makes an internal ("I'm just not smart"), stable ("Nothing can be done to change the fact that I'm not smart") and global ("This is another example of how lousy I am at everything") attribution for the poor performance. The reformulated theory predicts that the student would perceive a lack of control over this stressful event and thus be especially prone to developing depression. Indeed, research has

demonstrated that people who have a tendency to make internal, global, and stable attributions for bad outcomes tend to develop symptoms of depression when faced with negative life experiences (Peterson & Seligman, 1984).

Seligman's learned helplessness model has emerged over the years as a leading theoretical explanation for the onset of major depressive disorder. When you study psychological disorders, you will learn more about the latest reformulation of this model—now called hopelessness theory.

People who report higher levels of perceived control view their health as controllable, thereby making it more likely that they will better manage their health and engage in behaviors conducive to good health (Bandura, 2004). Not surprisingly, greater perceived control has been linked to lower risk of physical health problems, including declines in physical functioning (Infurna, Gerstorf, Ram, Schupp, & Wagner, 2011), heart attacks (Rosengren et al., 2004), and both cardiovascular disease incidence (Stürmer, Hasselbach, & Amelang, 2006) and mortality from cardiac disease (Surtees et al., 2010). In addition, longitudinal studies of British civil servants have found that those in low-status jobs (e.g., clerical and office support staff) in which the degree of control over the job is minimal are considerably more likely to develop heart disease than those with high-status jobs or considerable control over their jobs (Marmot, Bosma, Hemingway, & Stansfeld, 1997).

The link between perceived control and health may provide an explanation for the frequently observed relationship between social class and health outcomes (Kraus, Piff, Mendoza-Denton, Rheinschmidt, & Keltner, 2012). In general, research has found that more affluent individuals experience better health mainly because they tend to believe that they can personally control and manage their reactions to life's stressors (Johnson & Krueger, 2006). Perhaps buoyed by the perceived level of control, individuals of higher social class may be prone to overestimating the degree of influence they have over particular outcomes. For example, those of higher social class tend to believe that their votes have greater sway on election outcomes than do those of lower social class, which may explain higher rates of voting in more affluent communities (Krosnick, 1990). Other research has found that a sense of perceived control can protect less affluent individuals from poorer health, depression, and reduced life-satisfaction—all of which tend to accompany lower social standing (Lachman & Weaver, 1998).

Taken together, findings from these and many other studies clearly suggest that perceptions of control and coping abilities are important in managing and coping with the stressors we encounter throughout life.

Social Support

The need to form and maintain strong, stable relationships with others is a powerful, pervasive, and fundamental human motive (Baumeister & Leary, 1995). Building strong interpersonal relationships with others helps us establish a network of close, caring individuals who can provide social support in times of distress, sorrow, and fear. Social support can be thought of as the soothing impact of friends, family, and acquaintances (Baron & Kerr, 2003). Social support can take many forms, including advice, guidance, encouragement, acceptance, emotional comfort, and tangible assistance (such as financial help). Thus, other people can be very comforting to us when we are faced with a wide range of life stressors, and they can be extremely helpful in our efforts to manage these challenges. Even in nonhuman animals, species mates can offer social support during times of stress. For example, elephants seem to be able to sense when other elephants are stressed and will often comfort them with physical contact—such as a trunk touch—or an empathetic vocal response (Krumboltz, 2014).

Scientific interest in the importance of social support first emerged in the 1970s when health researchers developed an interest in the health consequences of being socially integrated (Stroebe & Stroebe, 1996). Interest was further fueled by longitudinal studies showing that social connectedness reduced mortality. In one classic study, nearly 7,000 Alameda County, California, residents were followed over 9 years. Those who had previously indicated that they lacked social and community ties were more likely to die during the follow-up period than those with more extensive social networks. Compared to those with the most social contacts, isolated men and women were, respectively, 2.3 and 2.8 times more likely to die. These trends persisted even after controlling for a variety of health-related variables, such as smoking, alcohol consumption, self-reported health at the beginning of the study, and physical activity (Berkman & Syme, 1979).

Since the time of that study, social support has emerged as one of the well-documented psychosocial factors affecting health outcomes (Uchino, 2009). A statistical review of 148 studies conducted between 1982 and 2007 involving over 300,000 participants concluded that individuals with stronger social relationships have a 50% greater likelihood of survival compared to those with weak or insufficient social relationships (Holt-Lunstad, Smith, & Layton, 2010). According to the researchers, the magnitude of the effect of social support observed in this study is comparable with quitting smoking and exceeded many well-known risk factors for mortality, such as obesity and physical inactivity (Figure 14.23Links to an external site.).



(a)



(b)

Figure 14.23 Close relationships with others, whether (a) a group of friends or (b) a family circle, provide more than happiness and fulfillment—they can help foster good health. (credit a: modification of work by Nattachai Noogure; credit b: modification of work by Christian Haugen)

A number of large-scale studies have found that individuals with low levels of social support are at greater risk of mortality, especially from cardiovascular disorders (Brummett et al., 2001). Further, higher levels of social supported have been linked to better survival rates following breast cancer (Falagas et al., 2007) and infectious diseases, especially HIV infection (Lee & Rotheram-Borus, 2001). In fact, a person with high levels of social support is less likely to contract a common cold. In one study, 334 participants completed questionnaires assessing their sociability; these individuals were subsequently exposed to a virus that causes a common cold and monitored for several weeks to see who became ill. Results showed that increased sociability was linearly associated with a decreased probability of developing a cold (Cohen, Doyle, Turner, Alper, & Skoner, 2003).

For many of us, friends are a vital source of social support. But what if you found yourself in a situation in which you lacked friends or companions? For example, suppose a popular high school student attends a far-away college, does not know anyone, and has trouble making friends and meaningful connections with others during the first semester. What can be done? If real life social support is lacking, access to distant friends via social media may help compensate. In a study of college freshmen, those with few face-to-face friends on campus but who communicated electronically with distant friends were less distressed that those who did not (Raney & Troop-Gordon, 2012). Also, for some people, our families—especially our parents—are a major source of social support.

Social support appears to work by boosting the immune system, especially among people who are experiencing stress (Uchino, Vaughn, Carlisle, & Birmingham, 2012). In a pioneering study, spouses of cancer patients who reported high levels of social support showed indications of better immune functioning on two out of three immune functioning measures, compared to spouses who were below the median on reported social support (Baron, Cutrona, Hicklin, Russell, & Lubaroff, 1990). Studies of other populations have produced similar results, including those of spousal caregivers of dementia sufferers, medical students, elderly adults, and cancer patients (Cohen & Herbert, 1996; Kiecolt-Glaser, McGuire, Robles, & Glaser, 2002).

In addition, social support has been shown to reduce blood pressure for people performing stressful tasks, such as giving a speech or performing mental arithmetic (Lepore, 1998). In these kinds of studies, participants are usually asked to perform a stressful task either alone, with a stranger present (who may be either supportive or unsupportive), or with a friend present. Those tested with a friend present generally exhibit lower blood pressure than those tested alone or with a stranger (Fontana, Diegnan, Villeneuve, & Lepore, 1999). In one study, 112 female participants who performed stressful mental arithmetic exhibited lower blood pressure when they received support from a friend rather than a stranger, but only if the friend was a male (Phillips, Gallagher, & Carroll, 2009). Although these findings are somewhat difficult to interpret, the authors mention that it is possible that females feel less supported and more evaluated by other females, particularly females whose opinions they value.

Taken together, the findings above suggest one of the reasons social support is connected to favorable health outcomes is because it has several beneficial physiological effects in stressful situations. However, it is also important to consider the possibility that social support may lead to better health behaviors, such as a healthy diet, exercising, smoking cessation, and cooperation with medical regimens (Uchino, 2009).

DIG DEEPER

Coping with Prejudice and Discrimination

While having social support is quite beneficial, being the recipient of prejudicial attitudes and discriminatory behaviors is associated with a number of negative outcomes. In their literature review, Brondolo, Brady, Pencille, Beatty, and Contrada (2009) describe how racial prejudice and discrimination serve as unique, significant stressors for those who are the targets of such attitudes

and behavior. Being the target of racism is associated with increased rates of depression, lowered self-esteem, hypertension, and cardiovascular disease.

Given the complex and pervasive nature of racism as a stressor, Brondolo et al. (2009) point out the importance of coping with this specific stressor. Their review is aimed at determining which coping strategies are most effective at offsetting negative health outcomes associated with racism-related stress. The authors examine the effectiveness of three coping strategies: focusing on racial identity to handle race-related stress, anger expression/suppression, and seeking social support. You've learned a bit about social support, so we'll focus the remainder of this discussion on the potential coping strategies of focusing on racial identity and anger expression/suppression.

Focusing on racial identity refers to the process by which a person comes to feel as if he belongs to a given racial group; this may increase a sense of pride associated with group membership. Brondolo et al. (2009) suggest that a strong sense of racial identity might help an individual who is the target of racism differentiate between prejudicial attitudes/behaviors that are directed toward his group as a whole rather than at him as a person. Furthermore, the sense of belonging to his group might alleviate the distress of being ostracized by others. However, the research literature on the effectiveness of this technique has produced mixed results.

Anger expression/suppression refers to the options available as a function of the anger evoked by racial prejudice and discrimination. Put simply, a target of racist attitudes and behaviors can act upon her anger or suppress her anger. As discussed by Brondolo et al. (2009), there has been very little research on the effectiveness of either approach; the results are quite mixed with some showing anger expression and others showing anger suppression as the healthier option.

In the end, racism-related stress is a complex issue and each of the coping strategies discussed here has strengths and weaknesses. Brondolo et al. (2009) argue that it is imperative that additional research be conducted to ascertain the most effective strategies for coping with the negative outcomes that are experienced by the targets of racism.

Stress Reduction Techniques

Beyond having a sense of control and establishing social support networks, there are numerous other means by which we can manage stress (Figure 14.24). A common technique people use to combat stress is exercise (Salmon, 2001). It is well-established that exercise, both of long (aerobic) and short (anaerobic) duration, is beneficial for both physical and mental health (Everly & Lating, 2002). There is considerable evidence that physically fit individuals are more resistant to the adverse effects of stress and recover more quickly from stress than less physically fit individuals (Cotton, 1990). In a study of more than 500 Swiss police officers and emergency service personnel, increased physical fitness was associated with reduced stress, and regular exercise was reported to protect against stress-related health problems (Gerber, Kellman, Hartman, & Pühse, 2010).



(a) (b) (c)

Figure 14.24 Stress reduction techniques may include (a) exercise, (b) meditation and relaxation, or (c) biofeedback. (credit a: modification of work by "UNE Photos"/Flickr; credit b: modification of work by Caleb Roenigk; credit c: modification of work by Dr. Carmen Russoniello)

One reason exercise may be beneficial is because it might buffer some of the deleterious physiological mechanisms of stress. One study found rats that exercised for six weeks showed a decrease in hypothalamic-pituitary-adrenal responsiveness to mild stressors (Campeau et al., 2010). In high-stress humans, exercise has been shown to prevent telomere shortening, which may explain the common observation of a youthful appearance among those who exercise regularly (Puterman et al., 2010). Further, exercise in later adulthood appears to minimize the detrimental effects of stress on the hippocampus and memory (Head, Singh, & Bugg, 2012). Among cancer survivors, exercise has been shown to reduce anxiety (Speck, Courneya, Masse, Duval, & Schmitz, 2010) and depressive symptoms (Craft, VanIterson, Helenowski, Rademaker, & Courneya, 2012). Clearly, exercise is a highly effective tool for regulating stress.

In the 1970s, Herbert Benson, a cardiologist, developed a stress reduction method called the relaxation response technique(Greenberg, 2006). The relaxation response technique combines relaxation with transcendental meditation, and consists of four components (Stein, 2001):

1. sitting upright on a comfortable chair with feet on the ground and body in a relaxed position,
2. a quiet environment with eyes closed,
3. repeating a word or a phrase—a mantra—to oneself, such as “alert mind, calm body,”
4. passively allowing the mind to focus on pleasant thoughts, such as nature or the warmth of your blood nourishing your body.

The relaxation response approach is conceptualized as a general approach to stress reduction that reduces sympathetic arousal, and it has been used effectively to treat people with high blood pressure (Benson & Proctor, 1994).

Another technique to combat stress, biofeedback, was developed by Gary Schwartz at Harvard University in the early 1970s. Biofeedback is a technique that uses electronic equipment to accurately measure a person’s neuromuscular and autonomic activity —feedback is provided in the form of visual or auditory signals. The main assumption of this approach is that providing somebody biofeedback will enable the individual to develop strategies that help gain some level of voluntary control over what are normally involuntary bodily processes (Schwartz & Schwartz, 1995). A number of different bodily measures have been used in biofeedback research, including facial muscle movement, brain activity, and skin temperature, and it has been applied successfully with individuals experiencing tension headaches, high blood pressure, asthma, and phobias (Stein, 2001).

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10.4: Psychological Wellbeing

5.4: Psychological Wellbeing

Individual attributes and behaviors

These relate to a person's innate and learned ability to deal with thoughts and feelings and to manage him/herself in daily life ('emotional intelligence'). It is also the capacity to deal with the social world around by partaking in social activities, taking responsibilities or respecting the views of others ('social intelligence'). An individual's mental health state can also be influenced by genetic and biological factors; that is, determinants that persons are born or endowed with, including chromosomal abnormalities (e.g. Down's syndrome) and intellectual disability caused by prenatal exposure to alcohol or oxygen deprivation at birth.

Social and economic circumstances

The capacity for people to develop and flourish is deeply influenced by their immediate social surroundings – including their opportunity to engage positively with family members, friends or colleagues, and earn a living for themselves and their families – and also by the socioeconomic circumstances in which they find themselves. Restricted or lost opportunities to gain an education and income are especially pertinent socio-economic factors.

Environmental factors

The wider sociocultural and geopolitical environment in which people live can also affect an individual's, household's or community's mental health status, including levels of access to basic commodities and services (water, essential health services, the rule of law), exposure to predominating cultural beliefs, attitudes or practices, as well as by social and economic policies formed at the national level; for example, the on-going global financial crisis is expected to have significant mental health consequences, including increased rates of suicide and harmful alcohol use. Discrimination, social or gender inequality and conflict are examples of adverse structural determinants of mental well-being.

Personality

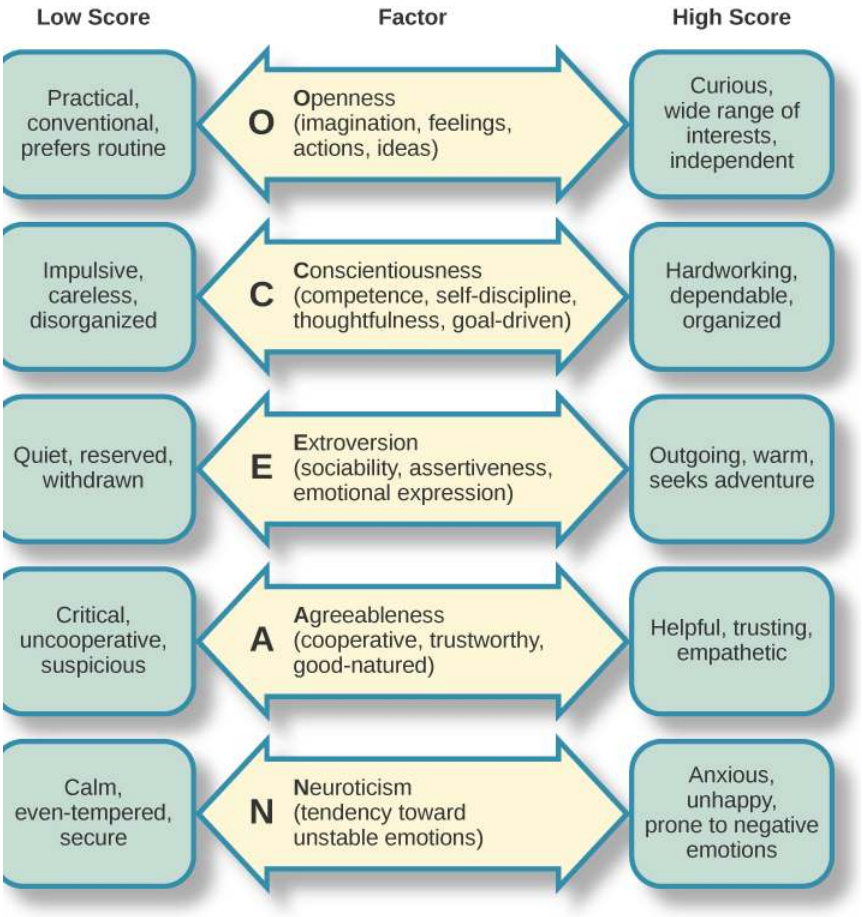
Personality measures turn out to be good predictors of your health, your sexual promiscuity, your likelihood of divorce, how happy you typically are—even your taste in paintings. Personality is a much better predictor of these things than social class or age. The origin of these differences is in part innate. That is to say, when people are adopted at birth and brought up by new families, their personalities are more similar to their blood relatives than to the ones they grew up with. The differences begin to emerge early in life and are surprisingly stable across the decades. This is not to say that people cannot change, but major change is the exception rather than the rule. Personality differences tend to manifest themselves through the quick, gut-feeling, intuitive, and emotional systems of thehuman mind. The slower, rational, deliberate systems show less variation in output from person to person. Deliberate rational strategies can be used to over-ride intuitive patterns of response, and this is how people wishing to change their personalities or feelings have to go about it.

So what are the major ways personalities can differ? The dominant approach is to think of the space of possible personalities as being defined by a number of dimensions. Each person can be given a location in the space by their scores on all the different dimensions. Virtually all theories agree on two of the main dimensions, though they differ on how many additional ones they recognize.

Five factors

- Openness to experience: (inventive/curious vs. consistent/cautious). Appreciation for art, emotion, adventure, unusual ideas, curiosity, and variety of experience. Openness reflects the degree of intellectual curiosity, creativity and a preference for novelty and variety a person has. It is also described as the extent to which a person is imaginative or independent and depicts a personal preference for a variety of activities over a strict routine. High openness can be perceived as unpredictability or lack of focus. Moreover, individuals with high openness are said to pursue selfactualization specifically by seeking out in tense, euphoric experiences. Conversely, those with low openness seek to gain fulfillment through perseverance and are characterized as pragmatic and data-driven—sometimes even perceived to be dogmatic and closed-minded. Some disagreement remains about how to interpret and contextualize the openness factor.

- Conscientiousness: (efficient/organized vs. easy-going/careless). A tendency to be organized and dependable, show self-discipline, act dutifully, aim for achievement, and prefer planned rather than spontaneous behavior. High conscientiousness is often perceived as stubbornness and obsession. Low conscientiousness is associated with flexibility and spontaneity, but can also appear as sloppiness and lack of reliability.
- Extraversion: (outgoing/energetic vs. solitary/reserved). Energy, positive emotions, surgency, assertiveness, sociability and the tendency to seek stimulation in the company of others, and talkativeness. High extraversion is often perceived as attention-seeking, and domineering. Low extraversion causes a reserved, reflective personality, which can be perceived as aloof or self-absorbed.
- Agreeableness: (friendly/compassionate vs. challenging/detached). A tendency to be compassionate and cooperative rather than suspicious and antagonistic towards others. It is also a measure of one's trusting and helpful nature, and whether a person is generally well-tempered or not. High agreeableness is often seen as naive or submissive. Low agreeableness personalities are often competitive or challenging people, which can be seen as argumentativeness or untrustworthiness.
- Neuroticism: (sensitive/nervous vs. secure/confident). The tendency to experience unpleasant emotions easily, such as anger, anxiety, depression, and vulnerability. Neuroticism also refers to the degree of emotional stability and impulse control and is sometimes referred to by its low pole, "emotional stability". A high need for stability manifests itself as a stable and calm personality, but can be seen as uninspiring and unconcerned. A low need for stability causes a reactive and excitable personality, often very dynamic individuals, but they can be perceived as unstable or insecure.



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10.5: Healthy Behaviors and Wellness

5.5: Healthy Behaviors and Wellness

As most college students do, you have probably set goals. Obviously, your individual goals differ from those of your fellow classmates, but everyone's goals share one common attribute: their intention to improve individual wellbeing. However, there are as many ideas about how to do that as there are individuals. Do your goals involve making more money, achieving better health, improving your relationships? Holistic wellness involves all those aspects of life and more. This chapter explains the importance of overall wellness, which is about more than being physically and mentally healthy, free from illness and disease. In fact, the study of wellness incorporates all aspects of life. Achieving overall wellness means living actively and fully. People in this state exude confidence, optimism, and self-efficacy; they have the energy reserves to do what needs to be done today and to plan for a better tomorrow. The most effective and transformative goals are those designed to achieve the highest level of personal wellness.

Dimensions of Wellness

Wellness is a familiar term, but what is its true definition? Is it simply the absence of disease? This chapter will define all the components of holistic wellness and describe the factors that contribute to not only a person's physical and mental health, but also their ability to develop, thrive, succeed, enjoy life, and meet challenges head on with confidence and resolve.

To achieve this type of overall wellness, a person must be healthy in nine interconnected dimensions of wellness: physical, emotional, intellectual, spiritual, social, environmental, occupational, financial, and cultural. A description of each dimension follows.

The Nine Dimensions of Wellness

Occupational Wellness An occupationally well person enjoys the pursuit of a career which is fulfilling on a variety of levels. This person finds satisfaction and enrichment in work, while always in pursuit of opportunities to reach the next level of professional success.

Financial Wellness Those who are financially well are fully aware of their current financial state. They set long- and short-term goals regarding finances that will allow them to reach their personal goals.

Physical Wellness People who are physically well actively make healthy decisions on a daily basis. They eat a nutritionally balanced diet; they try to get an adequate amount of sleep, and they visit the doctor routinely. They make a habit of exercising three to five times per week; they have the ability to identify their personal needs and are aware of their body's limitations. They maintain positive interpersonal relationships and make healthy sexual decisions that are consistent with their personal values and beliefs.

Emotional Wellness An emotionally well person successfully expresses and manages an entire range of feelings, including anger, doubt, hope, joy, desire, fear, and many others. People who are emotionally well maintain a high level of self-esteem. They have a positive body-image and the ability to regulate their feelings. They know where to seek support and help regarding their mental health, including but not limited to, seeking professional counseling services.

Intellectual Wellness Those who enjoy intellectual wellness engage in lifelong learning. They seek knowledge and activities that further develop their critical thinking and heighten global awareness. They engage in activities associated with the arts, philosophy, and reasoning.

Spiritual Wellness People who can be described as spiritually well have identified a core set of beliefs that guide their decision making, and other faith-based endeavors. While firm in their spiritual beliefs, they understand others may have a distinctly different set of guiding principles. They recognize the relationship between spirituality and identity in all individuals.

Social Wellness A socially well person builds healthy relationships based on interdependence, trust, and respect. Those who are socially well have a keen awareness of the feelings of others. They develop a network of friends and co-workers who share a common purpose, and who provide support and validation.

Environmental Wellness An environmentally well person appreciates the external cues and stimuli that an environment can provide. People who have achieved environmental wellness recognize the limits to controlling an environment and seek to understand the role an individual plays in the environment.

Cultural Wellness Culturally well people are aware of their own cultural background, as well as the diversity and richness present in other cultural backgrounds. Cultural wellness implies understanding, awareness, and intrinsic respect for aspects of diversity. A culturally well person acknowledges and accepts the impact of these aspects of diversity on sexual orientation, religion, gender, racial and ethnic backgrounds, age groups, and disabilities.

Lifestyle Modification Barriers

Dr. James M. Olson, a psychology professor at the University of Western Ontario, London, has identified several psychological barriers that commonly prevent people from taking action, even when inaction poses a threat to their health. These barriers occur during three stages of behavior modification: admission of the problem, initial attempts to change, and long-term change, as outlined below:

Barriers to Admission of the Problem

The first step in lasting change is admitting a problem exists. People often fail to change behavior that poses a risk to their health because they deny a risk exists, trivialize their personal risk, feel invulnerable, make a faulty conceptualization (i.e., they attribute early warning signs to a benign cause), or experience debilitating emotions when contemplating preventative measures.

Barriers to Initial Attempts to Change

At this stage, people acknowledge the need to change but struggle to accomplish their goals. This failure is a result of lack of knowledge, low self-efficacy (the belief in one's own ability to succeed at change), and dysfunctional attitudes.

Barriers to Long-term Change

Just because a person has experienced success in changing a behavior, that doesn't mean the change is permanent. Barriers to long-term change include cognitive and motivational drift (diminishing enthusiasm for the need to change), lack of perceived improvement, lack of social support, and lapses.

Fostering Wellness in Your Life

You are once again feeling motivated to eat better, exercise more, drink less caffeine, or make any number of the positive lifestyle changes you have been telling yourself you want to make. You have tried before—probably declaring another attempt as a New Year's resolution—but without experiencing much success. Making a lifestyle change is challenging, especially when you want to transform many things at once. This time, think of those changes not as a resolution but as an evolution.

Lifestyle changes are a process that takes time and requires support. Once you are ready to make a change, the difficult part is committing and following through. So do your research and make a plan that will prepare you for success. Careful planning means setting small goals and taking things one step at a time.

Here are five tips from the American Psychological Association (APA) that will assist you in making lasting, positive lifestyle and behavior changes:

1. **Make a plan that will stick.** Your plan is a map that will guide you on this journey of change. You can even think of it as an adventure. When making your plan, be specific. Want to exercise more? Detail the time of day when you can take walks and how long you will walk. Write everything down, and ask yourself if you are confident that these activities and goals are realistic for you. If not, start with smaller steps. Post your plan where you will most often see it as a reminder.
2. **Start small.** After you've identified realistic short-term and long-term goals, break down your goals into small, manageable steps that are specifically defined and can be measured. Is your long-term goal to lose 20 pounds within the next five months? A good weekly goal would be to lose one pound a week. If you would like to eat healthier, consider as a goal for the week replacing dessert with a healthier option, like fruit or yogurt. At the end of the week, you will feel successful knowing you met your goal.
3. **Change one behavior at a time.** Unhealthy behaviors develop over the course of time, so replacing unhealthy behaviors with healthy ones requires time. Many people run into problems when they try to change too much too fast. To improve your success, focus on one goal or change at a time. As new healthy behaviors become a habit, try to add another goal that works toward the overall change you are striving for.

4. **Involve a buddy.** Whether it be a friend, co-worker, or family member, someone else on your journey will keep you motivated and accountable. Perhaps it can be someone who will go to the gym with you or someone who is also trying to stop smoking. Talk about what you are doing. Consider joining a support group. Having someone with whom to share your struggles and successes makes the work easier and the mission less intimidating.
5. **Ask for support.** Accepting help from those who care about you and will listen strengthens your resilience and commitment. If you feel overwhelmed or unable to meet your goals on your own, consider seeking help from a psychologist. Psychologists are uniquely trained to understand the connection between the mind and body, as well as the factors that promote behavior change. Asking for help does not mean a lifetime of therapy; even just a few sessions can help you examine and set attainable goals or address the emotional issues that may be getting in your way.

Start with "Why?"

Making changes in habitual behavior requires a deep and abiding belief that change is needed. Your desire to change may be motivated by personal goals, or it may be the result of the impact your improved wellness will have on those you love. Nietzsche said, "He who has a strong enough why can bear almost any how."

Once you have a compelling reason to change, develop a plan and commit to that plan. If you experience a moment of weakness, do not waste time on self-condemnation. Revisit your compelling reason and reaffirm your commitment to change. The health, peace, and sense of well-being inherent in the highest level of your own personal wellness is more than worth the effort required to change.

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10.6: The Pursuit of Happiness

5.6: The Pursuit of Happiness

America's founders declared that its citizens have an unalienable right to pursue happiness. But what is happiness? When asked to define the term, people emphasize different aspects of this elusive state. Indeed, happiness is somewhat ambiguous and can be defined from different perspectives (Martin, 2012). Some people, especially those who are highly committed to their religious faith, view happiness in ways that emphasize virtuosity, reverence, and enlightened spirituality. Others see happiness as primarily contentment—the inner peace and joy that come from deep satisfaction with one's surroundings, relationships with others, accomplishments, and oneself. Still others view happiness mainly as pleasurable engagement with their personal environment—having a career and hobbies that are engaging, meaningful, rewarding, and exciting. These differences, of course, are merely differences in emphasis. Most people would probably agree that each of these views, in some respects, captures the essence of happiness.

Elements of Happiness

Some psychologists have suggested that happiness consists of three distinct elements: the pleasant life, the good life, and the meaningful life, as shown in Figure 14.25 (Seligman, 2002; Seligman, Steen, Park, & Peterson, 2005). The pleasant life is realized through the attainment of day-to-day pleasures that add fun, joy, and excitement to our lives. For example, evening walks along the beach and a fulfilling sex life can enhance our daily pleasure and contribute to the pleasant life. The good life is achieved through identifying our unique skills and abilities and engaging these talents to enrich our lives; those who achieve the good life often find themselves absorbed in their work or their recreational pursuits. The meaningful life involves a deep sense of fulfillment that comes from using our talents in the service of the greater good: in ways that benefit the lives of others or that make the world a better place. In general, the happiest people tend to be those who pursue the full life—they orient their pursuits toward all three elements (Seligman et al., 2005).

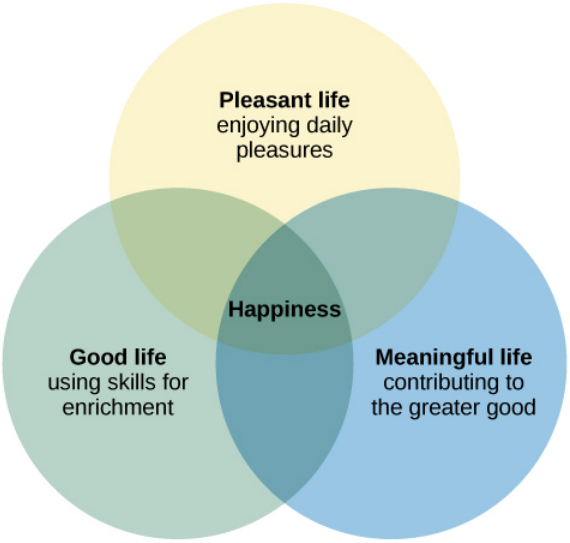


Figure 14.25 Happiness is an enduring state of well-being involving satisfaction in the pleasant, good, and meaningful aspects of life.

For practical purposes, a precise definition of happiness might incorporate each of these elements: an enduring state of mind consisting of joy, contentment, and other positive emotions, plus the sense that one's life has meaning and value (Lyubomirsky, 2001). The definition implies that happiness is a long-term state—what is often characterized as subjective well-being—rather than merely a transient positive mood we all experience from time to time. It is this enduring happiness that has captured the interests of psychologists and other social scientists.

The study of happiness has grown dramatically in the last three decades (Diener, 2013). One of the most basic questions that happiness investigators routinely examine is this: How happy are people in general? The average person in the world tends to be relatively happy and tends to indicate experiencing more positive feelings than negative feelings (Diener, Ng, Harter, & Arora, 2010). When asked to evaluate their current lives on a scale ranging from 0 to 10 (with 0 representing "worst possible life" and 10

representing “best possible life”), people in more than 150 countries surveyed from 2010–2012 reported an average score of 5.2. People who live in North America, Australia, and New Zealand reported the highest average score at 7.1, whereas those living Sub-Saharan Africa reported the lowest average score at 4.6 (Helliwell, Layard, & Sachs, 2013). Worldwide, the five happiest countries are Denmark, Norway, Switzerland, the Netherlands, and Sweden; the United States is ranked 17th happiest (Figure 14.26) (Helliwell et al., 2013).



(a) (b)

Figure 14.26 (a) Surveys of residents in over 150 countries indicate that Denmark has the happiest citizens in the world. (b) Americans ranked the United States as the 17th happiest country in which to live. (credit a: modification of work by "JamesZ_Flickr"/Flickr; credit b: modification of work by Ryan Swindell)

Several years ago, a Gallup survey of more than 1,000 U.S. adults found that 52% reported that they were “very happy.” In addition, more than 8 in 10 indicated that they were “very satisfied” with their lives (Carroll, 2007). However, a recent poll found that only 42% of American adults report being "very happy." The groups that show the greatest declines in happiness are people of color, those who have not completed a college education, and those who politically identify as Democrats or independents (McCarthy, 2020). These results suggest that challenging economic conditions may be related to declines in happiness. Of course, this interpretation implies that happiness is closely tied to one's finances. But, is it? What factors influence happiness?

Factors Connected to Happiness

What really makes people happy? What factors contribute to sustained joy and contentment? Is it money, attractiveness, material possessions, a rewarding occupation, a satisfying relationship? Extensive research over the years has examined this question. One finding is that age is related to happiness: Life satisfaction usually increases the older people get, but there do not appear to be gender differences in happiness (Diener, Suh, Lucas, & Smith, 1999). Although it is important to point out that much of this work has been correlational, many of the key findings (some of which may surprise you) are summarized below.

Family and other social relationships appear to be key factors correlated with happiness. Studies show that married people report being happier than those who are single, divorced, or widowed (Diener et al., 1999). Happy individuals also report that their marriages are fulfilling (Lyubomirsky, King, & Diener, 2005). In fact, some have suggested that satisfaction with marriage and family life is the strongest predictor of happiness (Myers, 2000). Happy people tend to have more friends, more high-quality social relationships, and stronger social support networks than less happy people (Lyubomirsky et al., 2005). Happy people also have a high frequency of contact with friends (Pinquart & Sörensen, 2000).

Can money buy happiness? In general, extensive research suggests that the answer is yes, but with several caveats. While a nation’s per capita gross domestic product (GDP) is associated with happiness levels (Helliwell et al., 2013), changes in GDP (which is a less certain index of household income) bear little relationship to changes in happiness (Diener, Tay, & Oishi, 2013). On the whole, residents of affluent countries tend to be happier than residents of poor countries; within countries, wealthy individuals are happier than poor individuals, but the association is much weaker (Diener & Biswas-Diener, 2002). To the extent that it leads to increases in purchasing power, increases in income are associated with increases in happiness (Diener, Oishi, & Ryan, 2013). However, income within societies appears to correlate with happiness only up to a point. In a study of over 450,000 U.S. residents surveyed by the Gallup Organization, Kahneman and Deaton (2010) found that well-being rises with annual income, but only up to $75,000. The average increase in reported well-being for people with incomes greater than $75,000 was null. As implausible as these findings might seem—after all, higher incomes would enable people to indulge in Hawaiian vacations, prime seats as sporting events, expensive automobiles, and expansive new homes—higher incomes may impair people’s ability to savor and enjoy the small pleasures of life (Kahneman, 2011). Indeed, researchers in one study found that participants exposed to a subliminal reminder of wealth spent less time savoring a chocolate candy bar and exhibited less enjoyment of this experience than did participants who were not reminded of wealth (Quoidbach, Dunn, Petrides, & Mikolajczak, 2010).

What about education and employment? Happy people, compared to those who are less happy, are more likely to graduate from college and secure more meaningful and engaging jobs. Once they obtain a job, they are also more likely to succeed (Lyubomirsky et al., 2005). While education shows a positive (but weak) correlation with happiness, intelligence is not appreciably related to happiness (Diener et al., 1999).

Does religiosity correlate with happiness? In general, the answer is yes (Hackney & Sanders, 2003). However, the relationship between religiosity and happiness depends on societal circumstances. Nations and states with more difficult living conditions (e.g., widespread hunger and low life expectancy) tend to be more highly religious than societies with more favorable living conditions. Among those who live in nations with difficult living conditions, religiosity is associated with greater well-being; in nations with more favorable living conditions, religious and nonreligious individuals report similar levels of well-being (Diener, Tay, & Myers, 2011).

Clearly the living conditions of one's nation can influence factors related to happiness. What about the influence of one's culture? To the extent that people possess characteristics that are highly valued by their culture, they tend to be happier (Diener, 2012). For example, self-esteem is a stronger predictor of life satisfaction in individualistic cultures than in collectivistic cultures (Diener, Diener, & Diener, 1995), and extraverted people tend to be happier in extraverted cultures than in introverted cultures (Fulmer et al., 2010).

So we've identified many factors that exhibit some correlation to happiness. What factors don't show a correlation? Researchers have studied both parenthood and physical attractiveness as potential contributors to happiness, but no link has been identified. Although people tend to believe that parenthood is central to a meaningful and fulfilling life, aggregate findings from a range of countries indicate that people who do not have children are generally happier than those who do (Hansen, 2012). And although one's perceived level of attractiveness seems to predict happiness, a person's objective physical attractiveness is only weakly correlated with their happiness (Diener, Wolsic, & Fujita, 1995).

Life Events and Happiness

An important point should be considered regarding happiness. People are often poor at affective forecasting: predicting the intensity and duration of their future emotions (Wilson & Gilbert, 2003). In one study, nearly all newlywed spouses predicted their marital satisfaction would remain stable or improve over the following four years; despite this high level of initial optimism, their marital satisfaction actually declined during this period (Lavner, Karner, & Bradbury, 2013). In addition, we are often incorrect when estimating how our long-term happiness would change for the better or worse in response to certain life events. For example, it is easy for many of us to imagine how euphoric we would feel if we won the lottery, were asked on a date by an attractive celebrity, or were offered our dream job. It is also easy to understand how long-suffering fans of the Chicago Cubs baseball team, which had not won a World Series championship since 1908, thought they would feel permanently elated when their team finally won another World Series in 2016. Likewise, it is easy to predict that we would feel permanently miserable if we suffered a disabling accident or if a romantic relationship ended.

However, something similar to sensory adaptation often occurs when people experience emotional reactions to life events. In much the same way our senses adapt to changes in stimulation (e.g., our eyes adapting to bright light after walking out of the darkness of a movie theater into the bright afternoon sun), we eventually adapt to changing emotional circumstances in our lives (Brickman & Campbell, 1971; Helson, 1964). When an event that provokes positive or negative emotions occurs, at first we tend to experience its emotional impact at full intensity. We feel a burst of pleasure following such things as a marriage proposal, birth of a child, acceptance to law school, an inheritance, and the like; as you might imagine, lottery winners experience a surge of happiness after hitting the jackpot (Lutter, 2007). Likewise, we experience a surge of misery following widowhood, a divorce, or a layoff from work. In the long run, however, we eventually adjust to the emotional new normal; the emotional impact of the event tends to erode, and we eventually revert to our original baseline happiness levels. Thus, what was at first a thrilling lottery windfall or World Series championship eventually loses its luster and becomes the status quo (Figure 14.27Links to an external site.). Indeed, dramatic life events have much less long-lasting impact on happiness than might be expected (Brickman, Coats, & Janoff-Bulman, 1978).



(a) (b)

Figure 14.27 (a) Long-suffering Chicago Cub fans felt elated in 2016 when their team won a World Series championship, a feat that had not been accomplished by that franchise in over a century. (b) In ways that are similar, those who play the lottery rightfully think that choosing the correct numbers and winning millions would lead to a surge in happiness. However, the initial burst of elation following such elusive events would most likely erode with time. (credit a: modification of work by Phil Roeder; credit b: modification of work by Robert S. Donovan)

Recently, some have raised questions concerning the extent to which important life events can permanently alter people's happiness set points (Diener, Lucas, & Scollon, 2006). Evidence from a number of investigations suggests that, in some circumstances, happiness levels do not revert to their original positions. For example, although people generally tend to adapt to marriage so that it no longer makes them happier or unhappier than before, they often do not fully adapt to unemployment or severe disabilities (Diener, 2012). Figure 14.28, which is based on longitudinal data from a sample of over 3,000 German respondents, shows life satisfaction scores several years before, during, and after various life events, and it illustrates how people adapt (or fail to adapt) to these events. German respondents did not get lasting emotional boosts from marriage; instead, they reported brief increases in happiness, followed by quick adaptation. In contrast, widows and those who had been laid off experienced sizeable decreases in happiness that appeared to result in long-term changes in life satisfaction (Diener et al., 2006). Further, longitudinal data from the same sample showed that happiness levels changed significantly over time for nearly a quarter of respondents, with 9% showing major changes (Fujita & Diener, 2005). Thus, long-term happiness levels can and do change for some people.

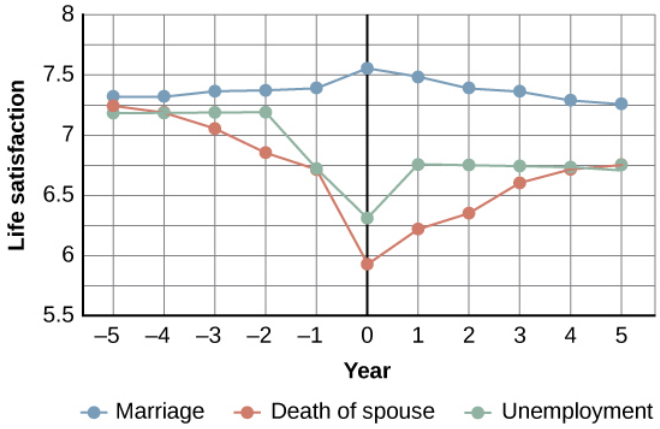


Figure 14.28 This graphs shows life satisfaction scores several years before and after three significant life events (0 represents the year the event happened) (Diener et al., 2006).

Increasing Happiness

Some recent findings about happiness provide an optimistic picture, suggesting that real changes in happiness are possible. For example, thoughtfully developed well-being interventions designed to augment people's baseline levels of happiness may increase happiness in ways that are permanent and long-lasting, not just temporary. These changes in happiness may be targeted at individual, organizational, and societal levels (Diener et al., 2006). Researchers in one study found that a series of happiness interventions involving such exercises as writing down three good things that occurred each day led to increases in happiness that lasted over six months (Seligman et al., 2005).

Measuring happiness and well-being at the societal level over time may assist policy makers in determining if people are generally happy or miserable, as well as when and why they might feel the way they do. Studies show that average national happiness scores (over time and across countries) relate strongly to six key variables: per capita gross domestic product (GDP, which reflects a

nation's economic standard of living), social support, freedom to make important life choices, healthy life expectancy, freedom from perceived corruption in government and business, and generosity (Helliwell et al., 2013). Investigating why people are happy or unhappy might help policymakers develop programs that increase happiness and well-being within a society (Diener et al., 2006). Resolutions about contemporary political and social issues that are frequent topics of debate—such as poverty, taxation, affordable health care and housing, clean air and water, and income inequality—might be best considered with people's happiness in mind.

Positive Psychology

In 1998, Seligman (the same person who conducted the learned helplessness experiments mentioned earlier), who was then president of the American Psychological Association, urged psychologists to focus more on understanding how to build human strength and psychological well-being. In deliberately setting out to create a new direction and new orientation for psychology, Seligman helped establish a growing movement and field of research called positive psychology (Compton, 2005). In a very general sense, positive psychology can be thought of as the science of happiness; it is an area of study that seeks to identify and promote those qualities that lead to greater fulfillment in our lives. This field looks at people's strengths and what helps individuals to lead happy, contented lives, and it moves away from focusing on people's pathology, faults, and problems. According to Seligman and Csikszentmihalyi (2000), positive psychology,

> *at the subjective level is about valued subjective experiences: well-being, contentment, and satisfaction (in the past); hope and optimism (for the future); and… happiness (in the present). At the individual level, it is about positive individual traits: the capacity for love and vocation, courage, interpersonal skill, aesthetic sensibility, perseverance, forgiveness, originality, future mindedness, spirituality, high talent, and wisdom. (p. 5)*

Some of the topics studied by positive psychologists include altruism and empathy, creativity, forgiveness and compassion, the importance of positive emotions, enhancement of immune system functioning, savoring the fleeting moments of life, and strengthening virtues as a way to increase authentic happiness (Compton, 2005). Recent efforts in the field of positive psychology have focused on extending its principles toward peace and well-being at the level of the global community. In a war-torn world in which conflict, hatred, and distrust are common, such an extended "positive peace psychology" could have important implications for understanding how to overcome oppression and work toward global peace (Cohrs, Christie, White, & Das, 2013).

DIG DEEPER

The Center for Investigating Healthy Minds

On the campus of the University of Wisconsin–Madison, the Center for Investigating Healthy Minds at the Waisman Center conducts rigorous scientific research on healthy aspects of the mind, such as kindness, forgiveness, compassion, and mindfulness. Established in 2008 and led by renowned neuroscientist Dr. Richard J. Davidson, the Center examines a wide range of ideas, including such things as a kindness curriculum in schools, neural correlates of prosocial behavior, psychological effects of Tai Chi training, digital games to foster prosocial behavior in children, and the effectiveness of yoga and breathing exercises in reducing symptoms of post-traumatic stress disorder.

According to its website, the Center was founded after Dr. Davidson was challenged by His Holiness, the 14th Dalai Lama, "to apply the rigors of science to study positive qualities of mind" (Center for Investigating Health Minds, 2013). The Center continues to conduct scientific research with the aim of developing mental health training approaches that help people to live happier, healthier lives.

Positive Affect and Optimism

Taking a cue from positive psychology, extensive research over the last 10-15 years has examined the importance of positive psychological attributes in physical well-being. Qualities that help promote psychological well-being (e.g., having meaning and purpose in life, a sense of autonomy, positive emotions, and satisfaction with life) are linked with a range of favorable health outcomes (especially improved cardiovascular health) mainly through their relationships with biological functions and health behaviors (such as diet, physical activity, and sleep quality) (Boehm & Kubzansky, 2012). The quality that has received attention is positive affect, which refers to pleasurable engagement with the environment, such as happiness, joy, enthusiasm, alertness, and excitement (Watson, Clark, & Tellegen, 1988). The characteristics of positive affect, as with negative affect (discussed earlier), can be brief, long-lasting, or trait-like (Pressman & Cohen, 2005). Independent of age, gender, and income, positive affect is associated

with greater social connectedness, emotional and practical support, adaptive coping efforts, and lower depression; it is also associated with longevity and favorable physiological functioning (Steptoe, O'Donnell, Marmot, & Wardle, 2008).

Positive affect also serves as a protective factor against heart disease. In a 10-year study of Nova Scotians, the rate of heart disease was 22% lower for each one-point increase on the measure of positive affect, from 1 (no positive affect expressed) to 5 (extreme positive affect) (Davidson, Mostofsky, & Whang, 2010). In terms of our health, the expression, "don't worry, be happy" is helpful advice indeed. There has also been much work suggesting that optimism—the general tendency to look on the bright side of things—is also a significant predictor of positive health outcomes.

Although positive affect and optimism are related in some ways, they are not the same (Pressman & Cohen, 2005). Whereas positive affect is mostly concerned with positive feeling states, optimism has been regarded as a generalized tendency to expect that good things will happen (Chang, 2001). It has also been conceptualized as a tendency to view life's stressors and difficulties as temporary and external to oneself (Peterson & Steen, 2002). Numerous studies over the years have consistently shown that optimism is linked to longevity, healthier behaviors, fewer postsurgical complications, better immune functioning among men with prostate cancer, and better treatment adherence (Rasmussen & Wallio, 2008). Further, optimistic people report fewer physical symptoms, less pain, better physical functioning, and are less likely to be rehospitalized following heart surgery (Rasmussen, Scheier, & Greenhouse, 2009).

Flow

Another factor that seems to be important in fostering a deep sense of well-being is the ability to derive flow from the things we do in life. Flow is described as a particular experience that is so engaging and engrossing that it becomes worth doing for its own sake (Csikszentmihalyi, 1997). It is usually related to creative endeavors and leisure activities, but it can also be experienced by workers who like their jobs or students who love studying (Csikszentmihalyi, 1999). Many of us instantly recognize the notion of flow. In fact, the term derived from respondents' spontaneous use of the term when asked to describe how it felt when what they were doing was going well. When people experience flow, they become involved in an activity to the point where they feel they lose themselves in the activity. They effortlessly maintain their concentration and focus, they feel as though they have complete control of their actions, and time seems to pass more quickly than usual (Csikszentmihalyi, 1997). Flow is considered a pleasurable experience, and it typically occurs when people are engaged in challenging activities that require skills and knowledge they know they possess. For example, people would be more likely report flow experiences in relation to their work or hobbies than in relation to eating. When asked the question, "Do you ever get involved in something so deeply that nothing else seems to matter, and you lose track of time?" about 20% of Americans and Europeans report having these flow-like experiences regularly (Csikszentmihalyi, 1997).

Although wealth and material possessions are nice to have, the notion of flow suggests that neither are prerequisites for a happy and fulfilling life. Finding an activity that you are truly enthusiastic about, something so absorbing that doing it is reward itself (whether it be playing tennis, studying Arabic, writing children's novels, or cooking lavish meals) is perhaps the real key. According to Csikszentmihalyi (1999), creating conditions that make flow experiences possible should be a top social and political priority. How might this goal be achieved? How might flow be promoted in school systems? In the workplace? What potential benefits might be accrued from such efforts?

In an ideal world, scientific research endeavors should inform us on how to bring about a better world for all people. The field of positive psychology promises to be instrumental in helping us understand what truly builds hope, optimism, happiness, healthy relationships, flow, and genuine personal fulfillment.

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10.7: Health Problems in the United States

Americans today experience health problems that people who lived 100 years ago did not encounter. What are the factors that account for these health problems that have arisen over the past 100 years? Most health problems faced by people in the U.S. are chronic diseases that are preventable and caused by everyday choices and unhealthy lifestyles.

The link below provides more information about the leading causes of death in the United States:

Leading Causes of Death

To see a 2014 chart that shows the leading cause of death by age group, click on the link below:

Leading Cause of Death by Age Group

In the video below, you will learn about the determinants of health as outlined by Healthy People 2020. Healthy People 2020 is a federal advisory committee comprised of non-federal, independent subject matter experts who gather data and provide advice on how to promote health and prevent disease in America:



In the meantime, the Healthy People 2020 program has updated, and been renamed Healthy People 2030 website, which contains data and technical information about the program's objectives. The video below is the announcement for the update



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10.7.1: The Mind-Body Connection

Amy Baldwin

Questions to Consider:

- Are there ways I can control how I react in stressful situations?
- Is it possible to "feel" stressed in your body?

Controlling Emotional Reactions

As you begin to understand how feelings impact your mood, and how your mood can feel in your body, you can start to align your emotions with the physical reactions that your body experiences. Doing this will help you in knowing when you need to use coping skills to help you through stronger emotions. (Coping skills are discussed in the section on mental health.)

Below is a conversation between a student and her professor.

> *Paige shows up to class a few minutes late, interrupting her professor when she enters the room. Professor Marsh is returning the most recent essay assignments. When Paige sees her grade she jumps up and explodes, "What is this garbage?!"*
>
> *Surprised, Professor Marsh turns towards her. "I beg your pardon?"*
>
> *"This grade," Paige says, walking towards her teacher. "What is this?" Paige leans against the desk. Palms of her hands sweating. Face flushed.*
>
> *Standing this close, Professor Marsh can see the slight tremble in Paige's lip. "If you have a question about your paper, we can talk about it after class."*
>
> *"I wanna know now. What is this total piece of garbage?" Paige waves her paper in the air.*
>
> *"You're excused," the professor says, calmly and with no equivocation.*
>
> *This gets Paige's attention and that of the other students in the room. "What?"*
>
> *"You're excused," Professor Marsh juts her head towards the door. "Your behavior is completely inappropriate, so you need to leave."*
>
> *"I don't want to leave."*
>
> *"Fine. Then sit down and remain calm and respectful." And she does.*
>
> *When class ends, Paige comes up to Professor Marsh, wrinkled paper in hand, and sets it down. "I don't understand why I got this grade."*
>
> *"Well, let's go over my notes and see." Professor Marsh starts to read Paige's work, explaining her feedback.*
>
> *Shaking her head, Paige pushes off from the edge of the desk, smacks it with her fist, and says, "That's B.S.!. This is totally personal and this class sucks!"*
>
> *As the professor stands and gathers her things, Paige folds her arms across her chest. "Where are you going?"*

> *"I'm leaving. If you aren't interested in talking about your work, I'm not interested in staying." And so Professor Marsh leaves – concerned about Paige's attitude, lack of boundaries, and well-being.*

Have you experienced a situation when you've been so frustrated you wanted to scream? Would you have responded differently? Do you feel Paige was in control of her emotions? In this example, Paige's reaction was driven by her emotions. Physically she experienced sweaty palms, a flushed face, and a trembling lip. Psychologically she was angry and hostile. Behaviorally, she was waving her paper in the air and yelling at the professor.

Table 36.1

Examples of Types of Reactions			
Type of Reaction	**Physical**	**Psychological**	**Behavioral**
	sweating, shaking	feeling sad, hurt, angry	crying, punching, yelling

Paige's reaction illustrates the various reactions you may experience with emotions including the physical, psychological, and behavioral reactions. When experiencing these reactions it is best to take a step back and not allow your emotions to take over. This situation could have been avoided if Paige took a moment to pause and collect her thoughts. Reacting quickly often results in over-reacting; so, to prevent negative consequences, a better approach is to take a breath and walk away. The same idea applies when you are not in person: Taking substantial time before sending an email or text, reacting to a social media post, or responding to a comment in a discussion forum can make a difference between a careful, constructive outcome and one that leads to even deeper problems.

As you continue this journey of managing your emotions, you will find that you experience more situations in which you feel in control of your emotions and less often experience emotion-driven behaviors and lack of control.

Physical Responses and Well-Being

When you have felt really frustrated with a personal relationship or an upcoming test, have you ever experienced a headache, stomachache or perhaps felt extremely tired? This is your brain and body working together to let you know that they are stressed. The connection between our mind and body is powerful, and both feed off of each other to influence how we feel and function every day. The amount of sleep we get, the types of food we eat, what we do for exercise or what we don't do, all interrelate and lead to how we can manage our emotions or not.

Developing coping skills will help you manage how you are feeling and calm your body and mind with the goal of decreasing your stress level. Taking a pause versus reacting immediately, such as going on a walk, connecting with a friend, or simply focusing on your breath during times of stress has the potential to slow down your heart rate and calm your mind.

Although coping strategies help in these stressful situations, what you do every day to prepare your body to manage these times matters just as much. You need to focus on taking care of your body and mind daily. Again, the mind-body connection is so strong that what you eat, how much activity you do, and the amount of time you sleep directly influences your ability to manage your day-to-day stressors.

Below are some simple suggestions to ensure you are making your mind and body your top priority. A more comprehensive understanding of each of these behaviors is discussed later in the chapter.

- A healthy diet will help you to be your best self and keep your mind and body functioning properly. Balance is critical: Try to have a serving of a protein source, a carbohydrate source, and a serving of a fruit and vegetable at each meal. Typically, you will find that your body and mind need fuel every 3-4 hours during the day. Knowing this, you can plan accordingly your meals and snacks. Lastly, don't forget to hydrate.
- Being active for at least 60 minutes every day can be a goal for you if you find yourself spending most of your day sitting—in class, while studying, or as you complete assignments. Being physically active will help your body feel awake and make you

stronger to handle stressful situations. Even simple activities such as taking a walk, finding a yoga class or online video, or even a pick-up game of basketball can maintain good physical health.

- As important as being active is, it is equally critical to spend time sleeping. Note, that being inactive (watching TV, playing video games) is not the same to our bodies as restorative sleep. Maintaining a regular sleep routine and schedule is critical to your mind and body.

APPLICATION

Choose one health goal from each of the three areas described above and write down how you will ensure that you meet each goal by listing your tactics, or what you will do regularly to meet the goal.

	Goal	Tactics
Example: Being active	To walk at least 2 miles each day	• 1) Block off 30 minutes after the last class of the day to walk the nature trail on campus • 2) Use my watch to track my steps each day to ensure I have walked at least 2 miles
Eating healthfully		
Being active		
Sleeping fully		

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10.7.2: Why Study Wellness?

As most college students do, you have probably set goals. Obviously, your individual goals differ from those of your fellow classmates, but everyone's goals share one common attribute: their intention to improve individual wellbeing. However, there are as many ideas about how to do that as there are individuals. Do your goals involve making more money, achieving better health, improving your relationships? Holistic wellness involves all those aspects of life and more. This chapter explains the importance of overall wellness, which is about more than being physically and mentally healthy, free from illness and disease. In fact, the study of wellness incorporates all aspects of life. Achieving overall wellness means living actively and fully. People in this state exude confidence, optimism, and self-efficacy; they have the energy reserves to do what needs to be done today and to plan for a better tomorrow. The most effective and transformative goals are those designed to achieve the highest level of personal wellness.

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10.8: Habits, Lifestyles, and Health

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CHAPTER OVERVIEW

10.8.1: Healthy Behaviors and Wellness

By Jonathan Howard

Learning Objectives

- Define the nine dimensions of wellness
- Identify health problems in the United States
- Identify the behaviors that promote wellness
- Behavior Modification: how change occurs, barriers to change, and how to successfully
- overcome barriers and make lasting lifestyle changes

10.8.1.1: Dimensions of Wellness
10.8.1.2: Behaviors That Promote Wellness
10.8.1.3: Behavior Modification
10.8.1.4: Lifestyle Modification Barriers
10.8.1.4.1: Behaviors That Promote Wellness
10.8.1.5: Assessing Your Personal Lifestyle Behaviors
10.8.1.6: Sleep

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10.8.1.1: Dimensions of Wellness

Wellness is a familiar term, but what is its true definition? Is it simply the absence of disease? This chapter will define all the components of holistic wellness and describe the factors that contribute to not only a person's physical and mental health, but also their ability to develop, thrive, succeed, enjoy life, and meet challenges head on with confidence and resolve.

To achieve this type of overall wellness, a person must be healthy in nine interconnected dimensions of wellness: physical, emotional, intellectual, spiritual, social, environmental, occupational, financial, and cultural. A description of each dimension follows.

The Nine Dimensions of Wellness

- *Occupational Wellness*
  An occupationally well person enjoys the pursuit of a career which is fulfilling on a variety of levels. This person finds satisfaction and enrichment in work, while always in pursuit of opportunities to reach the next level of professional success.
- *Financial Wellness*
  Those who are financially well are fully aware of their current financial state. They set long- and short-term goals regarding finances that will allow them to reach their personal
- *Physical Wellness*
  People who are physically well actively make healthy decisions on a daily basis. They eat a nutritionally balanced diet; they try to get an adequate amount of sleep, and they visit the doctor routinely. They make a habit of exercising three to five times per week; they have the ability to identify their personal needs and are aware of their body's limitations. They maintain positive interpersonal relationships and make healthy sexual decisions that are consistent with their personal values and beliefs.
- *Emotional Wellness*
  An emotionally well person successfully expresses and manages an entire range of feelings, including anger, doubt, hope, joy, desire, fear, and many others. People who are emotionally well maintain a high level of self-esteem. They have a positive body-image and the ability to regulate their feelings. They know where to seek support and help regarding their mental health, including but not limited to, seeking professional counseling services.
- *Intellectual Wellness*
  Those who enjoy intellectual wellness engage in lifelong learning. They seek knowledge and activities that further develop their critical thinking and heighten global awareness. They engage in activities associated with the arts, philosophy, and reasoning.
- *Spiritual Wellness*
  People who can be described as spiritually well have identified a core set of beliefs that guide their decision making, and other faith- based endeavors. While firm in their spiritual beliefs, they understand others may have a distinctly different set of guiding principles. They recognize the relationship between spirituality and identity in all individuals.
- *Social Wellness*
  A socially well person builds healthy relationships based on interdependence, trust, and respect. Those who are socially well have a keen awareness of the feelings of others. They develop a network of friends and co-workers who share a common purpose, and who provide support and validation.
- *Environmental Wellness*
  An environmentally well person appreciates the external cues and stimuli that an environment can provide. People who have achieved environmental wellness recognize the limits to controlling an environment and seek to understand the role an individual plays in the environment.
- *Cultural Wellness*
  Culturally well people are aware of their own cultural background, as well as the diversity and richness present in other cultural backgrounds. Cultural wellness implies understanding, awareness and intrinsic respect for aspects of diversity. A culturally well person acknowledges and accepts the impact of these aspects of diversity on sexual orientation, religion, gender, racial and ethnic backgrounds, age groups, and disabilities.[1]

For more information on the nine dimensions of wellness, click on the link below:

Nine Dimensions of Wellness

A video about the nine dimensions of wellness,



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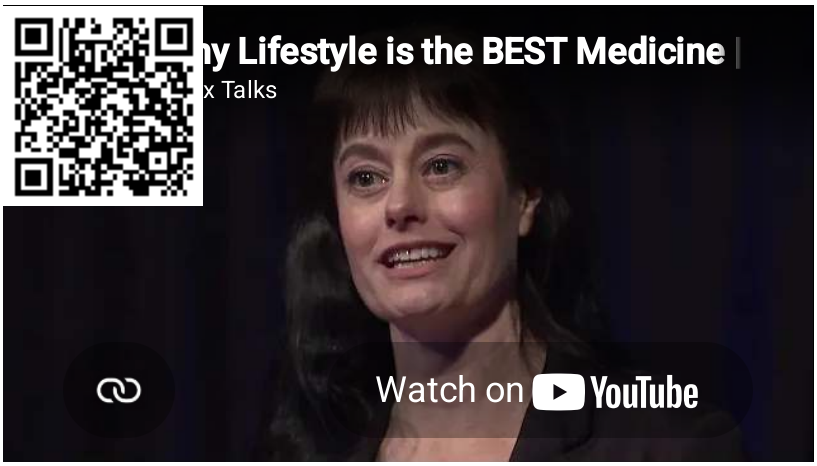
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10.8.1.2: Behaviors That Promote Wellness

Bad habits are hard to break, but choosing to eat healthier and exercise more provides benefits that go far beyond a more ideal body weight and shape. Being physically fit can stave off many of the diseases and medical conditions discussed in the previous section, including heart disease, the number 1 killer in America. Exercise reduces stress and eases depression. Healthier employees are also more productive. Being physically fit nurtures the mind, body, and spirit and is the cornerstone of wellness. The links below provide information about behaviors within your control that contribute to an improved quality of life and increased wellness.

Six Behaviors That Contribute to Wellness

A video on lifestyle choices and their effect on wellbeing



Behaviors that Contribute to Wellness Presentation

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10.8.1.3: Behavior Modification

Making permanent lifestyle changes is one of the greatest challenges a person can face. This section will explore how changes to behavior occur, the psychological barriers that hamper efforts to change, and tips for making lasting change.

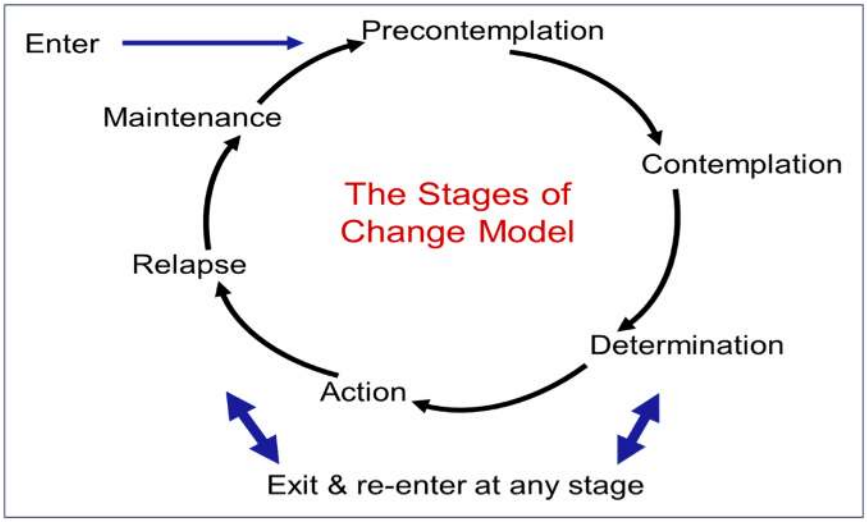
How Changes in Behavior Occur

The Transtheoretical Model, also called the **Stages of Change Model**, was developed by James Prochaska and Carlo DiClemente in the late 1970s. Considered the dominant model for describing how behavior changes occur, it evolved through studies examining the experiences of smokers who quit on their own and comparing them with the experiences of those requiring further treatment. The goal of those studies was to understand why some people were capable of quitting on their own. It was determined that people quit smoking if they were ready to do so. Thus, the Transtheoretical Model (TTM) focuses on the decision-making of the individual and is a model of intentional change. The TTM operates on the assumption that people do not change behaviors quickly and decisively. Rather, change in behavior, especially habitual behavior, occurs continuously through a cyclical process. The TTM is not a theory but a model; different behavioral theories and constructs can be applied to various stages of the model where they may be most effective.

The TTM posits that individuals move through six stages of change: precontemplation, contemplation, preparation, action, maintenance, and termination. Termination was not part of the original model and is less often used in application of stages of change for health- related behaviors. For each stage of change, different intervention strategies are most effective at moving the person to the next stage of change and subsequently through the model to maintenance, the ideal stage of behavior.

Six Stages of Change:

- *Stage 1: Precontemplation*
  In this stage, people do not intend to take action in the foreseeable future (defined as within the next 6 months). People are often unaware that their behavior is problematic or produces negative consequences. People in this stage often underestimate the pros of changing behavior and place too much emphasis on the cons of changing behavior.



- *Stage 2: Contemplation*
  In this stage, people are intending to start the healthy behavior in the foreseeable future (defined as within the next 6 months). People recognize that their behavior may be problematic, and a more thoughtful and practical consideration of the pros and cons of changing the behavior takes place, with equal emphasis placed on both. Even with this recognition, people may still feel ambivalent toward changing their behavior.
- *Stage 3: Preparation (Determination)*
  In this stage, people are ready to take action within the next 30 days. People start to take small steps toward the behavior change, and they believe changing their behavior can lead to a healthier life.

- *Stage 4: Action*
  In this stage, people have recently changed their behavior (defined as within the last 6 months) and intend to keep moving forward with that behavior change. People may exhibit this by modifying their problem behavior or acquiring new healthy behaviors.
- *Stage 5: Maintenance*
  In this stage, people have sustained their behavior change for a while (defined as more than 6 months) and intend to maintain the behavior change going forward. People in this stage work to prevent relapse to earlier stages.
- *Stage 6: Termination*
  In this stage, people have no desire to return to their unhealthy behaviors and are sure they will not relapse. Since this is rarely reached, and people tend to stay in the maintenance stage, this stage is often not considered in health promotion programs.

To progress through the stages of change, people apply cognitive, affective, and evaluative processes. Ten processes of change have been identified, with some processes being more relevant to a specific stage of change than other processes. These processes result in strategies that help people make and maintain change.

Ten Processes of Change:

1. *Consciousness Raising*Increasing awareness about the healthy behavior.
2. *Dramatic Relief*
   Emotional arousal about the health behavior, whether positive or negative arousal.
3. *Self-Reevaluation*
   Self-reappraisal to realize the healthy behavior is part of who they want to be.
4. *Environmental Reevaluation*
   Social reappraisal to realize how their unhealthy behavior affects others.
5. *Social Liberation*
   Environmental opportunities that exist to show society is supportive of the healthy behavior.
6. *Self-Liberation*
   Commitment to change behavior based on the belief that achievement of the healthy behavior is possible.
7. *Helping Relationships*
   Finding supportive relationships that encourage the desired change.
8. *Counter-Conditioning*
   Substituting healthy behaviors and thoughts for unhealthy behaviors and thoughts.
9. *Reinforcement Management*Rewarding the positive behavior and reducing the rewards that come from negative behavior.
10. *Stimulus Control*
    Re-engineering the environment to have reminders and cues that support and encourage the healthy behavior and remove those that encourage the unhealthy behavior.

Limitations of the Transtheoretical Model

Limitations of the model include the following:

- The theory ignores the social context in which change occurs, such as socioeconomic status and income.
- The lines between the stages can be arbitrary with no set criteria of how to determine a person's stage of change. The questionnaires that have been developed to assign a person to a stage of change are not always standardized or validated.
- No clear sense exists for how much time is needed for each stage, or how long a person can remain in a stage.
- The model assumes that individuals make coherent and logical plans in their decision-making process when this is not always true.

The Transtheoretical Model provides suggested strategies for public health interventions to address people at various stages of the decision-making process. Using strategies suggested by TTM can result in interventions that are more effective because they are tailored for a specific group of people. In other words, the interventions involve a message or program component that has been specifically created for a target population's level of knowledge and motivation. The TTM encourages an assessment of an individual's current stage of change and accounts for relapse in people's decision- making process.[2]

For more information about TTM, especially as it relates to exercise, watch the video



One of the most effective tools for changing behavior is goal setting. The links below provide information on how to set goals effectively to achieve greater success in goal attainment.

Goal Setting Info from Oregon State University's Academic Success Center

Two videos that may help





Making S.M.A.R.T. Goals Activity

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10.8.1.4: Lifestyle Modification Barriers

Dr. James M. Olson, a psychology professor at the University of Western Ontario, London, has identified several psychological barriers that commonly prevent people from taking action, even when inaction poses a threat to their health. These barriers occur during 3 stages of behavior modification: admission of the problem, initial attempts to change, and long-term change as outlined below:

- *Barriers to Admission of the problem*
  The first step in lasting change is admitting a problem exists. People often fail to change behavior that poses a risk to their health because they deny a risk exists, trivialize their personal risk, feel invulnerable, make a faulty conceptualization, (i.e., they attribute early warning signs to a benign cause), or experience debilitating emotions when contemplating preventative measures.
- *Barriers to Initial Attempts to Change*
  At this stage, people acknowledge the need to change but struggle to accomplish their goals. This failure is a result of lack of knowledge, low self-efficacy (the belief in one's own ability to succeed at change), and dysfunctional attitudes.
- *Barriers to long-term change*
  Just because a person has experienced success in changing a behavior, that doesn't mean the change is permanent. Barriers to long-term change include cognitive and motivational drift (diminishing enthusiasm for the need to change), lack of perceived improvement, lack of social support, and lapses.

To read more about these barriers to change, including strategies for overcoming these barriers, read Dr. Olson's entire article linked below:

Psychological Barriers to Behavior Change

A presentation on overcoming barriers to change by the National Institute for Health and Clinical Excellence (NHS) is linked below:

Overcoming Barriers to Change

Fostering Wellness in Your Life

You are once again feeling motivated to eat better, exercise more, drink less caffeine or make any number of the positive lifestyle changes you have been telling yourself you want to make. You have tried before— probably declaring another attempt as a New Year's resolution—but without experiencing much success. Making a lifestyle change is challenging, especially when you want to transform many things at once. This time, think of those changes not as a resolution but as an evolution.

Lifestyle changes are a process that take time and require support. Once you are ready to make a change, the difficult part is committing and following through. So do your research and make a plan that will prepare you for success. Careful planning means setting small goals and taking things one step at a time.

Here are five tips from the American Psychological Association (APA) that will assist you in making lasting, positive lifestyle and behavior changes:

- *Make a plan that will stick.*
  Your plan is a map that will guide you on this journey of change. You can even think of it as an adventure. When making your plan, be specific. Want to exercise more? Detail the time of day when you can take walks and how long you will walk. Write everything down, and ask yourself if you are confident that these activities and goals are realistic for you. If not, start with smaller steps. Post your plan where you will most often see it as a reminder.
- *Start small.*
  After you've identified realistic short-term and long-term goals, break down your goals into small, manageable steps that are specifically defined and can be measured. Is your long-term goal to lose 20 pounds within the next five months? A good weekly goal would be to lose one pound a week. If you would like to eat healthier, consider as a goal for the week replacing dessert with a healthier option, like fruit or yogurt. At the end of the week, you will feel successful knowing you met your goal.
- *Change one behavior at a time*. Unhealthy behaviors develop over the course of time, so replacing unhealthy behaviors with healthy ones requires time. Many people run into problems when they try to change too much too fast. To improve your

success, focus on one goal or change at a time. As new healthy behaviors become a habit, try to add another goal that works toward the overall change you are striving for.

- *Involve a buddy.*
  Whether it be a friend, co-worker or family member, someone else on your journey will keep you motivated and accountable. Perhaps it can be someone who will go to the gym with you or someone who is also trying to stop smoking. Talk about what you are doing. Consider joining a support group. Having someone with whom to share your struggles and successes makes the work easier and the mission less intimidating.
- *Ask for support.*
  Accepting help from those who care about you and will listen strengthens your resilience and commitment. If you feel overwhelmed or unable to meet your goals on your own, consider seeking help from a psychologist. Psychologists are uniquely trained to understand the connection between the mind and body, as well as the factors that promote behavior change. Asking for help does not mean a lifetime of therapy; even just a few sessions can help you examine and set attainable goals or address the emotional issues that may be getting in your way.

Start with "Why?"

Making changes in habitual behavior requires a deep and abiding belief that change is needed. Your desire to change may be motivated by personal goals, or it may be the result of the impact your improved wellness will have on those you love. Nietzsche said, "He who has a strong enough *why* can bear almost any *how*."

Once you have a compelling reason to change, develop a plan and commit to that plan. If you experience a moment of weakness, do not waste time on self- condemnation. Revisit your compelling reason and reaffirm your commitment to change. The health, peace, and sense of wellbeing inherent in the highest level of your own personal wellness is more than worth the effort required to change.

For more information about making permanent lifestyle changes, go to the APA website linked below:

LIfestyle Changes That Last

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10.8.1.4.1: Behaviors That Promote Wellness

Bad habits are hard to break, but choosing to eat healthier and exercise more provides benefits that go far beyond a more ideal body weight and shape. Being physically fit can stave off many of the diseases and medical conditions discussed in the previous section, including heart disease, the number 1 killer in America. Exercise reduces stress and eases depression. Healthier employees are also more productive. Being physically fit nurtures the mind, body, and spirit and is the cornerstone of wellness. The links below provide information about behaviors within your control that contribute to an improved quality of life and increased wellness.

Six Behaviors That Contribute to Wellness

Lifestyle Choices and Their Effect on Wellbeing

Behaviors that Contribute to Wellness Presentation

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10.8.1.5: Assessing Your Personal Lifestyle Behaviors

Complete the following lab. Please print, complete, and submit the evaluation linked below to D2L.

Lifestyle Evaluation Lab

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10.8.1.6: Sleep

Learning Objectives

1. Explain why students need adequate sleep to succeed in college.
2. Determine how much sleep you need.
3. Change your habits and routines in ways to ensure you get the sleep you need.

Like good nutrition and exercise, adequate sleep is crucial for wellness and success. Sleep is particularly important for students because there seem to be so many time pressures—to attend class, study, maintain a social life, and perhaps work—that most college students have difficulty getting enough. Yet sleep is critical for concentrating well. First, use the Sleep Self-Assessment to consider your current habits and attitudes.

Sleep Self-Assessment

Check the appropriate boxes.

	Usually	Sometimes	Seldom
1. I usually get enough sleep.			
2. I feel drowsy or unfocused during the day.			
3. I take a nap when I need more sleep.			
4. I have fallen asleep in class or had trouble staying awake.			
5. I have fallen asleep while studying.			
6. I have pulled an “all-nighter” when studying for a test or writing a class paper.			

Write your answers.

7. How many hours of sleep do you usually get on weeknights?

   _____

   _____

8. How many hours of sleep do you usually get on weekends?

   _____

   _____

9. How would you rank the importance of sleep in relation to studying, working, spending time with friends, and other activities?

   _____

   _____

10. How many hours of sleep do you think you ideally need?

    _____

11. Generally, do you believe you are getting as much sleep as you think you need?

The Importance of a Good Night's Sleep

You may not realize the benefits of sleep, or the problems associated with being sleep deprived, because most likely you've had the same sleep habits for a long time. Or maybe you know you're getting less sleep now, but with all the changes in your life, how can you tell if some of your stress or problems studying are related to not enough sleep?

On the positive side, a healthy amount of sleep has the following benefits:

- Improves your mood during the day
- Improves your memory and learning abilities
- Gives you more energy
- Strengthens your immune system
- Promotes wellness of body, mind, and spirit

In contrast, not getting enough sleep over time can lead to a wide range of health issues and student problems. Sleep deprivation can have the following consequences:

- Affects mental health and contributes to stress and feelings of anxiety, depression, and general unhappiness
- Causes sleepiness, difficulty paying attention in class, and ineffective studying
- Weakens the immune system, making it more likely to catch colds and other infections
- Increases the risk of accidents (such as while driving)
- Contributes to weight gain

How Much Sleep Is Enough?

College students are the most sleep-deprived population group in the country. With so much to do, who has time for sleep?

Most people need seven to nine hours of sleep a night, and the average is around eight. Some say they need much less than that, but often their behavior during the day shows they are actually sleep deprived. Some genuinely need only about six hours a night. New research indicates there may be a "sleep gene" that determines how much sleep a person needs. So how much sleep do *you* actually need?

There is no simple answer, in part because the quality of sleep is just as important as the number of hours a person sleeps. Sleeping fitfully for nine hours and waking during the night is usually worse than seven or eight hours of good sleep, so you can't simply count the hours. Do you usually feel rested and alert all day long? Do you rise from bed easily in the morning without struggling with the alarm clock? Do you have no trouble paying attention to your instructors and never feel sleepy in a lecture class? Are you not continually driven to drink more coffee or caffeine-heavy "power drinks" to stay attentive? Are you able to get through work without feeling exhausted? If you answered yes to all of these, you likely are in that 10 percent to 15 percent of college students who consistently get enough sleep.

How to Get More and Better Sleep

You have to allow yourself enough time for a good night's sleep. Using the time management strategies discussed in Chapter 2 "Staying Motivated, Organized, and On Track", schedule at least eight hours for sleeping every night. If you still don't feel alert and energetic during the day, try increasing this to nine hours. Keep a sleep journal, and within a couple weeks you'll know how much sleep you need and will be on the road to making new habits to ensure you get it.

Myths about Sleep

- **Having a drink or two helps me get to sleep better.***False:* Although you may seem to fall asleep more quickly, alcohol makes sleep less restful, and you're more likely to awake in the night.
- **Exercise before bedtime is good for sleeping.***False:* Exercise wakes up your body, and it may be some time before you unwind and relax. Exercise earlier in the day, however, is beneficial for sleep.
- **It helps to fall asleep after watching television or surfing the Web in bed.***False:* Rather than helping you unwind, these activities can engage your mind and make it more difficult to get to sleep.

Tips for Success: Sleep

- Avoid nicotine, which can keep you awake—yet another reason to stop smoking.
- Avoid caffeine for six to eight hours before bed. Caffeine remains in the body for three to five hours on the average, much longer for some people. Remember that many soft drinks contain caffeine.
- Don't eat in the two to three hours before bed. Avoid alcohol before bedtime.
- Don't nap during the day. Napping is the least productive form of rest and often makes you less alert. It may also prevent you from getting a good night's sleep.
- Exercise earlier in the day (at least several hours before bedtime).
- Try to get to bed and wake about the same time every day—your body likes a routine.
- Make sure the environment is conducive to sleep: dark, quiet, comfortable, and cool.
- Use your bed only for sleeping, not for studying, watching television, or other activities. Going to bed will become associated with going to sleep.
- Establish a presleep winding-down routine, such as taking a hot bath, listening to soothing music, or reading (not a textbook). Try one of the relaxation techniques described in Chapter 10 "Taking Control of Your Health", Section 10.5 "Stress".

If you can't fall asleep after ten to fifteen minutes in bed, it's better to get up and do something else rather than lie there fitfully for hours. Do something you find restful (or boring). Read, or listen to a recorded book. Go back to bed when you're sleepy.

If you frequently cannot get to sleep or are often awake for a long time during the night, you may be suffering from insomnia, a medical condition. Resist the temptation to try over-the-counter sleep aids. If you have tried the tips listed here and still cannot sleep, talk with your health-care provider or visit the student health clinic. Many remedies are available for those with a true sleep problem.

Key Takeaways

- Getting enough sleep is very important for wellness and success in college. It's easy to determine if you're getting enough sleep.
- Don't fall for popular myths about sleep. It's worthwhile to get enough sleep, which gives you an improved ability to focus and apply yourself more efficiently in your studies and work.

Checkpoint Exercises

1. List at least three things you should *not* do before going to bed in order to get a good night's sleep.

   _____

2. Identify one or two things you can do as a regular presleep routine to help you relax and wind down.

   _____

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10.8.2: Sexual Health

Learning Objectives

1. Explain the importance of understanding your sexual values and making wise decisions regarding your sexuality.
2. Describe guidelines for sexually active college students to protect themselves against sexually transmitted infections and unwanted pregnancy.
3. List actions some can take to protect against sexual assault.

Sexuality is normal, natural human drive. As an adult, your sexuality is your own business. Like other dimensions of health, however, your sexual health depends on understanding many factors involving sexuality and your own values. Your choices and behavior may have consequences. Learning about sexuality and thinking through your values will help you make responsible decisions. Begin with the Sexual Health Self-Assessment.

Sexual Health Self-Assessment

Check the appropriate boxes.

	Often	Sometimes	Never
1. I think about issues related to sexuality.			
2. I have experienced unwanted sexual advances from another.			
3. If I am sexually active, I protect myself from the risk of sexually transmitted infections.			
4. If I am sexually active, I protect myself from the risk of unwanted pregnancy.			
5. I am proud of the choices I have made regarding sexual activity.			
6. I am concerned about the possibility of sexual assault including date rape.			
7. I have been in situations involving some risk of date rape.			

Write your answers.

8. How comfortable are you with your past and present decisions related to sexual behavior?

_____

_____

9. If you are not presently sexually active, do you feel prepared to make responsible decisions about sexual activity if you become active in the near future?

_____

_____

10. If you are sexually active, how well protected are you against the risks of sexually transmitted infection? If you are not active now, how well do you understand protections needed if you become active?

_____

_____

11. If you are sexually active, how well protected are you against the risk of unwanted pregnancy? If you are not active now, how well do you understand the different types of protection available if you become active?

_____

_____

12. If you suddenly found yourself in a situation with a potential for sexual assault, including date rape, would you know what to do?

_____

_____

Sexual Values and Decisions

It's often difficult to talk about sexuality and sex. Not only is it a very private matter for most people, but the words themselves are often used loosely, resulting in misunderstandings. Surveys have shown, for example, that about three-fourths of college students say they are "sexually active"—but survey questions rarely specify exactly what that phrase means. To some, sexual activity includes passionate kissing and fondling, while to others the phrase means sexual intercourse. Manual and oral sexual stimulation may or may not be included in an individual's own definition of being sexually active.

We should therefore begin by defining these terms. First, sexuality is not the same as sex. Human sexuality is a general term for how people experience and express themselves as sexual beings. Since all people are sexual beings, everyone has a dimension of human sexuality regardless of their behavior. Someone who practices complete abstinence from sexual behavior still has the human dimension of sexuality.

Sexuality involves gender identity, or how we see ourselves in terms of maleness and femaleness, as well as sexual orientation, which refers to the gender qualities of those to whom we are attracted. The phrase sexual activity is usually used to refer to behaviors between two (or more) people involving the genitals—but the term may also refer to solo practices such as masturbation or to partner activities that are sexually stimulating but may not involve the genitals. For the purposes of this chapter, with its focus on personal health, the term sexual activity refers to any behavior that carries a risk of acquiring a sexually transmitted disease. This includes vaginal, oral, and anal intercourse. The term sexual intercourse will be used to refer to vaginal intercourse, which also carries the risk of unwanted pregnancy. We'll avoid the most confusing term, sex, which in strict biological terms refers to reproduction but is used loosely to refer to many different behaviors.

There is a stereotype that sexual activity is very prominent among college students. One survey found that most college students think that *other* students have had an average of three sexual partners in the past year, yet 80 percent of those answering said that they *themselves* had zero or one sexual partner. In other words, college students as a whole are not engaging in sexual activity nearly as much as they think they are. Another study revealed that about 20 percent of eighteen- to twenty-four-year-old college students had never been sexually active and about half had not been during the preceding month.

In sum, some college students are sexually active and some are not. Misperceptions of what others are doing may lead to unrealistic expectations or feelings. What's important, however, is to be aware of your own values and to make responsible decisions that protect your sexual health.

Information and preparation are the focus of this section of the chapter. People who engage in sexual activity in the heat of the moment—often under the influence of alcohol—without having protection and information for making good decisions are at risk for disease, unwanted pregnancy, or abuse.

Alcohol and Sexual Activity

Figure 10.5



Drinking alcohol increases the likelihood of having unprotected sexual activity.

Becca – 21st bday!!!!! – CC BY-ND 2.0.

Almost all college students know the importance of protection against sexually transmitted infections and unwanted pregnancy. So why then do these problems occur so often? Part of the answer is that we don't always do the right thing even when we know it—especially in the heat of the moment, particularly when drinking or using drugs. Some four hundred thousand eighteen- to twenty-four-year-old college students a year engage in unprotected sexual activity after drinking, and one hundred thousand report having been too intoxicated to know if they had consented to the sexual activity.

What's "Safe Sex"?

It has been said that *no* sexual activity is safe because there is always some risk, even if very small, of protections failing. The phrase "safer sex" better describes actions one can take to reduce the risk of sexually transmitted infections and unwanted pregnancy.

Sexually Transmitted Infections (STIs)

About two dozen different diseases can be transmitted through sexual activity. Sexually transmitted infections (STIs) range from infections that can be easily treated with medications to diseases that may have permanent health effects to HIV (human immunodeficiency virus), the cause of AIDS, a fatal disease. Despite decades of public education campaigns and easy access to protection, STIs still affect many millions of people every year. Often a person feels no symptoms at first and does not realize he or she has the infection and thus passes it on unknowingly. Or a person may not use protection because of simple denial: "It can't happen to me."

Table 10.2 "Common Sexually Transmitted Infections" lists facts about common STIs for which college students are at risk. Although there are some differences, in most cases sexual transmission involves an exchange of body fluids between two people: semen, vaginal fluids, or blood (or other body fluids containing blood). Because of this similarity, the same precautions to prevent the transmission of HIV will prevent the transmission of other STIs as well.

Although many of these diseases may not cause dramatic symptoms, always see a health-care provider if you have the slightest suspicion of having acquired an STI. Not only should you receive treatment as soon as possible to prevent the risk of serious health problems, but you are also obligated to help not pass it on to others.

Table 10.2 Common Sexually Transmitted Infections

Infection	U.S. Incidence	Transmission	Symptoms	Risks
HIV (Human Immunodeficiency Virus) Causing AIDS	About 56,000 new HIV infections per year	Contact with infected person's blood, semen, or vaginal secretions during any sexual act (and needle sharing)	Usually no symptoms for years or decades. Later symptoms include swollen glands, weight loss, and susceptibility to infections.	Because medical treatment can only slow but not cure AIDS, the disease is currently eventually fatal.
Chlamydia Bacteria	Over 1 million new cases reported annually, with many more not reported	Vaginal, anal, or oral sex with infected person	Often no symptoms. Symptoms may occur 1–3 weeks after exposure, including burning sensation when urinating and abnormal discharge from vagina or penis.	In women, pelvic inflammatory disease may result, with permanent damage to reproductive tissues, possibly sterility. In men, infection may spread and cause pain, fever, and rarely sterility.
Genital HPV (Human Papilloma Virus) Causing Genital Warts	6.2 million new cases a year (before vaccine)	Genital contact, most often during vaginal and anal sex	Most infected people have no symptoms at all and unknowingly pass on the virus. Warts may appear in weeks or months.	Of the 40 types of HPV, many cause no health problems. Some types cause genital warts; others can lead to cancer. Vaccine is now recommended for girls and young women and protects against cancer-causing HPV.
Genital Herpes Virus	An estimated 45 million Americans have had the infection	Genital-genital or oral-genital contact	Often no symptoms. First outbreak within 2 weeks of contact may cause sores and flu-like symptoms. Outbreaks occur less frequently over time.	Many adults experience recurrent painful genital sores and emotional distress. Genital herpes in a pregnant woman puts the infant at risk during childbirth.
Gonorrhea Bacteria	700,000 new cases each year	Direct contact with the penis, vagina, mouth, or anus; ejaculation does not have to occur	Often no recognized symptoms. Burning sensation when urinating. Abnormal discharge from vagina or penis. Rectal infection symptoms include itching, soreness, or bleeding.	If untreated, it may cause serious, permanent health problems, including pelvic inflammatory disease in women with permanent damage to reproductive tissues and possibly sterility in both men and women.
Trichomoniasis Protozoa	7.4 million new cases each year	Genital contact, most often during vaginal sex	Most men have no symptoms or may have slight burning after urination or mild discharge. Some women have vaginal discharge with strong odor and	Trichomoniasis makes an infected woman more susceptible to HIV infection if exposed to the virus. Trichomoniasis is easily treated with medication.

Infection	U.S. Incidence	Transmission	Symptoms	Risks
			irritation or itching of genital area.	
Syphilis Bacteria	36,000 cases reported a year	Direct contact with a syphilis sore, which occurs mainly on the external genitals, vagina, anus, or in the rectum but can also occur on the lips and in the mouth; during vaginal, anal, or oral sex	Often no recognized symptoms for years. Primary stage symptom (a small painless sore) appears in 10–90 days but heals without treatment. Secondary stage symptoms (skin rashes, fever, headache, muscle aches) may also resolve without treatment. Late-stage symptoms occur after 10–20 years, including severe internal organ damage and nervous system effects.	Because the infected person may feel no symptoms, the risk of transmission is great. Syphilis is easy to treat in the early stages, but treatment in late stages cannot repair damage that has already occurred. Untreated, syphilis is often fatal.

The following are guidelines to protect yourself against STIs if you are sexually active:

- Know that only abstinence is 100 percent safe. Protective devices can fail even when used correctly, although the risk is small. Understand the risks of not always using protection.
- Talk with your partner in advance about your sexual histories and health. Agree that regardless of how sure you both are about not having an STI, you will use protection because you cannot be certain even if you have no symptoms.
- Avoid sexual activity with casual acquaintances whose sexual history you do not know and with whom you have not talked about health issues. Sexual activity is safest with a single partner in a long-term relationship.
- Use a latex condom for all sexual activity. A male condom is about 98 percent effective when used correctly, and a female condom about 95 percent effective when used correctly. With both, incorrect use increases the risk. If you are unsure how to use a condom correctly and safely, do some private online reading. Good information can be found at http://www.emedicinehealth.com/how_to_use_a_condom/article_em.htm. You can watch a video demonstration of how to use condoms correctly at http://www.plannedparenthood.org/teen-talk/watch/how-use-condom-26797.htm.
- If you are sexually active with multiple partners, see your health-care provider twice a year for an STI screening even if you are not experiencing symptoms.

Preventing Unwanted Pregnancy

Heterosexual couples who engage in vaginal intercourse are also at risk for an unwanted pregnancy. There are lots of myths about how a woman can't get pregnant at a certain time in her menstrual cycle or under other conditions, but in fact, there's a risk of pregnancy after vaginal intercourse at any time. All couples should talk about protection before reaching the stage of having intercourse and take appropriate steps.

While a male condom is about 98 percent effective, that 2 percent failure rate could lead to tens of thousands of unintended pregnancies among college students. When not used correctly, condoms are only 85 percent effective. In addition, a couple that has been healthy and monogamous in their relationship for a long time may be less faithful in their use of condoms if the threat of STIs seems diminished. Other methods of birth control should also therefore be considered. With the exception of the male vasectomy, at present most other methods are used by the woman. They include intrauterine devices (IUDs), implants, injected or oral contraceptives (the "pill"), hormone patches, vaginal rings, diaphragms, cervical caps, and sponges. Each has certain advantages and disadvantages.

Birth control methods vary widely in effectiveness as well as potential side effects. This is therefore a very personal decision. In addition, two methods can be used together, such as a condom along with a diaphragm or spermicide, which increases the effectiveness. (Note that a male and female condom should not be used together, however, because of the risk of either or both tearing because of friction between them.) Because this is such an important issue, you should talk it over with your health-care provider, or a professional at your student health center or an agency such as Planned Parenthood.

In cases of unprotected vaginal intercourse, or if a condom tears, emergency contraception is an option for up to five days after intercourse. Sometimes called the "morning after pill" or "plan B," emergency contraception is an oral hormone that prevents pregnancy from occurring. It is *not* an "abortion pill." Planned Parenthood offices around the country can provide more information and confidential contraceptive services including emergency contraception.

Sexual Assault and Date Rape

Sexual assault is a serious problem in America generally and among college students in particular:

- About a third of all dating relationships involve some physical violence.
- One in six women and one in ten men will be sexually assaulted in their lifetimes.
- About a fourth of sexual assault victims are in the typical college age range of eighteen to twenty-four years old.
- As many as one in four women experience unwanted sexual intercourse while attending college.
- In more than three fourths of rape cases, the victim knows the perpetrator.

Sexual assault is any form of sexual contact without voluntary consent. Rape is usually more narrowly legally defined as forced sexual intercourse, a specific type of sexual assault. Both are significant problems among college students. Although men can also be victims of sexual assault and rape, the problem usually involves women, so this section focuses primarily on the issue for women in college. Men must also understand what is involved in sexual assault and help build greater awareness of the problem and how to prevent it.

Sexual assault is so common in our society in part because many people believe in myths about certain kinds of male-female interaction. Common myths include "It's not really rape if the woman was flirting first" and "It's not rape unless the woman is seriously injured." Both statements are not legally correct. Another myth or source of confusion is the idea that "Saying no is just playing hard to get, not really no." Men who really believe these myths may not think that they are committing assault, especially if their judgment is impaired by alcohol. Other perpetrators of sexual assault and rape, however, know exactly what they're doing and in fact may plan to overcome their victim by using alcohol or a date rape drug.

College administrators and educators have worked very hard to promote better awareness of sexual assault and to help students learn how to protect themselves. Yet colleges cannot prevent things that happen at parties and behind closed doors. Students must understand how to protect themselves.

Perpetrators of sexual assault fall into three categories:

1. Strangers
2. Acquaintances
3. Dating partners

Among college students, assault by a stranger is the least common because campus police departments take many measures to help keep students safe on campus. Nonetheless, use common sense to avoid situations where you might be alone in a vulnerable place. Walk with a friend if you must pass through a quiet place after dark. Don't open your door to a stranger. Don't take chances. For more information and ways to reduce your risk of sexual assault, see http://www.rainn.org/get-information/sexual-assault-prevention.

Most sexual assaults are perpetrated by acquaintances or date partners. Typically, an acquaintance assault begins at a party. Typically, both the man and the woman are drinking—although assault can happen to sober victims as well. The interaction may begin innocently, perhaps with dancing or flirting. The perpetrator may misinterpret the victim's behavior as a willingness to share sexual activity, or a perpetrator intent on sexual activity may simply pick out a likely target. Either way, the situation may gradually or suddenly change and lead to sexual assault.

Prevention of acquaintance rape begins with the awareness of its likelihood and then taking deliberate steps to ensure you stay safe at and after the party:

- Go with a friend and don't let someone separate you from your friend. Agree to stick together and help each other if it looks like things are getting out of hand. If your friend has too much to drink, don't leave her or him alone. Plan to leave together and stick to the plan.
- Be especially alert if you become separated from your friend, even if you are only going off alone to look for the bathroom. You may be followed.
- Be cautious if someone is pressuring you to drink heavily.
- Trust your instincts if someone seems to be coming on too aggressively. Get back to your friends.
- Know where you are and have a plan to get home if you have to leave abruptly.

These preventions can work well at a party or in other social situations, but they don't apply to most dating situations when you are alone with another person. About half of sexual assaults on college students are date rape. An assault may occur after the first date, when you feel you know the person better and perhaps are not concerned about the risk. This may actually make you more vulnerable, however. Until you really get to know the person well and have a trusting relationship, follow these guidelines to lower the risk of sexual assault:

- Make it clear that you have limits on sexual activity. Take care that your body language or appearance does not send a message that you might be "easy." If there is any question that your date may not understand your limits, talk about your values and limits.
- If your date initiates unwanted sexual activity of any sort, do not resist passively. The other may misinterpret passive behavior as consent.
- Be careful if your date is drinking heavily or using drugs. Avoid drinking yourself, or drink very moderately.
- Stay in public places where there are other people. Do not invite your date to your home before your relationship is well established.
- Trust your instincts if your date seems to be coming on too strong. End the date if necessary.
- Pay attention for signs of an unhealthy relationship (described in Chapter 10 "Taking Control of Your Health", Section 10.6 "Emotional Health and Happiness").

If you are sexually assaulted, always talk to someone. Call a rape crisis center, your student health center, or the **National Sexual Assault Hotline at 1-800-656-HOPE** for a confidential conversation. Even if you do not report the assault to law enforcement, it's important to talk through your feelings and seek help if needed to prevent an emotional crisis.

Date Rape Drugs

In addition to alcohol, sexual predators use certain commonly available drugs to sedate women for sexual assault. They are odorless and tasteless and may be added to a punch bowl or slipped into your drink when you're not looking. These drugs include the sedatives GHB, sometimes called "liquid ecstasy," and Rohypnol, also called "roofies." Both cause sedation in small doses but can have serious medical effects in larger doses. Date rape drugs are typically used at parties. Use the following tips to protect yourself against date rape drugs:

- Don't put your drink down where someone else may get to it. If your drink is out of your sight for even a moment, don't finish it.
- Never accept an open drink. Don't accept a mixed drink that you did not see mixed from pure ingredients.
- Never drink anything from a punch bowl, even if it's nonalcoholic. You can't know what may have been added into the punch.
- If you experience unexpected physical symptoms that may be the result of something you drank or ate, get to an emergency room and ask to be tested.

Key Takeaways

- Sexual health is an important dimension of wellness and something we should all think about to affirm our values and make responsible decisions.

- Your time in college and your overall health and well-being would be seriously impacted if you were to acquire a sexually transmitted infection or experience an unwanted pregnancy. You owe it to yourself—and anyone with whom you are in a relationship—to have the facts and know how to protect yourself.
- The huge number of sexual assaults that occur every year is one of our society's "dirty little secrets." This problem is as rampant on college campuses as in society in general. You need to know what's involved—and what to do to protect yourself from the pain of becoming a victim.

Checkpoint Exercises

1. For each of the following statements about sexual health, circle T for true or F for false:

T	F	As long as you always use a condom, you don't have to worry about an STI from sexual activity.
T	F	You may have a very serious STI without feeling any symptoms at all.
T	F	Abstinence is the only 100 percent effective method of birth control.
T	F	It's not rape if a man has sexual intercourse with a woman after she says no as long as he does not use force.

- List at least three things a woman can do at a party to ensure she does not become a victim of sexual assault.

  _____

- Describe a first date scenario in which a woman is well protected from the risk of sexual assault. List at least three things she should make sure of.

  _____

  _____

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This book is organized using a functional approach, which means that the material is organized around physiological functions, such as fluid and electrolyte balance, antioxidant function, bone health, energy and metabolism, and blood health, instead of organizing it strictly by nutrient. A primary goal of this text is to provide you with information backed by nutritional science, and with a variety of resources that use scientific evidence to optimize health and prevent disease. In this chapter you will see that there are many conditions and deadly diseases that can be prevented by good nutrition. You will also discover the many other determinants of health and disease, how the powerful tool of scientific investigation is used to design dietary guidelines, and recommendations that will promote health and prevent disease.

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SECTION OVERVIEW

10.8.3.1: Nutrition and You

In this Chapter, we provide an overview of nutrition as an evidence-based science and explore the concepts of health, wellness, and disease. We also provide an introduction to the different types of nutrients, health factors, personal health assessment, and the concept of sustainable food systems.

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10.8.3.1.1: Chapter Introduction

Nutrition is an evidence-based science. Nutritional scientists continuously advance our knowledge of nutrition by building on prior research.



Video **10.8.3.1.1.1**: Nutrition Quiz: Listen to what Americans think 100 Calories looks like.

As we get started on our journey into the world of health and nutrition, our first focus will be to demonstrate that nutritional science is an evolving field of study, continually being updated and supported by research, studies, and trials. Once we establish this, your confidence will be strengthened in nutritional science to help guide your eating habits. Let's begin with the story of hurry, curry, and worry: the story of *Helicobacter (H.) pylori*.

Peptic ulcers are painful sores in the gastrointestinal tract and can cause symptoms of abdominal pain, nausea, loss of appetite, and weight loss. The cure for this ailment took some time for scientists to figure out. If your grandfather complained to his doctor of symptoms of peptic ulcer, he was probably told to avoid spicy foods, alcohol, and coffee, and to manage his stress. In the early twentieth century, the medical community thought peptic ulcers were caused by what you ate and drank, and by stress. In 1915, Dr. Bertram W. Sippy devised the "Sippy diet" for treating peptic ulcers. Dr. Sippy advised patients to drink small amounts of cream and milk every hour in order to neutralize stomach acid. And then, increasingly, introduce soft bland foods with frequent meal times. For a while this diet sometimes worked, fooling both doctors and patients. However, the disappearance of peptic ulcer symptoms was likely the result of having a full stomach all the time, as the symptoms more often occur when the stomach is empty. Ultimately, the Sippy diet did not cure peptic ulcers and in the latter 1960s scientists discovered the diet was associated with a significant increase in heart disease due to its high saturated fat content.

In the 1980s, Australian physicians Barry Marshall and Robin Warren Currey, R. "Ulcers—The Culprit Is *H. Pylori*!" National proposed a radical hypothesis—that the cause of ulcers was bacteria that could survive in the acidic environment of the stomach and small intestine. They met with significant opposition to their hypothesis but they persisted with their research. Their research led to an understanding that the spiral shape of the bacterium *H. pylori* allows it to penetrate the stomach's mucous lining, where it secretes an enzyme that generates substances to neutralize the stomach's acidity. This weakens the stomach's protective mucous, making the tissue more susceptible to the damaging effects of acid, leading to the development of sores and ulcers. *H. pylori* also prompt the stomach to produce even more acid, further damaging the stomach lining. Marshall actually drank a dish of *H. pylori* hoping to give himself an ulcer to prove his point. A few days later he was vomiting and had inflamed tissue in his stomach. The presence of H. pylori was confirmed. He then took an antibiotic and the symptoms of *H. pylori* infection dissipated. Experimental success? It still took years for the medical community to be entirely convinced of the link between peptic ulcers and *H. pylori*.

Video Link 1.1.2

YouTube Video about the discovery of H. *pylori*.



In 1994, the National Institutes of Health held a conference on the cause of peptic ulcers. There was scientific consensus that H. pylori cause most peptic ulcers and that patients should be treated with antibiotics. In 1996, the Food and Drug Administration (FDA) approved the first antibiotic that could be used to treat patients with peptic ulcers. Nevertheless, the link between H. pylori and peptic ulcers was not sufficiently communicated to health-care providers. In fact, 75 percent of patients with peptic ulcers in the late 1990s were still being prescribed antacid medications and advised to change their diet and reduce their stress. In 1997, the Centers for Disease Control and Prevention (CDC), alongside other public health organizations, began an intensive educational campaign to convince the public and health-care providers that peptic ulcers are a curable condition requiring treatment with antibiotics. Today, if you go to your primary physician you will be given the option of taking an antibiotic to eradicate *H. pylori* from your gut. Scientists have progressed even further and mapped the entire genome of H. pylori, which will hopefully aid in the discovery of even better drugs to treat peptic ulcers.

The *H. pylori* discovery was made recently, overturning a theory applied in our own time. The demystification of disease requires the continuous forward march of science, overturning old, traditional theories and discovering new, more effective ways to treat disease and promote health. In 2005, Marshall and Warren were awarded the prestigious Nobel Prize in medicine for their discovery that many stomach ulcers are caused by H. pylori—not by hurry, curry, and worry.

> *Make a commitment to empower yourself with scientific evidence as a strategy for achieving a healthier diet.*

A primary goal of this text is to provide you with information backed by nutritional science, and with a variety of resources that use scientific evidence to optimize health and prevent disease. In this chapter you will see that there are many conditions and deadly diseases that can be prevented by good nutrition. You will also discover the many other determinants of health and disease, how the powerful tool of scientific investigation is used to design dietary guidelines, and recommendations that will promote health and prevent disease.

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10.8.3.1.2: Defining Nutrition, Health, and Disease

Learning Objective

- Explain the terms nutrition, health, health promotion, and disease prevention.

You and I are bombarded with images and messages about food everywhere we go. We see super models eating giant burgers, chefs battling to prepare meals, and the top places to burst your belly from consuming atomic chicken wings and deli sandwiches longer than a foot. There are also shows that feature bizarre foods from cultures around the world. How do you use the information from popular network food shows to build a nutritious meal? You don't—these shows are for entertainment. The construction of a nutritious meal requires learning about which foods are healthy and which foods are not-so-health, how foods and nutrients function in your body, and how to use scientific resources to make healthful choices for you and those you care about. This text is designed to provide you with the information necessary to make sound nutritional choices that will optimize health and help prevent disease.



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How do you fill your plate?

The word nutrition first appeared in 1551 and comes from the Latin word *nutrire*, meaning "to nourish." Today, we define Nutritional science is the investigation of how an organism is nourished, and incorporates the study of how nourishment affects personal health, population health, and planetary health. Nutritional science covers a wide spectrum of disciplines. As a result, nutritional scientists can specialize in particular aspects of nutrition such as biology, physiology, immunology, biochemistry, education, psychology, sustainability, and sociology.

Without adequate nutrition the human body does not function optimally, and severe nutritional inadequacy can lead to disease and even death. The typical American diet is lacking in many ways, from not containing the proper amounts of essential nutrients, to being too speedily consumed, to being only meagerly satisfying. Dietitians are nutrition professionals who integrate their knowledge of nutritional science into helping people achieve a healthy diet and develop good dietary habits. The Academy of Nutrition and Dietetics (AND) is the largest organization of nutrition professionals worldwide and dietitians registered with the AND are committed to helping Americans eat well and live healthier lives. To learn more from the AND's nutritional advice, visit EatRight.Org

Your ability to wake up, to think clearly, to communicate, to hope, to dream, to go to school, to gain knowledge, to go to work, to earn a living, and to do all of the things that you like to do are dependent upon one factor—your health. Good health means you are able to function normally and work hard to achieve your goals in life. For the next few minutes, take some time to view snapshots of the insides of the refrigerators of American mechanics, doctors, school teachers, hunters, short-order cooks, college students, vegans, and more. Visit Mark Menjivar's portrait exhibition, "You Are What You Eat". Menjivar hopes these images will invoke new thoughts about, "How we care for our bodies. How we care for others. And how we care for the land." As you look at these

images think about your personal health, the health of your family and friends, and the health of this planet. These hopes encompass the inspirations for this book.

Interactive 1.1

Mark Menjivar has traveled around the United States taking photographs of the contents of refrigerators of numerous types of people. The portraits are available for viewing on his website under “You Are What You Eat.” Then click on "Refrigerators" on the left.

Nutrition and Health and Disease

In 1946, the World Health Organization (WHO) defined health as “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.” This definition was adopted into the WHO constitution in 1948 and has not been amended since. A triangle is often used to depict the equal influences of physical, mental, and social well-being on health (Figure 1.1). Disease is defined as any abnormal condition affecting the health of an organism, and is characterized by specific signs and symptoms. Signs refer to identifying characteristics of a disease such as swelling, weight loss, or fever. Symptoms are the features of a disease recognized by a patient and/or their doctor. Symptoms can include nausea, fatigue, irritability, and pain. Diseases are broadly categorized as resulting from pathogens (i.e., bacteria, viruses, fungi, and parasites), deficiencies, genetics, and physiological dysfunction. Diseases that primarily affect physical health are those that impair body structure (as is the case with osteoporosis), or functioning (as is the case with cardiovascular disease). Mental illnesses primarily affect mental and social well-being.

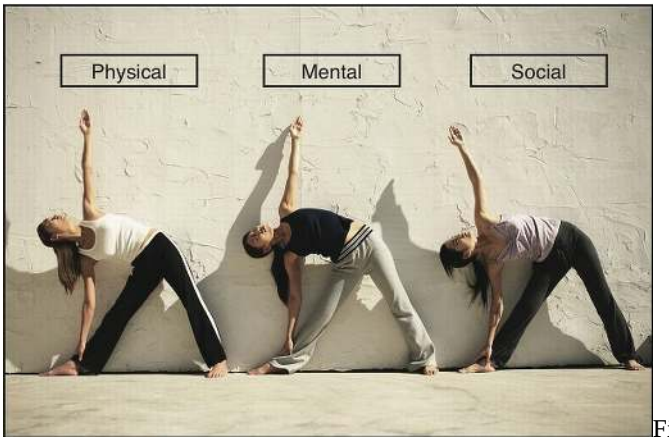


Figure **10.8.3.1.2.1**: The Health Triangle. © Thinkstock

The foods we eat affect all three aspects of our health. For example, a teen with Type 2 diabetes (a disease often brought on by poor diet) is first diagnosed by physical signs and symptoms such as increased urination, thirstiness, and unexplained weight loss. But research has also found that teens with Type 2 diabetes have impaired thinking and do not interact well with others in school, thereby affecting mental and social well-being. Type 2 diabetes is just one example of a physiological disease that affects all aspects of health—physical, mental, and social.

Public Health and Disease Prevention

In 1894, the first congressional funds were appropriated to the US Department of Agriculture (USDA) for the study of the relationship between nutrition and human health. Dr. Wilbur Olin Atwater was appointed as the Chief of Nutrition Investigations and is regarded as the “Father of Nutrition Science” in America. Under his guidance, the USDA released the first bulletin to the American public that contained information on the amounts of fat, carbohydrates, proteins, and food energy in various foods. Nutritional science advanced considerably in these early years, but it took until 1980 for the USDA and the US Department of Health and Human Services (HHS) to jointly release the first edition of *Nutrition and Your Health: Dietary Guidelines for Americans*.

Although wide distribution of the "Dietary Guidelines for Americans" did not come about until the 1980s, many historical events that demonstrated the importance of diet to health preceded their release. Assessments of the American diet in the 1930s led President Franklin D. Roosevelt to declare in his inaugural address on January 20, 1937, “I see one-third of our nation is ill-housed, ill-clad, and ill-nourished.” From the time of Atwater until the onset of the Great Depression, nutrition scientists had discovered many of the vitamins and minerals that are essential for the functioning of the human body. Their work and the acknowledgement

by President FDR of the nutritional inadequacy of the American diet evoked a united response between scientists and government, leading to: the enrichment of flour (adding vitamins and minerals), the development of free or reduced-cost school lunch programs, and advancements of nutrition education in this country.

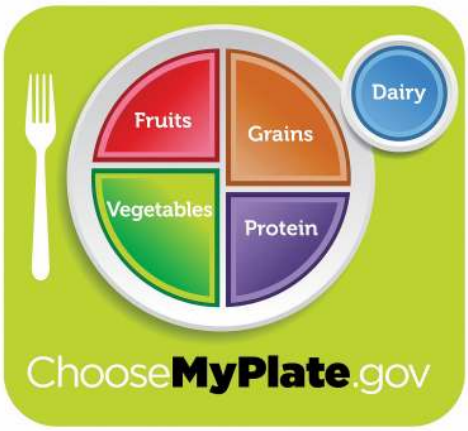


Figure 1.2: The Federal Government's New and Improved Tool of Nutritional Communication

In the latter part of the twentieth century nutrition scientists, public health organizations, and the American public increasingly recognized that eating too much of certain foods is linked to chronic diseases. We now know that diet-related conditions and diseases include: hypertension (high blood pressure), obesity, Type 2 diabetes, cardiovascular disease, some cancers, and osteoporosis. These diet-related conditions and diseases are some of the biggest killers of Americans. The United States Department of Health and Human Services (HHS) reports that unhealthy diets and inactivity cause between 310,000 and 580,000 deaths every single year. According to the United States Department of Agriculture (USDA), eating healthier could save Americans over $70 billion per year and this does not include the cost of obesity, which is estimated to cost a further $117 billion per year. Unfortunately, despite the fact that the prevalence of these diseases can be decreased by healthier diets and increased physical activity, the Center for Disease Control (CDC) reports that the federal government spends one thousand times more to treat disease than to prevent it ($1,390 versus $1.21 per person each year). In 2015, the newest edition of the Dietary Guidelines for Americans identified obesity as the number one nutritional-related health problem in the United States and established strategies to combat its incidence and health consequences in the American population. A 2008 study in the journal Obesity reported that if current trends are not changed, 100 percent of Americans will be overweight or obese in 2048! Wang Y, et al. "Will All Americans Become Overweight or Obese? Estimating the Progression and Cost of the US Obesity Epidemic." Obesity 10, no. 16 (October 2008): 2323–30. http://www.nature.com/oby/journal/v16/n10/full/oby2008351a.html In 2011, the US federal government released a new multimedia tool that aims to help Americans choose healthier foods from the five food groups (grains, vegetables, fruits, dairy, and proteins). The tool, called "Choose MyPlate," is available at choosemyplate.gov.

Key Takeaways

- Health is defined as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity." World Health Organization.
- Disease is defined as any abnormal condition that affects the health of an organism, and is characterized by specific signs and symptoms.
- Disease affects all three aspects of the health triangle.
- Good nutrition provides a mechanism to promote health and prevent disease.
- Diet-related conditions and diseases include: obesity, Type 2 diabetes, cardiovascular disease, some cancers, and osteoporosis.
- It took until the 1980s for the US federal government to develop a diet-related public policy designed to equip Americans with the tools to change to a healthier diet.

Discussion Starters

1. How might the way we nourish our bodies affect planetary health?
2. Debate your classmates: Should the federal government be concerned with what Americans eat?

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10.8.3.1.3: What Are Nutrients?

Learning Objective

- Define the word “nutrient” and identify the six classes of nutrients essential for health.
- List the three main energy (Calorie) yielding nutrients and how many Calories each of these nutrients provide.

What is in Food?

Your "diet" is defined as the foods you choose to eat. The diet of most people contains a variety of foods: nuts, seeds, leafy green vegetables and more! The foods we eat contain nutrients. Nutrients are substances required by the body to perform its basic functions. Nutrients must be obtained from diet, since the human body does not synthesize them, or does not synthesize them in large enough amounts for human health. Nutrients are used for many body functions such as: growing, moving your muscles, repairing tissues and much more! There are six classes of essential nutrients required for the body to function and maintain overall health. These six classes of essential nutrients are: carbohydrates, lipids (fats), proteins, water, vitamins, and minerals. Foods also contain non-nutrients. Some non-nutrients appear to be very important for human health, like fiber and antioxidants, some non-nutrients may be harmful to human health such as: preservatives, colorings, flavorings and pesticide residues.

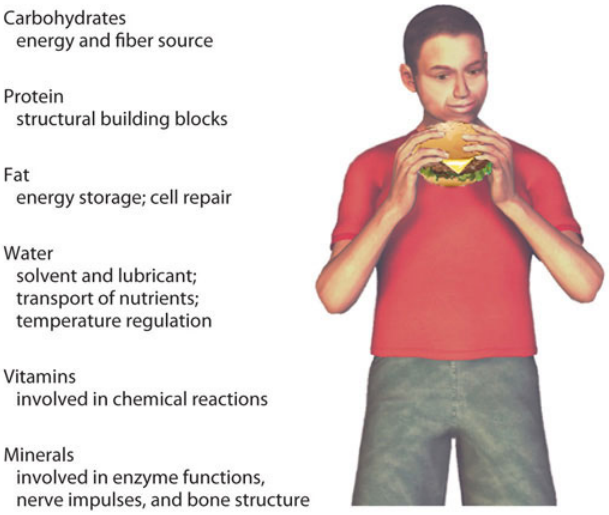


Figure **10.8.3.1.3.1**: The Six Classes of Nutrients. Source: http://www.chemistry.wustl.edu/~edud.../vitamins.html.

Macronutrients

Nutrients that are needed in large amounts are called macronutrients. There are three major classes of macronutrients: carbohydrates, lipids, and proteins. All three of these nutrients are needed in relatively large amounts AND they contain Calories (note the capital C which indicates kilocalories) which can be "burned" in your body to create energy for your body cells. The energy from these macronutrients comes from their chemical bonds. This chemical energy is converted into cellular energy that is then utilized to perform work, allowing our bodies to conduct their basic functions. A unit of measurement of food energy is the Calorie. The next time you are eating a packaged food, look on the "Nutrition Facts" panel to find out how many Calories you getting when you eat one serving of that food. Water is also a macronutrient in the sense that you require a large amount of it, but unlike the other macronutrients it does not yield calories. One other possible component of the diet that can provide Calories is alcohol though it is generally NOT considered to be a nutrient. Alcohol (in the form of ethanol) provides about 7 Calories per gram.

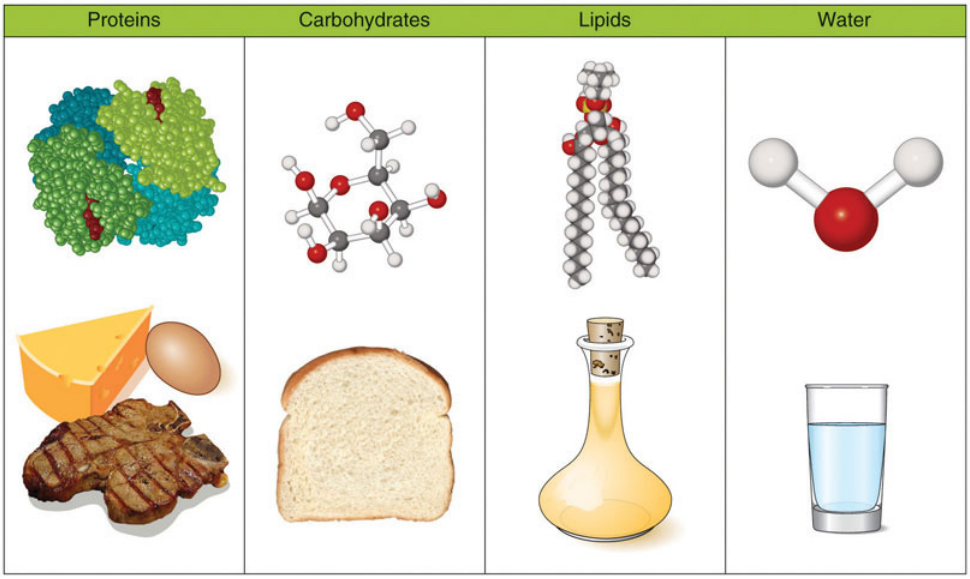


Figure **10.8.3.1.3.2**: The Macronutrients: Carbohydrates, Lipids, Protein, and Water

Carbohydrates

When you eat a food that contains carbohydrate, like bread for example, you will be receiving approximately 4 Calories for every gram of carbohydrate you eat. Carbohydrates are molecules composed of carbon, hydrogen, and oxygen. The major food sources of carbohydrates are grains, milk, fruits, and starchy vegetables like potatoes. Non-starchy vegetables also contain carbohydrates, but in lesser quantities. Carbohydrates are broadly classified into two forms based on their chemical structure: fast-releasing carbohydrates, often called "simple sugars", and slow-releasing carbohydrates, often called "complex carbohydrates".

Fast-releasing carbohydrates consist of one or two basic sugar units. They are sometimes called "simple sugars" because their chemical structure is fairly simple with only one or two sugar units. If the carbohydrate has one sugar unit we call it a "monosaccharide". Mono means one and saccharide means sugar. Examples of monosaccharides you have heard of are: Glucose (the sugar that is in your blood); Fructose (a sugar commonly found in fruit); and Galactose (a sugar that is found as part of milk sugar). If the carbohydrate has two sugar units we call it a "disaccharide". Di means two and saccharide means sugar. Examples of disaccharides you may be familiar with are: sucrose (table sugar); lactose (milk sugar) and maltose (malt sugar). Sucrose is made of a Glucose linked together with a Fructose. Lactose is made of Glucose linked together with Galactose. Maltose is made of two Glucose molecules bonded together. In order to digest a disaccharide, your body has to break the two sugars apart. We will talk more about this when we discuss lactose intolerance!

Slow-releasing carbohydrates are long chains of simple sugars (polysaccharides) that can be branched or unbranched. Some polysaccharides that you have probably heard of are starch and fiber. During digestion, the body does its best to break down all slow-releasing carbohydrates like starch to simple sugars, mostly glucose. Glucose is then transported to all our cells where it is stored, used to make energy, or used to build macromolecules. Fiber is also a slow-releasing carbohydrate, but it cannot be broken down in the human body and passes through the digestive tract undigested unless the bacteria that live in the large intestine break it down for us.

One gram of carbohydrates yields four Calories of energy for the cells in the body to perform work. In addition to providing energy and serving as building blocks for bigger macromolecules, carbohydrates are essential for proper functioning of the nervous system, heart, and kidneys. As mentioned, glucose can be stored in the body for future use. In humans, the storage molecule of carbohydrates is called glycogen and in plants it is known as starches. Glycogen and starches are slow-releasing carbohydrates.

Lipids

Lipids are also a family of molecules composed of carbon, hydrogen, and oxygen, but unlike carbohydrates, they are insoluble in water. Lipids are found predominately in butter, oils, meats, dairy products, nuts, and seeds, and in many processed foods. The three main types of lipids are triglycerides (triacylglycerols), phospholipids, and sterols. The main job of lipids is to store energy.

Lipids provide more energy per gram than carbohydrates (nine Calories per gram of lipids versus four Calories per gram of carbohydrates). In addition to energy storage, lipids serve as cell membranes, surround and protect organs, aid in temperature regulation, and regulate many other functions in the body.

Proteins

Proteins are macromolecules composed of chains of subunits called amino acids. Amino acids are simple subunits composed of carbon, oxygen, hydrogen, and nitrogen. The food sources of proteins are meats, dairy products, seafood, and a variety of different plant-based foods, most notably soy. The word protein comes from a Greek word meaning “of primary importance,” which is an apt description of these macronutrients; they are also known colloquially as the “workhorses” of life. Proteins provide four Calories of energy per gram; however providing energy is not protein’s most important function. Proteins provide structure to bones, muscles and skin, and play a role in conducting most of the chemical reactions that take place in the body. Scientists estimate that greater than one-hundred thousand different proteins exist within the human body.

Water

There is one other nutrient that we must have in large quantities: water. Water does not contain carbon, but is composed of two hydrogens and one oxygen per molecule of water. Water does not provide any Calories. More than 60 percent of your total body weight is water. Without it, nothing could be transported in or out of the body, chemical reactions would not occur, organs would not be cushioned, and body temperature would fluctuate widely. On average, an adult consumes just over two liters of water per day from food and drink. According to the “rule of threes,” a generalization supported by survival experts, a person can survive three minutes without oxygen, three days without water, and three weeks without food. Since water is so critical for life’s basic processes, the amount of water input and output is supremely important, a topic we will explore in detail in Chapter 7.

Alcohol (not a nutrient)

Alcoholic drinks are a source of Calories even though they are generally not considered nutrients. Alcohol itself provides approximately 7 Calories for every gram consumed. In addition to alcohol, many alcoholic drinks contain carbohydrate as well.

Micronutrients

Micronutrients are nutrients required by the body in lesser amounts, but are still essential for carrying out bodily functions. Micronutrients include all the essential minerals and vitamins. There are sixteen essential minerals and thirteen vitamins (Tables **10.8.3.1.3.1** and **10.8.3.1.3.2** for a complete list and their major functions). In contrast to carbohydrates, lipids, and proteins, micronutrients do not contain Calories. This is often confusing because most people have heard how tired a person will feel if they are low in a micronutrient such as Iron. The tiredness can be explained by the fact that, micronutrients assist in the process of making energy by being part of enzymes (i.e., coenzymes). Enzymes catalyze chemical reactions in the body and are involved in many aspects of body functions from producing energy, to digesting nutrients, to building macromolecules. Micronutrients play many roles in the body.

Minerals

Minerals are solid inorganic substances that form crystals and are classified depending on how much of them we need. Trace minerals, such as molybdenum, selenium, zinc, iron, and iodine, are only required in a few milligrams or less and macrominerals, such as calcium, magnesium, potassium, sodium, and phosphorus, are required in hundreds of milligrams. Many minerals are critical for enzyme function, others are used to maintain fluid balance, build bone tissue, synthesize hormones, transmit nerve impulses, contract and relax muscles, and protect against harmful free radicals.

Table **10.8.3.1.3.1**: : Minerals and Their Major Functions

Minerals	Major Functions
Macro	
Sodium	Fluid balance, nerve transmission, muscle contraction
Chloride	Fluid balance, stomach acid production
Potassium	Fluid balance, nerve transmission, muscle contraction
Calcium	Bone and teeth health maintenance, nerve transmission, muscle contraction, blood clotting
Phosphorus	Bone and teeth health maintenance, acid-base balance
Magnesium	Protein production, nerve transmission, muscle contraction
Sulfur	Protein production
Trace	
Iron	Carries oxygen, assists in energy production
Zinc	Protein and DNA production, wound healing, growth, immune system function
Iodine	Thyroid hormone production, growth, metabolism
Selenium	Antioxidant
Copper	Coenzyme, iron metabolism
Manganese	Coenzyme
Fluoride	Bone and teeth health maintenance, tooth decay prevention
Chromium	Assists insulin in glucose metabolism
Molybdenum	Coenzyme

Vitamins

The thirteen vitamins are categorized as either water-soluble or fat-soluble. The water-soluble vitamins are vitamin C and all the B vitamins, which include thiamine, riboflavin, niacin, pantothenic acid, pyroxidine, biotin, folate and cobalamin. The fat-soluble vitamins are A, D, E, and K. Vitamins are required to perform many functions in the body such as making red blood cells, synthesizing bone tissue, and playing a role in normal vision, nervous system function, and immune system function.

Table **10.8.3.1.3.1**: Vitamins and Their Major Functions

Vitamins	Major Functions
Water-soluble	
B_1 (thiamine)	Coenzyme, energy metabolism assistance
B_2 (riboflavin)	Coenzyme, energy metabolism assistance
B_3 (niacin)	Coenzyme, energy metabolism assistance
B_5 (pantothenic acid)	Coenzyme, energy metabolism assistance
B_6 (pyroxidine)	Coenzyme, amino acid synthesis assistance
Biotin	Coenzyme
Folate	Coenzyme, essential for growth
B_{12} (cobalamin)	Coenzyme, red blood cell synthesis
C	Collagen synthesis, antioxidant
Fat-soluble	
A	Vision, reproduction, immune system function
D	Bone and teeth health maintenance, immune system function
E	Antioxidant, cell membrane protection
K	Bone and teeth health maintenance, blood clotting

Vitamin deficiencies can cause severe health problems. For example, a deficiency in niacin causes a disease called pellagra, which was common in the early twentieth century in some parts of America. The common signs and symptoms of pellagra are known as the “4D’s—diarrhea, dermatitis, dementia, and death.” Until scientists found out that better diets relieved the signs and symptoms of pellagra, many people with the disease ended up in insane asylums awaiting death (Video **10.8.3.1.3.1**). Other vitamins were also found to prevent certain disorders and diseases such as scurvy (vitamin C), night blindness (vitamin A), and rickets (vitamin D).



Video **10.8.3.1.3.1**: This video provides a brief history of Dr. Joseph Goldberger’s discovery that pellagra was a diet-related disease.

Food Energy

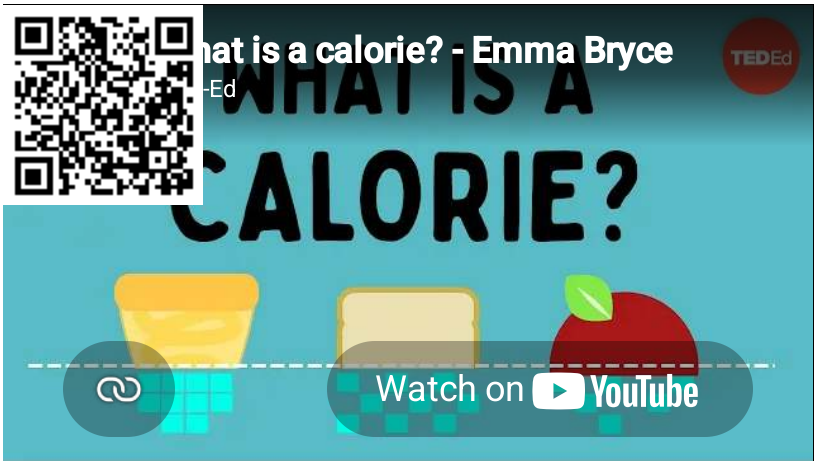
Though this is only Chapter 1, you have already seen the words "Calories" and "Energy" used several times. In everyday life you have probably heard people talk about how many Calories they burned on the treadmill or how many Calories are listed on a bag of chips. Calories, are a measure of energy. It takes quite a lot of Calories (energy) to keep us alive. Even if a person is in a coma, they still burn approximately 1000 Calories of energy in order for: their heart to beat, their blood to circulate, their lungs to breathe,

etc... We burn even more calories when we exercise. The carbohydrates, fats and proteins we eat and drink provide calories for us (and alcohol as well if we choose to consume it). Sometimes people refer to these nutrients as "energy yielding". As you read above, carbohydrates provide 4 Calories for every gram we consume; proteins provide 4 Calories for every gram we consume; fats provide 9 Calories for every gram we consume and alcohol provides 7 Calories of energy for every gram we consume. Vitamins, minerals and water do not provide any calories, even though they are still essential nutrients.

Food Quality: Nutrient Density compared to Calorie Density

One way to think about the quality of your food is to consider how many nutrients you receive from a serving of that food compared to the number of Calories you receive from one serving of the food. For example, a candy bar gives you quite a few Calories but not very many of the essential nutrients. We would say that the candy bar has Calorie density but low Nutrient density. An apple on the other hand, has quite a few essential nutrients but not very many Calories. We would say that the apple has high Nutrient density but low Calorie density.

Please watch the following Ted Ed video called "What is a Calorie" which will describe in more detail what a Calorie is and why you may want to know how many Calories you are consuming compared to how many you are burning each day.



Video: What is a calorie? - Emma Bryce

One measurement of food quality is the amount of nutrients it contains relative to the amount of energy (Calories) it provides. High-quality foods are nutrient dense, meaning they contain lots of the nutrients relative to the amount of Calories they provide. Nutrient-dense foods are the opposite of “empty-calorie” foods such as carbonated sugary soft drinks, which provide many calories and very little, if any, other nutrients. Food quality is additionally associated with its taste, texture, appearance, microbial content, and how much consumers like it.

Food: A Better Source of Nutrients

It is better to get all your micronutrients from the foods you eat as opposed to from supplements. Supplements contain only what is listed on the label, but foods contain many more macronutrients, micronutrients, and other chemicals, like antioxidants that benefit health. While vitamins, multivitamins, and supplements are a $20 billion industry in this country and more than 50 percent of Americans purchase and use them daily, there is no consistent evidence that they are better than food in promoting health and preventing disease. Dr. Marian Neuhouser, associate of the Fred Hutchinson Cancer Research Center in Seattle, says that “…scientific data are lacking on the long-term health benefits of supplements. To our surprise, we found that multivitamins did not lower the risk of the most common cancers and also had no impact on heart disease. ”Woodward, K. “Multivitamins Each Day Will Not Keep Common Cancers Away; Largest Study of Its Kind Provides Definitive Evidence that Multivitamins Will Not Reduce Risk of Cancer or Heart Disease in Postmenopausal Women.” Fred Hutchinson Cancer Research Center. *Center News* 16 (February 2009). http://www.fhcrc.org/about/pubs/center_news/online/2009/02/multivitamin_study.html

Key Takeaways

- Foods contain nutrients that are essential for our bodies to function.
- Four of the classes of nutrients required for bodily function are needed in large amounts. They are carbohydrates, lipids, proteins, and water, and are referred to as macronutrients.
- Two of the classes of nutrients are needed in lesser amounts, but are still essential for bodily function. They are vitamins and minerals.
- One measurement of food quality is the amount of essential nutrients a food contains relative to the amount of energy it has (nutrient density).

Discussion Starters

1. Make a list of some of your favorite foods and visit the “What’s In the Foods You Eat?” search tool provided by the USDA. What are some of the nutrients found in your favorite foods?

   http://www.ars.usda.gov/Services/docs.htm?docid=17032

2. Have a discussion in class on the “progression of science” and its significance to human health as depicted in the video on pellagra (Video 10.8.3.1.3.1.

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10.8.3.1.4: The Broad Role of Nutritional Science

Learning Objective

- Provide an example of how the scientific method works to promote health and prevent disease.

How to Determine the Health Effects of Food and Nutrients

Similar to the method by which a police detective finally charges a criminal with a crime, nutritional scientists discover the health effects of food and its nutrients by first making an observation. Once observations are made, they come up with a hypothesis, test their hypothesis, and then interpret the results. After this, they gather additional evidence from multiple sources and finally come up with a conclusion on whether the food suspect fits the claim. This organized process of inquiry used in forensic science, nutritional science, and every other science is called the scientific method.

Below is an illustration of the scientific method at work—in this case to prove that iodine is a nutrient. Zimmerman, M.B. "Research on Iodine Deficiency and Goiter in the 19th and Early 20th Centuries." *J Nutr* 138, no. 11 (November 2008): 2060–63. Carpenter, K.J. "David Marine and the Problem of Goiter." *J Nutr* 135, no.4 (April 2005): 675–80. In 1811, French chemist Bernard Courtois was isolating saltpeter for producing gunpowder to be used by Napoleon's army. To carry out this isolation he burned some seaweed and in the process observed an intense violet vapor that crystallized when he exposed it to a cold surface. He sent the violet crystals to an expert on gases, Joseph Gay-Lussac, who identified the crystal as a new element. It was named iodine, the Greek word for violet. The following scientific record is some of what took place in order to conclude that iodine is a nutrient.

- **Observation.** Eating seaweed is a cure for goiter, a gross enlargement of the thyroid gland in the neck.
- **Hypothesis.** In 1813, Swiss physician Jean-Francois Coindet hypothesized that the seaweed contained iodine and he could use just iodine instead of seaweed to treat his patients.
- **Experimental test.** Coindet administered iodine tincture orally to his patients with goiter.
- **Interpret results.** Coindet's iodine treatment was successful.
- **Gathering more evidence.** Many other physicians contributed to the research on iodine deficiency and goiter.
- **Hypothesis.** French chemist Chatin proposed that the low iodine content in food and water of certain areas far away from the ocean were the primary cause of goiter and renounced the theory that goiter was the result of poor hygiene.
- **Experimental test.** In the late 1860s the program, "The stamping-out of goiter," started with people in several villages in France being given iodine tablets.
- **Results.** The program was effective and 80 percent of goitrous children were cured.
- **Hypothesis.** In 1918, Swiss doctor Bayard proposed iodizing salt as a good way to treat areas endemic with goiter.
- **Experimental test.** Iodized salt was transported by mules to a small village at the base of the Matterhorn where more than 75 percent of school children were goitrous. It was given to families to use for six months.
- **Results.** The iodized salt was beneficial in treating goiter in this remote population.
- **Experimental test.** Physician David Marine conducted the first experiment of treating goiter with iodized salt in America in Akron, Ohio.
- **Results.** This study conducted on over four-thousand school children found that iodized salt prevented goiter.
- **Conclusions.** Seven other studies similar to Marine's were conducted in Italy and Switzerland that also demonstrated the effectiveness of iodized salt in treating goiter. In 1924, US public health officials initiated the program of iodizing salt and started eliminating the scourge of goiterism. Today more than 70 percent of American households use iodized salt and many other countries have followed the same public health strategy to reduce the health consequences of iodine deficiency.

Evidence-Based Approach to Nutrition

It took more than one hundred years from iodine's discovery as an effective treatment for goiter until public health programs recognized it as such. Although a lengthy process, the scientific method is a productive way to define essential nutrients and determine their ability to promote health and prevent disease. The scientific method is part of the overall evidence-based approach to designing nutritional guidelines. An evidence-based approach to nutrition includes:Briss, P.A., et al. "Developing an Evidence-Based Guide to Community Preventive Services—Methods." *Am J Prev Med* 18, no. 1S (2000): 35–43.· Myers, E. "Systems for

Evaluating Nutrition Research for Nutrition Care Guidelines: Do They Apply to Population Dietary Guidelines?" *J Am Diet Assoc* 103, no. 12, supplement 2 (December 2003): 34–41.

- Defining the problem or uncertainty (e.g., the rate of colon cancer is higher in people who eat red meat)
- Formulating it as a question (e.g., Does eating red meat contribute to colon cancer?)
- Setting criteria for quality evidence
- Evaluating the body of evidence
- Summarizing the body of evidence and making decisions
- Specifying the strength of the supporting evidence required to make decisions
- Disseminating the findings

The Food and Nutrition Board of the Institute of Medicine, a nonprofit, nongovernmental organization, constructs its nutrient recommendations (i.e., Dietary Reference Intakes, or DRI) using an evidence-based approach to nutrition. The entire procedure for setting the DRI is documented and made available to the public. The same approach is used by the USDA and HHS, which are departments of the US federal government. The USDA and HHS websites are great tools for discovering ways to optimize health; however, it is important to gather nutrition information from multiple resources as there are often differences in opinion among various scientists and public health organizations. While the new *Dietary Guidelines*, published in 2015, have been well-received by some, there are nongovernmental public health organizations that are convinced that some pieces of the guidelines may be influenced by lobbying groups and/or the food industry. For example, the Harvard School of Public Health (HSPH) feels the government falls short by being "too lax on refined grains."The guidelines recommend getting at least *half* of grains from whole grains—according to the HSPH this still leaves too much consumption of refined grains.

For a list of reliable sources that advocate good nutrition to promote health and prevent disease using evidence-based science see Table **10.8.3.1.4.1**. In subsquent sections, we will further discuss distinguishing criteria that will enable you to wade through misleading nutrition information and instead gather your information from reputable, credible websites and organizations.

Table **10.8.3.1.4.1**: Web Resources for Nutrition and Health

Organization	Website
Governmental	
US Department of Agriculture	http://www.usda.gov/wps/portal/usda/usdahome
USDA Center for Nutrition Policy and Promotion	www.cnpp.usda.gov/
US Department of Health and Human Services	http://www.hhs.gov/
Centers for Disease Control and Prevention	http://www.cdc.gov/
Food and Drug Administration	http://www.fda.gov/
Healthy People	http://www.healthypeople.gov/2020/default.aspx
Office of Disease Prevention and Health Promotion	odphp.osophs.dhhs.gov/
Health Canada	http://www.hc-sc.gc.ca/
International	
World Health Organization	http://www.who.int/en/
Food and Agricultural Organization of the United Nations	www.fao.org/
Nongovernmental	
Harvard School of Public Health	www.hsph.harvard.edu/nutritio...rce/index.html
Mayo Clinic	http://www.mayoclinic.com/
Linus Pauling Institute	http://lpi.oregonstate.edu/
American Society for Nutrition	http://www.nutrition.org/
American Medical Association	http://www.ama-assn.org/
American Diabetes Association	http://www.diabetes.org/
The Academy of Nutrition and Dietetics	http://www.eatright.org/
Institute of Medicine: Food and Nutrition	www.iom.edu/Global/Topics/Food-Nutrition.aspx
Dietitians of Canada	http://www.dietitians.ca/

Types of Scientific Studies

There are many types of scientific studies that can be used to provide supporting evidence for a particular hypothesis. The various types of studies include epidemiological studies, interventional clinical trials, and randomized clinical interventional trials.

Epidemiological studies are observational studies that look for health patterns and are often the front-line studies for public health. The CDC defines epidemiological studies as scientific investigations that define frequency, distribution, and patterns of health events in a population. Thus, these studies describe the occurrence and patterns of health events over time. The goal of an epidemiological study is to find factors associated with an increased risk for a health event, though these sometimes remain elusive. An example of an epidemiological study is the Framingham Heart Study, a project of the National Heart, Lung and Blood Institute and Boston University that has been ongoing since 1948. This study first examined the physical health and lifestyles of 5,209 men and women from the city of Framingham, Massachusetts and has now incorporated data from the children and grandchildren of the original participants. One of the seminal findings of this ambitious study was that higher cholesterol levels in the blood are a risk factor for heart disease. The Framingham Heart Study, a project of the National Heart, Lung, and Blood Institute and Boston University. “History of the Framingham Heart Study.” Epidemiological studies are a cornerstone for examining and evaluating public health and some of their advantages are that they can lead to the discovery of disease patterns and risk factors for diseases, and they can be used to predict future healthcare needs and provide information for the design of disease prevention strategies for

entire populations. Some shortcomings of epidemiological studies are that investigators cannot control environments and lifestyles, a specific group of people studied may not be an accurate depiction of an entire population, and these types of scientific studies cannot directly determine if one variable causes another. Scientists regard epidemiological studies as a starting place for ideas about what types of lifestyle choice MAY contribute to a disease. They can show a correlation between two things happening but not whether one factor CAUSED the other. My favorite example of this is a thought experiment where a make-believe scientist observes (through epidemiological studies) that grey hair often goes along with Alzheimer's Disease. Wouldn't it be silly for that scientist to predict that grey hair CAUSES Alzheimer's Disease? Could that scientist easily test that silly prediction? Suppose that scientist dyed a group of people's hair grey to see if the color grey truly increased their risk of Alzheimer's Disease. The whole thing is silly but I think you get the point. Epidemiological studies may give us ideas but those ideas need clinical trials to figure out what the patterns mean.

Interventional clinical trial studies are scientific investigations in which a variable is changed between groups of people. When well done, this type of study allows one to determine causal relationships. An example of an interventional clinical trial study is the Dietary Approaches to Stop Hypertension (DASH) trial published in the April 1997 issue of *The New England Journal of Medicine*.Appel, L. J., et al. “A Clinical Trial of the Effects of Dietary Patterns on Blood Pressure.,” *N Engl J Med* 336 (April 1997): 1117–24. In this study, 459 people were randomly assigned to three different groups; one was put on an average American control diet, a second was put on a diet rich in fruits and vegetables, and the third was put on a combination diet rich in fruits, vegetables, and low-fat dairy products with reduced saturated and total fat intake. The groups remained on the diets for eight weeks. Blood pressures were measured before starting the diets and after eight weeks. Results of the study showed that the group on the combination diet had significantly lower blood pressure at the end of eight weeks than those who consumed the control diet. The authors concluded that the combination diet is an effective nutritional approach to treat high blood pressure. The attributes of high-quality clinical interventional trial studies are:

- those that include a control group, which does not receive the intervention, to which you can compare the people who receive the intervention being tested;
- those in which the subjects are randomized into the group or intervention group, meaning a given subject has an equal chance of ending up in either the control group or the intervention group. This is done to ensure that any possible confounding variables are likely to be evenly distributed between the control and the intervention groups;
- those studies that include a sufficient number of participants.

What are confounding variables? These are factors other than the one being tested that could influence the results of the study. For instance, in the study we just considered, if one group of adults did less physical activity than the other, then it could be the amount of physical activity rather than the diet being tested that caused the differences in blood pressures among the groups.

The limitations of these types of scientific studies are that they are difficult to carry on for long periods of time, are costly, and require that participants remain compliant with the intervention. Furthermore, it is unethical to study certain interventions. (An example of an unethical intervention would be to advise one group of pregnant mothers to drink alcohol to determine the effects of alcohol intake on pregnancy outcome, because we know that alcohol consumption during pregnancy damages the developing fetus.)

Randomized clinical interventional trial studies are powerful tools to provide supporting evidence for a particular relationship and are considered the “gold standard” of scientific studies. A randomized clinical interventional trial is a study in which participants are assigned by chance to separate groups that compare different treatments. Neither the researchers nor the participants can choose which group a participant is assigned. However, from their limitations it is clear that epidemiological studies complement interventional clinical trial studies and both are necessary to construct strong foundations of scientific evidence for health promotion and disease prevention.

Other scientific studies used to provide supporting evidence for a hypothesis include laboratory studies conducted on animals or cells. An advantage of this type of study is that they typically do not cost as much as human studies and they require less time to conduct. Other advantages are that researchers have more control over the environment and the amount of confounding variables can be significantly reduced. Moreover, animal and cell studies provide a way to study relationships at the molecular level and are also helpful in determining the exact mechanism by which a specific nutrient causes a change in health. The disadvantage of these types of studies are that researchers are not working with whole humans and thus the results may not be relevant. Nevertheless,

well-conducted animal and cell studies that can be repeated by multiple researchers and obtain the same conclusion are definitely helpful in building the evidence to support a scientific hypothesis.

Evolving Science

Science is always moving forward, albeit sometimes slowly. One study is not enough to make a guideline or a recommendation or cure a disease. Science is a stepwise process that builds on past evidence and finally culminates into a well-accepted conclusion. Unfortunately, not all scientific conclusions are developed in the interest of human health and it is important to know where a scientific study was conducted and who provided the money. Indeed, just as an air quality study paid for by a tobacco company diminishes its value in the minds of readers, so does one on red meat performed at a laboratory funded by a national beef association.

Science can also be contentious even amongst experts that don't have any conflicting financial interests. To see scientists debating over the nutritional guidelines, watch Video \(\PageIndex{1}\. Contentious science is actually a good thing as it forces researchers to be of high integrity, well-educated, well-trained, and dedicated. It also instigates public health policy makers to seek out multiple sources of evidence in order to support a new policy. Agreement involving many experts across multiple scientific disciplines is necessary for recommending dietary changes to improve health and prevent disease. Although a somewhat slow process, it is better for our health to allow the evidence to accumulate before incorporating some change in our diet.



Video **10.8.3.1.4.1**: Debate" This webcast from March 29, 2011 demonstrates how science is always evolving and how debate among nutrition science experts influences policy decisions.Source: Harvard School of Public Health, in collaboration with Reuters.

Nutritional Science Evolution

One of the newest areas in the realm of nutritional science is the scientific discipline of nutritional genetics, also called nutrigenomics. Genes are part of DNA and contain the genetic information that make up all our traits. Genes are codes for proteins and when they are turned "on" or "off," they change how the body works. While we know that health is defined as more than just the absence of disease, there are currently very few accurate genetic markers of good health. Rather, there are many more genetic markers for disease. However, science is evolving and nutritional genetics aims to identify what nutrients to eat to "turn on" healthy genes and "turn off" genes that cause disease. Eventually this field will progress so that a person's diet can be tailored to their genetics. Thus, your DNA will determine your optimal diet.



Video 10.8.3.1.4.2: Nutrigenomics: A dietitian describes the new scientific discipline of nutrigenomics and its potential impact on diet and health.

Using Science and Technology to Change the Future

As science evolves, so does technology. Both can be used to create a healthy diet, optimize health, and prevent disease. Picture yourself not too far into the future: you are wearing a small “dietary watch” that painlessly samples your blood, and downloads the information to your cell phone, which has an app that evaluates the nutrient profile of your blood and then recommends a snack or dinner menu to assure you maintain adequate nutrient levels. What else is not far off? How about another app that provides a shopping list that adheres to all dietary guidelines and is emailed to the central server at your local grocer who then delivers the food to your home? The food is then stored in your smart fridge which documents your daily diet at home and delivers your weekly dietary assessment to your home computer (Figure 10.8.3.1.4.1:. At your computer, you can compare your diet with other diets aimed at weight loss, optimal strength training, reduction in risk for specific diseases or any other health goals you may have. You may also delve into the field of nutritional genetics and download your gene expression profiles to a database that analyzes yours against millions of others.



Figure 10.8.3.1.4.1: The “Smart Fridge". (CC BY 2.0; David Berkowitz)

Key Takeaways

- The scientific method is an organized process of inquiry used in nutritional science to determine if the food suspect fits the claim.
- The scientific method is part of the overall evidence-based approach to designing nutritional guidelines that are based on facts.
- There are different types of scientific studies—epidemiological studies, randomized clinical interventional trial studies, and laboratory animal and cell studies—which all provide different, complementary lines of evidence.
- It takes time to build scientific evidence that culminates as a commonly accepted conclusion.

- Agreement of experts across multiple scientific disciplines is a necessity for recommending dietary changes to improve health and help to prevent disease.
- Science is always evolving as more and more information is collected.

Discussion Starters

1. What are some of the ways in which you think like a scientist and use the scientific method in your everyday life? Any decision-making process uses at least pieces of the scientific method. Think about some of the major decisions you have made in your life and the research you conducted that supported your decision. For example, what computer brand do you own? Where is your money invested? What college do you attend?
2. Do you use technology, appliances, and/or apps that help you to optimize your health?

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10.8.3.1.5: Health Factors and Their Impact

Learning Objective

- Explain the role that genetics, environment, life cycle, and lifestyle play in health status.
- Describe economic, social, cultural, and emotional determinants that affect personal choices of foods.

In addition to nutrition, health is affected by genetics, the environment, life cycle, and lifestyle. These factors are referred to as "determinants" of health and they all interact with each other. For example, family income influences the food choices available and the quantity and quality of food that can be purchased, which of course affects nutrition. Except for nutrition and lifestyle, these factors can be difficult or impossible to change.

Genetics

Everyone starts out in life with the genes handed down to them from the families of their mother and father. Genes are responsible for your many traits as an individual and are defined as the sequences of DNA that code for all the proteins in your body. The expression of different genes can determine the color of your hair, skin, and eyes, and even if you are more likely to be fat or thin and if you have an increased risk for a certain disease. The sequence of DNA that makes up your genes determines your genetic makeup, also called your genome, which is inherited from your mother and father. In 2003, the Human Genome Project was completed and now the entire sequence of DNA in humans is known. It consists of about three billion individual units and contains between twenty-five and thirty thousand genes. The human genome that was sequenced was taken from a small population of donors and is used as a reference DNA sequence for the entire population. Each of us has a similar but unique DNA sequence. Only identical twins and cloned animals have the exact same DNA sequence.



Identical twins are the only individuals in the world that have identical DNA, sharing the same genotype. However, their phenotype is different, meaning that their identical DNA is expressed differently. Marian and Vivian Brown, identical twins, photographed by Christopher Michel.

Now that we understand the map of the human genome, let's enter the fields of nutrigenomics and epigenetics. Recall that nutrigenomics is an emerging scientific discipline aimed at defining healthy genes and not-so-healthy genes and how nutrients affect them. Currently, scientists cannot change a person's DNA sequence. But they have discovered that chemical reactions in the body can turn genes "on" and "off," causing changes in the amounts and types of proteins expressed. Epigenetics is another rapidly advancing scientific field in which researchers study how chemical reactions turn genes "on" and "off" and the factors that influence the chemical reactions. Some of these factors are now known to be nutrients. Researchers at the Genetic Science Learning Center at the University of Utah conducted an experiment in which some pregnant mice were fed a diet containing folate, choline, vitamin B_{12}, and betaine, and other pregnant mice were fed a diet that did not contain these nutrients and chemicals. Both groups of pregnant mice were also fed bisphenol A, a chemical in plastic, which alters DNA by inhibiting a specific chemical reaction. The mice born from the mother fed the supplemented diet were brown, thin, and healthy. The mice born from the mother

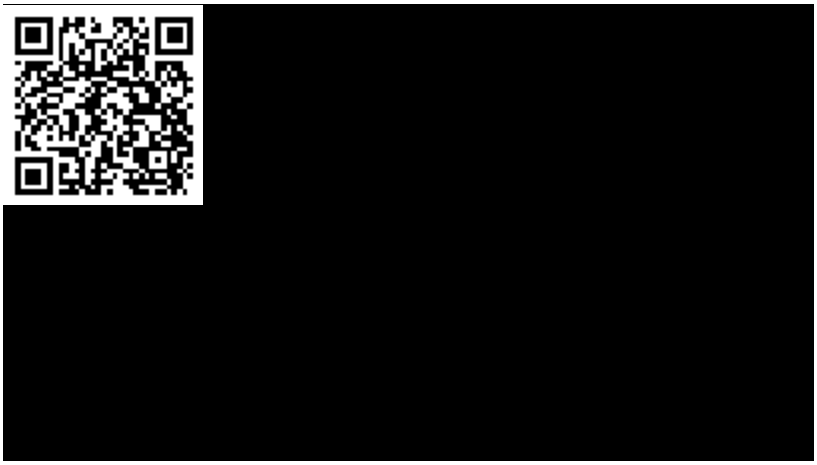
fed the unsupplemented diet were yellow, fat, and unhealthy. This is a dramatic example of how nutrients change not the sequence of DNA, but which genes are expressed. These two mice look different, but have identical DNA sequences. Thus, not only do the things you eat determine your health, but so do the things your mother ate during pregnancy. Moreover, other studies have demonstrated what your dad ate—and what your grandmother ate while she was pregnant with your mother!—also can affect your gene expression and, consequently, your health. Does this make it OK for you to blame your mother and father for all of your shortcomings? No. Genetics are important in determining your health, but they are certainly not the only determinant.

Interactive 10.8.3.1.5.1

This is a good animation of the central foundation of modern biology. Turn "on" a gene, make messenger RNA, and make protein. Spin the dial all the way to the left to turn off the expression, and then slowly move it to the right.

http://learn.genetics.utah.edu/content/epigenetics/control/

Source: Genetic Science Learning Center at the University of Utah.



Video 10.8.3.1.5.1: Diet during Pregnancy. Watch as Jen discovers how what you eat during pregnancy affects the health of your baby.

The Life Cycle

The life cycle of human beings originates from a fertilized egg, which develops into a fetus that is eventually born as a baby. A baby develops into a child, transitions through the wonderful phase of adolescence, becomes an adult, and then advances into old age and eventually death (Figure **10.8.3.1.5.1**). The current average life expectancy in America is approaching eighty. To see how this compares with other countries, see Interactive **10.8.3.1.5.2**.

Interactive 10.8.3.1.5.2: The World Bank

Visit this public database from the World Bank to learn how the life expectancy in America differs from those in other countries.

http://www.google.com/publicdata?ds=wb-wdi&met_y=sp_dyn_le00_in&idim=country:USA&dl=en&hl=en&q=america+average+life+expectancy

A person's stage of life influences their health and nutritional requirements. For example, when you are an adolescent, your bones grow quickly. More calcium, a bone-building nutrient, is required in the diet during this life stage than at other ages. As you get older, the aging process affects how your body functions. One effect of aging, apparently earlier in women than in men, is the deterioration of bone tissue. As a result, women over age fifty-one need more calcium in their diet than younger adult women. Another life-cycle stage, pregnancy, requires several adjustments to nutrition compared to nonpregnant women. It is recommended that a pregnant woman consume more protein than a nonpregnant woman to support growth and development, and to consume more of some vitamins, such as folate, to prevent certain birth defects. The USDA provides information on healthy diets for many different stages of the life cycle on their website. Healthy aging requires eating a diet that matches one's life stages to support the

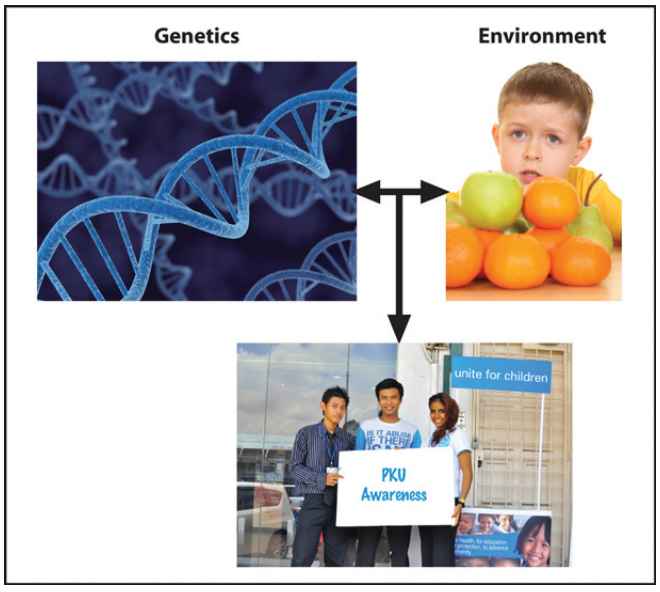
body's specific physiological requirements. What else is known to help a person age slowly and gracefully? Diets high in vegetables and fruits are associated with increased longevity and a decreased risk of many diseases.



Figure 10.8.3.1.5.1: The Life Cycle - The Forward March to Old Age and Ultimately Death. © Shutterstock

Environment

Your environment has a large influence on your health, genetics, life cycle, and lifestyle. Scientists say that the majority of your expressed traits are a product of your genes and environment, of which nutrition is a component. An example of this interaction can be observed in people who have the rare genetic disorder, phenylketonuria (PKU). The clinical signs of PKU are mental retardation, brain damage, and seizures and are caused by the build-up of the amino acid phenylalanine and its metabolites (breakdown products produced during metabolism) in the body. The high level of phenylalanine in a person who has PKU is the result of a change in the gene that encodes for an enzyme that converts phenylalanine into the amino acid tyrosine. This genetic change, called a mutation, causes the enzyme to not function properly.



The interplay of genetics and environment can determine the consequences of disease. Sources: http://topnews.co.uk/214471-rare-disorder-known-phenylketonuria and www.georgiapku.org/AboutUs.html. © Shutterstock

In this country and many others all newborn babies are screened for PKU in order to diagnose and treat the disease before the development of mental retardation and brain damage. Once diagnosed, PKU is treated by strict adherence to a diet low in phenylalanine, consisting mostly of fruits, vegetables, and grains. Adhering to this diet for life allows an individual with PKU to lead a normal life without suffering the consequences of brain damage, mental retardation, or seizures. In the example of PKU, the consequences of a genetic mutation are modified by diet. Thus, a person's genes can make them more susceptible to a particular disease, or cause a disease, and their environment can decrease or increase the progression and severity of the condition.

Socioeconomic Status

Multiple aspects of a person's environment can affect nutrition, which in turn affects health. One of the best environmental predictors of a population's health is socioeconomic status. Socioeconomic status is a measurement made up of three variables: income, occupation, and education. Socioeconomic status affects nutrition by influencing what foods you can afford and consequently, food choice and food quality. Nutrition and health are generally better in populations that have higher incomes, better jobs, and more education. On the other hand, the burden of disease is highest in the most disadvantaged populations. A commentary in the *Journal of the American Medical Association* reports that the lower life expectancy of populations of lower socioeconomic status is largely attributable to increased death from heart disease.Fiscella, K. and D. Tancredi. "Socioeconomic Status and Coronary Heart Disease Risk Prediction." *JAMA* 300, no. 22 (2008): 2666–68. The American Heart Association states that having a healthy diet is one of the best weapons to fight heart disease and it is therefore essential that all socioeconomic status groups have access to high-quality, nutrient-dense foods. The disparities in nutrition and health in America are directly related to the disparity in socioeconomic status. Other dimensions that affect health disparity are race, ethnic group, sex, sexual identity, age, disability, and geographic location. The issue of inequitable health among Americans is recognized by the federal government and one of the overarching goals of Healthy People 2020, a large program managed by the HHS, is to "Achieve health equity, eliminate disparities, and improve the health of all groups." To work toward this monumentous goal, the HHS is actively tracking disease patterns, chronic conditions, and death rates among the many different types of people that live in the United States.

Interactive 10.8.3.1.5.3: CAUses of Death

To see the differences in causes of death for different sexes, races, and age groups, visit the website of Healthy People and compare the top ten causes of death for different populations (http://www.healthypeople.gov/2020/default.aspx).

Lifestyle

One facet of lifestyle is your dietary habits. Recall that we discussed briefly how nutrition affects health. A greater discussion of this will follow in subsequent chapters in this book as there is an enormous amount of information regarding this aspect of lifestyle. Dietary habits include what a person eats, how much a person eats during a meal, how frequently meals are consumed, and how often a person eats out at restaurants. Other aspects of lifestyle include physical activity level, recreational drug use, and sleeping patterns, all of which play a role in health and impact nutrition. Following a healthy lifestyle improves your overall health.

In 2008, the HHS released the *Physical Activity Guidelines for Americans*. The HHS states that "Being physically active is one of the most important steps that Americans of all ages can take to improve their health. The *2008 Physical Activity Guidelines for Americans* provides science-based guidance to help Americans aged six and older improve their health through appropriate physical activity." The guidelines recommend exercise programs for people in many different stages of their lifecycle and for pregnant women and adults and children who have disabilities. The HHS reports that there is strong evidence that increased physical activity decreases the risk of early death, heart disease, stroke, Type 2 diabetes, high blood pressure, and certain cancers; prevents weight gain and falls; and improves cognitive function in the elderly. Also unveiled recently are the *Canadian Physical Activity Guidelines*, which are available at the website of The Canadian Society for Exercise Physiology.

Interactive 10.8.3.1.5.4: Physical Activity Guidelines

Go to the HHS website to access the entire *2008 Physical Activity Guidelines for Americans* (https://health.gov/paguidelines/guidelines).

Recreational Drug Use

Recreational drug use, which includes tobacco-smoking and alcohol consumption along with narcotic and other illegal drug use, has a large impact on health. Smoking cigarettes causes lung cancer, eleven other types of cancer, heart disease, and several other disorders or diseases that markedly decrease quality of life and increase mortality. In the United States, smoking causes more than four hundred thousand deaths every single year, which is far more than deaths associated with any other lifestyle component. Centers for Disease Control and Prevention. "Smoking and Tobacco Use." Last updated March 21, 2011. Also, according to the CDC, excessive alcohol intake causes an estimated seventy-five thousand deaths per year. Centers for Disease Control and Prevention. "Alcohol and Drug Use." Last updated June 7, 2012. http://www.cdc.gov/healthyyouth/alcoholdrug/ Staying away

from excessive alcohol intake lowers blood pressure, the risk from injury, heart disease, stroke, liver problems, and some types of cancer. Abstaining from alcohol also aids in weight loss and increases the money in your wallet. While heavy drinking of alcoholic beverages is associated with several bad health effects, consuming alcohol in moderation has been found to promote health such as reducing the risk for heart disease and Type 2 diabetes in some people. The HHS defines drinking in moderation as no more than one drink a day for women and two drinks a day for men.

Illicit and prescription drug abuse are associated with decreased health and is a prominent problem in the United States. The health effects of drug abuse can be far-reaching including increased risk for stroke, heart disease, cancer, lung disease, and liver disease.

Sleeping Patterns

Inadequate amounts of sleep, or not sleeping well, can also have remarkable effects on a person's health. In fact, sleeping can affect your health just as much as diet or exercise. At least 10 percent of Americans have chronic insomnia (National Sleep Foundation. "Can't Sleep? What to Know about Insomnia." Accessed February 12, 2012.) Scientific studies have shown that insufficient sleep increases the risk for heart disease, Type 2 diabetes, obesity, and depression. Abnormal breathing during sleep, a condition called sleep apnea, is also linked to an increased risk for chronic disease.

Interactive 10.8.3.1.5.5

Go to the HHS website and discover the many tools at your fingertips to live a healthier lifestyle. (www.healthfinder.gov/prevention/)

Nutrition, Genetics, Environment, and Lifestyle Interact to Affect Health

The Pima Indians who inhabit parts of southern Arizona and the Pima Indians that live across the border in Mexico are genetically and culturally similar, but there are vast differences in the health of these two populations. In America, the Pima Indians have the highest rate of obesity and Type 2 diabetes compared to any other ethnic group. However, the Pima Indians who live in Mexico do not share these same health problems because of a complex interplay between nutrition, genetics, environment, and lifestyle. Over one hundred years ago, the Pima Indians were farmers, hunters, and gatherers and their diets consisted of about 70 percent carbohydrate, 15 percent protein, and 10 to 15 percent fat. Typical of the lives of farmers, hunters, and gatherers a century ago, they lived through times of feast and times of famine. The geneticist James Neel proposed in 1962 that the Pima Indians carried a "thrifty gene" that makes them very efficient at storing fat during times of plenty so they do not starve when food is scarce.

After World War II, the Pima Indians in America either went back to reservations in southern Arizona or moved to the cities for work. They rapidly adopted the American diet and lifestyle and consumed high-fat, processed foods and refined grains and were more sedentary than their counterparts in Mexico, who retained their more traditional diet and lifestyle. Today, the typical American Pima Indian diet obtains more than 40 percent of calories from fat. The "thrifty gene" in the American Pima Indian population increased their susceptibility to the consequences of the high-fat American diet and sedentary lifestyle because they were genetically better at storing fat than others. The story of the Pima Indians and the difference between the health of their populations in America and Mexico demonstrates the interactions between nutrition, genetics, environment, and lifestyle. Indeed, preliminary studies suggest that when American Pima Indians switch back to the diets of their ancestors and consume beans, corn, grains, and greens and other low-fat, high-fiber plant foods, the benefits are weight loss and reduced risk of chronic disease. The health status of American Pima Indians is considered "a canary in the coal mine, " meaning they provide a warning to the American people.

Although the health consequences of the American diet and lifestyle in Pima Indians appeared rapidly in their population, all Americans that partake in the current trends of American diet and lifestyle are at risk. On the lighter side (literally!), the new studies that show changing back to more traditional diets markedly improved the health of the American Pima Indians suggest that all Americans can reduce their risk for diet-related diseases even when their genetic susceptibility for these diseases is high.

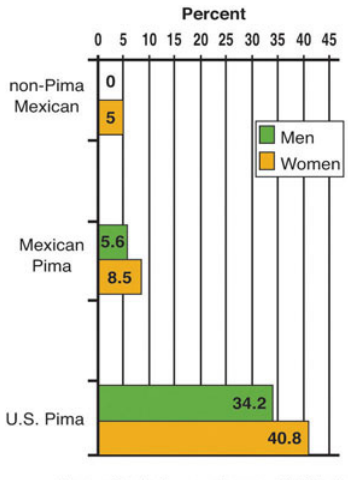


Figure 10.8.3.1.5.2: The Interplay of Nutrition, Genetics, Environment, and Lifestyle Affects Health. Pima Indians living in America are genetically similar to those who live in Mexico, but differences in their nutrition, environment, and lifestyle changes their health. Source: paleobioticslab.com/general-i...he-rest-of-us/.

Tools for Change

Heed the warning of the Pima Indians and seek out ways to establish a more traditional dietary pattern. The American diet in the nineteenth century consisted of less meat, less processed food, and more home-grown fruits, vegetables, and whole grains. Think of ways to include these types of foods in your diet or partake in some of the traditional foods of a particular ethnic group in your community. Visit the following websites to find out the unique foods of some traditional diets.

- Traditional Mediterranean diet: www.oldwayspt.org/mediterraneandiet
- Native Tech: http://www.nativetech.org/recipes/index.php
- Traditional foods, with recipes, by country: http://www.foodbycountry.com/index.html

Personal Choice: The Challenge of Choosing Foods

From visiting websites about traditional foods of different cultures and ethnic groups, you may have noticed that a few more things besides environment and lifestyle that influence the foods you choose to eat. Different foods affect energy level, mood, how much is eaten, how long before you eat again, and if cravings are satisfied. We have talked about some of the physical effects of food on your body, but there are other effects too. Food regulates your appetite and how you feel. Multiple studies have demonstrated that some high-fiber foods and high-protein foods decrease appetite by slowing the digestive process and prolonging the feeling of being full. The effects of individual foods and nutrients on mood are not backed by consistent scientific evidence, but in general most studies support that healthier diets are associated with a decrease in depression and improved well-being. To date, science has not been able to track the exact path in the brain that occurs in response to eating a particular food, but it is quite clear that foods, in general, stimulate emotional responses in people.

Food also has psychological, cultural, and religious significance, so your personal choices of food affect your body, mind, and soul. The social implications of food have a great deal to do with what people eat, as well as how and when. Special events in individual lives—from birthdays to funerals—are commemorated with equally special foods. Being aware of these forces can help people make healthier food choices—and still honor the traditions and ties they hold dear. Typically, eating kosher food means a person is Jewish; eating fish on Fridays during Lent means a person is Catholic; fasting during the ninth month of the Islamic calendar means a person is Muslim. On New Year's Day, people from New England like to combine pork and sauerkraut as a way to eat their way to luck. Several hundred miles away in the southern United States, people eat Hoppin' John, a favorite local dish made with black-eyed peas and pork, while fish is the "lucky" food of choice for Japanese Americans. National food traditions are carried to other countries when people immigrate. American cuisine would not be what it is today without the contributions of Italian, Chinese, Mexican, and other immigrants.

Factors that Drive Food Choices

Along with these influences, a number of other factors affect the dietary choices individuals make, including:

- **Taste, texture, and appearance.** Individuals have a wide range of tastes which influence their food choices, leading some to dislike milk and others to hate raw vegetables. Some foods that are very healthy, such as tofu, may be unappealing at first to many people. However, creative cooks can adapt healthy foods to meet most peoples' taste.
- **Economics.** Access to fresh fruits and vegetables may be scant, particularly for those who live in economically disadvantaged or remote areas, where cheaper food options are limited to convenience stores and fast food.
- **Early food experiences.** People who were not exposed to different foods as children, or who were forced to swallow every last bite of overcooked vegetables, may make limited food choices as adults.
- **Habits.** It's common to establish eating routines, which can work both for and against optimal health. Habitually grabbing a fast food sandwich for breakfast can seem convenient, but might not offer substantial nutrition. Yet getting in the habit of drinking an ample amount of water each day can yield multiple benefits.
- **Culture.** The culture in which one grows up affects how one sees food in daily life and on special occasions.
- **Geography.** Where a person lives influences food choices. For instance, people who live in Midwestern US states have less access to seafood than those living along the coasts.
- **Advertising.** The media greatly influences food choice by persuading consumers to eat certain foods.
- **Social factors.** Any school lunchroom observer can testify to the impact of peer pressure on eating habits, and this influence lasts through adulthood. People make food choices based on how they see others and want others to see them. For example, individuals can purchase cheap and fast pizzas or opt for high-end versions at fancy restaurants.
- **Health concerns.** Some people have significant food allergies, to lactose or peanuts for example, and need to avoid those foods. Others may have developed health issues, which require them to follow a low-salt diet. In addition, people who have never worried about their weight have a very different approach to eating than those who have long struggled with excess pounds.
- **Emotions.** There is a wide range in how emotional issues affect eating habits. When faced with a great deal of stress, some people tend to overeat, while others find it hard to eat at all.
- **Green food/Sustainability choices.** Based on a growing understanding of diet as a public and personal issue, more and more people are starting to make food choices based on their environmental impact. Realizing that their food choices help shape the world, many individuals are opting for a vegetarian diet, or, if they do eat animal products, striving to find the most "cruelty-free" options possible. Purchasing local and organic food products and items grown through sustainable products also helps shrink the size of one's dietary footprint.

Takeaways

In this section, you discovered that there are many determinants that affect your health status. You can change some of them and others you cannot. All the determinants of health interact together in influencing your health.

- The expression of genes determines all of your traits including your risk for certain diseases. Nutrients can change the way genes are turned "on" and "off," consequently affecting health.
- Certain stages of life require changes in nutrition to maintain bodily functions, such as growing.
- The traits that a person has are largely a product of their genes and environment. One aspect of a person's environment is socioeconomic status, which is dependent on income, occupation, and education. Socioeconomic status is one of the best environmental predictors of a population's health.
- Besides dietary habits, other components of lifestyle which affect health are physical activity level, recreational drug use, and sleeping patterns.
- Nutrition, genetics, environment, and lifestyle interplay on health.
- Cultural and religious tradition, along with social values can affect food choices. The foods you choose to eat affect your appetite and feelings. Numerous factors other than nutrition drive food choices.

Discussion Starters

1. What types of diseases and/or conditions are present in your family?
2. Discuss the different cultures and religions that are represented by the people in your classroom and learn the different foods that they choose to eat.

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10.8.3.1.6: Assessing Personal Health

Learning Objectives

- Discuss ways of assessing your personal health status and your diet.
- Set a goal to adopt, maintain, or improve a nutrition-related practice.
- Formulate an effective, long-term, personal health and nutrition plan.

You may remember that when you were younger your mother or grandmother made you swallow that teaspoonful of cod liver oil because she said it was good for you. You don't have to have a PhD to know some of the basic ways you can adapt your life to be healthier. However, the mainstream media inundates the American population with health cures and tips, making it confusing to develop the best plan for your health. This section will equip you with tools to assess and improve your health. To find some other reliable sources on health see video below.

Exercise 10.8.3.1.6.1: Quackwatch!

With all of the false Nutrition information out there, we need to be able to figure out which websites are reliable and which ones are simply quackery (false nutrition information)! Here is a website which will help you figure out who is trying their best to give you good information on nutrition and health and who is lying!

https://quackwatch.org/04ConsumerEdu...nonrecorg.html

Personal Health Assessment

One of the easiest places to begin a personal health assessment is by examining the results from your last physical. Often a person will leave the doctor's office without these results. Remember that the results belong to you and having this information on hand provides you with much of what you need to keep track of your health. During a physical, after obtaining weight and height measurements, a nurse will typically examine blood pressure. Blood pressure is a measurement of the forces in the arteries that occur during each heart beat. It is a principle vital sign and an indicator of cardiovascular health. A desirable blood pressure is 120 over 80 mmHg. In most circumstances a physical includes blood tests, which measure many health indicators, and you have to request the results. Once you have the results in hand, it is good practice to file them in a binder so you can compare them from year to year. This way you can track your blood-cholesterol levels and other blood-lipid levels and blood-glucose levels. These are some of the more general measurements taken, but in many instances blood tests also examine liver and kidney function, vitamin and mineral levels, hormone levels, and disease markers. Your doctor uses all of these numbers to assess your health and you can use them to play a more active role in keeping track of your health.



Figure **10.8.3.1.6.1**: Don't forget to get the results of your physical the next time you visit your doctor. They will help you keep track of your health. (National Cancer Institute, an agency part of the National Institutes of Health; Linda Bartlett (Photographer)).

Hearing and vision are additionally part of a general health assessment. If you wear glasses, contacts, or a hearing aid you already are aware of how important it is to know the results of these exams. If you have not experienced vision or hearing problems yet your likelihood of experiencing them markedly increases over the age of forty. Another component of overall health is oral health.

The health of your teeth, gums, and everything else in your mouth are an integral component of your overall health. This becomes apparent when a person experiences a tooth infection, which if left untreated significantly impairs physical, mental, and social well-being.

Other indicators of health that you can measure yourself are body mass index (BMI) and fitness. BMI is simply a ratio of an individual's weight and height. More specifically BMI is calculated using an individual's body weight (in kilograms, or kg) divided by the square of their height (in meters) and the unit of measurement is kg/m^2. You can calculate this yourself or use one of the many BMI calculators on the web (see Interactive). BMI is a standardized measurement that indicates if a person is underweight, of normal weight, overweight, or obese and is based on data from the average population. It has some limitations. One limitation is that it does not take into account how much of your weight is made up of muscle mass, which weighs more than fat tissue. BMI and other measurements of body composition and fitness are more fully discussed elsewhere.

Interactive

One of the better websites for assessing your health is available at the Institute for Good Medicine from the Pennsylvania Medical Society. Note: to convert your weight in pounds into kilograms simply divide by divide your weight in pounds by 2.2. For example: 160 pounds divided by 2.2 = 72.7 kilograms.

www.myfamilywellness.org/Main...rHealthToolkit

This personal health assessment has focused primarily on physical health, but remember that mental and social well-being also affect health. During a physical, a doctor will ask how you are feeling, if you are depressed, and if you are experiencing behavioral problems. Be prepared to answer these questions truthfully, so that your doctor can develop a proper treatment plan to manage these aspects of health. Interactive 1.8 provides some tools to assess your mental and social well-being.

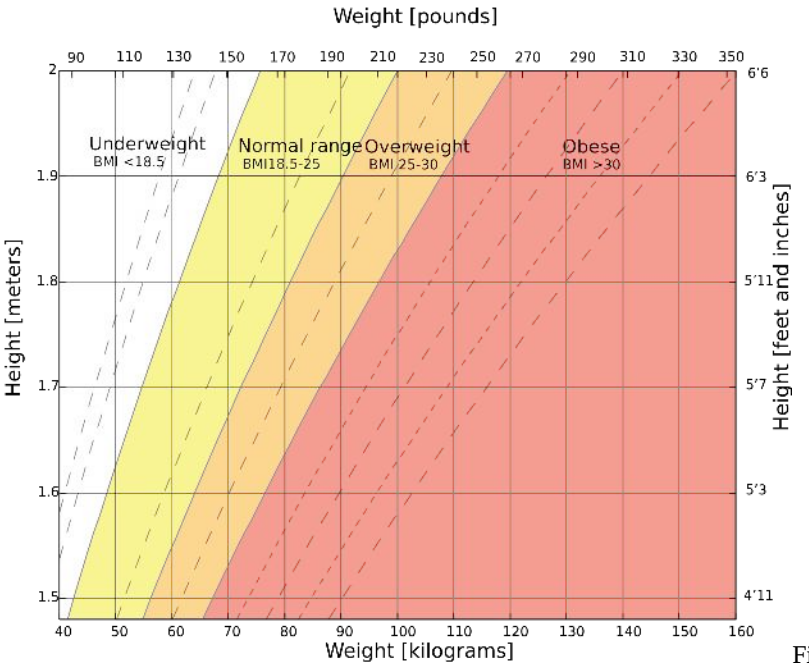


Figure **10.8.3.1.6.2**: A graph of body mass index is shown above. By lining up weight and height you can find out in which range an adult person falls. Left of normal range means too thin, to the right of normal means too fat. Dashed lines give a rough idea of how much too thin or how much too fat a person is. (Public Domain).

Taking charge of your health will pay off and equip you with the knowledge to better take advantage of your doctor's advice during your next physical. Health calculators, such as those that calculate BMI, ideal weight, target heart rate among many others, and personal health assessments will help you to take charge of your health, but they should not take the place of visiting your doctor.

Dietary Assessment

The first step in assessing your diet is to find out if the foods you eat are good for your health and provide you with all the nutrients you need. Begin by recording in a journal what you eat every day, including snacks and beverages. Then visit the USDA website, www.choosemyplate.gov/myplate/index.aspx, which has various tools to help you assess your diet. You can track calories over time, diet quality, and find many other tools to evaluate your daily food consumption. The questions these tools can help answer include: How much food do you have to eat to match your level of activity? How many calories should you eat? What are the best types of food to get the most nutrients? What nutrients are contained in different foods? How do you plan a menu that contains all the nutrients you need? Make the first step and assess your diet. This book will provide you with interactive resources, videos, and audio files to empower you to create a diet that improves your health.

Family Medical History

Because genetics play a large role in defining your health it is a good idea to take the time to learn some of the diseases and conditions that may affect you. To do this, you need to record your family's medical history. Start by simply drawing a chart that details your immediate family and relatives. Many families have this and you may have a good start already. The next time you attend a family event start filling in the blanks. What did people die from? What country did Grandpa come from? While this may be a more interesting project historically, it can also provide you with a practical tool to determine what diseases you might be more susceptible to. This will allow you to make better dietary and lifestyle changes early on to help prevent a disease from being handed down from your family to you. It is good to compile your information from multiple relatives.

Lifestyle Assessment

A lifestyle assessment includes evaluating your personal habits, level of fitness, emotional health, sleep patterns, and work-life balance. Many diseases are preventable by simply staying away from certain lifestyles. Don't smoke, don't drink excessively, and don't do recreational drugs. Instead, make sure you exercise. Find out how much to exercise by reading the *2008 Physical Activity Guidelines for Americans*. There is a wealth of scientific evidence that increased physical activity promotes health, prevents disease, and is a mood enhancer. Emotional health is often hard to talk about; however a person's quality of life is highly affected by emotional stability. Harvard's Women's Health Watch notes six reasons to get enough sleep: Sleep promotes healthy brain function, while lack of sleep can cause weight gain and increase appetite, decrease safety (falling asleep while driving), make a person moody and irritable, decrease health of the cardiovascular system and prevent the immune system from functioning well.Harvard Health Publications. "Importance of Sleep: Six Reasons Not to Scrimp on Sleep." *Harvard's Women's Health Watch* (January 2006). © 2000–2012 Harvard University. http://www.health.harvard.edu/press_releases/importance_of_sleep_and _health Finding balance between work and life is a difficult and continuous process involving keeping track of your time, taking advantage of job flexibility options, saying no, and finding support when you need it. Work-life balance can influence what you eat too.

Key Takeaways

This section equips you with some tools to assess your lifestyle and make changes towards a healthier one.

- **Step 1.** Take charge of tracking your personal health.
- **Step 2.** Assess your diet and identify where it can be changed to promote health and prevent disease.
- **Step 3.** Start finding out the medical history of your family and identify the diseases you may be more susceptible to getting.
- **Step 4.** Assess your lifestyle by evaluating your personal habits, emotional health, sleep patterns, and work-life balance.
- **Step 5.** Start living a healthier life.

Discussion Starters

1. What websites in Interactive 1.8 did you find to be the most helpful in the assessment of your health?
2. Share your comments on these tools with your classmates and get their opinions, too.

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10.8.3.1.7: A Fresh Perspective- Sustainable Food Systems

Learning Objective

- Discuss some approaches to building a sustainable food system in your community.

The science of nutrition includes the study of how organisms obtain food from their environment. An ecosystem is defined as the biological and physical environments and their interactions with the community of organisms that inhabit those environments as well as the interactions among the organisms. Human nutrition and the health of the world's ecosystem are interdependent, meaning that what we eat and where we get it from affects the world. In turn the health of the earth influences our health. The term sustainability is used to indicate the variety of approaches aimed at improving our way of life. Sustainability promotes the development of conditions under which people and nature can interact harmoniously. It is based upon the principle that everything needed for human survival depends upon the natural environment.

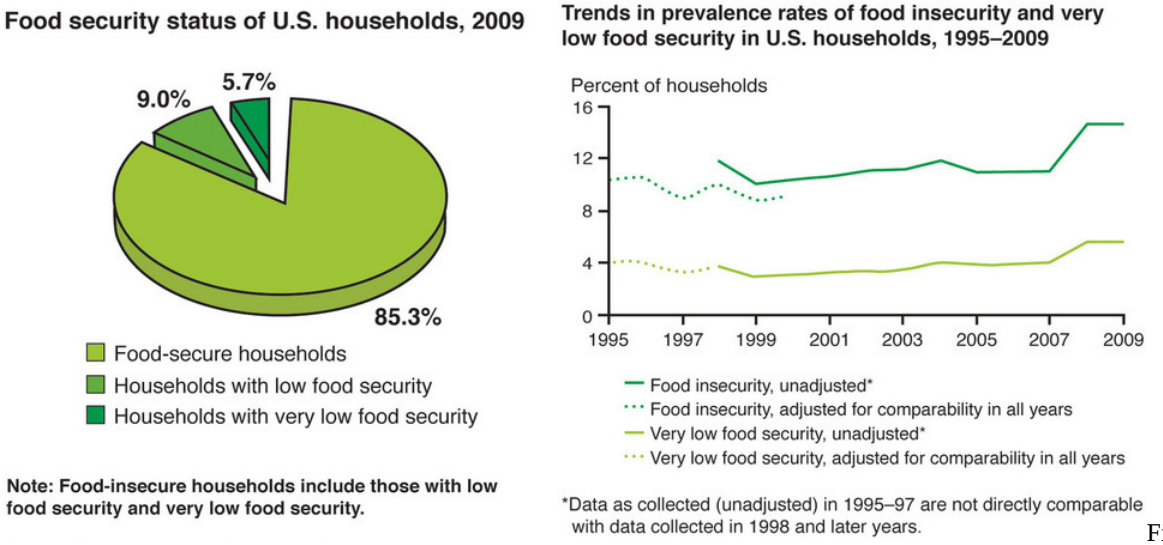


Figure 10.8.3.1.7.1: Food Security Status in the United States. Building a sustainable food system will help enforce measures to ensure that everyone on the planet has enough food to eat. Source: Calculated by ERS using data from the December 2009 Current Population Survey Food Security Supplement.

A major theme of sustainability is to ensure that the resources needed for human and environmental health will continue to exist. A healthy ecosystem, one that is maintained over time, is harmonious and allows for social and economic fulfillment for present and future generations. Nutritious foods come from our ecosystem and to ensure its availability for generations to come, it must be produced and distributed in a sustainable way. The American Public Health Association (APHA) defines a sustainable food system as "one that provides healthy food to meet current food needs while maintaining healthy ecosystems that can also provide food for generations to come with minimal negative impact to the environment."American Public Health Association. "Towards a Healthy, Sustainable Food System." *Policy Statement Database*. Policy no. 200712 (November 6, 2007). www.apha.org/advocacy/policy/...lt.htm?id=1361 It also states that the attributes of a sustainable food system are:

- availability
- accessibility
- affordability to all
- humane
- just

A sustainable food system does not just include the food and those who consume the food, but also those that produce the food, like farmers and fishermen, and those who process, package, distribute, and regulate food. Unfortunately, we have a long way to go to build a sustainable food system.

The Challenges

The most prominent challenge to building a sustainable food system is to make food available and accessible to all. The Food and Agricultural Organization of the United Nations (FAO) states the right to food is a fundamental human right and its mission is to assist in building a food-secure world. Food security in America is defined as the "access by all people at all times to enough food for an active, healthy life."US Department of Agriculture, Economic Research Service. "Food Security in the United States: Key Statistics and Graphics." Last updated June 4, 2012. www.ers.usda.gov/Briefing/Foo...tm#food_secure As of 2009, 14.9 percent of households, or 17.4 million people in the United States, had very low or low food security and these numbers have risen in recent years (Figure **10.8.3.1.7.2**).Food and Agricultural Organization of the United Nations. "Food Security: Concepts and Measurement." In *Corporate Document Repository*, ID: 144369. 2003. www.fao.org/docrep/005/y4671e/y4671e06.htm

Food security is defined by the FAO as existing "when all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food which meets their dietary needs and food preferences for an active and healthy life."Food and Agriculture Organization of the United Nations. "How Does International Price Volatility Affect Domestic Economies and Food Security? In *The State of Food Insecurity in the World*. 2011. www.fao.org/publications/sofi/en/ The FAO estimates that 925 million worldwide were undernourished in 2010. Although there was a recent decline in overall food insecurity (attributable mostly to a decline in undernourished people in Asia), the number of undernourished people world-wide is still higher than it was in 1970, despite many national and international goals to reduce it.

Another challenge to building a sustainable food system is to supply high-quality nutritious food. The typical American diet does not adhere to dietary guidelines and recommendations, is unhealthy, and thus costs this country billions of dollars in healthcare. The average American diet contains too many processed foods with added sugars and saturated fats and not enough fruits, vegetables, and whole grains. Moreover, the average American takes in more kilocalories each day than ever before. This shift of the population toward unhealthy, high-calorie diets has fueled the obesity and diet-related disease crisis in this nation. Overall the cost of food for the average American household has declined since the 1970s; however, there has been a growth of "food deserts." A food desert is a location that does not provide access to affordable, high-quality, nutritious food. One of the best examples of a "food desert" is in Detroit, Michigan. The lower socioeconomic status of the people who live in this city does not foster the building of grocery stores in the community. Therefore, the most accessible foods are the cheap, high-caloric ones sold in convenience stores. As a result, people who live in Detroit have some of the highest incidences of obesity, Type 2 diabetes, and cardiovascular disease in the country.

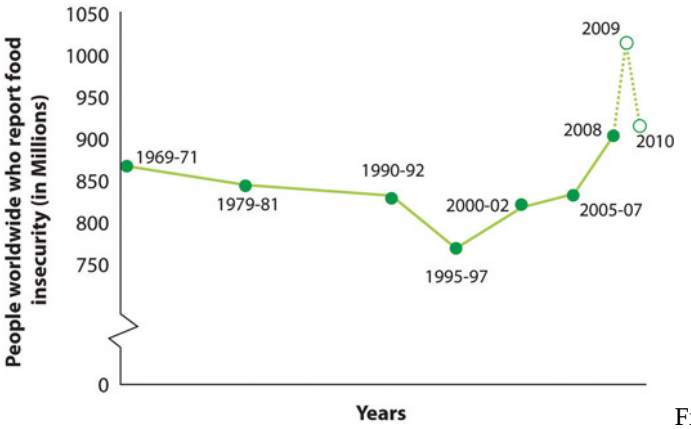


Figure **10.8.3.1.7.2**: Food Insecurity: A Global Perspective.
Source: Calculated by ERS based on Current Population Survey Food Security Supplement data.

A fourth challenge to building a sustainable food system is to change how we produce, process, and distribute food. Large agribusiness, complex industrial processing, and massive retail conglomerations distort the connection we have between the food on our plate and where it came from. More food is being produced in this nation than ever before, which might sound good at first. However, some factors that have contributed to higher food production include using genetically engineered plants, excessive use of herbicides and pesticides, and the selective promotion of only a few crops by the policy of crop-specific subsidies (money given to farmers by the federal government). The subsidies are given toward the support of only about eight crops, most notably corn and soybeans. This policy diminishes the variety of crops, decreases biodiversity among crops, and supports large agribusiness while disadvantaging small- and medium-sized farms. Additionally, the whole system of food production, processing, and distribution is

lengthy, requiring a great deal of energy and fossil fuels, and promotes excessive use of chemicals to preserve foods during transportation and distribution. In fact, the current US food system uses approximately 22 percent of the energy in this country and is responsible for at least 20 percent of greenhouse gas emissions. Canning, P. et al. “Energy Use in the US Food System.” US Department of Agriculture, *Economic Research Report, no. ERR-94* (March 2010).

Solutions to the Challenges

While these challenges are daunting there are many potential solutions that are gaining momentum in the United States. The APHA advocates expanding the infrastructure for locally grown food, improving access to healthy and local food for low-income Americans, providing education on food origin and production, building up the livelihoods of local farmers, and using sustainable farming methods. Detroit is currently a “food desert,” but there is a fantastic example of how to positively impact the growth of a sustainable food system within the city. It is called the Eastern Market and it is a six-block inner city market with over 250 vendors marketing local produce, meat, seafood, plants, fresh-cut flowers and much, much more. Unlike many urban farmers’ markets it sells foods that are of better quality and lower prices than grocery stores. Its forty-thousand visitors every Saturday demonstrate its success as a community-based way to foster good nutrition, good health, and social interaction.

Tools for Change

Ten Steps You Can Take to Help Build a Sustainable Food System in Your Community

1. Eat a “low-carbon diet.” This is one where the foods that you eat require less energy and fuel to produce, process, and distribute than other foods.
2. Join a community-based farmers’ market.
3. Have a garden at home and join a network of home gardeners. Find out how by visiting the USDA website on gardening: https://www.nal.usda.gov/topics/home-gardening and the National Garden Association: http://www.garden.org/.
4. Compost your food and garden waste. Learn some of the essentials of composting by visiting “Composting at home,” a fact sheet provided by Ohio State University (http://ohioline.osu.edu/hyg-fact/1000/1189.html).
5. Buy local food—make at least 10 percent of your food purchases local and share what you know about local food with friends and family.
6. Pool your resources with family and friends to purchase locally.
7. Drink tap water instead of bottled water.
8. When purchasing foods, choose the ones with less packaging.
9. Support state initiatives that support local farmers and build infrastructure to sell more healthy food.
10. When dining out, ask what nutrients are in the food and where the food labels are on the menu (to encourage the restaurants to label). Also, visit the restaurant’s website as the information may be posted there with a space for comments.

These are some great steps to build a more sustainable food system for you and your family, friends, neighborhood, community, city, state, nation, and world. For more solutions, watch Video**10.8.3.1.7.1**.

Throughout this book we will highlight multiple steps you can take toward building a sustainable food system in the Tools for Change sections, so stay tuned.



Figure 10.8.3.1.7.3: You can do your part in building a sustainable environment by literally starting in your own backyard. © Shutterstock

Video 10.8.3.1.7.1: Sustainable Food Systems

This link brings you to an educational video on sustainable food systems.



ENG reporting on how and where students can learn about sustainable agriculture, sustainable food systems, and education in sustainability.

Key Takeaways

- Sustainability promotes the development of conditions under which people and nature can interact harmoniously. It is based upon the principle that everything needed for human survival depends upon the natural environment. A sustainable food system includes not only the food and those who consume the food, but also those who produce food (such as farmers and fishermen), and process, package, distribute, and regulate food.
- The challenges to building a sustainable food system are many, from providing affordable and accessible food, to supplying nutritious, high-quality, low-cost food regardless of socioeconomic status, to changing the ways foods are produced, processed, and distributed.
- There are many solutions to the challenges of building a sustainable flood system. Some of the solutions are to: expand the infrastructure for locally grown food, improve access to healthy and local food for low-income Americans, provide education on food origin and production, build up the livelihoods of local farmers, and use sustainable farming methods.
- You can take action individually and locally to help build a sustainable food system.

Discussion Starters

1. Share with each other in the classroom some of the things you might have already done to help build a sustainable food system in your community.

2. Form debate teams in the classroom and have a formal debate on the topic of the regulation of food. One side must present the reasons it is beneficial for the government to regulate food. The other side will argue the reasons it is better for people to grow their food locally.

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10.8.3.1.E: Nutrition and You (Exercises)

Study Questions:

1. What does Essential mean?

2. What are the 6 classes of essential nutrients? Put a star by the MOST essential nutrient.

3. How many of the 6 classes of essential nutrients are present in the food you eat?

4. Which of the nutrients give you Calories?

5. If you ate a food that contained: 10 grams of Carbohydrate, 10 grams of Fat and 10 grams of Protein, how many Calories would that food contain (approximately)? *Hint: Use 4 Calories per gram of Carbohydrate, 9 Calories per gram of Fat and 4 Calories per gram of Protein*

6. Is Alcohol a nutrient? Does Alcohol give you Calories?

7. When it comes to nutrients, is it “the more the better”? Why or Why not?

8. Are there “good foods” and “bad foods”? Why or Why not?

9. What are “phytochemicals”?

10. What is meant by the term "serving size"? *For example, a "serving size" of potato chips is 1 ounce or about 15 chips.*

11. What is your opinion of the role of the federal government in promoting health and preventing disease in Americans?

Expand Your Knowledge

1. Conduct an assessment of your diet. Begin by recording what you eat every day, including snacks and beverages, in a journal. Then visit the website, myfitnesspal.com which has tools to help you assess your diet and exercise. Calculate how many Calories you are eating in a day compared to how many are suggested for you per day.
2. Conduct an informal survey of five of your friends and family members. Create a questionnaire with ten to fifteen questions pertaining to their perception of food, their favorite food shows, what restaurants they frequent, what they purchase from the grocery store each week, etc. Ask questions about their general eating habits and record the answers. Next, get a camera and take pictures of the insides of their refrigerators. What have you learned about their eating habits? What advice would you give them? Review all the material and put it together in a report. Be prepared to share your findings.
3. Define eight steps your community can take to build a more sustainable food system. Visit the websites of Toronto’s and California’s plans to help provide you with some good ideas to accomplish the challenge. Toronto’s plan for a sustainable food system: wx.toronto.ca/inter/health/fo...s%20report.pdf

   California’s plan for a sustainable food system: www.vividpicture.net/

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SECTION OVERVIEW

10.8.3.2: Achieving a Healthy Diet

In this chapter, we explore the tools you can use to achieve a healthy diet, as well as important nutrition concepts like balance and moderation.

10.8.3.2.1: Chapter Introduction

10.8.3.2.2: A Healthy Philosophy toward Food

10.8.3.2.3: What Is Nutritional Balance and Moderation?

10.8.3.2.4: Understanding the Bigger Picture of Dietary Guidelines

10.8.3.2.5: National Goals for Nutrition and Health- Healthy People 2020

10.8.3.2.6: Recommendations for Optimal Health

10.8.3.2.7: Understanding Dietary Reference Intakes (DRI)

10.8.3.2.8: Discovering Nutrition Facts

10.8.3.2.9: When Enough is Enough

10.8.3.2.10: Nutrition and the Media

10.8.3.2.E: Exercises

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10.8.3.2.1: Chapter Introduction

The dietary toolkit contains numerous ideas to help you achieve a healthy diet.

Let's talk about a toolkit for a healthy diet. The first thing in it would be the Recommended Daily Allowances (RDAs). Then we could add the Dietary Reference Intakes (DRIs), the Estimated Average Requirements (EARs), and the Tolerable Upper Limits (ULs). All of these tools are values for important nutrients, calculated to meet the health needs of different age groups. But long before the dietary toolkit full of acronyms such as DRI, RDA, EAR, and UL, daily standards were created with the single goal of keeping workers alive and toiling in the factories and workhouses of the early Industrial Revolution. In the late nineteenth century powerhouse tycoons operated without fear of legal consequences and paid their workers as little as possible in order to maximize their own profits. Workers could barely afford housing, and depended on what their bosses fed them at the workhouses to fend off starvation.



Figure 10.8.3.2.1.1: Without programs like food stamps, workers and military personnel often had to accept whatever meager rations were given to them by their employers. People eating at a soup kitchen. Montreal, Canada. Public domain image.

Living conditions in those days show that the term "starvation wages" was not just a figure of speech. Here's a typical day's menu:

- **Breakfast.** 1 pint porridge, one 6-ounce piece of bread.
- **Lunch.** Beef broth one day, boiled pork and potatoes the next.
- **Dinner.** 1 pint porridge, one 6-ounce piece of bread.

As public awareness about these working conditions grew, so did public indignation. Experts were eventually called in to create the first dietary guidelines, which were designed only to provide a typical individual with what they needed to survive each day, and no more. It wasn't until World War I that the British Royal Society first made recommendations about the nutrients people needed to be healthy, as opposed to merely surviving. They included ideas we now take for granted, such as making fruit and vegetables part of the diet and giving milk to children. Since then, most governments have established their own dietary standards. Food is a precious commodity, like energy, and controlling the way it is distributed confers power. Sometimes this power is used to influence other countries, as when the United States withholds food aid from countries with regimes of which it disapproves. Governments can also use their power over food to support their most fragile citizens with food relief programs, such as the Supplemental Nutrition Assistance Program (SNAP) and the Women, Infants, and Children Supplemental Food Program (WIC).

The US government has also established dietary standards to help citizens follow a healthy diet. The first of these were the Recommended Daily Allowances (RDAs), published in 1943 because of the widespread food shortages caused by World War II. During the war, the government rationed sugar, butter, milk, cheese, eggs, coffee, and canned goods. Limited transportation made it hard to distribute fruits and vegetables. To solve this problem, the government encouraged citizens to plant "victory gardens" to produce their own fruits and vegetables. More than twenty million people began planting gardens in backyards, empty lots, and on rooftops. Neighbors pooled their resources and formed cooperatives, planting in the name of patriotism.



Figure 10.8.3.2.1.2: A key part of the former First Lady Michelle Obama's healthy eating campaign is the new My Food Plate. Official portrait of First Lady Michelle Obama in the Green Room of the White House. Unfortunately from a nutrition perspective, regulations put in place to advance nutrition in school children's diets have been rolled back by the subsequent administration.

Today in the United States, there are various measures used to maintain access to nutritious, safe, and sufficient food to the citizenry. Many of these dietary guidelines are provided by the government, and are found at the Food and Drug Administration's (FDA) new website, ChooseMyPlate.gov. We call this collection of guidelines the "dietary toolkit."

> How will you use the dietary toolkit?

The government works to provide citizens with information, guidance, and access to healthy foods. How will you decide which information to follow? What are the elements of a healthy diet, and how do you figure out ways to incorporate them into your personal diet plan? The dietary toolkit can be likened to a mechanics toolkit, with every tool designed for a specific task(s). Likewise, there are many tools in the dietary toolkit that can help you build, fix, or maintain your diet for good health. In this chapter you will learn about many of the tools available to you.

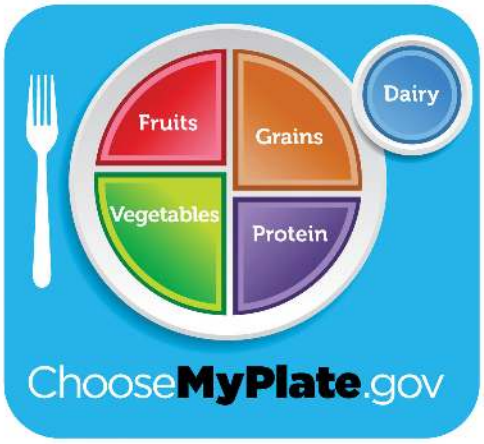


Figure 10.8.3.2.1.3: Today, the US government sets dietary guidelines that provide evidence-based nutrition information designed to improve the health of the population. Source: US Department of Agriculture.

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10.8.3.2.2: A Healthy Philosophy toward Food

Learning Objectives

- Explain why nutrition is important to health.

"Tell me what you eat, and I will tell you what you are" wrote the French lawyer and politician, Antheime Brillat-Savarin in his book, *Physiologie du Gout, ou Meditations de Gastronomie Transcendante*, in 1826. Almost one hundred years later, nutritionist Victor Lindlahr wrote in an ad in 1923, "Ninety percent of the diseases known to man are caused by cheap foodstuffs. You are what you eat." Today, we know this phrase simply as, "You are what you eat."



Figure **10.8.3.2.2.1**: Nutrition provides the body with the nutrients it needs to perform all activities, from taking a breath to strenuous athletic activity. © Dreamstime

Good nutrition equates to receiving enough (but not too much) of the macronutrients (proteins, carbohydrates, fats, and water) and micronutrients (vitamins and minerals) so that the body can stay healthy, grow properly, and work effectively. The phrase "you are what you eat" refers to the fact that your body will respond to the food it receives, either good or bad. Processed, sugary, high-fat, and excessively salted foods leave the body tired and unable to perform effectively. By contrast, eating fresh, natural whole foods fuels the body by providing what it needs to produce energy, promote metabolic activity, prevent micronutrient deficiencies, ward off chronic disease, and to promote a sense of overall health and well-being.

Table **10.8.3.2.2.1**: Why Nutrition Is Important to Health

Protein	Necessary for tissue formation, cell reparation, and hormone and enzyme production. It is essential for building strong muscles and a healthy immune system.
Carbohydrates	Provide a ready source of energy for the body and provide structural constituents for the formation of cells.
Fat	Provides stored energy for the body, functions as structural components of cells and also as signaling molecules for proper cellular communication. It provides insulation to vital organs and works to maintain body temperature.
Vitamins	Regulate body processes and promote normal body-system functions.
Minerals	Regulate body processes, are necessary for proper cellular function, and comprise body tissue.
Water	Transports essential nutrients to all body parts, transports waste products for disposal, and aids with body temperature maintenance.

Undernutrition, Overnutrition, and Malnutrition

For many, the word “malnutrition” produces an image of a child in a third-world country with a bloated belly, and skinny arms and legs. However, this image alone is not an accurate representation of the state of malnutrition. For example, someone who is 150 pounds overweight can also be malnourished. Malnutrition refers to one not receiving proper nutrition and does not distinguish between the consequences of too many nutrients or the lack of nutrients, both of which impair overall health. Undernutrition is characterized by a lack of nutrients and insufficient energy supply, whereas overnutrition is characterized by excessive nutrient and energy intake. Overnutrition can result in obesity, a growing global health threat. Obesity is defined as a metabolic disorder that leads to an overaccumulation of fat tissue.

Although not as prevalent in America as it is in developing countries, undernutrition is not uncommon and affects many subpopulations, including the elderly, those with certain diseases, and those in poverty. Many people who live with diseases either have no appetite or may not be able to digest food properly. Some medical causes of malnutrition include cancer, inflammatory bowel syndrome, AIDS, Alzheimer’s disease, illnesses or conditions that cause chronic pain, psychiatric illnesses, such as anorexia nervosa, or as a result of side effects from medications. Overnutrition is an epidemic in the United States and is known to be a risk factor for many diseases, including Type 2 diabetes, cardiovascular disease, inflammatory disorders (such as rheumatoid arthritis), and cancer.

Growth and Development

From birth to adulthood, nutrients fuel proper growth and function of all body cells, tissue, and systems. Without proper amounts of nutrients, growth and development are stunted. Some nutrient deficiencies manifest right away, but sometimes the effects of undernutrition aren’t seen until later in life. For example, if children do not consume proper amounts of calcium and vitamin D, peak bone mass will be reduced compared to what it would be had adequate amounts of these nutrients been consumed. When adults enter old age without adequate bone mass, they are more susceptible to osteoporosis, putting them at risk for bone fractures. Therefore, it is vital to build bone strength through proper nutrition during youth because it cannot be done in later life.MedicineNet.com. “Nutrients for the Growing Years.” Last reviewed August 13, 2003. http://www.medicinenet.com/script/main/art.asp?articlekey=10054.

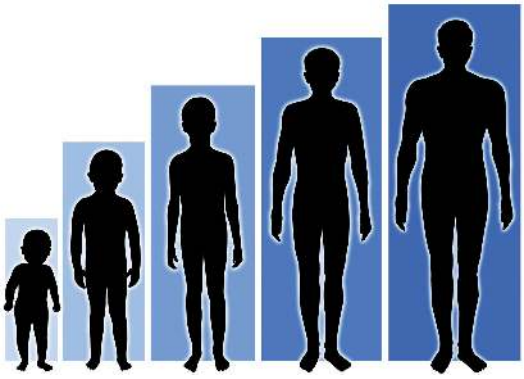


Figure 10.8.3.2.2.2: Proper growth throughout the life stages depends upon proper nutrition. © Dreamstime

The Healing Process

With all wounds, from a paper cut to major surgery, the body must heal itself. Healing is facilitated through proper nutrition,MacKay, D., ND, and A. L. Miller, ND. "Nutritional Support for Wound Healing." *Alternative Medicine Review* 8, no. 4 (2003): 359–77. while malnutrition inhibits and complicates this vital process. The following nutrients are important for proper healing:

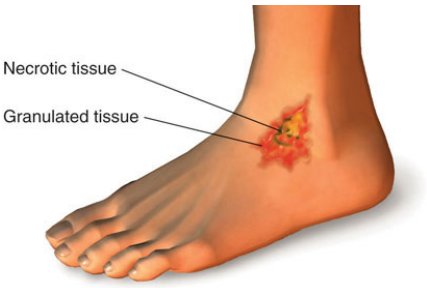


Figure 10.8.3.2.2.3: Healing, a critical function of a healthy body, is facilitated by adequate nutrition.

- **Vitamin A.** Helps to enable the epithelial tissue (the thin outer layer of the body and the lining that protects your organs) and bone cells form.
- **Vitamin C.** Helps form collagen, an important protein in many body tissues.
- **Protein.** Facilitates tissue formation.
- **Fats.** Play a key role in the formation and function of cell membranes.
- **Carbohydrates.** Fuel cellular activity, supplying needed energy to support the inflammatory response that promotes healing.

Now that we have discussed the importance of proper nutrition for your body to perform normal tissue growth, repair, and maintenance, we will discuss ways of achieving a healthy diet.

Key Takeaways

- Nutrition promotes vitality and an overall sense of health and well-being by providing the body with energy and nutrients that fuel growth, healing, and all body systems and functions. Good nutrition will also help to ward off the development of chronic disease.
- A person is malnourished by being either undernourished or overnourished. Malnutrition results when the body does not receive the required amounts of calories, fats, proteins, carbohydrates, vitamins, and minerals necessary to keep the body and its systems in good functioning order.

Discussion Starter

1. Describe what the phrase, "You are what you eat" means. Do you notice how you feel after eating certain types of foods? How might this relate to your overall health?

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10.8.3.2.3: What Is Nutritional Balance and Moderation?

Learning Objectives

- Define the components of a healthful diet.

Achieving a Healthy Diet

Achieving a healthy diet is a matter of balancing the quality and quantity of food that is eaten. There are five key factors that make up a healthful diet:

- A diet must be **adequate**, by providing sufficient amounts of each essential nutrient, as well as fiber and calories.
- A **balanced** diet results when you do not consume one nutrient at the expense of another, but rather get appropriate amounts of all nutrients.
- **Calorie control** is necessary so that the amount of energy you get from the nutrients you consume equals the amount of energy you expend during your day's activities.
- **Moderation** means not eating to the extremes, neither too much nor too little.
- **Variety** refers to consuming different foods from within each of the food groups on a regular basis.

A healthy diet is one that favors whole foods. As an alternative to modern processed foods, a healthy diet focuses on "real" fresh whole foods that have been sustaining people throughout the millenniums. Whole foods supply the needed vitamins, minerals, protein, carbohydrates, fats, and fiber that are essential to good health. Commercially prepared and fast foods are often lacking nutrients and often contain inordinate amounts of sugar, salt, saturated and trans fats, all of which are associated with the development of diseases such as atherosclerosis, heart disease, stroke, cancer, obesity, high cholesterol, diabetes, and other illnesses. A balanced diet is a mix of food from the different food groups (vegetables, legumes, fruits, grains, protein foods, and dairy).

Adequacy

An adequate diet is one that favors nutrient-dense foods. Nutrient-dense foods are defined as foods that contain many essential nutrients per calorie. Nutrient-dense foods are the opposite of "empty-calorie" foods, such as sugary carbonated beverages, which are also called "nutrient-poor." Nutrient-dense foods include fruits and vegetables, lean meats, poultry, fish, low-fat dairy products, and whole grains. Choosing more nutrient-dense foods will facilitate weight loss, while simultaneously providing all necessary nutrients.

Tools for Change

Does your diet contain nutrient-dense foods? Record your eating habits for one week. Note the sugary, fatty, and calorie-heavy foods you most often consume. Look at Table **10.8.3.2.3.1** to decide what you can substitute those foods with.

Table **10.8.3.2.3.1**: The Smart Choice: Nutrient-Dense Food Alternatives

Instead of…	Replace with…
Sweetened fruit yogurt	Plain fat-free yogurt with fresh fruit
Whole milk	Low-fat or fat-free milk
Cheese	Low-fat or reduced-fat cheese
Bacon or sausage	Canadian bacon or lean ham
Sweetened cereals	Minimally sweetened cereals with fresh fruit
Apple or berry pie	Fresh apple or berries
Deep-fried French fries	Oven-baked French fries or sweet potato baked fries
Fried vegetables	Steamed or roasted vegetables
Sugary sweetened soft drinks	Seltzer mixed with 100 percent fruit juice
Recipes that call for sugar	Experiment with reducing amount of sugar and adding spices (cinnamon, nutmeg, etc…)

Source: US Department of Agriculture. “Food Groups.” www.choosemyplate.gov/food-groups/.

Balance

Balance the foods in your diet. Achieving balance in your diet entails not consuming one nutrient at the expense of another. For example, calcium is essential for healthy teeth and bones, but too much calcium will interfere with iron absorption. Most foods that are good sources of iron are poor sources of calcium, so in order to get the necessary amounts of calcium and iron from your diet, a proper balance between food choices is critical. Another example is that while sodium is a vital nutrient, an overabundance of it can contribute to congestive heart failure and chronic kidney disease. Remember, everything must be consumed in the proper amounts.



Figure **10.8.3.2.3.1**: With careful planning, a balanced diet providing optimal nutrition can be achieved and maintained. © Shutterstock

Moderation

Eat in moderation. Moderation is crucial for optimal health and survival. Burgers, French fries, cake, and ice cream each night for dinner will lead to health complications. But as part of an otherwise healthful diet and consumed only on a weekly basis, this should not have too much of an impact on overall health. If this is done once per month, it will have even less of an impact upon overall health. It’s important to remember that eating is, in part, about enjoyment and indulging with a spirit of moderation. This fits within a healthy diet.

Calorie Control

Monitor food portions. For optimum weight maintenance, it is important to ensure that energy consumed from foods meets the energy expenditures required for body functions and activity. If not, the excess energy contributes to gradual, steady weight gain. In order to lose weight, you need to ensure that more calories are burned than consumed. Likewise, in order to gain weight, calories must be eaten in excess of what is expended daily. So what exactly is a Calorie anyway? Watch this YouTube Video called "What is a calorie? - Emma Bryce"

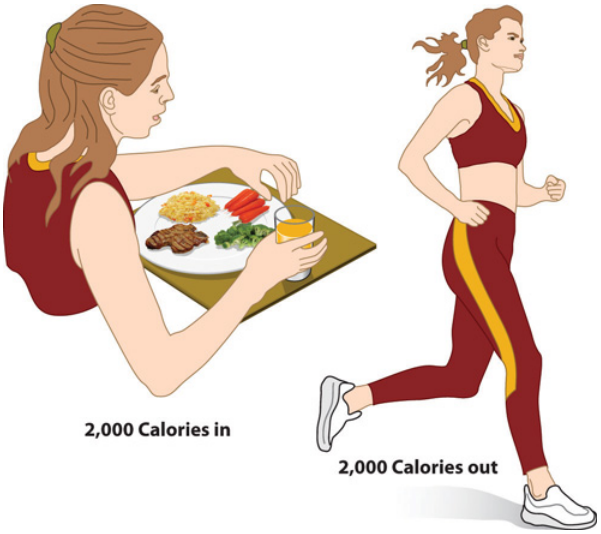


Figure **10.8.3.2.3.2**: The number of calories consumed should always match the number of calories being expended by the body to maintain a healthy weight.© Networkgraphics

Variety

Variety involves eating different foods from all the food groups. Eating a varied diet helps to ensure that you receive all the nutrients necessary for a healthy diet. One of the major drawbacks of a monotonous diet is the risk of consuming too much of some nutrients and not enough of others. Trying new foods can also be a source of pleasure—you never know what foods you might like until you try them.

Table **10.8.3.2.3.2**: Food Choices for a Healthful Diet

Grain	Vegetable	Fruit	Dairy	Protein
Whole-grain products, brown rice, quinoa, barley, buckwheat, millet, wild rice, oats, rye berries, sorghum, bulgur, kasha, farrow, wheat berries, corn, amaranth, spelt, Teff	**Dark green:** broccoli, collards, kale, romaine lettuce, spinach, turnip greens, watercress	apples, apricots, bananas	all fluid milk (fat free, low-fat, reduced-fat, whole milk, lactose-free), fortified soy milk, yogurt	**Meats:** beef, ham, lamb, pork, veal
	Red and orange: Acorn squash, butternut squash, carrots, pumpkin, red peppers, sweet potatoes	**Berries:** strawberries, blueberries, raspberries, cherries, grapefruit, kiwi fruit, lemons, limes, mangoes	**Hard natural cheeses:** cheddar, mozzarella, Swiss, parmesan	**Poultry:** chicken, goose, turkey, duck
	Beans and peas: Black beans, black-eyed peas, chickpeas, kidney beans, lentils, navy beans, pinto beans, soybeans, split peas, white beans	**Melons:** cantaloupe, honey dew, watermelon	**Soft cheeses:** ricotta, cottage	**Eggs**
	Starchy: Cassava, green bananas, green peas, green lima beans, plantains, potatoes, taro, water chestnuts	**Other fruits:** nectarines, oranges, peaches, pears, papaya, pineapple, plums, prunes		**Beans and peas:** (see vegetable column)
	Other vegetables: Asparagus, avocado, bean sprouts, beets, Brussels sprouts, cabbage, cauliflower, celery, eggplant, green beans, green peppers, mushrooms, okra, onions, parsnips			**Nuts and seeds:** almonds, cashews, hazelnuts, peanuts, pecans, pistachios, pumpkin seeds, sesame seeds, sunflower seeds, walnuts
				Seafood: catfish, cod, flounder, haddock, halibut, herring, mackerel, pollock, porgy, salmon, sea bass, snapper, swordfish, trout, tuna
				Shellfish: scallops, muscles, crab, lobster

Source: Adapted from www.choosemyplate.gov/food-groups/protein-foods.html.

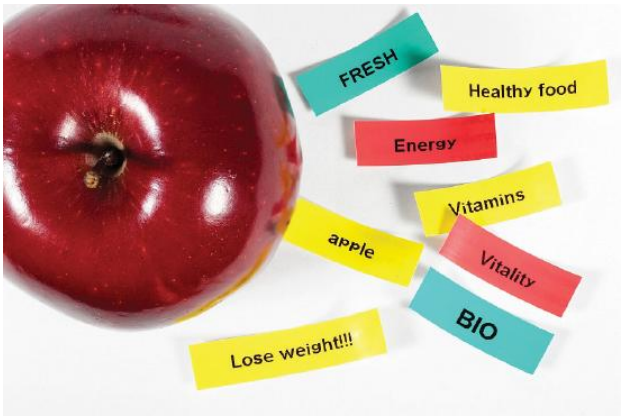
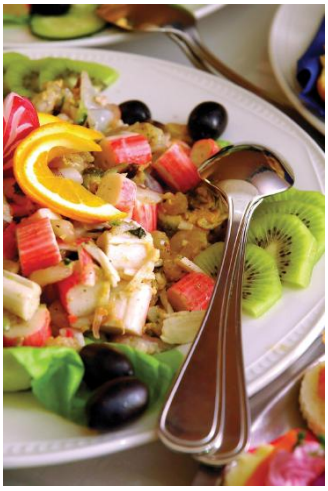


Figure **10.8.3.2.3.3**: Scientific evidence confirms that a diet full of fresh whole foods reduces the risks for developing chronic disease and helps maintain a healthy weight. © Dreamstime

Video Link

Different Types of Grains: In this video, a registered dietitian discusses the benefits of eating whole grains. https://youtu.be/o_RxfQqpkkE

Developing a healthful diet can be rewarding, but be mindful that all of the principles presented must be followed to derive maximal health benefits. For instance, introducing variety in your diet can still result in the consumption of too many high-calorie, nutrient-poor foods and inadequate nutrient intake if you do not also employ moderation and calorie control. Using all of these principles together will afford you lasting health benefits.


Figure **10.8.3.2.3.4**: Widening your food palate will increase your intake of vital nutrients. © Dreamstime

Key Takeaways

- A healthful diet is adequate in providing proper amounts of nutrient-dense foods, is balanced in relation to food types so that one nutrient is not consumed at the expense of another, practices calorie control by supplying food energy to match energy output, is moderate in unwanted constituents, and draws from a variety of nutritious foods.
- Nutrient-dense foods contribute to daily nutritional requirements while limiting caloric intake, thus allowing people to either lose weight safely or to maintain a healthy weight.

Discussion Starters

1. Discuss the principles of a healthy diet. How can you employ these principles in your diet, if you are not already?
2. Review the list of grains in Table 2.3. Pick one that you have not tried before. Make a dish using this grain. Discuss with your classmates your experience eating this new food.

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10.8.3.2.4: Understanding the Bigger Picture of Dietary Guidelines

Learning Objectives

- Describe the major themes of the *2015-2020 Dietary Guidelines for Americans*.

The first US dietary recommendations were set by the National Academy of Sciences in 1941. The recommended dietary allowances (RDA) were first established out of concern that America's overseas World War II troops were not consuming enough daily nutrients to maintain good health. The first Food and Nutrition Board was created in 1941, and in the same year set recommendations for the adequate intakes of caloric energy and eight essential nutrients. These were disseminated to officials responsible for food relief for armed forces and civilians supporting the war effort. Since 1980, the dietary guidelines have been reevaluated and updated every five years by the advisory committees of the US Department of Agriculture (USDA) and the US Department of Health and Human Services (HHS). The guidelines are continually revised to keep up with new scientific evidence-based conclusions on the importance of nutritional adequacy and physical activity to overall health. While dietary recommendations set prior to 1980 focused only on preventing nutrient inadequacy, the current dietary guidelines have the additional goals of promoting health, reducing chronic disease, and decreasing the prevalence of overweight and obesity.



Figure **10.8.3.2.4.1**: Dietary guidelines help people to stay on a healthful track by drawing attention to the overall scope of their diet and lifestyle. © Dreamstime

Why Are Guidelines Needed?

Instituting nation-wide standard policies provides consistency across organizations and allows health-care workers, nutrition educators, school boards, and elder-care facilities to improve nutrition and subsequently the health of their respective populations. The 2015–2020 Dietary Guidelines is designed to help Americans eat a healthier diet. Intended for policymakers and health professionals, the 2015 edition of the Dietary Guidelines outlines how people can improve their overall eating patterns — the complete combination of foods and drinks in their diet. The free 2015 edition offers overarching themes about what constitutes a healthy diet, how to shift behaviors to make it possible to follow a healthful diet and a number of Key Recommendations with specific nutritional targets and dietary limits



Figure **10.8.3.2.4.2**: The major theme of the *20105 Dietary Guidelines for Americans* is an adequate diet combined with proper exercise. © Dreamstime

Major Themes of the *2015 Dietary Guidelines*

The *2015 Dietary Guidelines* consists of five major action steps for the American public to improve their eating habits. It also includes several key recommendations. These five steps are as follows:

1. Follow a healthy eating pattern across the lifespan.
2. Focus on variety, nutrient density, and amount.
3. Limit calories from added sugars and saturated fats and reduce sodium intake.
4. Shift to healthier food and beverage choices.
5. Support healthy eating patterns for all.

We will discuss the highlights of each chapter of the *2015 Dietary Guidelines*; however, if you are interested in reading more, visit the USDA website, https://health.gov/dietaryguidelines/2015/guidelines/.

How should you develop a healthy eating plan to best achieve your goals of losing weight, gaining weight, or maintaining weight? We will start with some basics and move on to healthy eating patterns. To provide further guidance, several key recommendations are provided. These should be applied in their entirety because of their interconnectedness.

Consume a healthy eating pattern that accounts for all foods and beverages within an appropriate calorie level.

A health heating pattern includes:

- A variety of vegetables from all of the subgroups - dark green, red and orange, legumes (beans and peas), starchy, and other
- Fruits, especially whole fruits
- Grains, at least half of which are whole grains
- Fat-free or low-fat dairy, including milk, yogurt, cheese, and/or fortified soy beverages
- A variety of protein foods, including seafood, lean meats and poultry, eggs, legumes (beans and peas), and nuts, seeds, and soy products
- Oils

The following components of the diet should be limited in order to achieve a healthy eating pattern:

- Consume less than 10 percent of calories per day from added sugars
- Consume less than 10 percent of calories per day from saturated fats
- Consume less than 2,300 milligrams (mg) per day of sodium
- If alcohol is consumed, it should be consumed in moderation - up to one drink per day for women and up to two drinks per day for men - and only by adults of legal drinking age.

Finally, all Americans regardless of age should meet the *Physical Activity Guidelines for Americans*.

Foods and Food Components to Reduce

High consumptions of certain foods, such as those high in saturated or trans fat, sodium, added sugars, and refined grains may contribute to the increased incidence of chronic disease. Additionally, excessive consumption of these foods replaces the intake of more nutrient-dense foods.

Table **10.8.3.2.4.1**: A Little Less of These, Please

Dietary Constituent	Health Implications	Recommendations
Excess sodium	High blood pressure	Limit intake to 2,300 mg daily
Too much saturated fat	Cardiovascular disease	Limit intake to < 10 percent of total calories
Trans fats	Cardiovascular disease	Minimal, if any consumption
Excess cholesterol	Atherosclerosis	Limit intake to below 300 mg daily
SoFAS (solid fats and added sugars)	Obesity, Type 2 diabetes	Avoid if possible
Too much alcohol	Impaired liver function, impaired motor function	No more than one drink per day for women; No more than two drinks per day for men

The average person consumes 3,400 milligrams of sodium per day, mostly in the form of table salt. The *2010 Dietary Guidelines* recommend that Americans reduce their daily sodium intake to less than 2,300 milligrams. If you are over the age of fifty-one, are African American, or have cardiovascular risk factors, such as high blood pressure or diabetes, sodium intake should be reduced even further to 1,500 milligrams. The *Dietary Guidelines* also recommend that less than 10 percent of calories come from saturated fat, and that fat calories should be obtained by eating foods high in unsaturated fatty acids. Cholesterol intake should be decreased to below 300 milligrams per day and trans fatty acid consumption kept to a bare minimum. The *Dietary Guidelines* stresses the importance of limiting the consumption of foods with refined grains and added sugars, and introduce the new term, SoFAS, which is an acronym for *solid fats and added sugars*, both of which are to be avoided in a healthy diet plan.Nelson, J. and K. Zeratsky. "Dietary Guidelines Connect SoFAS and Weight Gain." Mayo Clinic, *Nutrition-Wise* (blog). August 25, 2010. www.mayoclinic.com/health/die...elines/MY01417. Moreover, if alcohol is consumed, it should be consumed only in moderation, which for women it is not more than one drink per day and for men is not more than two drinks per day. The macronutrients protein, carbohydrates, and fats contribute considerably to total caloric intake. The IOM has made recommendations for different age groups on the percentage of total calories that should be obtained from each macronutrient class (Table **10.8.3.2.4.2**).

Table **10.8.3.2.4.2**: Recommendations for Macronutrient Intake As Percentage of Total Calories

Age Group	Protein (%)	Carbohydrates (%)	Fat (%)
Children (1–3)	5–20	45–65	30–40
Children and Adolescents (4–18)	10–30	45–65	25–35
Adults (>19)	10–35	45–65	20–35

Source: *2010 Dietary Guidelines*.

Foods and Nutrients to Increase

The typical American diet lacks sufficient amounts of vegetables, fruits, whole grains, and high-calcium foods, causing concern for deficiencies in certain nutrients important for maintaining health. The *2010 Dietary Guidelines* provide the following suggestions on food choices to achieve a healthier diet:

1. Eat a variety of vegetables, especially dark green, red, and orange vegetables.
2. Choose at least half of your grains consumed from whole-grain foods.
3. For dairy products, eat the low-fat versions.
4. Don't get your protein only from red meats; choose instead seafood, poultry, eggs, beans, peas, nuts, seeds, and soy products.
5. Replace butter with oils.
6. Choose foods dense in the nutrients potassium, calcium, and vitamin D.
7. Increase intake of dietary fiber.

Building Healthy Eating Patterns

The *2010 Dietary Guidelines* recommend that people make an effort to reduce their caloric consumption, reduce the intake of nutrient-poor foods, and increase the intake of nutrient-dense foods. To accomplish these tasks it is necessary to incorporate moderation and variety. The goal is not only choosing specific foods for your diet, but also the development of a healthy eating pattern. Several studies provide good evidence that certain dietary patterns increase overall health and decrease the risk of chronic disease. The Dietary Approaches to Stop Hypertension trial, or DASH, reports that men and women who consumed more than eight servings per day of fruits and vegetables had lower blood pressures than a control group that consumed under four servings per day of fruits and vegetables.Sacks, F.M, et al., "Effects on Blood Pressure of Reduced Dietary Sodium and the Dietary Approaches to Stop Hypertension (DASH) Diet." *N Engl J Med*. 344, no. 1 (January 2001): 3–10. http://www.nejm.org/doi/full/10.1056/NEJM200101043440101. Other studies investigating the benefits of the DASH diet have also found it to be protective against cardiovascular disease and decrease overall mortality. Another well-known diet is the Mediterranean diet. In general, the Mediterranean diet is described as one that emphasizes fruits, vegetables, whole grains, and nuts, and olive oil as a replacement for butter. Few meats and high-fat dairy products are eaten. Observational studies have linked the Mediterranean diet to reduced cardiovascular disease and decreased mortality. Vegetarian diets, which emphasize many of the same foods as the DASH and Mediterranean diets have also been linked to a decrease in incidences of some chronic diseases.



Figure **10.8.3.2.4.3**: Fresh vegetables and olive oil are examples of foods emphasized in the DASH and Mediterranean diets. © Thinkstock

Key Takeaways

- US dietary guidelines are based on evolving scientific evidence and are updated every five years. The goals of the *2015-2020 Dietary Guidelines* are to prevent nutrient inadequacy, promote health, reduce chronic disease, and decrease the prevalence of overweight and obesity.
- To have a healthy eating pattern, reduce the intake of sodium, saturated and trans fats, cholesterol, added sugars, and refined grains. Increase the consumption of fruits, vegetables, low-fat dairy products, dietary fiber, and oils.
- Healthy eating patterns prevent chronic disease and provide nutrient adequacy.

Discussion Starter

1. Discuss with your classmates suggestions from the *2015-2020 Dietary Guidelines* that you should incorporate into your diet. How can you align your personal dietary goals with these recommendations?

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10.8.3.2.5: National Goals for Nutrition and Health- Healthy People 2020

Learning Objectives

- State the Healthy People 2020 nutrition- and weight-status goals.
- List three related objectives for the Healthy People 2020 program.

The Healthy People 2020 program, launched in 2010, is a ten-year national program instituted by the US government with objectives aimed toward improving the health of all Americans. Similar to the *2010 Dietary Guidelines*, it has been established to promote longer lives free of preventable disease, disability, injury, and premature death. With a revived intent on identifying, measuring, tracking, and reducing health disparities through a "determinants of health approach," Healthy People 2020 will strive to create the social and physical environments that promote good health for all and to promote quality of life, healthy development, and healthy behaviors across all life stages. This means that the understanding of what makes and keeps people healthy is consistently refined. The determinants of health approach reflects the evidence from outside factors that greatly affect the health of individuals.US Department of Health and Human Services. "About Healthy People." Last updated March 29, 2012. http://www.healthypeople.gov/2020/about/default.aspx It takes into consideration the circumstances in which people are born, live, work, and age. It also reflects the conditions that shape their circumstances such as money, power, and resources at the local, national, and global levels. Social determinants of health are primarily accountable for the lack of fair health opportunities and the unjust differences in health status that exist within and between countries.World Health Organization. "Social Determinants of Health." © 2012. http://www.who.int/social_determinants/en/.

Video **10.8.3.2.5.1**: Preparing for the Next Decade



Preparing for the Next Decade: A 2020 Vision for Healthy People (click to see video)

Helping People Make Healthy Choices

It is not just ourselves, the food industry, and federal government that shape our choices of food and physical activity, but also our sex, genetics, disabilities, income, religion, culture, education, lifestyle, age, and environment. All of these factors must be addressed by organizations and individuals that seek to make changes in dietary habits. The socioeconomic model incorporates all of these factors and is used by health-promoting organizations, such as the USDA and the HHS to determine multiple avenues through which to promote healthy eating patterns, to increase levels of physical activity, and to reduce the risk of chronic disease for all Americans.



Figure 10.8.3.2.5.1: The socioeconomic model helps organizations and the government to plan and promote effective healthy-eating programs tailored to specific populations. © Networkgraphics

Lower economic prosperity influences diet specifically by lowering food quality, decreasing food choices, and decreasing access to enough food. As a result of the recent financial crisis in America the number of people who struggle to have enough to eat is rising and approaching fifty million. In response to these recent numbers, USDA Secretary Tom Vilsack said, “These numbers are a wake-up call…for us to get very serious about food security and hunger, about nutrition and food safety in this country.”Amy Goldstein, “Hunger a Growing Problem in America, USDA Reports,” *Washington Post*, 17 November 2009. www.washingtonpost.com/wp-dyn...111601598.html.

Video 10.8.3.2.5.2: Determinants of Health



Determinants of Health Approach in Healthy People 2020 (click to see video)

Goals for Nutrition and Weight Status

While Healthy People 2020 has many goals and objectives, we are going to focus on the two goals for nutrition and weight status. They are to promote health and reduce the risk of developing chronic diseases by encouraging Americans to consume healthful diets and to achieve and maintain healthy body weights. Nutrition criteria are reflective of a solid scientific foundation for health and weight management. Emphasis is on modifying individual behavior patterns and habits, and having policies and environments that will support these behaviors in various settings, such as schools and local community-based organizations.



Figure 10.8.3.2.5.2: One of the ways that Healthy People 2020 strives to promote good health and nutrition is by bringing together multiple agencies and groups dedicated to achieving the Healthy People 2020 nationwide objectives. © Shutterstock

Healthy People 2020 has defined their mission as:

- Identify nationwide health improvement priorities
- Increase public awareness and understanding of the determinants of health, disease, and disability, and the opportunities for progress
- Provide measurable objectives and goals that are applicable at the national, state, and local levels
- Engage multiple sectors to take actions to strengthen policies and improve practices that are driven by the best knowledge
- Identify critical research, evaluation, and data-collection needs

Healthy People 2020 has set key recommendations as follows:

- Consume a variety of nutrient-dense foods within and across the food groups, especially whole grains, fruits, vegetables, low-fat or fat-free milk or milk products, and lean meats and other protein sources
- Limit the intake of saturated fat and trans fats, cholesterol, added sugars, sodium (salt), and alcohol
- Limit caloric intake to meet caloric needsUS Department of Health and Human Services. “Nutrition and Weight Status.” HealthyPeople.gov. Last updated May 1, 2012. http://healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=29


Figure 10.8.3.2.5.3: Consuming nutrient-dense foods and limiting portion sizes of food will contribute to weight management. Avoiding excessive amounts of anything allows room for many food types in the diet. © Dreamstime

Tools for Change

If you wait many hours between meals, there is a good chance you will overeat. To refrain from overeating try consuming small meals at frequent intervals throughout the day as opposed to two or three large meals. Eat until you are satisfied, not until you feel “stuffed.” Eating slowly and savoring your food allows you to both enjoy what you eat and have time to realize that you are full before you get overfull. Your stomach is about the size of your fist but it expands if you eat excessive amounts of food at one sitting. Eating smaller meals will diminish the size of your appetite over time so you will feel satisfied with smaller amounts of food.

Benefits of Following the Healthy People 2020 Goals

Nutrition and weight status are important to children's growth and development. In addition, healthy eating habits will decrease risks for developing chronic health conditions such as obesity, malnutrition, anemia, cardiovascular disease, high blood pressure, dyslipidemia (poor lipid profiles), Type 2 diabetes, osteoporosis, dental disease, constipation, diverticular disease, and certain types of cancer.

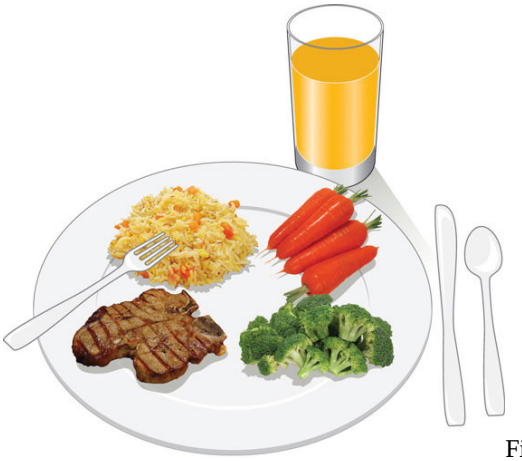


Figure 10.8.3.2.5.4: Following the *2015 Dietary Guidelines* will promote nutrition, weight loss, and weight maintenance as well as the reduction of chronic disease. © Networkgraphics

Meeting the recommended intake for energy needs by adopting a balanced eating regimen as promoted by the USDA's My Food Plate tool will assist people in losing and maintaining weight and in improving overall health.

Objectives Related to the Healthy People 2020 Goals

Seven out of every ten deaths in the United States are caused by chronic diseases, such as heart disease, cancer, and diabetes, and three-quarters of the country's health spending goes toward the cost of treating these diseases. Helping people lose weight, maintain a healthy weight, and prevent chronic disease by improving dietary habits requires providing education about food and nutrition, assuring access to healthier food options, and promoting the desire and ability to become physically active. Some of the Healthy People 2020 program's related objectives are discussed below.

1. **Improve health, fitness, and quality of life through daily physical activity.** The Healthy People 2020 objectives for physical activity are based on the *2008 Physical Activity Guidelines for Americans*, and reflect the strong scientific evidence supporting the benefits of physical activity. More than 80 percent of the current US population, from youth to adults, is not meeting these guidelines. Healthy People 2020 highlights the way that one's level of physical activity is affected by environmental factors such as the availability of safe sidewalks, bike lanes, trails, and parks. It also highlights the legislative policies that improve access to facilities that promote physical activity. Understanding that personal, social, economic, and environmental barriers to physical activity all have a part in determining a population's physical activity level, is an important part of being able to provide interventions that foster physical activity. Consistent physical activity is necessary for preventing chronic disease, improving bone health, decreasing body fat, and preventing an early death.

Video 10.8.3.2.5.3: Active versus Sedentary Lifestyles



This video provides a short overview of leading an active life versus a sedentary life.

2. **Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and injury, improve health, and enhance quality of life.** Healthy eating is a learned behavior. By increasing the number of community-based programs (schools, workplace, health-care facilities, local community groups) that offer guidance for healthy eating and lifestyle choices, people of all ages will learn good eating habits and will gain access to good food choices to help improve their diet and overall health.
3. **Improve the development, health, safety, and well-being of adolescents and young adults.** Adolescents (ten to nineteen years of age) and young adults (twenty to twenty-four years of age) constitute 21 percent of the population of the United States. The financial burdens of preventable health problems and associated long-term costs of chronic diseases in this demographic group have the potential to be vast, and will be the result of attitudes and behaviors initiated during adolescence. For example, the annual adult health-related financial burden of cigarette smoking, which usually starts by age eighteen, is $193 billion.Adhikari, B. et al. “Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses—United States, 2000–2004.” *MMWR CDC Surveill Summ* 57, no. 45 (November 14, 2008): 1226–8. http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5745a3.htm.



Figure **10.8.3.2.5.5**: Healthy children will lead to a healthy adult population with less disease, lower healthcare costs, and increased longevity. © Shutterstock

4. **Reduce the consumption of calories from SoFAS in the population aged two years and older.** A diet high in SoFAS contributes to excessive weight gain and poor health. Added sugars provide no nutritional value to foods. Excessive fat and sugar intake promotes tooth decay, obesity, Type 2 diabetes, unhealthy cholesterol levels, and heart disease. Being overweight increases susceptibility for developing high blood pressure, diabetes, cardiovascular diseases, and certain types of cancer. The evidence is clear that many chronic diseases are linked to unhealthy dietary patterns. Excessive consumption of SoFAS, in combination with the lack of plant-based foods, may contribute to higher rates of developing chronic diseases.

For more information on Healthy People 2020 and its related objectives for nutrition and weight status, please visit the website http://www.healthypeople.gov/2020.

Key Takeaways

- Healthy People 2020 is a health initiative with a ten-year objective of helping Americans improve health and well-being, and to live long, healthy lives. Among its many objectives are to promote health and reduce the risk of developing chronic diseases by encouraging Americans to consume healthful diets and to achieve and maintain healthy body weights.
- The goals of Healthy People 2020 are founded upon a determinants of health approach, which means they are reflective of the circumstances in which people are born, live, and work, as well as the conditions that shape their circumstances such as money, power, and resources at the local, national, and global levels. Diet patterns are influenced by genetics, environment, and cultural values. All of these things must be considered to provide the optimal approach to improving the health of the American population.
- Decreasing caloric intake and increasing physical activity are important strategies in achieving the goals of the Healthy People 2020 program.

Discussion Starters

1. Think of fun ways to increase physical activity in your life. Think small but frequent and think about things you can incorporate easily in your regular daily activities.
2. Review some of the Healthy People 2020 nutrition and physical activity program objectives. What objectives would you like to see enacted in your community? Why is this important to you? http://www.healthypeople.gov/2020

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10.8.3.2.6: Recommendations for Optimal Health

Learning Objectives

- Design a quality diet plan using MyPlate Daily Food Plan.
- State recommendation(s) for fruit and vegetable consumption and list the potential benefits of this eating program.

For many years, the US government has been encouraging Americans to develop healthful dietary habits. In 1992 the food pyramid was introduced, and in 2005 it was updated. This was the symbol of healthy eating patterns for all Americans. However, some felt it was difficult to understand, so in 2011, the pyramid was replaced with Choose MyPlate.

The Choose MyPlate program uses a tailored approach to give people the needed information to help design a healthy diet. The plate is divided according to the amount of food and nutrients you should consume for each meal. Each food group is identified with a different color, showing the food variety that all plates must have. Aside from educating people about the type of food that is best to support optimal health, the new food plan offers the advice that it is okay to enjoy food, just eat less of it.US Department of Agriculture. Accessed July 22, 2012. http://www.choosemyplate.gov/.

Video 10.8.3.2.6.1: Introducing the New Food Icon: MyPlate

This video provides an introduction to the new MyPlate food guide.



Building a Healthy Plate: Choose Nutrient-Rich Foods

Planning a healthy diet using the MyPlate approach is not difficult. According to the icon, half of your plate should have fruits and vegetables, one-quarter should have whole grains, and one-quarter should have protein. Dairy products should be low-fat or non-fat. The ideal diet gives you the most nutrients within the fewest calories. This means choosing nutrient-rich foods.

Fill half of your plate with red, orange, and dark green vegetables and fruits, such as kale, collard greens, tomatoes, sweet potatoes, broccoli, apples, oranges, grapes, bananas, blueberries, and strawberries in main and side dishes. Vary your choices to get the benefit of as many different vegetables and fruits as you can. You may choose to drink fruit juice as a replacement for eating fruit. (As long as the juice is 100 percent fruit juice and only half your fruit intake is replaced with juice, this is an acceptable exchange.) For snacks, eat fruits, vegetables, or unsalted nuts.

Fill a quarter of your plate with whole grains such as 100 percent whole-grain cereals, breads, crackers, rice, and pasta. Half of your daily grain intake should be whole grains. Read the ingredients list on food labels carefully to determine if a food is comprised of whole grains.

Tools for Change

Consider the information in this video:



Buying Local: The Importance of Locally Produced and Organically Grown Foods to Local Economy. (click to see video)

Identify which vegetables and fruits are in season and local to your area. By consuming in-season, local foods you cut down on transportation costs (emission and financial) and you are likely to get fresher produce. You also support your local farms by purchasing their produce.



Make sure at least half of your daily grain intake comes from whole-grain foods. © Shutterstock

Select a variety of protein foods to improve nutrient intake and promote health benefits. Each week, be sure to include a nice array of protein sources in your diet, such as nuts, seeds, beans, legumes, poultry, soy, and seafood. The recommended consumption amount for seafood for adults is two 4-ounce servings per week. When choosing meat, select lean cuts. Be conscious to prepare meats using little or no added saturated fat, such as butter.



Remember to vary your selections of protein. Lentils contain good amounts of protein and make great meals. Try using lentils or beans as a meat substitute each week. © Thinkstock

If you enjoy drinking milk or eating milk products, such as cheese and yogurt, choose low-fat or nonfat products. Low-fat and nonfat products contain the same amount of calcium and other essential nutrients as whole-milk products, but with much less fat and calories. Calcium, an important mineral for your body, is also available in lactose-free and fortified soy beverage and rice beverage products. You can also get calcium in vegetables and other fortified foods and beverages.

Oils are essential for your diet as they contain valuable essential fatty acids, but the type you choose and the amount you consume is important. Be sure the oil is plant-based rather than based on animal fat. You can also get oils from many types of fish, as well as avocados, and unsalted nuts and seeds. Although oils are essential for health they do contain about 120 calories per tablespoon. It is vital to balance oil consumption with total caloric intake. The Nutrition Facts label provides the information to help you make healthful decisions.

In short, substituting vegetables and fruit in place of unhealthy foods is a good way to make a nutrient-poor diet healthy again. Vegetables are full of nutrients and antioxidants that help promote good health and reduce the risk for developing chronic diseases such as stroke, heart disease, high blood pressure, Type 2 diabetes, and certain types of cancer. Regularly eating fresh fruits and vegetables will boost your overall health profile.

Discretionary Calories

When following a balanced, healthful diet with many nutrient-dense foods, you may consume enough of your daily nutrients before you reach your daily calorie limit. The remaining calories are discretionary (to be used according to your best judgment). To find out your discretionary calorie allowance, add up all the calories you consumed to achieve the recommended nutrient intakes and then subtract this number from your recommended daily caloric allowance. For example, someone who has a recommended 2,000-calorie per day diet may eat enough nutrient-dense foods to meet requirements after consuming only 1,814 calories. The remaining 186 calories are discretionary. These calories may be obtained from eating an additional piece of fruit, adding another teaspoon of olive oil on a salad or butter on a piece of bread, adding sugar or honey to cereal, or consuming an alcoholic beverage.US Department of Agriculture. “MyPyramid Education Framework.” Accessed July 22, 2012. http://www.choosemyplate.gov

The amount of discretionary calories increases with physical activity level and decreases with age. For most physically active adults, the discretionary calorie allowance is, at most, 15 percent of the recommended caloric intake. By consuming nutrient-dense foods, you afford yourself a discretionary calorie allowance.

Table **10.8.3.2.6.1**: Sample Menu Plan Containing 2,000 Calories

Meal	Calories	Total Meal/Snack Calories
Breakfast		
1 scrambled egg	92	
with sliced mushrooms and spinach	7	
½ whole-wheat muffin	67	
1 tsp. margarine-like spread	15	
1 orange	65	
8 oz. low-sodium tomato juice	53	299
Snack		
6 oz. fat-free flavored yogurt	100	
with ½ c. raspberries	32	132
Lunch		
1 sandwich on pumpernickel bread	160	
with smoked turkey deli meat,	30	
4 slices tomato	14	
2 lettuce leaves	3	
1 tsp. mustard	3	
1 oz. baked potato chips	110	
½ c. blueberries, with 1 tsp. sugar	57	
8 oz. fat-free milk	90	467
Snack		
1 banana	105	
7 reduced-fat high-fiber crackers	120	225
Dinner		
1 c. Greek salad (tomatoes, cucumbers, feta)	150	
with 5 Greek olives,	45	
with 1.5 tsp. olive oil	60	
3 oz. grilled chicken breast	150	
½ c. steamed asparagus	20	
with 1 tsp. olive oil,	40	
with 1 tsp. sesame seeds	18	
½ c. cooked wild rice	83	
with ½ c. chopped kale	18	

Meal	Calories	Total Meal/Snack Calories
1 whole-wheat dinner roll	4	
with 1 tsp. almond butter	33	691
(Total calories from all meals and snacks = 1,814)		
Discretionary calorie allowance: 186		

Healthy Eating Index

To assess whether the American diet is conforming to the *2010 Dietary Guidelines*, the Center for Nutrition Policy and Promotion (CNPP), a division of the USDA, uses a standardized tool called the Healthy Eating Index (HEI).US Department of Agriculture. "Healthy Eating Index." Last modified March 14, 2012. www.cnpp.usda.gov/healthyeatingindex.htm. The first HEI was developed in 1995 and revised in 2006. This tool is a simple scoring system of dietary components. The data for scoring diets is taken from national surveys of particular population subgroups, such as children from low-income families or Americans over the age of sixty-five. Diets are broken down into several food categories including milk, whole fruits, dark green and orange vegetables, whole grains, and saturated fat, and then a score is given based on the amount consumed. For example, a score of ten is given if a 2,000-kilocalorie diet includes greater than 2.6 cups of milk per day. If less than 10 percent of total calories in a diet are from saturated fat, a score of eight is given. All of the scores are added up from the different food categories and the diets are given a HEI score. Using this standardized diet-assessment tool at different times, every ten years for instance, the CNPP can determine if the eating habits of certain groups of the American population are getting better or worse. The HEI tool provides the federal government with information to make policy changes to better the diets of American people. For more information on the HEI, visit this website: www.cnpp.usda.gov/healthyeatingindex.htm.

Key Takeaways

- The Food Pyramid has been replaced by MyPlate, a system that was designed to be easier to implement. The new MyPlate encourages all plates to be filled with fruits and vegetables (50 percent), protein (25 percent), and grains (25 percent). Half of daily grain intake should be from whole-grain sources. Dairy choices should be switched to low-fat or non-fat sources.
- A diet rich in fresh fruits and vegetables will help you lose and/or maintain weight, will lower your risk for stroke, heart disease, high blood pressure, Type 2 diabetes, and certain types of cancer, and will boost your overall health profile.
- By choosing nutrient-dense foods, you may have discretionary calories to "spend" at the end of the day.

Discussion Starter

1. As you analyze the new MyPlate, how do your regular dietary habits compare to this new format? What changes, if any, will you have to make to your breakfast? Lunch? Dinner?

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10.8.3.2.7: Understanding Dietary Reference Intakes (DRI)

Learning Objectives

- Use the Dietary Reference Intakes to determine daily nutrient recommendations.

Dietary Reference Intakes (DRI) are the recommendation levels for specific nutrients and consist of a number of different types of recommendations. This DRI system is used in both the United States and Canada.

Dietary Reference Intakes: A Brief Overview

The most recent recommendations from the Food and Nutrition Board are the "Dietary Reference Intakes" (DRI). The DRI include 4 sets of standards:

- **Recommended Dietary Allowances (RDA)**: average daily level of intake sufficient to meet the nutrient requirements of nearly all (97%-98%), healthy people.
- **Adequate Intakes (AI)**: established when evidence is insufficient to develop an RDA and is set at a level assumed to ensure nutritional adequacy.
- **Tolerable Upper Intake Levels (UL)**: maximum daily intake unlikely to cause adverse health effects.
- **Estimated Average Requirements (EARs)**: expected to satisfy the needs of 50% of the people in that age group based on a review of the scientific literature.

The DRIs are not minimum or maximum nutritional requirements and are not intended to fit everybody. They are to be used as guides only for the majority of the healthy population. https://ods.od.nih.gov/Health_Information/Dietary_Reference_Intakes.aspx

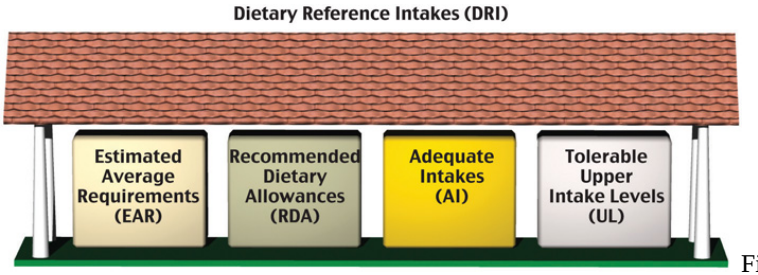


Figure **10.8.3.2.7.1**: The DRIs are inclusive of all four reference values. © Networkgraphics

DRIs are important not only to help the average person determine whether their intake of a particular nutrient is adequate, they are also used by health-care professionals and policy makers to determine nutritional recommendations for special groups of people who may need help reaching nutritional goals. This includes people who are participating in programs such as the Special Supplemental Food Program for Women, Infants, and Children. The DRI is not appropriate for people who are ill or malnourished, even if they were healthy previously.

Determining Dietary Reference Intakes

Each DRI value is derived in a different way. See below for an explanation of how each is determined:

1. **Estimated Average Requirements.** The EAR for a nutrient is determined by a committee of nutrition experts who review the scientific literature to determine a value that meets the requirements of 50 percent of people in their target group within a given life stage and for a particular sex. The requirements of half of the group will fall below the EAR and the other half will be above it. It is important to note that, for each nutrient, a specific bodily function is chosen as the criterion on which to base the EAR. For example, the EAR for calcium is set using a criterion of maximizing bone health. Thus, the EAR for calcium is set at a point that will meet the needs, with respect to bone health, of half of the population. EAR values become the scientific foundation upon which RDA values are set.
2. **Recommended Daily Allowances.** Once the EAR of a nutrient has been established, the RDA can be mathematically determined. While the EAR is set at a point that meets the needs of half the population, RDA values are set to meet the needs of the vast majority (97 to 98 percent) of the target healthy population. It is important to note that RDAs are not the same thing as individual nutritional requirements. The actual nutrient needs of a given individual will be different than the RDA. However,

since we know that 97 to 98 percent of the population's needs are met by the RDA, we can assume that if a person is consuming the RDA of a given nutrient, they are most likely meeting their nutritional need for that nutrient. The important thing to remember is that the RDA is meant as a *recommendation* and meeting the RDA means it is very likely that you are meeting your actual *requirement* for that nutrient.

Understanding the Difference

There is a distinct difference between a requirement and a recommendation. For instance, the DRI for vitamin D is a *recommended* 600 international units each day. However, in order to find out your true personal *requirements* for vitamin D, a blood test is necessary. The blood test will provide an accurate reading from which a medical professional can gauge your required daily vitamin D amounts. This may be considerably more or less than the DRI, depending on what your level actually is.

1. **Adequate Intake.** AIs are created for nutrients when there is insufficient consistent scientific evidence to set an EAR for the entire population. As with RDAs, AIs can be used as nutrient-intake goals for a given nutrient. For example, there has not been sufficient scientific research into the particular nutritional requirements for infants. Consequently, all of the DRI values for infants are AIs derived from nutrient values in human breast milk. For older babies and children, AI values are derived from human milk coupled with data on adults. The AI is meant for a healthy target group and is not meant to be sufficient for certain at-risk groups, such as premature infants.
2. **Tolerable Upper Intake Levels.** The UL was established to help distinguish healthful and harmful nutrient intakes. Developed in part as a response to the growing usage of dietary supplements, ULs indicate the highest level of continuous intake of a particular nutrient that may be taken without causing health problems. When a nutrient does not have any known issue if taken in excessive doses, it is not assigned a UL. However, even when a nutrient does not have a UL it is not necessarily safe to consume in large amounts.

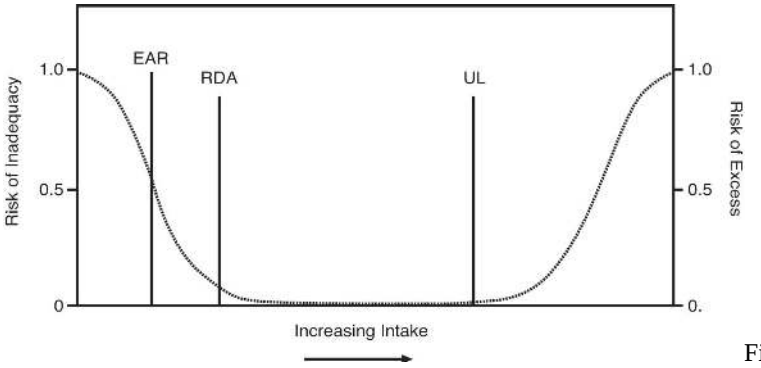


Figure 10.8.3.2.7.2: DRI Graph. This graph illustrates the risks of nutrient inadequacy and nutrient excess as we move from a low intake of a nutrient to a high intake. Starting on the left side of the graph, you can see that when you have a very low intake of a nutrient, your risk of nutrient deficiency is high. As your nutrient intake increases, the chances that you will be deficient in that nutrient decrease. The point at which 50 percent of the population meets their nutrient need is the EAR, and the point at which 97 to 98 percent of the population meets their needs is the RDA. The UL is the highest level at which you can consume a nutrient without it being too much—as nutrient intake increases beyond the UL, the risk of health problems resulting from that nutrient increases. Source: Institute of Medicine. © 2012 National Academy of Sciences. All Rights Reserved. www.iom.edu.

3. **Acceptable Macronutrient Distribution Ranges.** The Acceptable Macronutrient Distribution Range (AMDR) is the calculated range of how much energy from carbohydrates, fats, and protein is recommended for a healthy diet. People who do not reach the AMDRs for their target group increase their risk of developing health complications.

Table 2.7: AMDR Values for Adults

Nutrient	Value (percentage of Calories)
Fat	20.0–35.0
Carbohydrate	45.0–65.0
Protein	10.0–35.0
Polyunsaturated fatty acids	5.0–10.0
Linolenic acid	0.6–1.2

Source: Food and Nutrition Board of the Institute of Medicine. Dietary Reference Intakes for Energy, Carbohydrate, Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids. (Washington, DC: National Academies Press, 2002).

Tips for Using the Dietary Reference Intakes to Plan Your Diet

You can use the DRIs to help assess and plan your diet. Keep in mind when evaluating your nutritional intake that the values established have been devised with an ample safety margin and should be used as guidance for optimal intakes. Also, the values are meant to assess and plan average intake over time; that is, you don't need to meet these recommendations every single day—meeting them on average over several days is sufficient.

Key Takeaways

- Nutrient-intake recommendations set for healthy people living in the United States and Canada are known as Dietary Reference Intakes.
- The DRIs includes the AI, EAR, RDA, and UL for micronutrients and the AMDR ranges for energy-yielding macronutrients. The DRI provide a set of standards for researchers and government policy-makers, and specifies nutrient consumption guidelines for individuals.

Discussion Starter

1. Why do you think it is important for the government to set the DRI standards? How will you use this information for your personal dietary choices?

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10.8.3.2.8: Discovering Nutrition Facts

Learning Objectives

- Use the Nutrition Facts panel to discover the nutritional information of food.

The Labels on Your Food

Understanding the significance of dietary guidelines and how to use DRIs in planning your nutrient intakes can make you better equipped to select the right foods the next time you go to the supermarket.

In the United States, the Nutrition Labeling and Education Act passed in 1990 and came into effect in 1994. In Canada, mandatory labeling came into effect in 2005. As a result, all packaged foods sold in the United States and Canada must have nutrition labels that accurately reflect the contents of the food products. There are several mandated nutrients and some optional ones that manufacturers or packagers include. Table **10.8.3.2.8.1** lists the mandatory and optional inclusions.

Table **10.8.3.2.8.1**: Mandatory and Optional Inclusions on Nutrition Labels

Mandatory Inclusion	Optional Inclusion
Total Calories	Calories from saturated fats
Calories from fat	Polyunsaturated fat
Total fat	Monounsaturated fat
Saturated fat	Potassium
Cholesterol	Soluble fiber
Total carbohydrates	Sugar alcohol
Dietary fiber	Other carbohydrates
Sugars	Percent of vitamin A present as beta-carotene
Vitamins A and C	Other essential vitamins and minerals
Calcium	
Iron	

Source: US Food and Drug Administration. “Food Labeling Guide.” Last updated February 10, 2012. http://www.fda.gov.

There are other types of information that are required by law to appear somewhere on the consumer packaging. They include:

- Name and address of the manufacturer, packager, or distributor
- Statement of identity, what the product actually is
- Net contents of the package: weight, volume, measure, or numerical count
- Ingredients, listed in descending order by weight
- Nutrient information of serving size and daily values (US Food and Drug Administration. “Food Labeling & Nutrition”)

The Nutrition Facts panel provides a wealth of information about the nutritional content of the product. The information also allows shoppers to compare products. Because the serving sizes are included on the label, you can see how much of each nutrient is in each serving to make the comparisons. Knowing how to read the label is important because of the way some foods are presented. For example, a bag of peanuts at the grocery store may seem like a healthy snack to eat on the way to class. But have a look at that label. Does it contain one serving, or multiple servings? Unless you are buying the individual serving packages, chances are the bag you picked up is at least eight servings, if not more.

According to the 2010 health and diet survey released by the FDA, 54 percent of first-time buyers of a product will check the food label and will use this information to evaluate fat, calorie, vitamin, and sodium content.US Food and Drug Administration. “Survey

Shows Gain in Food-Label Use, Health/Diet Awareness." March 2, 2010. www.fda.gov/ForConsumers/Cons...abelHighlights. The survey also notes that more Americans are using food labels and are showing an increased awareness of the connection between diet and health. Having reliable food labels is a top priority of the FDA, which has a new initiative to prepare guidelines for the food industry to construct "front of package" labeling that will make it even easier for Americans to choose healthy foods. Stay tuned for the newest on food labeling by visiting the FDA website: http://www.fda.gov/Food/LabelingNutrition/default.htm.

Interactive Link: The Food Label and You.

The FDA has prepared an Interactive Food Label that is packed with helpful information. http://www.accessdata.fda.gov/script...tionFactsLabel

Reading the Label

The first part of the Nutrition Facts panel gives you information on the serving size and how many servings are in the container. For example, a label on a box of crackers might tell you that twenty crackers equals one serving and that the whole box contains 10 servings. All other values listed thereafter, from the calories to the dietary fiber, are based on this one serving. On the panel, the serving size is followed by the number of calories and then a list of selected nutrients. You will also see "Percent Daily Value" on the far right-hand side. This helps you determine if the food is a good source of a particular nutrient or not. The Daily Value (DV) represents the recommended amount of a given nutrient based on the RDI of that nutrient in a 2,000-kilocalorie diet. The percentage of Daily Value (percent DV) represents the proportion of the total daily recommended amount that you will get from one serving of the food. For example, in the food label in Figure 10.8.3.2.8.1, the percent DV of calcium for one serving of macaroni-and-cheese is 20 percent, which means that one serving of macaroni and cheese provides 20 percent of the daily recommended calcium intake. Since the DV for calcium is 1,000 milligrams, the food producer determined the *percent* DV for calcium by taking the calcium content in milligrams in each serving, and dividing it by 1,000 milligrams, and then multiplying it by 100 to get it into percentage format. Whether you consume 2,000 calories per day or not you can still use the percent DV as a target reference.

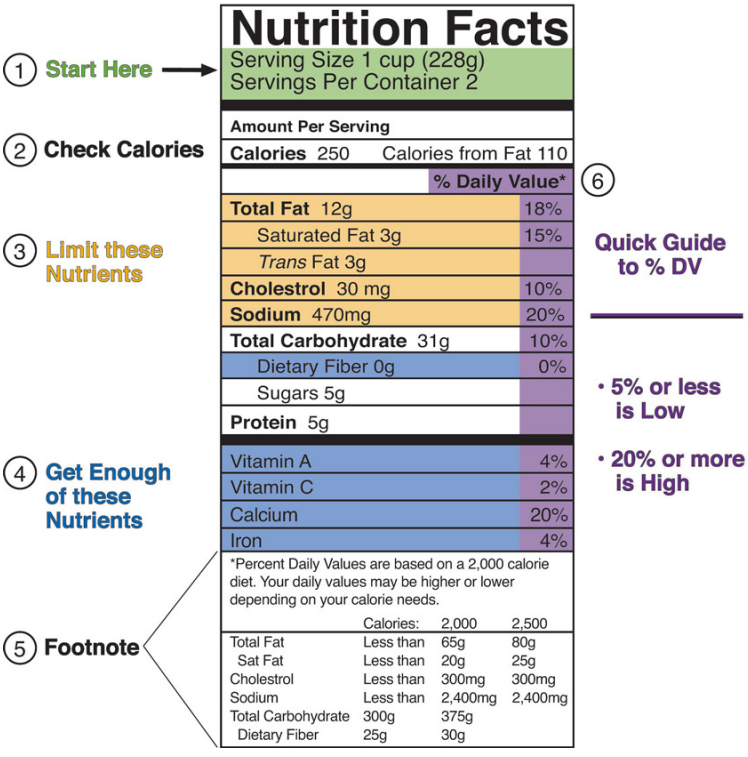


Figure 10.8.3.2.8.1: Determining Your Nutrient Allowances per Day. Pictured here is a sample label for macaroni and cheese. Source: FDA. "How to Understand and Use the Nutrition Facts Panel." Last updated February 15, 2012. www.fda.gov/food/labelingnutr...078889.htm#dvs

Generally, a percent DV of 5 is considered low and a percent DV of 20 is considered high. This means, as a general rule, for fat, saturated fat, trans fat, cholesterol, or sodium, look for foods with a low percent DV. Alternatively, when concentrating on essential

mineral or vitamin intake, look for a high percent DV. To figure out your fat allowance remaining for the day after consuming one serving of macaroni-and-cheese, look at the percent DV for fat, which is 18 percent, and subtract it from 100 percent. To know this amount in grams of fat, read the footnote of the food label to find that the recommended maximum amount of fat grams to consume per day for a 2,000 kilocalories per day diet is 65 grams. Eighteen percent of sixty-five equals about 12 grams. This means that 53 grams of fat are remaining in your fat allowance. Remember, to have a healthy diet the recommendation is to eat less than this amount of fat grams per day, especially if you want to lose weight.

Table **10.8.3.2.8.2**: DVs Based on a Caloric Intake of 2,000 Calories (For Adults and Children Four or More Years of Age)

Food Component	DV
Total fat	65 g
Saturated fat	20 g
Cholesterol	300 mg
Sodium	2,400 mg
Potassium	3,500 mg
Total carbohydrate	300 g
Dietary fiber	25 g
Protein	50 g
Vitamin A	5,000 IU
Vitamin C	60 mg
Calcium	1,000 mg
Iron	18 mg
Vitamin D	400 IU
Vitamin E	30 IU
Vitamin K	80 micrograms µg
Thiamin	1.5 mg
Riboflavin	1.7 mg
Niacin	20 mg
Vitamin B_6	2 mg
Folate	400 µg
Vitamin B_{12}	6 µg
Biotin	300 µg
Pantothenic acid	10 mg
Phosphorus	1,000 mg
Iodine	150 µg
Magnesium	400 mg
Zinc	15 mg
Selenium	70 µg
Copper	2 mg
Manganese	2 mg
Chromium	120 µg
Molybdenum	75 µg
Chloride	3,400 mg

Food Component	DV
Source: FDA, www.fda.gov/Food/GuidanceComp.../ucm064928.htm.	

Of course, this is a lot of information to put on a label and some products are too small to accommodate it all. In the case of small packages, such as small containers of yogurt, candy, or fruit bars, permission has been granted to use an abbreviated version of the Nutrition Facts panel. To learn additional details about all of the information contained within the Nutrition Facts panel, see the following website: www.fda.gov/Food/ResourcesFor.../ucm274593.htm

Video Link: How to Read Food Labels.

Pay attention to the fine print when grocery shopping. https://recipes.howstuffworks.com/fda-unveils-new-food-nutrition-labels.htm

Claims on Labels

In addition to mandating nutrients and ingredients that must appear on food labels, any nutrient-content claims must meet certain requirements. For example, a manufacturer cannot claim that a food is fat-free or low-fat if it is not, in reality, fat-free or low-fat. Low-fat indicates that the product has three or fewer grams of fat; low salt indicates there are fewer than 140 milligrams of sodium, and low-cholesterol indicates there are fewer than 20 milligrams of cholesterol and two grams of saturated fat. See Table **10.8.3.2.8.3** for some examples.US Food and Drug Administration. "Additional Requirements for Nutrient Content Claims." Appendix B in *Food Labeling Guide* (October 2009).

Table **10.8.3.2.8.3**: Common Label Terms Defined

Term	Explanation
Lean	Fewer than a set amount of grams of fat for that particular cut of meat
High	Contains more than 20% of the nutrient's DV
Good source	Contains 10 to 19% of nutrient's DV
Light/lite	Contains ⅓ fewer calories or 50% less fat; if more than half of calories come from fat, then fat content must be reduced by 50% or more
Organic	Contains 95% organic ingredients

Source: US Food and Drug Administration. "Food Labeling Guide." Last updated February 10, 2012. http://www.fda.gov.

Health Claims

Often we hear news of a particular nutrient or food product that contributes to our health or may prevent disease. A health claim is a statement that links a particular food with a reduced risk of developing disease. As such, health claims such as "reduces heart disease," must be evaluated by the FDA before it may appear on packaging. Prior to the passage of the NLEA products that made such claims were categorized as drugs and not food. All health claims must be substantiated by scientific evidence in order for it to be approved and put on a food label. To avoid having companies making false claims, laws also regulate how health claims are presented on food packaging. In addition to the claim being backed up by scientific evidence, it may never claim to cure or treat the disease. For a detailed list of approved health claims, visit: https://www.fda.gov/food/food-labeling-nutrition/authorized-health-claims-meet-significant-scientific-agreement-ssa-standard

Qualified Health Claims

While health claims must be backed up by *hard* scientific evidence, qualified health claims have *supportive* evidence, which is not as definitive as with health claims. The evidence may suggest that the food or nutrient is beneficial. Wording for this type of claim may look like this: "Supportive but not conclusive research shows that consumption of EPA and DHA omega-3 fatty acids may

reduce the risk of coronary artery disease. One serving of [name of food] provides [X] grams of EPA and DHA omega-3 fatty acids. [See nutrition information for total fat, saturated fat, and cholesterol content.]US Food and Drug Administration. "FDA Announces Qualified Health Claims for Omega-3 Fatty Acids."

Structure/Function Claims

Some companies claim that certain foods and nutrients have benefits for health even though no scientific evidence exists. In these cases, food labels are permitted to claim that you may benefit from the food because it may boost your immune system, for example. There may not be claims of diagnosis, cures, treatment, or disease prevention, and there must be a disclaimer that the FDA has not evaluated the claim.US Food and Drug Administration. "Claims That Can Be Made for Conventional Foods and Dietary Supplements."

Allergy Warnings

Food manufacturers are required by the FDA to list on their packages if the product contains any of the eight most common ingredients that cause food allergies. These eight common allergens are as follows: milk, eggs, peanuts, tree nuts, fish, shellfish, soy, and wheat. (More information on these allergens will be discussed elseshere). The FDA does not require warnings that cross contamination may occur during packaging, however most manufacturers include this advisory as a courtesy. For instance, you may notice a label that states, "This product is manufactured in a factory that also processes peanuts." If you have food allergies, it is best to avoid products that may have been contaminated with the allergen.

Key Takeaways

- The Nutrition Labeling and Education Act made it a law that foods sold in the United States have a food label that provides the accurate contents of nutrients within them. Canada has a similar law.
- A Nutrition Facts panel gives information on the amount of servings per container, the amount of calories per serving, and the amounts of certain nutrients.
- The percent DV is the percentage of the amount of the nutrient in the food in relationship to its recommended intake. It is a guide to help you determine if a food is a good or poor source of nutrients.
- To keep companies from making false claims, the FDA provides regulation for food manufacturers in putting labels on packages that promote health. Allergens must also be listed on food labels. Sometimes cross contamination does occur during packaging. Most food manufacturers voluntarily list this information. If you have a food allergy, it is best to avoid any product that has even had the possibility of coming in contact with a known allergen.

Discussion Starter

1. Recall the food you buy from the supermarket on a regular basis. How many of the food products you purchase regularly are nutrient-dense? How many are nutrient-poor? What foods can you substitute in place of the nutrient-poor food choices?

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10.8.3.2.9: When Enough is Enough

Learning Objectives

- Judge food portion sizes for adequacy.

Estimating Portion Size

Have you ever heard the expression, “Your eyes were bigger than your stomach?” This means that you thought you wanted a lot more food than you could actually eat. Amounts of food can be deceiving to the eye, especially if you have nothing to compare them to. It is very easy to heap a pile of mashed potatoes on your plate, particularly if it is a big plate, and not realize that you have just helped yourself to three portions instead of one.

The food industry makes following the *2010 Dietary Guidelines* a challenge. In many restaurants and eating establishments, portion sizes have increased, use of SoFAS has increased, and consequently the typical meal contains more calories than it used to. In addition, our sedentary lives make it difficult to expend enough calories during normal daily activities. In fact, more than one-third of adults are not physically active at all.

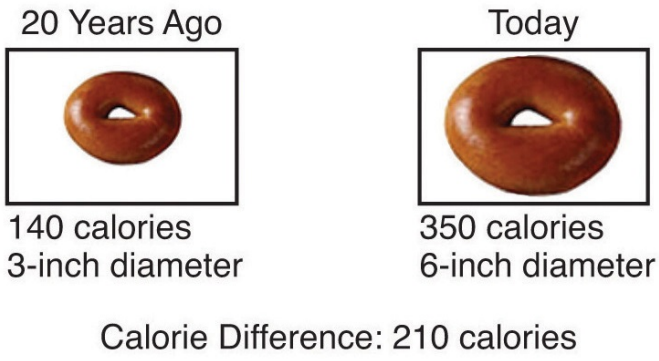


Figure **10.8.3.2.9.1**: As food sizes and servings increase it is important to limit the portions of food consumed on a regular basis.

Dietitians have come up with some good hints to help people tell how large a portion of food they really have. Some suggest using common items such as a deck of cards while others advocate using your hand as a measuring rule. See Table **10.8.3.2.9.1** for some examples.American Cancer Society. “Controlling Portion Sizes.” Last revised January 12, 2012. http://www.cancer.org/Healthy/EatHealthyGetActive/TakeControlofYourWeight/controlling-portion-sizes.

Table **10.8.3.2.9.1**: Determining Food Portions

Food Product	Amount	Object Comparison	Hand Comparison
Pasta, rice	½ c.	Tennis ball	Cupped hand
Fresh vegetables	1 c.	Baseball	
Cooked vegetables	½ c.	Cupped hand	
Meat, poultry, fish	3 oz.	Deck of cards	Palm of your hand
Milk or other beverages	1 c.	Fist	
Salad dressing	1 Tbsp.	Thumb	
Oil	1 tsp.	Thumb tip	

Video 10.8.3.2.9.1: Managing a Healthy Diet: Judging Healthy Portion Sizes



A dietitian shows how to compare food sizes with hands and other objects.(click to see video)

MyPlate Planner

Estimating portions can be done using the MyPlate Planner. Recall that the MyPlate symbol is divided according to how much of each food group should be included with each meal. Note the MyPlate Planner Methods of Use:

- Fill half of your plate with vegetables such as carrots, broccoli, salad, and fruit.
- Fill one-quarter of your plate with lean meat, chicken, or fish (about 3 ounces)
- Fill one-quarter of your plate with a whole grain such as ⅓ cup rice
- Choose one serving of dairy
- Add margarine or oil for preparation or addition at the table

Table **10.8.3.2.9.2**: Meal Planning Guidelines

Carbohydrates	Meats/Proteins	Fats	Free Foods
Choose three servings with each meal.	Choose one to three servings with each meal.	Choose one to two servings with each meal.	Use as desired.
Examples of *one* serving:	Examples of *one* serving:	Examples of *one* serving:	Examples
Breads and Starches • 1 slice bread or small roll • ⅓ c. rice or pasta • ½ c. of cooked cereal or potatoes • ¾ c. dry cereal • ½ c. corn	• 1 oz. lean meat, poultry, or fish • 1 egg • 1 oz. cheese • ¾ c. low-fat cottage cheese	• 1 tsp. margarine, oil, or mayonnaise • 1 Tbsp. salad dressing or cream cheese	**Foods with less than 20 calories per serving.*** • Most vegetables • Sugar-free soda • Black coffee or plain tea
Fruits • 1 piece, such as a small pear • 1 c. fresh fruit • ½ c. canned fruit • ½ c. fruit juice			
Milk • 1 c. skim or low fat • 1 c. unsweetened low-fat yogurt			

Key Takeaways

- Judging portion sizes can be done using your hand or household objects in comparison. It can also be done using the MyPlate guide to determine how much food is a portion for that meal.

Discussion Starter

1. Why is it important to judge portion sizes properly? Explain why it can be tricky to read food labels and figure out the caloric content for one serving.

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10.8.3.2.10: Nutrition and the Media

Learning Objectives

- List at least four sources of reliable and accurate nutrition information.

A motivational speaker once said, “A smart person believes half of what they read. An *intelligent* person knows which half to believe.” In this age of information where instant Internet access is just a click away, it is easy to be misled if you do not know where to go for reliable nutrition information. There are a few websites that can be consistently relied upon for accurate material that is updated regularly.



Figure 10.8.3.2.10.1: Right information or wrong information? How can you know? © Shutterstock

Using Eyes of Discernment

“New study shows that margarine contributes to arterial plaque.” “Asian study reveals that two cups of coffee per day can have detrimental effects on the nervous system.” How do you react when you read news of this nature? Do you boycott margarine and coffee? When reading nutrition-related claims, articles, websites, or advertisements always remember that one study does not substantiate a fact. One study neither proves nor disproves anything. Readers who may be looking for complex answers to nutritional dilemmas can quickly misconstrue such statements and be led down a path of misinformation. Listed below are ways that you can develop discerning eyes when reading nutritional news.

1. The scientific study under discussion should be published in a peer-reviewed journal, such as the *Journal of the International Society of Sports Nutrition*. Question studies that come from less trustworthy sources (such as non peer-reviewed journals or websites) or that are not published.
2. The report should disclose the methods used by the researcher(s). Did the study last for three or thirty weeks? Were there ten or one hundred participants? What did the participants actually do? Did the researcher(s) observe the results themselves or did they rely on self reports from program participants?
3. Who were the subjects of this study? Humans or animals? If human, are any traits/characteristics noted? You may realize you have more in common with certain program participants and can use that as a basis to gauge if the study applies to you.
4. Credible reports often disseminate new findings in the context of previous research. A single study on its own gives you very limited information, but if a body of literature supports a finding, it gives you more confidence in it.
5. Peer-reviewed articles deliver a broad perspective and are inclusive of findings of many studies on the exact same subject.
6. When reading such news, ask yourself, “Is this making sense?” Even if coffee does adversely affect the nervous system, do you drink enough of it to see any negative effects? Remember, if a headline professes a new remedy for a nutrition-related topic, it may well be a research-supported piece of news, but more often than not it is a sensational story designed to catch the attention of an unsuspecting consumer. Track down the original journal article to see if it really supports the conclusions being drawn in the news report.

When reading information on websites, remember the following criteria for discerning if the site is valid:

1. Who sponsors the website?

2. Are names and credentials disclosed?
3. Is an editorial board identified?
4. Does the site contain links to other credible informational websites? Even better, does it reference peer-reviewed journal articles? If so, do those journal articles actually back up the claims being made on the website?
5. How often is the website updated?
6. Are you being sold something at this website?
7. Does the website charge a fee?

Trustworthy Sources

Now let's consider some reputable organizations and websites from which you can obtain valid nutrition information.

1. **Centers for Disease Control and Prevention (CDC):** The Centers for Disease Control and Prevention (http://www.cdc.gov) distributes an online newsletter called *CDC Vital Signs*. This newsletter is a valid and credible source for up-to-date public health information and data regarding food, nutrition, cholesterol, high blood pressure, obesity, teenage drinking, and tobacco usage.
2. **The Academy of Nutrition and Dietetics (AND):** The AND promotes scientific evidenced-based, research-supported food and nutrition related information on its website, http://www.eatright.org. It is focused on informing the public about recent scientific discoveries and studies, weight-loss concerns, food safety topics, nutrition issues, and disease prevention.
3. **US Department of Agriculture (USDA):** The USDA site fnic.nal.usda.gov has more than twenty-five hundred links to dietary, nutrition, diet and disease, weight and obesity, food-safety and food-labeling, packaging, dietary supplement and consumer questions sites. Using this interactive site, you can find tips and resources on how to eat a healthy diet, my Foodapedia, and a food planner, among other sections.
4. **US Department of Health and Human Services (HHS):** The HHS website, HealthFinder.gov, provides credible information about healthful lifestyles and the latest in health news. A variety of online tools are available to assist with food-planning, weight maintenance, physical activity, and dietary goals. You can also find healthful tips for all age groups, tips for preventing disease, and on daily health issues in general.
5. **Dietitians of Canada:** Dietitians of Canada, http://www.dietitians.ca/, is the national professional association for dietitians. It provides trusted nutrition information to Canadians and health professionals.
6. **Health Canada:** Health Canada, http://www.hc-sc.gc.ca/index-eng.php, is the Federal department that helps Canadians improve their health. Its website also provides information about health-related legislation.

Key Takeaways

- Reliable nutritional news will be based upon solid scientific evidence, supported by multiple studies, and published in peer-reviewed journals. Be sure the website you use for information comes from a credible and trustworthy source, such as the USDA Food and Nutrition Center, the HHS, and the CDC.

Discussion Starter

1. Discuss why it is important to get information from proper and credible sources and not to rely upon single study findings.

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10.8.3.2.E: Exercises

It's Your Turn

1. What are the dietary reference intakes (DRI's)? What are they for? There used to only be one reference intake, the RDA, why are there so many now?
2. Define each of the following in everyday language:

   A. Estimated Average Requirements (EAR)

   *Why DON'T we use this one as the recommended amount people should eat daily?

   B. Recommended Dietary Allowances (RDA)

   *Why DO we use this one as the recommended amount people should eat daily?

   C. Adequate Intakes (AI)

   D. Tolerable Upper Intake Levels (UL)

   *Should we strive to reach the UL for a nutrient every day?6. Using Food Labels (use food label image below):

3. Select a packaged food and find the "Nutrition Facts" panel. Then answer the following questions A. How many Calories are there in 1 serving of this food?
   B. Look at the "Total Fat" and the "Saturated Fat". Is the Saturated fat PART of the Total Fat?
   C. What does the % Daily Value mean? For example, if it says that for every 1 serving of this food I get 2% Daily Value of Vitamin C. What does that mean?

Apply It

1. You have been hired to write a two-page article for a weekly magazine about why nutrition is important to health. Using simple terms and a good supply of photographs, create your article. Be prepared to share your project with the class.
2. Record a food diary this week. At the end of the week, circle the foods that contain SoFAS. Next to each food, write a substitute food to replace it. Record a food diary next week. Be sure to eat the substitute foods you have selected to replace the foods that contained the SoFAS.
3. Search the Internet for sites that claim to give you nutritional advice. Check to see who sponsors the sites and if the site is trying to sell you a product or service. Compare the information found on the sites to those recommended in this text. What similarities do you notice? What differences do you notice?

Expand Your Knowledge

1. You have just been hired at the local Boys and Girls club in an inner city neighborhood that happens to have a large high school drop-out rate. You have been put in charge of creating physical and nutritional opportunities for the community. Your goal for the first quarter is to enroll one hundred students in an exercise/nutrition program. You must develop two programs.
   - Define each program and state its objectives
   - Describe the ways in which the program will benefit participants
   - List ways in which you will encourage enrollment
   - Create a marketing flyer for each program
2. You are planning a big meal for a surprise graduation party for your friend. You expect fifty guests to attend. Using the information you have learned regarding healthy eating and food portions, plan a healthful meal. Determine how much protein, vegetables, fruits, and starch you will need to purchase to feed everyone comfortably. Write down a detailed list so that you can shop and prepare your budget accordingly. Share your results with the class.
3. You are a Registered Dietitian who has been asked to help a vegan patient adjust their eating habits to get more nutrients from their diet and halt unwanted weight loss. Develop a week's worth of meals to help this person have balance in their diet.

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SECTION OVERVIEW

10.8.3.3: Nutrition and the Human Body

Because we know that you may not have a background in biology, we start with a tour through the human body, from the single cell to the full organism, we set up for a discussion about the processes of digestion and absorption, followed by explorations of the other organ systems. After that, we discuss the concept of energy and calories. We also discuss some disorders and diseases related to nutritional health.

10.8.3.3.1: The Role of Social Media on Mental Health

10.8.3.3.2: Nutrients Are Essential for Organ Function

10.8.3.3.3: Energy and Calories

10.8.3.3.4: Disorders That Can Compromise Health

10.8.3.3.E: Exercises

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10.8.3.3.1: The Role of Social Media on Mental Health

Amy Baldwin

Questions to Consider:

- Why do I use social media?
- How can I balance positive and negative social media use?
- How can I identify and improve problematic social media use?
- What should I do if I experience cyberbullying?

Some people refer to the time we are living in as the age of overload. It's easy to get worn down by social media and the constant news cycle, and to be overwhelmed by too many choices that social media affords us. We live in a fast-paced, always-on world with a lot of pressures.

Social media offers many benefits, from staying connected to your loved ones and friends, learning about events in your community, and providing you with the ability to get information quickly. Unfortunately, these benefits are compounded with many risks (see Figure 38.1). Among college students, social media has also been associated with negative effects on self-esteem and self-image. Overuse of social media has been found to increase symptoms of anxiety, loneliness, and depression.

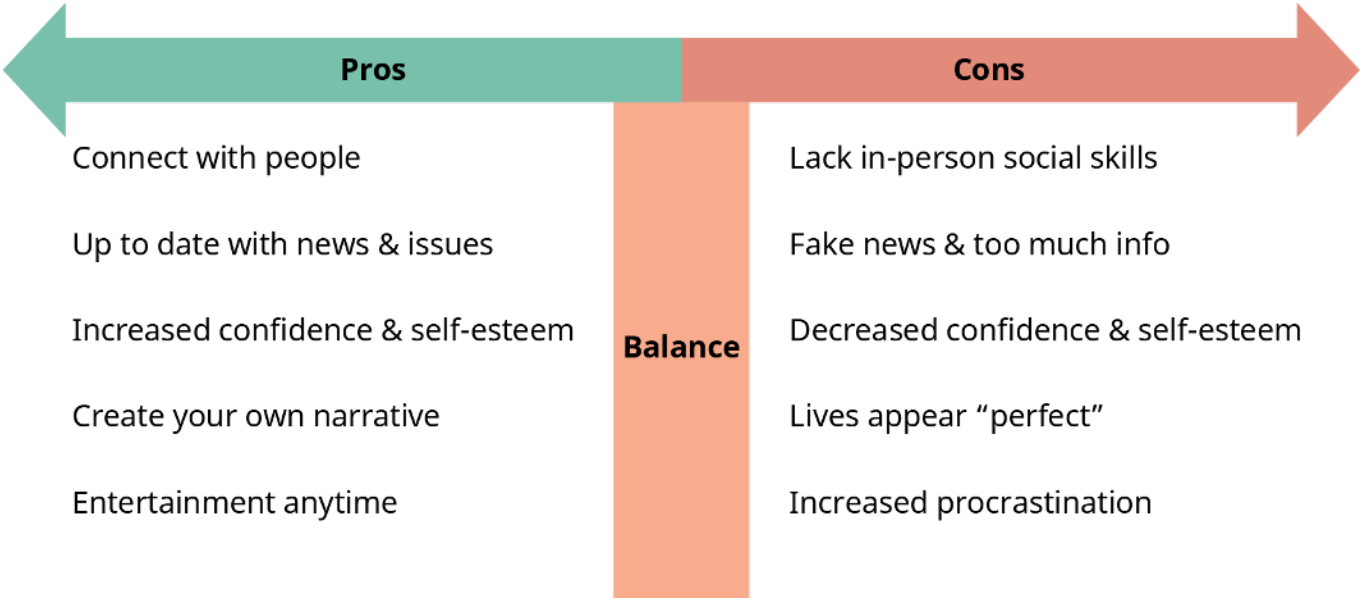


Figure 38.1 The Pros and Cons of Social Media

Uncovering Your Relationship with Social Media

By better understanding your relationship with social media, you will be more successful in finding the right balance and occasions for using it. The best way to get started is to just become aware of your relationship with social media and how it may or may not impact your own mental health.

ANALYSIS QUESTION

What is your relationship with social media? Do you feel you may have a problematic relationship with social media use? Here are some Questions to Consider and to learn more regarding your relationship with social media use:

- Do you spend a lot of time planning or thinking about how to use social media?
- Do you have difficulty concentrating in class or when you are studying due to social media use?
- Do you often use social media as an escape from what is happening in the real world?
- Do you feel you have to spend time on social media to feel satisfaction or pleasure?
- Do you find yourself engaging in or wanting to engage in social media when it is not appropriate (e.g., during a class)?
- Do you feel that you are more irritable, anxious, or sad when you are not able to use social media?
- Do you have experience with attempting to control your social media use and not being successful in such efforts?

Upon reflection from the activity above, where is your relationship with social media? To consider the relationship another way, think about the questions in the table below? Which more accurately describes your most frequent feelings when using social media?

Table 38.1 Relationship with Social Media

Frequency and Duration	Do you use social media for occasional entertainment and connection?	Or do you perhaps feel that you need constant stimulation and validation from your online network?
Feelings and Impact	Do you find yourself truly happy after looking through friends' posts or seeing your feed?	Or have you noticed that your mood is negatively impacted by what you are seeing on social media?
Outcomes and desire for change	Do you take inspiration and ideas from social media?	Or do you frequently feel you are "less than," or feel pressure to change?

Impact on Your Focus and Attention

When asked how social media use impacts a student's ability to study, two out of three undergraduate college students indicated they were more drawn to social media than their school work. Although the answer may be as simple as social media is more fun, the deeper issue may be related to how your use of social media has trained your brain to prefer to take in information in short

doses. Social media rewards a distracted, shorter attention span, which may reward giving our brain quick doses of dopamine. (Dopamine is a chemical in your brain related to feelings of pleasure or satisfaction.) Similarly, when your phone beeps, buzzes, or vibrates with new posts waiting for you, your brain receives a dose of dopamine.

Distractions from social media have also been linked to our desire to be connected and be available for people in our networks. Similar studies have shown that the fear of missing out (FoMO) leads to significant social media-driven distractions.

The first step of gaining control over these distractions is by eliminating them. As you know, you can easily turn on/off your phone (watch, computer, etc.) notifications. Consider switching away from social media during your relaxing time and pick up a book or magazine, an old school puzzle, or journaling on paper. Another way to improve your concentration is to focus on one task at a time. Put away your phone for 30-90 minutes, jot down three tasks you need to complete, and check one off at a time. The more you use these strategies, the faster you will regain your focus and attention.

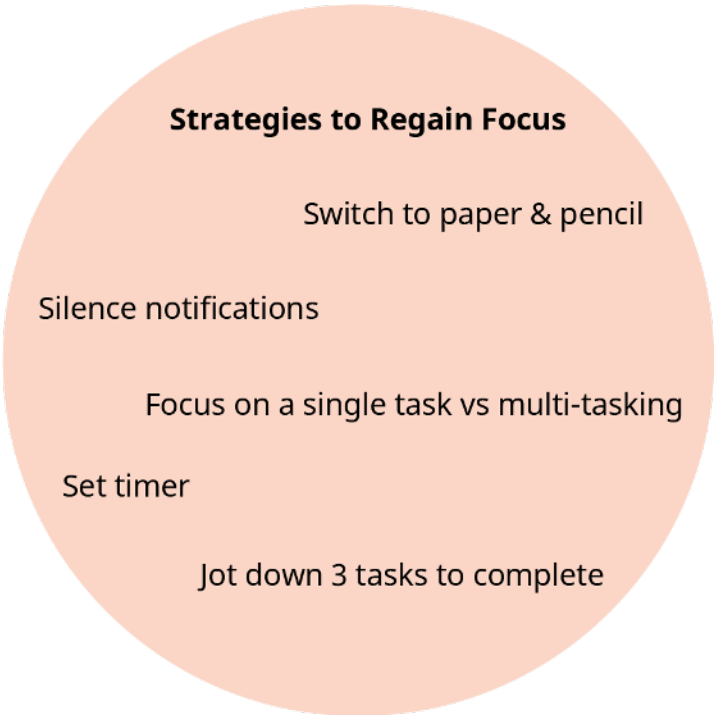


Figure 38.2 Strategies to Regain Focus

Impact on Relationships

Problematic social media use has been well documented among individuals who experience social anxiety and loneliness. For these individuals, social media is often used as a form of connection when in-person relationships are lacking. As mentioned above, for individuals who actively use social media as a way to directly communicate with others, social media use can provide social support and connection. Alternatively, those who use social media more passively, such as only to view other's lives, have more negative outcomes that can include depression and anxiety. Are you active in your engagement or passive?

If you feel your engagement is only passive, consider this as a red flag, and start by setting boundaries on your social media use as discussed above. To prevent social media from impacting your relationships, consider using social media more actively by reaching out to those in your network to plan in-person meet ups. Also, if you find yourself frequently comparing yourself to what you see on others' social media, remember that people's digital life might not be reflective of reality. If you find such comparisons damaging your self-esteem and relationship with yourself, reach out to your support network and open the conversation.

Need for Validation

Consider this scenario: Josh just finished finals week and posted on social media, "I guess I will start packing up my room. I know I just failed my chemistry final. My parents are going to threaten not to pay for next semester." An hour later, Josh is back in his dorm room and checks his account. No comments. No likes. No "hug" or "care" emoji.

How did you feel when you read this situation? Did it trigger you to cringe and feel bad for Josh? Have you ever found yourself in a similar situation? How did you feel then?

When you first started using social media you may have simply posted a picture or update in order to keep your friends and family connected with your life. At some point in time, you likely started to expect likes and comments. Eventually, if you don't get the same level of likes and comments you have become accustomed to, you may start to think your connections are not interested in you.

According to research, the lack of response is often interpreted as "no one cares since no one took the time to respond." This line of thinking can lead to self-doubt, insecurity, and anxiety. Seeking validation – either positive or negative — via social media is moving your relationship with social media into problem territory. If you reach that point, you should pause and reflect on the meaning of this behavior. One of the immediate steps you can take to disrupt this unhealthy cycle is to pause before you post.



Figure 38.3

Problematic Social Media Use

In 2021, the average internet user spent nearly two and a half hours per day on social media. That translates to over 37 days per year, and over the average lifetime, more than seven years of time. Let that sink in. Since we spend so much time on social media, dedicating such a massive portion of our lives to it, it's even more important we spend that time well. As stated above, there are definitely positives associated with engaging in social media, especially if you use it to learn more, broaden your social network, and enhance your life by letting it lead you to new offline experiences. However, there are times when social media use, or overuse, can be problematic and unhealthy.

Factors that lead to an individual having problematic social media use include the following:

1. poor self-regulation,
2. lack of control of time spent on social media,
3. social media as a mood regulator,
4. history of obsessive thinking,
5. social media impacting your social and/or professional life, and
6. if social media use is altered to negate these negative factors yet the individual relapses.

As a student, problematic social media use could mean that your attendance in class declines or you fail to complete assignments, which leads to lower academic achievement. You may find watching videos and viewing posts more satisfying than learning. You may regularly become distracted while participating in activities that require your full attention, such as driving. Further, problematic social media use refers to using social media platforms for reasons that are illegal, unethical, or socially unacceptable behaviors such as stalking, bullying, or spreading misinformation.

As previously described, evaluating your relationship with social media is the first place to start. In a recent intervention to decrease problematic social media use, students were asked to log their daily use of social media for one week. They logged the length of their time on social media, as well as how they were using it and their thoughts and emotions. After one week, students significantly reduced their level of problematic social media use and improved their mental health and academic efficiency.

Cyberbullying

The relationship between mental health issues and bullying is well documented. The relationship between mental health and bullying in the digital space, known as cyberbullying, is a newer problem and unfortunately provides a platform for bullies to say things behind the screen that most likely would never be said in person. Compared to traditional bullying, cyberbullying isn't easily reduced by supervision, has the potential for larger audiences, is often anonymous, and has fewer opportunities for someone to provide direct feedback in order to put a stop to the activity.

For individuals experiencing cyberbullying, it is much harder to avoid attacks and/or escape as the bullying can take place any time of the day. Cyberbullying has a larger audience due to how well connected social media is throughout the community, state, country, and world. Posts and conversations on social media have limitless reach which often puts the victim in a situation with very little control. Once information is in the virtual world, the text becomes very hard to remove and can "go viral" where it becomes so popular you can find it on any search platform.

Cyberbullying via social media can affect people of all ages, and it puts individuals in a difficult situation in which they cannot adequately defend themselves. The roles of each person involved in cyberbullying is consistently in a state of transition as people switch roles from being the victim, to the perpetrator, or the bystander as social media features (i.e., like, share) are utilized. In a recent study of US college students, 1 out of 2 students report being a victim of cyberbullying, while 1 out of 4 students report being a perpetrator at least one time per month.

Prevention strategies to decrease frequency of cyberbullying events are limited; however, research addressing victimization has noted the most effective strategy is to engage your social support network. Together you and a supportive person in your life can discuss the situation and make a plan to avoid further cyberbullying. Eliminating your social media platform where the attacks are occurring is not the only solution. Social media companies are aware that their users may experience these negative events and have put systems into place to report when users engage in such attacks. These companies have also enabled features to block or modify account privacy to prevent situations in the future. The table below provides common examples of cyberbullying and their explanations.

Table 38.2 Cyberbullying

Forms of Cyberbullying	Explanation
Victimization	person who receives the harmful communication
Perpetration	person initiating the harmful communication
Bystander or witness	person who witnesses the harmful communication

GET CONNECTED

If you feel you or someone you know is a victim, a perpetrator, or that you are a witness to cyberbullying you can contact student services and they can help safely guide you to the correct resources on your campus. If you need immediate assistance, IT departments and campus security can help you as well as recommend local law enforcement if illegal activity is at play including but not limited to harassment and stalking. Keep a record of the details including dates and times and take pictures when possible.

For more information on cyberbullying consult these resources.

Resource	Details
stopbullying.gov	This is a federal government website and is managed by the U.S. Department of Health and Human Services. It provides trusted resources for prevention and reporting of cyberbullying as well as documents strategies to deal with “haters.”
cyberbullying.org	This website provides a list of social media apps, gaming networks, and other platforms and a link to how to report cyberbullying for this particular website.
jedfoundation.org	The Jed Foundation is a nonprofit focused on youth mental health and suicide prevention. Through this website you can find immediate resources for you (“I need help”) or for someone you want to help (“I want to help”). The website also has a resource page with more information on cyberbullying including how to cope, understanding what it is, balancing social media, and more.

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OpenStax College Success Concise Chapter 6.5 The Role of Social Media on Mental Health. Access for free at: https://openstax.org/books/college-success-concise/pages/6-5-the-role-of-social-media-on-mental-health

Baldwin, A. (2023). The Role of Social Media on Mental Health. In *College Success Concise*. OpenStax.

Modifications: Figures and tables renumbered.

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10.8.3.3.2: Nutrients Are Essential for Organ Function

Learning Objectives

- Generalize how the body distributes nutrients to the rest of the body.
- Summarize the importance of adequate nutrition on other organ systems.

When the digestive system has broken down food to its nutrient components they are ready to get absorbed. Absorption is the movement of the nutrient molecules from the digestive tract into the blood or lymph. If the absorbed nutrient is water soluble it will be absorbed into the blood and if the nutrient is fat soluble it will be packaged into a special transport package, called a chylomicron, and absorbed into the lymph. For water soluble nutrients, the first stop is the liver. The liver has the ability to store some nutrients, send some nutrients on to other parts of the body and/or change some nutrients into other molecules the body needs! Fat soluble nutrients, because they are absorbed into the lymph and only later spill into the blood, travel first to the heart but eventually they too will end up at the liver.



The liver is the checkpoint for metabolic activity. © Shutterstock

The liver is the only organ in the human body that is capable of exporting nutrients for energy production to other tissues. Therefore, when a person is in between meals (fasted state) the liver exports nutrients and when a person has just eaten (fed state) the liver stores nutrients within itself. Nutrient levels and the hormones that respond to their levels in the blood provide the input so that the liver can distinguish between the fasted and fed states and distribute nutrients appropriately.

All eleven organ systems in the human body require nutrient input to perform their specific biological functions. No energy in means no work output. Overall health and the ability to carry out all of life's basic processes is fueled by nutrients. Without them organ systems would fail, humans would not reproduce, and the race would disappear. In this section, we will discuss some of the critical nutrients that support specific organ system functions.

The Circulatory System (Cardiovascular System)

The circulatory system, which is part of the "cardiovascular" system, is one of the eleven organ systems of the human body. Its main function is to transport nutrients to cells and wastes from cells (Figure 10.8.3.3.2.1). This system consists of the heart, blood, and blood vessels. The heart pumps the blood, and the blood is the transportation fluid. The transportation route to all tissues is a highly intricate blood-vessel network, comprised of arteries, veins, and capillaries. Nutrients absorbed in the small intestine travel mainly to the liver through the hepatic portal vein. From the liver, nutrients travel upward through the inferior vena cava blood vessel to the heart. The heart forcefully pumps the nutrient-rich blood first to the lungs to pick up some oxygen and then to all other cells in the body. Arteries become smaller and smaller on their way to cells, so that by the time blood reaches a cell, the artery's diameter is extremely small and the vessel is now called a capillary. The reduced diameter of the blood vessel substantially slows

the speed of blood flow. This dramatic reduction in blood flow gives cells time to harvest the nutrients in blood and exchange metabolic wastes.

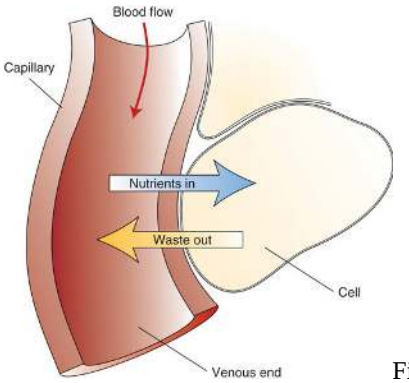
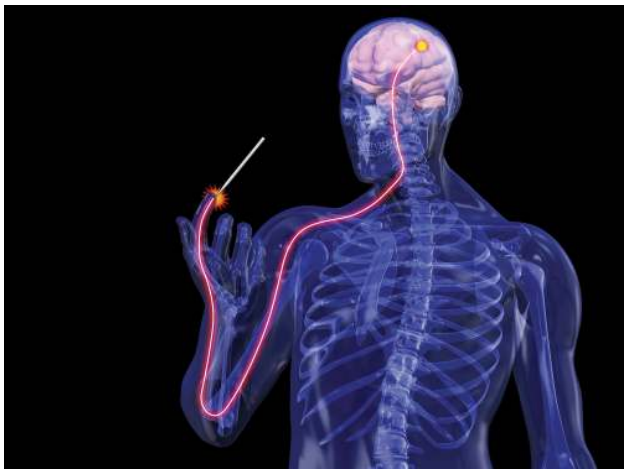


Figure **10.8.3.3.2.1**: The Circulatory System: The circulatory system transports nutrients to all cells and carries wastes out.

The Central Nervous System

The human brain (which weighs only about 3 pounds, or 1,300 kilograms) is estimated to contain over one hundred billion neurons. Neurons form the core of the central nervous system, which consists of the brain, spinal cord, and other nerve bundles in the body. The main function of the central nervous system is to sense changes in the external environment and create a reaction to them. For instance, if your finger comes into contact with a thorn on a rose bush, a sensory neuron transmits a signal from your finger up through the spinal cord and into the brain. Another neuron in the brain sends a signal that travels back to the muscles in your hand and stimulates muscles to contract and you jerk your finger away. All of this happens within a tenth of a second. All nerve impulses travel by the movement of charged sodium, potassium, calcium, and chloride atoms. These are some of the essential minerals in our diets—essential because they are absolutely required for central nervous system function. Nerves communicate with each other via chemicals built from amino acids called neurotransmitters. Eating adequate protein from a variety of sources will ensure the body gets all of the different amino acids that are so important for central nervous system function.



The brain has been compared to a central computer that controls all body functions. It relays messages to and from various body parts at lightning speed within a vast communication network of cells. © Shutterstock

Every day the brain uses over 20 percent of the energy obtained from nutrients. Its main fuel is glucose and only in extreme starvation will it use anything else. For acute mental alertness and clear thinking, glucose must be systematically delivered to your brain. This does not mean that sucking down a can of sugary soda before your next exam is a good thing. Just as too much glucose is bad for other organs, such as the kidneys and pancreas, it also produces negative effects upon the brain. Excessive glucose levels in the blood can cause a loss of cognitive function and chronically high blood-glucose levels can damage brain cells. The brain's cognitive functions include language processing, learning, perceiving, and thinking. Recent scientific studies demonstrate that

having continuously high blood-glucose levels substantially elevates the risk for developing Alzheimer's disease, which is the greatest cause of age-related cognitive decline.

The good news is that much research is directed toward determining the best diets and foods that slow cognitive decline and maximize brain health. A study in the June 2010 issue of the *Archives of Neurology* reports that people over age sixty-five who adhered to diets that consisted of higher intakes of nuts, fish, poultry, tomatoes, cruciferous vegetables, fruits, salad dressing, and dark green, and leafy vegetables, as well as a lower intake of high-fat dairy products, red meat, organ meat, and butter, had a much reduced risk for Alzheimer's disease.Gu, Y., PhD et al. "Food Combination and Alzheimer Disease Risk: A Protective Diet." *Arch Neurol* 67, no. 6 (2010): 699–706. doi: 10./1001/archneurol.2010.84. Other scientific studies provide supporting evidence that foods rich in omega-3 fatty acids and/or antioxidants provide the brain with protection against Alzheimer's disease. One potential "brain food" is the blueberry. The protective effects of blueberries upon the brain are linked to their high content of anthocyanins, which are potent antioxidants and reduce inflammation. A small study published in the April 2010 issue of the *Journal of Agricultural and Food Chemistry* found that elderly people who consumed blueberry juice every day for twelve weeks had improved learning and memorization skills in comparison to other subjects given a placebo drink.Krikorian, R. et al. "Blueberry Supplementation Improves Memory in Older Adults." *J Agric Food Chem* 58, no. 7 (2010): 3996–4000. doi: 10.1021/jf9029332. More clinical trials are evaluating the effects of blueberries and other foods that benefit the brain and preserve its function as we age.

The Muscular System

The muscular system allows the body to move voluntarily, but it also controls involuntary movements of other organ systems such as heartbeat in the circulatory system and peristaltic waves in the digestive system. It consists of over six hundred skeletal muscles, as well as the heart muscle, the smooth muscles that surround your entire alimentary canal, and all your arterial blood vessels. Muscle contraction relies on energy delivery to the muscle. Each movement uses up cellular energy and without an adequate energy supply muscle function suffers. Muscle, like the liver, can store the energy from glucose in the large polymeric molecule glycogen. But unlike the liver, muscles use up all of their own stored energy and do not export it to other organs in the body. When muscle energy stores are diminished, muscle contraction weakens. However, muscle is not as susceptible to low levels of blood glucose as the brain because it will readily use alternate fuels, such as fatty acids and protein to produce cellular energy.

"Hitting the Wall" or "Bonking"

If you are familiar with endurance sports, you may have heard of "hitting the wall" or "bonking." These colloquial terms refer to the extreme fatigue that sets in after about 120 minutes of performing an endurance sport, such as marathon running or long-distance cycling. The physiology underlying "hitting the wall" means that muscles have used up all their stored glycogen and are therefore dependent on other nutrients to support their energy needs. Fatty acids are transported from fat-storing cells to the muscle to rectify the nutrient deficit. However, fatty acids take more time to convert to energy than glucose, thus decreasing performance levels. To avoid "hitting the wall" or "bonking," endurance athletes load up on carbohydrates a few days before the event. This will maximize an athlete's amount of glycogen stored in their liver and muscle tissues. It is important not to assume that carbohydrate loading works for everyone. Without accompanied endurance training you will not increase the amount of stored glucose. If you plan on running a five-mile race for fun with your friend and decide to eat a large amount of carbohydrates in the form of a big spaghetti dinner the night before, the excess carbohydrates will be stored fat. Another way for athletes to avoid "hitting the wall" is to consume carbohydrate-containing drinks and foods during an endurance event. In fact, throughout the Tour de France—a twenty-two-day, twenty-four-hundred-mile race—the average cyclist consumes greater than 60 grams of carbohydrates per hour.



In order to avoid "hitting the wall," athletes consume large amounts of carbohydrates before and during events to ensure enough glucose is available for optimal performance, especially during endurance activities such as cycling. (Public Domain; Vzach).

The Endocrine System

The functions of the endocrine system are intricately connected to the body's nutrition. This organ system is responsible for regulating appetite, nutrient absorption, nutrient storage, and nutrient usage, in addition to other functions, such as reproduction. The glands in the endocrine system are the pituitary, thyroid, parathyroid, adrenals, thymus, pineal, pancreas, ovaries, and testes. The glands secrete hormones, which are biological molecules that regulate cellular processes in other target tissues, so they require transportation by the circulatory system. Adequate nutrition is critical for the functioning of all the glands in the endocrine system. A protein deficiency impairs gonadal-hormone release, preventing reproduction. Athletic teenage girls with very little body fat often do not menstruate. Children who are malnourished usually do not produce enough growth hormone and fail to reach normal height for their age group. Probably the most popularized connection between nutrition and the functions of the endocrine system is that unhealthy dietary patterns are linked to obesity and the development of Type 2 diabetes. The Centers for Disease Control and Prevention (CDC) estimates that twenty-six million Americans have Type 2 diabetes as of 2011. This is 8.3 percent of the US population. The maps in Note 3.35 show the percentage of adults who are obese, and those with diagnosed Type 2 diabetes within all American counties. You can see that those counties with the highest incidence of obesity also have the highest incidence of Type 2 diabetes.

Video 10.8.3.3.2.1: Obesity and Type 2 Diabetes

Watch the National Health video to see the relationship between the rise in obesity and the rise in Type 2 diabetes.



What is the causal relationship between overnutrition and Type 2 diabetes? The prevailing theory is that the overconsumption of high-fat and high-sugar foods causes changes in muscle, fat, and liver cells that leads to a diminished response from the pancreatic hormone insulin. These cells are called “insulin-resistant.” Insulin is released after a meal and instructs the liver and other tissues to take up glucose and fatty acids that are circulating in the blood. When cells are resistant to insulin they do not take up enough glucose and fatty acids and so glucose and fatty acids remain at high concentrations in the blood. The continuously high amounts of glucose and fatty acids in the blood impair the release of insulin from the pancreas, further exacerbating the situation. The chronic elevation of glucose and fatty acids in the blood also causes damage to other tissues over time, so that people who have Type 2 diabetes are at increased risk for cardiovascular disease, kidney disease, nerve damage, and eye disease.

Tools for Change

Do your part to slow the rising tide of obesity and Type 2 diabetes in this country. On the individual level, improve your own family’s diet; at the local community level, support the development of more nutritious school lunch programs; and at the national level, support your nation’s nutrition goals. Visit the CDC Diabetes Public Health Resource website at http://www.cdc.gov/diabetes/. It provides information on education resources, projects, and programs, and spotlights news on diabetes and obesity. The CDC also has a new workplace program called CDC’s LEAN *Works!* (LEAN: Leading Employees to Activity and Nutrition). The program provides free web-based resources with the mission of designing worksites that prevent obesity. See http://www.cdc.gov/leanworks/ for more details.

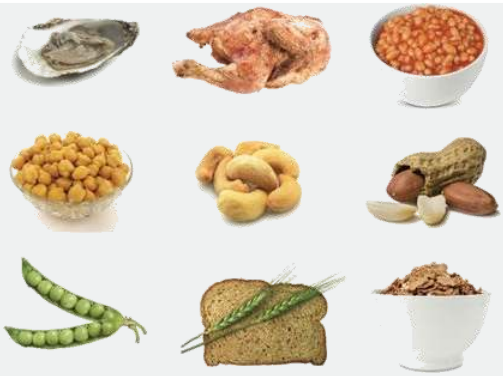
The Immune System

The immune system is comprised of several types of white blood cells that circulate in the blood and lymph. Their jobs are to seek, recruit, attack, and destroy foreign invaders, such as bacteria and viruses. Other less realized components of the immune system are the skin (which acts as a barricade), mucus (which traps and entangles microorganisms), and even the bacteria in the large intestine (which prevent the colonization of bad bacteria in the gut). Immune system functions are completely dependent on dietary nutrients. In fact, malnutrition is the leading cause of immune-system deficiency worldwide. When immune system functions are inadequate there is a marked increase in the chance of getting an infection. Children in many poor, developing countries have protein- and/or energy-deficient diets that are causative of two different syndromes, kwashiokors and marasmus. These children often die from infections that their bodies could normally have fought off, but because their protein and/or energy intake is so low, the immune system cannot perform its functions.

Other nutrients, such as zinc, selenium, copper, folate, and vitamins A, B_6, C, D, and E, all provide benefits to immune system function. Deficiencies in these nutrients can cause an increased risk for infection and death. Zinc deficiency results in suppression of the immune system’s barrier functions by damaging skin cells; it is also associated with a decrease in the number of circulating white blood cells. A review of several studies in the journal *Pediatrics* concluded that zinc supplements administered to children under age five for longer than three months significantly reduces the incidence and severity of diarrhea and respiratory illnesses.Aggarwal R., MD, DM, J. Sentz, MPH and M. A. Miller, MD. “Role of Zinc Administration in Prevention of Childhood Diarrhea and Respiratory Illnesses: A Meta-Analysis.” *Pediatrics* 119, no. 6 (2007): 1120–30. doi: 10.1542/peds.2006–3481. Zinc supplementation has also been found to be therapeutically beneficial for the treatment of leprosy, tuberculosis, pneumonia, and the common cold. Equally important to remember is that multiple studies show that it is best to obtain your minerals and vitamins from eating a variety of healthy foods.

Tools for Change

To ensure that your diet includes zinc-friendly foods, try these foods high in zinc and other immune-system friendly nutrients: oysters, poultry, baked beans, chick peas, cashews, sesame seeds, peanuts, whole grains, and zinc-fortified cereals.



These are just some of the foods that are high in zinc.

Just as undernutrition compromises immune system health, so does overnutrition. People who are obese are at increased risk for developing immune system disorders such as asthma, rheumatoid arthritis, and some cancers. Both the quality and quantity of fat affect immune system function. High intakes of saturated and trans fats negatively affect the immune system, whereas increasing your intake of omega-3 fatty acids, found in salmon and other oily fish, decreases inflammatory responses. High intakes of omega-3 fatty acids are linked to a reduction in the risk of developing certain autoimmune disorders, such as rheumatoid arthritis, and are used as part of a comprehensive treatment for rheumatoid arthritis.

Key Takeaways

- Metabolic homeostasis occurs when the amount of nutrients consumed matches the energy required to carry out life's biological processes.
- The circulatory system transports nutrients to cells and transports wastes from them.
- The essential minerals sodium, potassium, calcium, and chloride, and the macronutrients protein and carbohydrates, are required for central nervous system function. Fat is also critical for central nervous system function (see the Discussion Starter below).
- Without energy from nutrients, muscles cannot contract.
- Undernutrition and overnutrition compromise endocrine and immune system functions. Type 2 diabetes, increased rates of infection, and inflammatory disorders are symptoms of an imbalance in the diet.

Interactive 3.1

Take a look at the PowerPoint presentation prepared by the CDC that captures the concurrent rises of obesity and Type 2 diabetes in this country. Click on "Maps of Trends in Diabetes and Obesity." www.cdc.gov/diabetes/statisti...tes_slides.htm

Discussion Starter

1. Find out how fat supports brain function and protects nerves by visiting the Franklin Institute Resources for Science Learning website.

   www.fi.edu/learn/brain/fats.html

   Now look at the websites below to see how too much of the wrong kind of fats may be bad for the brain, while other types of fat are good for the brain.

   archneur.ama-assn.org/cgi/content/full/60/2/194

   http://www.sciencedaily.com/releases/2007/12/071210163251.htm

   http://www.webmd.com/alzheimers/news/20070418/omeg-3-fatty-acid-slows-alzheimers

   After viewing all of the videos, discuss the importance of "good fats" in the diet for optimizing brain function and preventing diseases such as Alzheimer's.

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10.8.3.3.3: Energy and Calories

Learning Objectives

- Estimate your total daily caloric /energy needs based upon your physical activity level.

Energy is essential to life. You must eat to have energy. You must go to bed at a decent time, so that when you wake up in the morning, you will not be too tired and you will have sufficient energy for the next day's activities. Energy is also everywhere in our environment: sunlight, wind, water, plants, and animals. All living things use energy every day. Energy can be defined as the quantity of work a particular system can perform, whether it be a growing child's body or a train transporting passengers from one place to another. Energy also helps us perform daily functions and tasks such as breathing, walking up a flight of steps, and studying for a test.

Energy is classified as either potential or kinetic. Potential energy is stored energy, or energy waiting to happen. Kinetic energy is energy in motion. To illustrate this, think of an Olympic swimmer standing at the pool's edge awaiting the sound of the whistle to begin the race. While he waits for the signal, he has potential energy. When the whistle sounds and he dives into the pool and begins to swim, his energy is kinetic (in motion).

Some basic forms of energy are:

1. **Thermal (heat) energy.** We can say that a cup of hot tea has thermal energy. Thermal energy is defined as the collective, microscopic, kinetic, and potential energy of the molecules within matter. In a cup of tea, the molecules have kinetic energy because they are moving and oscillating, but they also possess potential energy due to their shared attraction to each other.
2. **Chemical energy.** In your body, blood sugar (glucose) possesses chemical energy. When glucose reacts chemically with oxgen, energy is released from the glucose. Once the energy is released, your muscles will utilize it to produce mechanical force and heat.
3. **Electrochemical energy.** In the body, electrical impulses travel to and from the brain encoded as nerve impulses. Once the brain receives an electrical impulse it causes the release of a messenger chemical (glutamate, for example). This in turn facilitates electrical impulses as they move from one neuron to another.

The Calorie Is a Unit of Energy

The amount of energy in nutrients can be quantified into specific units that can be measured. The unit of measurement that defines the energy contained in a energy-yielding nutrient is called a calorie. A calorie is the amount of energy in the form of heat that is required to heat one gram of water one degree Celsius. To measure the number of calories in a particular food substance, a certain amount of food is burned in a device called a calorimeter. As the food burns, heat is created. The heat dissipates to the surrounding water while a thermometer detects the change in temperature of the water. You can even perform calorimetry at home with a more basic device. However, it is not likely that you will use this device to measure calorie content in the foods that you eat since mathematical formulas have been developed to estimate caloric content.

Estimating Caloric Content

The energy contained in energy-yielding nutrients differs because the energy-yielding nutrients are composed of different types of chemical bonds. A carbohydrate or a protein yields 4 kilocalories per gram, whereas a lipid yields 9 kilocalories per gram. A kilocalorie (Calorie) is the amount of heat generated by a particular macronutrient that raises the temperature of 1 kilogram of water 1 degree Celsius. A kilocalorie of energy performs one thousand times more work than a calorie. On the Nutrition Facts panel, the calories within a particular food are expressed as kilocalories, which is commonly denoted as "Calories" with a capital "C" (1 kcal = 1 Calorie = 1,000 calories).

Calculating the number of Calories in commercially prepared food is made fairly easy since the total number of Calories in a serving of a particular food is listed on the Nutrition Facts panel. If you wanted to know the number of Calories in the breakfast you consumed this morning just add up the number of Calories in each food. For example, if you ate one serving of yogurt that contained 150 Calories, on which you sprinkled one half of a cup of low-fat granola cereal that contained 209 Calories, and drank a glass of orange juice that contained 100 Calories, the total number of Calories you consumed at breakfast is 150 + 209 + 100 = 459

Calories. If you do not have a Nutrition Facts panel for a certain food, such as a half cup of blueberries, and want to find out the amount of Calories it contains, go to MyFood-a-pedia, a website maintained by the USDA.

Interactive 3.2: Fooducate

Try using "Fooducate" which will give each food a letter grade (A, B, C, D or F) for how healthy it is! Just type any food into the search box at the top. For example, Fig Newton Cookies get a C+.

Estimating the Amount of Energy from Each Macronutrient

Also listed on the Nutrition Facts panel are the amounts of total fat, total carbohydrate, and protein in grams. To calculate the contribution of each macronutrient to the total kilocalories in a serving, multiply the number of grams by the number of kilocalories yielded per gram of nutrient. For instance, from the Nutrition Facts panel for yogurt given in Figure 3.7, the protein content in one serving is 7 grams. Protein yields 4 kilocalories per gram. The number of kilocalories from protein is calculated by using the following equation:

# of grams of protein × 4 kilocalories/gram of protein 7 grams × 4 kilocalories/gram = 28 kilocalories

(# kilocalories from protein ÷ total kilocalories per serving) × 100 (28 ÷ 150) × 100 = 18.7 percent

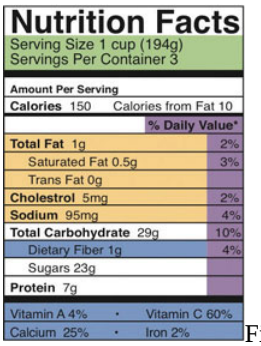


Figure **10.8.3.3.3.1**: A Nutrition Facts Panel for Yogurt: Because the total number of kilocalories in each serving of yogurt is 150, the percent of energy obtained from protein is calculated by using the following equation:

Key Takeaways

- Energy is vital to life and is categorized into two types—kinetic and potential. There are also different forms of energy such as thermal, chemical, and electrochemical.
- Calories are a measurement of a specific quantity of energy contained in foods. The number of calories contained in a commercially prepared food is listed on the Nutrition Facts panel.

Discussion Starter

1. Estimate the total number of kilocalories that you have eaten so far today. What percentage of the kilocalories you consumed was obtained from carbohydrates? Protein? Fat?

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10.8.3.3.4: Disorders That Can Compromise Health

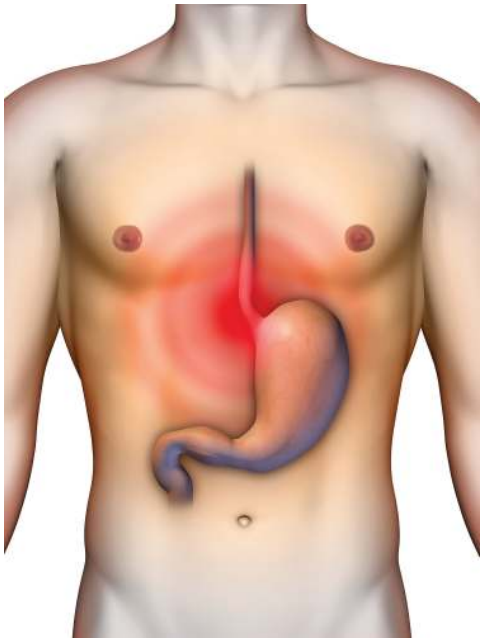
Learning Objectives

- Interpret why certain disorders and diseases, such as gastroesophageal reflux disease (GERD), celiac disease, and irritable bowel syndrome compromise overall health.

When nutrients and energy are in short supply, cells, tissues, organs, and organ systems do not function properly. Unbalanced diets can cause diseases and, conversely, certain illnesses and diseases can cause an inadequate intake and absorption of nutrients, simulating the health consequences of an unbalanced diet. Overeating high-fat foods and nutrient-poor foods can lead to obesity and exacerbate the symptoms of gastroesophageal reflux disease (GERD) and irritable bowel syndrome (IBS). Many diseases and illnesses, such as celiac disease, interfere with the body getting its nutritional requirements. A host of other conditions and illnesses, such as food allergies, cancer, stomach ulcers, Crohn's disease, and kidney and liver disease, also can impair the process of digestion and/or negatively affect nutrient balance and decrease overall health.

Gastroesophageal Reflux Disease

Gastroesophageal reflux disease (GERD) is a persistent form of acid reflux that occurs more than two times per week. Acid reflux occurs when the acidic contents of the stomach leak backward into the esophagus and cause irritation. It is estimated that GERD affects 25 to 35 percent of the US population. An analysis of several studies published in the August 2005 issue of *Annals of Internal Medicine* concludes that GERD is much more prevalent in people who are obese.Hampel, H. MD, PhD, N. S. Abraham, MD, MSc(Epi) and H. B. El-Serag, MD, MPH. "Meta-Analysis: Obesity and the Risk for Gastroesophageal Reflux Disease and Its Complications." *Ann Intern Med* 143, no. 3 (2005): 199–211. http://www.ncbi.nlm.nih.gov/pubmed/16061918 While the links between obesity and GERD are not completely known, they likely include that excess body fat puts pressure on the stomach, overeating increases pressure in the stomach, and fatty foods are triggers for GERD symptoms. The most common GERD symptom is heartburn, but people with GERD may also experience regurgitation (flow of the stomach's acidic contents into the mouth), frequent coughing, and trouble swallowing. Approximately 35 percent of children born in the United States have GERD. In babies the symptoms are more difficult to distinguish from what babies do normally. The symptoms are spitting up more than normal, incessant crying, refusal to eat, burping, and coughing. Most babies outgrow GERD before their first birthday but a small percentage do not.



Heartburn is a burning sensation that radiates throughout the chest. © Shutterstock

Additional Facts about GERD

There are other causative factors of GERD that may be separate from or intertwined with obesity. The sphincter that separates the stomach's internal contents from the esophagus often does not function properly and acidic gastric contents seep upward. Sometimes the peristaltic contractions of the esophagus are also sluggish and compromise the clearance of acidic contents. In addition to having an unbalanced, high-fat diet, some people with GERD are sensitive to particular foods—chocolate, garlic, spicy foods, fried foods, and tomato-based foods—which worsen symptoms. Drinks containing alcohol or caffeine may also worsen GERD symptoms. GERD is diagnosed most often by a history of the frequency of recurring symptoms. A more proper diagnosis can be made when a doctor inserts a small device into the lower esophagus that measures the acidity of the contents during one's daily activities. Sometimes a doctor may use an endoscope, which is a long tube with a camera at the end, to view the tissue in the esophagus. About 50 percent of people with GERD have inflamed tissues in the esophagus. A condition known as Barrett's esophagus may develop over time in some people who have GERD. Barrett's esophagus refers to a structural difference in the tissue of the esophagus, which is caused by recurrent tissue damage. It occurs in 5 to 15 percent of patients diagnosed with GERD and less than 1 percent of these patients may develop cancer of the esophagus, a highly lethal cancer.

The first approach to GERD treatment is dietary and lifestyle modifications. Suggestions are to reduce weight if you are overweight or obese, avoid foods that worsen GERD symptoms, eat smaller meals, stop smoking, and remain upright for at least three hours after a meal. There is some evidence that sleeping on a bed with the head raised at least six inches helps lessen the symptoms of GERD. People with GERD may not take in the nutrients they need because of the pain and discomfort associated with eating. As a result, GERD can be caused by an unbalanced diet and its symptoms can lead to a worsening of nutrient inadequacy, a viscious cycle that further compromises health. Many medications are available to treat GERD, including antacids, histamine2 (H2) blockers, and proton-pump inhibitors. Some evidence from scientific studies indicates that medications used to treat GERD may accentuate certain nutrient deficiencies, namely zinc and magnesium. When these treatment approaches do not work surgery is an option. The most common surgery involves reinforcing the sphincter that serves as a barrier between the stomach and esophagus.

Irritable Bowel Syndome

Irritable bowel syndrome (IBS) is characterized by muscle spasms in the colon that result in abdominal pain, bloating, constipation, and/or diarrhea. Interestingly, IBS produces no permanent structural damage to the large intestine as often happens to patients who have Crohn's disease or inflammatory bowel disease. It is estimated that one in five Americans displays symptoms of IBS. The disorder is more prevalent in women than men. Two primary factors that contribute to IBS are an unbalanced diet and stress. There is no specific test to diagnose IBS, but other conditions that have similar symptoms (such as celiac disease) must be ruled out. This involves stool tests, blood tests, and having a colonoscopy (which involves the insertion of a flexible tube with a tiny camera on the end through the anus so the doctor can see the colon tissues).

Symptoms of IBS significantly decrease a person's quality of life as they are present for at least twelve consecutive or nonconsecutive weeks in a year. Large meals and foods high in fat and added sugars, or those that contain wheat, rye, barley, peppermint, and chocolate intensify or bring about symptoms of IBS. Additionally, beverages containing caffeine or alcohol may worsen IBS. Stress and depression compound the severity and frequency of IBS symptoms. As with GERD, the first treatment approaches for IBS are diet and lifestyle modifications. People with IBS are often told to keep a daily food journal to help identify and eliminate foods that cause the most problems. Other recommendations are to eat slower, add more fiber to the diet, drink more water, and to exercise. There are some medications (many of which can be purchased over-the-counter) to treat IBS and the resulting diarrhea or constipation. Sometimes antidepressants and drugs to relax the colon are prescribed.

Celiac Disease

Celiac disease is an autoimmune disorder affecting between 0.5 and 1.0 percent of Americans—that is, one in every one- to two-hundred people. It is caused by an abnormal immune reaction of small intestine cells to a type of protein, called gluten. Gluten forms in the presence of water and is composed of two protein parts, glutenin and gliadin. Glutenin and gliadin are found in grains that are commonly used to make bread, such as wheat, rye, and barley. When bread is made, yeast eats the flour and makes a waste product, carbon dioxide, which forms bubbles in the dough. As the dough is kneaded, gluten forms and stretches. The carbon dioxide gas bubbles infiltrate the stretchy gluten, giving bread its porosity and tenderness. For those who are sensitive to gluten, it is good to know that corn, millet, buckwheat, and oats do not contain the proteins that make gluten. However, some people who

have celiac disease also may have a response to products containing oats. This is most likely the result of cross-contamination of grains during harvest, storage, packaging, and processing.

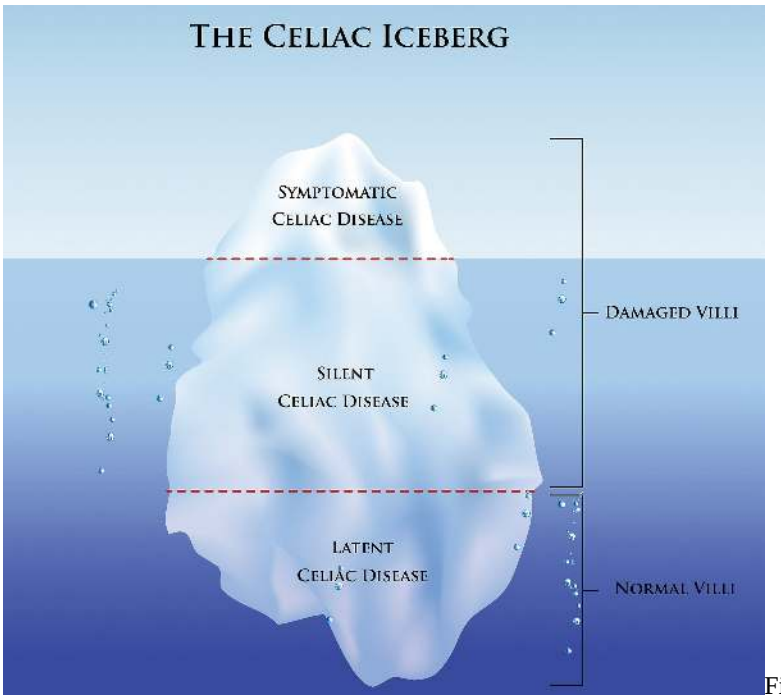


Figure 10.8.3.3.4.1: Celiac: Not everyone with celiac is diagnosed—many have “silent” or “latent” celiac disease. © Shutterstock

Celiac disease is most common in people of European descent and is rare in people of African American, Japanese, and Chinese descent. It is much more prevalent in women and in people with Type 1 diabetes, autoimmune thyroid disease, and Down and Turner syndromes. Symptoms can range from mild to severe and can include pale, fatty, loose stools, gastrointestinal upset, abdominal pain, weight loss and, in children, a failure to grow and thrive. The symptoms can appear in infancy or much later in life, even by age seventy. Celiac disease is not always diagnosed because the symptoms may be mild. A large number of people have what is referred to as “silent” or “latent” celiac disease (Figure 10.8.3.3.4.1).

Celiac disease diagnosis requires a blood test and a biopsy of the small intestine. Because celiac disease is an autoimmune disease, antibodies produced by white blood cells circulate in the body and can be detected in the blood. When gluten-containing foods are consumed the antibodies attack cells lining the small intestine leading to a destruction of the small villi projections. This tissue damage can be detected with a biopsy, a procedure that removes a portion of tissue from the damaged organ. Villi destruction is what causes many of the symptoms of celiac disease. The destruction of the absorptive surface of the small intestine also results in the malabsorption of nutrients, so that while people with this disease may eat enough, nutrients do not make it to the bloodstream because absorption is reduced. The effects of nutrient malabsorption are most apparent in children and the elderly as they are especially susceptible to nutrient deficiencies. Over time these nutrient deficiencies can cause health problems. Poor absorption of iron and folic acid can cause anemia, which is a decrease in red blood cells. Anemia impairs oxygen transport to all cells in the body. Calcium and vitamin D deficiences can lead to osteoporosis, a disease in which bones become brittle.

If you think you or someone close to you may have celiac disease, do not despair; it is a very treatable disease. Once diagnosed, a person follows a gluten-free diet for life. This requires dedication and careful detective work to seek out foods with hidden gluten, but some stores carry gluten-free foods. After eliminating gluten from the diet, the tissues of the small intestine rapidly repair themselves and heal in less than six months.

Food Allergies

Paying attention to the way individuals react to various foods is essential in determining what foods may specifically affect a person adversely. Food allergies are one of the many ways in which different body make-ups affect nutritional concerns. Although an estimated twelve million Americans have food allergies, there are likely many more people who say they have food allergies than actually do. This is because food sensitization is different from a medically-determined food allergy. When someone has a

food allergy, the immune system mistakenly attacks a certain kind of food (usually the protein component of a food), such as peanuts, as if it were a threat and IgE antibodies are produced. Doctors sometimes test for food allergies by using skin-prick tests or blood tests to look for the presence of IgE antibodies. However, these types of tests are not always reliable as they can sometimes yield a false positive result. By far, the most valuable tests for determining a food allergy is the Double Blind Placebo Controlled Food Challenge (DBPCFC), which involves administering the food orally and then denoting the signs and symptoms of the allergic response.



Many people with food allergies experience skin rashes after eating an allergenic food. © Shutterstock

Food allergy symptoms usually develop within a few minutes to two hours after a person has eaten a food to which they are allergic. These symptoms can range from the annoying to the potentially fatal, and include:

- A tingling mouth
- Swelling tongue and/or throat
- Difficulty breathing
- Hives
- Stomach cramps
- Diarrhea
- Vomiting
- Drop in blood pressure
- Loss of consciousness
- Death

There are no clear treatments for food allergies. Epinephrine is sometimes used to control severe reactions, and individuals with known and dangerous allergies may get prescriptions for self-injectable devices. The only certain way to avoid allergic reactions to food is to avoid the foods that cause them. Beyond avoidance, this can mean reading food labels carefully, or even calling manufacturers for product information.

Ninety percent of food allergies are caused by these eight foods:

1. Milk
2. Eggs
3. Peanuts
4. Tree nuts
5. Fish
6. Shellfish
7. Wheat
8. Soy

The prevalence of food allergies is a complex and growing problem. In response to this situation, the National Institute of Allergy and Infectious Diseases (NIAID) collaborated with thirty-four professional organizations, federal agencies, and patient-advocacy groups to develop a comprehensive guide to diagnosing and managing food allergies and treating acute food allergy reactions. The

guide defines various food allergies, allergens, and reactions, provides comprehensive information on the prevalence of different food allergies, tracks the history of food allergies, and reviews medical management techniques for people with food allergies.

Key Takeaways

- Unbalanced diets can cause diseases and, conversely, certain disorders and diseases can cause an inadequate intake and absorption of nutrients simulating the health consequences of an unbalanced diet.
- Unbalanced, high-fat diets can exacerbate the symptoms of GERD and IBS.
- Celiac disease and anorexia can lead to nutritional deficiencies, which compromise functioning of the organ systems and decrease health.
- Food allergies affect roughly twelve million Americans, with symptoms that range from mild to deadly. Proper diagnosis leads to better management of food allergies and sensitivities.

Discussion Starter

1. The next time you visit the grocery store, be a “gluten detective” and use the ingredients list to identify all the foods you might normally purchase that contain gluten. Discuss how you can use food labels to avoid products containing gluten.

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10.8.3.3.E: Exercises

It's Your Turn

1. Summarize the organization of the human body in a flow chart.
2. Determine how many calories you ate of a particular food yesterday and calculate the percent of calories that came from carbohydrates, protein, and fat.
3. Watch the video on celiac disease at https://www.youtube.com/watch?v=GnI6R5xN3nA and summarize how this ailment leads to decreased nutrient absorption.

Apply It

1. Draw a flow chart that summarizes the steps of digestion that take place in each organ of the digestive system.
2. Calculate the calories derived from protein, fats, and carbohydrates from five different foods you often eat.
3. After watching the video on GERD, list the potential consequences of GERD.

   Understanding GERD video

Expand Your Knowledge

1. Find out how fat supports brain function and protects nerves by visiting the following website: www.fi.edu/learn/brain/fats.html. Now look at these other websites to see how too much of the wrong kind of fats may be bad for the brain, while other types of fat are good for the brain.

   archneur.ama-assn.org/cgi/content/full/60/2/194

   http://www.sciencedaily.com/releases/2007/12/071210163251.htm

   http://www.webmd.com/alzheimers/news/20070418/omeg-3-fatty-acid-slows-alzheimers.

   Discuss how a balanced fat intake that contains "good fats" helps optimize brain function and prevent diseases such as Alzheimer's.

2. Estimate the total number of kilocalories that you have eaten so far today. What percentage of the kilocalories you consumed was obtained from carbohydrates, protein, and fat? Compare the percentage of calories from carbohydrates, protein, and fat that you consumed to their Acceptable Macronutrient Distribution Ranges.
3. On your next trip to the grocery store, pretend you have a child with a peanut allergy and determine which foods you need to avoid purchasing to prevent your child from having an allergic response.

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SECTION OVERVIEW

10.8.3.4: Energy Balance and Body Weight

In this chapter, we take a look at the obesity epidemic and eating disorders—the extremes of energy imbalance—and we look at evidence-based recommendations for maintaining a healthy weight. You will learn how to assess body weight and fatness and learn that it is not only society and environment that play a role in body weight and fatness, but also physiology, genetics, and behavior—and that all of them interact. We will also discuss the health risks of being underweight and overweight, learn evidence-based solutions to maintain body weight at the individual level, and assess the current state of affairs of combating the obesity epidemic in the United States.

10.8.3.4.1: Prelude to Energy Balance and Body Weight

10.8.3.4.2: Indicators of Health- Body Mass Index, Body Composition, and Fat Distribution

10.8.3.4.3: Balancing Energy Input with Energy Output

10.8.3.4.4: Too Little or Too Much Weight?

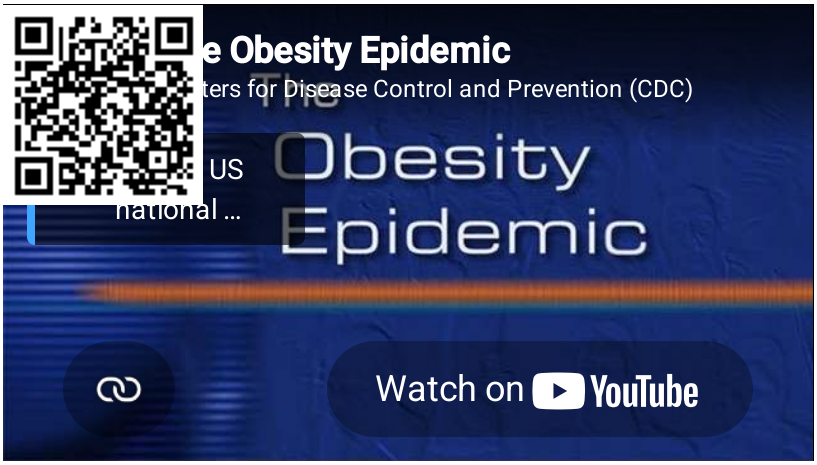
10.8.3.4.5: Dietary, Behavioral, and Physical Activity Recommendations for Weight Management

10.8.3.4.E: Energy Balance and Body Weight (Exercises)

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10.8.3.4.1: Prelude to Energy Balance and Body Weight

As you probably already know, the number of people who struggle with being overweight and/or obese is rising rapidly in the United States of America and in many other countries around the world. There is a new term being used to try to understand this rapid rise in obesity. The new term is "obesogenic" environments. The Centers for Disease Control and Prevention (CDC) defines an obesogenic environment as “an environment that **promotes increased food intake of non-healthful foods, and physical inactivity**.” The CDC reports that in 2009 in the United States, 33 percent of adults and 16 percent of children were obese, a doubling and tripling of the numbers since 1980, respectively, while in Canada the obesity rate was 24.1 percent for 2007–2009. The health consequences of too much body fat are numerous, including: increased risks for cardiovascular disease, Type 2 diabetes, and some cancers. The medical costs related to obesity are well over one hundred billion dollars and on the individual level, people who are obese spend $1,429 more per year for medical care than people of healthy weight. No one WANTS to become obese, so what are the factors causing rates of obesity to rise so rapidly? What can we do about these factors?



Video **10.8.3.4.1.1**: The Obesity Epidemic: This video from the Centers for Disease Control and Prevention provides an overview of the burden of the obesity epidemic in the United States and its contributing causes.. www.cdc.gov/cdctv/ObesityEpidemic/

Numerous obesogenic agents contribute to the immense public health problem that has become a part of everyday life in American society. Most agree that the **fast food** industry is playing a role. Fast food has been growing for decades and continues to grow, even when the economy struggles. In America today there are over twelve thousand McDonald’s restaurants, while in 1960 there was one. Another factor is that **food portions have been getting bigger** since the 1960s, and in the 1990s North American society experienced the “super-size” marketing boom, which is still very popular. **Another factor is physical inactivity is getting worsse**. Between 1960 and 2000 more than 123 million vehicles were added to the American society. Escalators, elevators, and horizontal walkways now dominate shopping malls and office buildings, factory work has become increasingly mechanized and automated, the typical American watches more than four hours of television daily, and in many work places the only tools required to conduct work are a chair and a computer. **The list of all the societal obesogenic factors goes on and on**. They are the result of modernization, industrialization, and urbanization continuing on without individuals, public health officials, or government adequately addressing the concurrent rise in overweight and obesity.

With obesity at epidemic proportions in America it is critical we make changes that will help to remedy this growing problem. The good news is we can make a difference! Policies are being implemented and reinforced at all levels of society including: education, agriculture, industry, urban planning, health care, and government. Reversing and stopping obesity are two different things. The former will require much more societal change and change on the individual level than the latter. The following are some ideas that are being demonstrated to work for constructing an environment in America that promotes health and confronts the obesity epidemic:

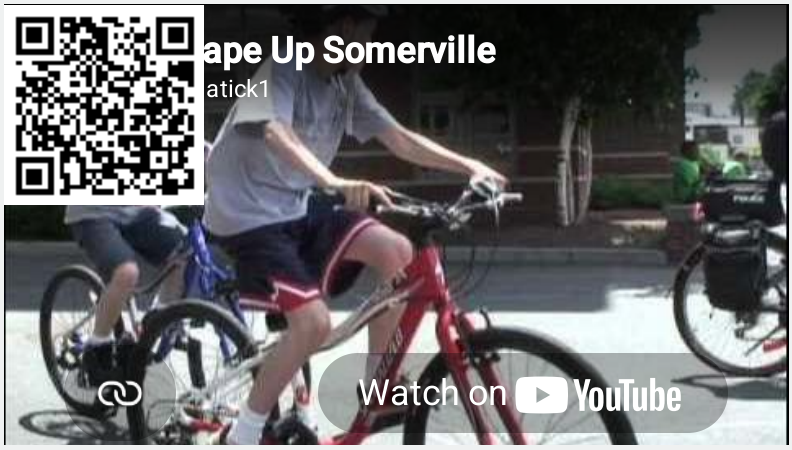
- **Individual Level: What you can do NOW**
  - Purchase less prepared foods and eat more whole foods.
  - Decrease portion sizes when eating or serving food.

- Eat out less, and when you do eat out choose low-calorie options.
- Walk or bike to work. If this is not feasible, walk while you are at work.
- Take the stairs when you come upon them or better yet, seek them out.
- Walk your neighborhood and know your surroundings. This benefits both health and safety.
- Watch less television.

- **Community Level: What you and your friends, family and co-workers can do together!**
  - Request that your college/workplace provides more access to healthy low-cost foods.
  - Support changes in school lunch programs—this is happening now but needs vocal parents to continue!
  - Participate in cleaning up local green spaces and then enjoy them during your leisure time, get outside!
  - Patronize local farms and fruit-and-vegetable stands.
  - Talk to your grocer and ask for better whole-food choices and seafood at a decent price.
  - Ask your favorite restaurant to serve more nutritious food and to accurately display calories of menu items.
- **National Level: What we can do as a country!**
  - Support policies that increase the walk-ability of cities.
  - Support national campaigns addressing obesity, such as America on the Move.
  - Support policies that support local farmers and the increased access and affordability of healthy food.

Interactive

Watch this video about "Shape up Sommerville" in which a city in Massachusetts was able to make some amazing changes to the health and wellness of its citizens!



Video* 10.8.3.4.1.2*: An interview, with Mayor Joseph Curtatone, about a groundbreaking community health and wellness program in Somerville, MA

You Decide

How can you assist in the American transition from an obesogenic environment to a healthier environment at the individual, community, and national levels?

In this chapter you will learn how to assess body weight and fatness. You will also learn that it is not only society and environment that play a role in body weight and fatness, but also physiology, genetics, and behavior—and that all of them interact. We will also discuss the health risks of being underweight and overweight, learn evidence-based solutions to maintain body weight at the individual level, and assess the current state of affairs of combating the obesity epidemic in the United States.

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10.8.3.4.2: Indicators of Health- Body Mass Index, Body Composition, and Fat Distribution

Learning Objectives

- Be able to calculate body mass index (BMI) given a particular weight and height.
- Name the factors that affect body composition and distribution.

Although the terms "overweight" and "obese" are often used interchangeably and considered as gradations of the same thing, they can denote different things. You weigh what you weigh because of your: water weight, lean muscle weight, bone weight, and weight from body fat (adipose). "Overweight" refers to having more weight than is typical for a particular height. That weight may be the result of water weight, muscle weight, or fat mass. "Obese" refers specifically to having excess body fat. In most cases people who are overweight also have excessive body fat and therefore body weight is an indicator of obesity in much of the population.

> *The "ideal" healthy body weight for a particular person is dependent on many things, such as frame size, sex (hormone profile), muscle mass, bone density, age, and height. The perception of the "ideal" body weight can be additionally dependent on cultural factors and the mainstream societal advertisement of beauty.*

In this author's opinion, the concept of "ideal body weight" is concerning. I feel that each of us should be eating healthfully (not just saying it but doing it), exercising healthfully and then allowing our body weight to go where it wants to go. However, medical doctors, public health officials and others needed to find a simple tool to look at patterns of weight gain in the U.S.A. and elsewhere. The easy tool that was developed is called the Body Mass Index (BMI). BMI is a tool meant to tell an individual if they weight too much, too little or just right. BMI uses the information that we already have readily available from every doctor's visit: weight and height. The general idea is, if you are very tall and have a low weight you are probably underweight. If you are very short and you weigh a lot you are probably overweight. It is a crude tool but one that can quickly, inexpensively give estimates of overweight and/or underweight.

The Body Mass Index (BMI)

Body mass index (BMI) is calculated using **height** and **weight** measurements and is more predictive of health risk than using weight alone. BMI measurements are used to indicate whether an individual may be underweight (with a BMI less than 18.5), overweight (with a BMI over 25), or obese (with a BMI over 30). The BMI is defined as the body mass divided by the square of the body height, and is universally expressed in units of kg/m^2, resulting from mass in kilograms and height in meters.

$$\text{BMI} = \frac{\text{weight } (kg)}{\text{height } (m^2)} \qquad (10.8.3.4.2.1)$$

The BMI attempts to quantify the amount of tissue mass (muscle, fat, and bone) in an individual, and then categorize that person as underweight, normal weight, overweight, or obese based on that value. However, there is some debate about where on the BMI scale the dividing lines between categories should be placed. Commonly accepted BMI ranges are underweight: under 18.5 kg/m2, normal weight: 18.5 to 25, overweight: 25 to 30, obese: over 30 (Figure 10.8.3.4.2.1:).

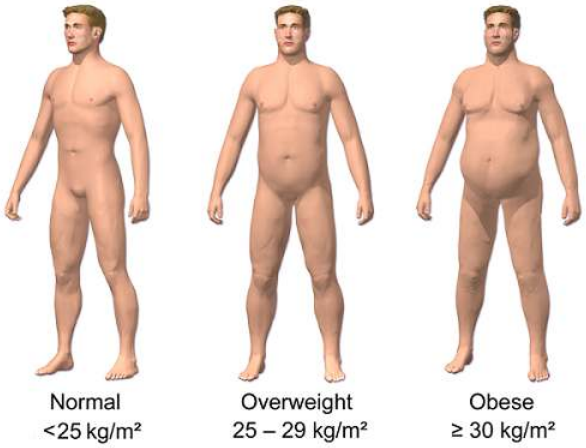


Figure **10.8.3.4.2.1**: Obesity and BMI. (CC BY-SA 4.0; BruceBlaus).

Automatic BMI Calculators

The National Heart, Lung, and Blood Institute and the CDC have automatic BMI calculators on their websites:

- www.nhlbisupport.com/bmi/
- http://www.cdc.gov/healthyweight/assessing/bmi/adult_bmi/english_bmi_calculator/bmi_calculator.html

To see how your BMI indicates the weight category you are in, see Table **10.8.3.4.2.1** or use a chart of weight and height to figure out your BMI.

Table **10.8.3.4.2.1**: BMI Categories

Categories	BMI
Underweight	< 18.5
Normal weight	18.5–24.9
Overweight	25–29.9
Obese	> 30.0

Source: National Heart, Lung, and Blood Institute. Accessed November 4, 2012. http://www.nhlbi.nih.gov.

Very high AND very low BMI's appear to increase a person's risk of dying. If you look at a graph of BMI as it relates to your risk of dying, it has a "J shaped Curve" or a "U shaped Curve" because being too low and/or too high both raise your risk of mortality (Figure **10.8.3.4.2.2**). Instead, you'd like to be in the middle range of the BMI which is what they use for "Normal weight". You will notice that, even though you will be categorized as "overweight" at a BMI of 25 and "obese" at a BMI of 30, the risk of dying goes up gradually. Like a teacher assigning a letter grade, the decision of exactly where to draw the lines for underweight, normal weight, overweight and obese are somewhat arbitrary.

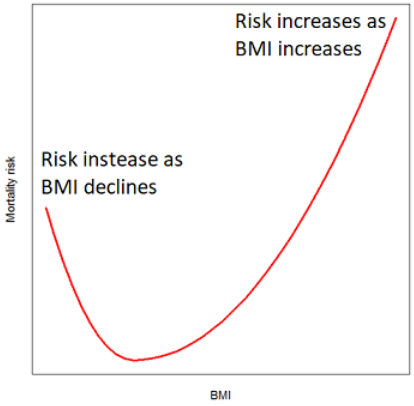


Figure 10.8.3.4.2.2: Mortality risk vs. BMI.

Limitations of the BMI

A BMI is a fairly simple measurement and does not take into account fat mass or fat distribution in the body, both of which are additional predictors of disease risk. Body fat weighs less than muscle mass. Therefore, BMI can sometimes underestimate the amount of body fat in overweight or obese people and overestimate it in more muscular people. For instance, a muscular athlete will have more muscle mass (which is heavier than fat mass) than a couch potato of the same height. Based on their BMIs the muscular athlete would be less "ideal" and may be categorized as more overweight or obese than the couch potato; however this is an infrequent problem with BMI calculation. Additionally, an older person with osteoporosis (decreased bone mass) will have a lower BMI than an older person of the same height without osteoporosis, even though the person with osteoporosis may have more fat mass. A BMI is a useful inexpensive tool to categorize people and is highly correlative with disease risk, but other measurements are needed to diagnose obesity and more accurately assess disease risk..

Measuring Body Fat Content

Water, organs, bone tissue, fat, and muscle tissue make up a person's weight. Having more fat mass may be indicative of disease risk, but fat mass also varies with sex, age, and physical activity level. Females have more fat mass, which is needed for reproduction and, in part, is a consequence of different levels of hormones. The optimal fat content of a female is between 20 and 30 percent of her total weight and for a male is between 12 and 20 percent. Fat mass can be measured in a variety of ways. The simplest and lowest-cost way is the skin-fold test. A health professional uses a caliper to measure the thickness of skin on the back, arm, and other parts of the body and compares it to standards to assess body fatness. It is a noninvasive and fairly accurate method of measuring fat mass, but similar to BMI, is compared to standards of mostly young to middle-aged adults. Other methods of measuring fat mass are more expensive and more technically challenging. They include:

- **Underwater weighing.** This technique requires a chamber full of water big enough for the whole body can fit in. First, a person is weighed outside the chamber and then weighed again while immersed in water. Bone and muscle weigh more than water, but fat does not—therefore a person with a higher muscle and bone mass will weigh more when in water than a person with less bone and muscle mass.
- **Bioelectric Impedance Analysis (BIA).** This device is based on the fact that fat slows down the passage of electricity through the body. When a small amount of electricity is passed through the body, the rate at which it travels is used to determine body composition. These devices are also sold for home use and commonly called body composition scales.
- **Dual-energy x-ray absorptiometry.** This technique can be used to measure bone density. It also can determine fat content via the same method, which directs two low-dose x-ray beams through the body and determines the amount of the energy absorbed from the beams. The amount of energy absorbed is dependent on the body's content of bone, lean tissue mass, and fat mass. Using standard mathematical formulas, fat content can be accurately estimated.

Measuring Fat Distribution

Total body-fat mass is one predictor of health; another is how the fat is distributed in the body. You may have heard that fat on the hips is better than fat in the belly—this is true. Fat can be found in different areas in the body and it does not all act the same, meaning it differs physiologically based on location. Fat deposited in the abdominal cavity is called visceral fat and it is a better

predictor of disease risk than total fat mass. Visceral fat releases hormones and inflammatory factors that contribute to disease risk. The only tool required for measuring visceral fat is a measuring tape. The measurement (of waist circumference) is taken just above the belly button. Men with a waist circumference greater than 40 inches and women with a waist circumference greater than 35 inches are predicted to face greater health risks.

The waist-to-hip ratio is often considered a better measurement than waist circumference alone in predicting disease risk. To calculate your waist-to-hip ratio, use a measuring tape to measure your waist circumference and then measure your hip circumference at its widest part. Next, divide the waist circumference by the hip circumference to arrive at the waist-to-hip ratio. Observational studies have demonstrated that people with "apple-shaped" bodies, (who carry more weight around the waist) have greater risks for chronic disease than those with "pear-shaped" bodies, (who carry more weight around the hips). A study published in the November 2005 issue of *Lancet* with more than twenty-seven thousand participants from fifty-two countries concluded that the waist-to-hip ratio is highly correlated with heart attack risk worldwide and is a better predictor of heart attacks than BMI.Yusuf, S. et al. "Obesity and the Risk of Myocardial Infarction in 27,000 Participants from 52 Countries: A Case-Control Study." *Lancet* 366, no. 9497 (2005): 1640–9. Accessed October 5, 2011. http://www.ncbi.nlm.nih.gov/pubmed/16271645 ?dopt=AbstractPlus. Abdominal obesity is defined by the World Health Organization (WHO) as having a waist-to-hip ratio above 0.90 for males and above 0.85 for females.

Key Takeaways

Most people who are overweight also have excessive body fat and therefore body weight is an indicator of obesity in much of the population. To standardize the "ideal" body weight and relate it to health, scientists have devised some computational measurements to better define a healthy ideal weight. Body weight in relation to height is called BMI and is correlated with disease risk. Total body fat mass is another predictor of disease risk; another is where the fat is distributed. Fat deposits in different areas in the body and do not all act the same, meaning it differs physiologically based on location. Visceral fat contributes more to disease risk, for example.

Discussion Starters

1. Read the article, "Exercise Keeps Dangerous Visceral Fat Away a Year after Weight Loss, Study Finds," at http://www.sciencedaily.com/releases/2009/10/091029102740.htm. Then discuss the importance of exercise in eradicating excessive fat.
2. Based on what you learned, why would an individual with a high BMI have a decreased risk of osteoporosis?

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10.8.3.4.3: Balancing Energy Input with Energy Output

Learning Objectives

- Estimate your daily energy requirement.
- Define basal metabolism and explain the factors that affect basal metabolic rate.
- Summarize why the amount of food we eat (appetite) is not completely under our conscious control.

Energy Intake Balances Energy Output To Maintain Weight

Recall that the macronutrients you consume are either converted to energy, stored, or used to synthesize macromolecules. A nutrient's metabolic path is dependent upon energy balance. When you are in a positive energy balance the excess nutrient energy will be stored or used to grow (e.g., during childhood, pregnancy, and wound healing). When you are in negative energy balance you aren't taking in enough energy to meet your needs, so your body will need to use its stores to provide energy. Energy balance is achieved when intake of energy is equal to energy expended. Weight can be thought of as a whole body estimate of energy balance; body weight is maintained when the body is in energy balance, lost when it is in negative energy balance, and gained when it is in positive energy balance. In general, weight is a good predictor of energy balance, but many other factors play a role in energy intake and energy expenditure. Some of these factors are under your control and others are not. Let us begin with the basics on how to estimate energy intake, energy requirement, and energy output. Then we will consider the other factors that play a role in maintaining energy balance and hence, body weight.

Estimating Energy Requirement

To maintain body weight you have to balance the calories obtained from food and beverages with the calories expended every day. Here, we will discuss how to calculate your energy needs in kilocalories per day so that you can determine whether your caloric intake falls short, meets, or exceeds your energy needs. The Institute of Medicine has devised a formula for calculating your Estimated Energy Requirement (EER). It takes into account your age, sex, weight, height, and physical activity level (PA). The EER is a standardized mathematical prediction of a person's daily energy needs in kilocalories per day required to maintain weight. It is calculated via the following formulas:

- Adult male:

$$\begin{aligned} \mathbf{EER} \\ = 662 - [9.53 \times age(y)] + PA \times [15.91 \times wt(kg) + 5.39.6 \times ht(m)] \end{aligned} \quad (10.8.3.4.3.1)$$

- Adult female:

$$\mathbf{EER} = 354 - [6.91 \times age(y)] + PA \times [9.36 \times wt(kg) + 726 \times ht(m) \quad (10.8.3.4.3.2)$$

Note: to convert pounds to kilograms, divide weight in pounds by 2.2. To convert feet to meters, divide height in feet by 3.3.

Interactive

To begin your dietary assessment, go to MyPlate, which is available on the US Department of Agriculture (USDA) website: http://www.choosemyplate.gov/.

Table 10.8.3.4.3.1: Physical Activity (PA) Categories and Values

Activity Level	Men PA Value	Women PA Value	Description
Sedentary	1.00	1.00	No physical activity beyond that required for independent living
Low	1.11	1.12	Equivalent to walking 1.5 to 3 miles per day
Moderate	1.25	1.27	Equivalent to walking 3 to 10 miles per day
High	1.48	1.45	Equivalent to walking 10 or more miles per day

These values only apply to normal weight adults and not to children or pregnant or lactating women. Source: Health Canada. "Dietary Reference Intake Tables." Last modified November 29, 2010. http://www.hc-sc.gc.ca/fn-an/nutrition/reference/table/index-eng.php#eeer.

The numbers within the equations for the EER were derived from measurements taken from a group of people of the same sex and age with similar body size and physical activity level. These standardized formulas are then applied to individuals whose measurements have not been taken, but who have similar characteristics in order to estimate their energy requirements. Thus, a person's EER is, as the name suggests, an estimate for an average person of similar characteristics. EER values are different for children, pregnant or lactating women, and for overweight and obese people. Also, remember the EER is calculated based on weight maintenance, not for weight loss or weight gain.

Table 10.8.3.4.3.2: Estimated Daily Calorie Needs

Sex	Age (years)	Sedentary	Moderately Active	Active
Child (female and male)	2–3	1,000–1,200	1,000–1,400	1,000–1,400
Female	4–8	1,200–1,400	1,400–1,600	1,400–1,800
	9–13	1,400–1,600	1,600–2,000	1,800–2,200
	14–18	1,800	2,000	2,400
	19–30	1,800–2,000	2,000–2,200	2,400
	31–50	1,800	2,000	2,200
	51+	1,600	1,800	2,000–2,200
Male	4–8	1,200–1,400	1400–1,600	1,600–2,000
	9–13	1,600–2,000	1,800–2,200	2,000–2,600
	14–18	2,000–2,400	2,400–2,800	2,800–3,200
	19–30	2,400–2,600	2,600–2,800	3,000
	31–50	2,200–2,400	2,400–2,600	2,800–3,000
	51+	2,000–2,200	2,200–2,400	2,400–2,800

Source: US Department of Agriculture. *2010 Dietary Guidelines for Americans.* 2010. http://health.gov/dietaryguidelines/dga2010/DietaryGuidelines2010.pdf.

The *2010 Dietary Guidelines* provides a table (Table **10.8.3.4.3.2**) that gives the estimated daily calorie needs for different age groups of males and females with various activity levels. The *2010 Dietary Guidelines* also states that while knowing the number

of calories you need each day is useful, it is also pertinent to obtain your calories from nutrient-dense foods and consume the various macronutrients in their Acceptable Macronutrient Distribution Ranges (AMDRs) (Table **10.8.3.4.3.3**).

Table **10.8.3.4.3.3**: Acceptable Macronutrient Distribution Ranges

Age	Carbohydrates (% of Calories)	Protein (% of Calories)	Fat (% of Calories)
Young Children (1–3)	45–65	5–20	30–40
Older children/adolescents (4–18)	45–65	10–30	25–35
Adults (19 and older)	45–65	10–35	20–35

Source: Institute of Medicine. "Dietary Reference Intakes: Macronutrients." Dietary Reference Intakes for Energy, Carbohydrate. Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids. September 5, 2002. www.iom.edu/~/media/Files/Act...onutrients.pdf

Total Energy Expenditure (Output)

The amount of energy you expend every day includes not only the calories you burn during physical activity, but also the calories you burn while at rest (basal metabolism), and the calories you burn when you digest food. The sum of caloric expenditure is referred to as total energy expenditure (TEE). Basal metabolism refers to those metabolic pathways necessary to support and maintain the body's basic functions (e.g. breathing, heartbeat, liver and kidney function) while at rest. The basal metabolic rate (BMR) is the amount of energy required by the body to conduct its basic functions over a certain time period. The great majority of energy expended (between 50 and 70 percent) daily is from conducting life's basic processes. Of all the organs, the liver requires the most energy (Table **10.8.3.4.3.4**). Unfortunately, you cannot tell your liver to ramp up its activity level to expend more energy so you can lose weight. BMR is dependent on body size, body composition, sex, age, nutritional status, and genetics. People with a larger frame size have a higher BMR simply because they have more mass. Muscle tissue burns more calories than fat tissue even while at rest and thus the more muscle mass a person has, the higher their BMR. Since females typically have less muscle mass and a smaller frame size than men, their BMRs are generally lower than men's. As we get older muscle mass declines and thus so does BMR. Nutritional status also affects basal metabolism. Caloric restriction, as occurs while dieting, for example, causes a decline in BMR. This is because the body attempts to maintain homeostasis and will adapt by slowing down its basic functions to offset the decrease in energy intake. Body temperature and thyroid hormone levels are additional determinants of BMR.

Table **10.8.3.4.3.4**: Energy Breakdown of Organs

Organ	**Percent of Energy Expended**
Liver	27
Brain	19
Heart	7
Kidneys	10
Skeletal muscle (at rest)	18
Other organs	19

The energy required for all the enzymatic reactions that take place during food digestion and absorption of nutrients is called the "thermic effect of food" and accounts for about 10 percent of total energy expended per day. The other energy required during the day is for physical activity. Depending on lifestyle, the energy required for this ranges between 15 and 30 percent of total energy expended. The main control a person has over TEE is to increase physical activity.

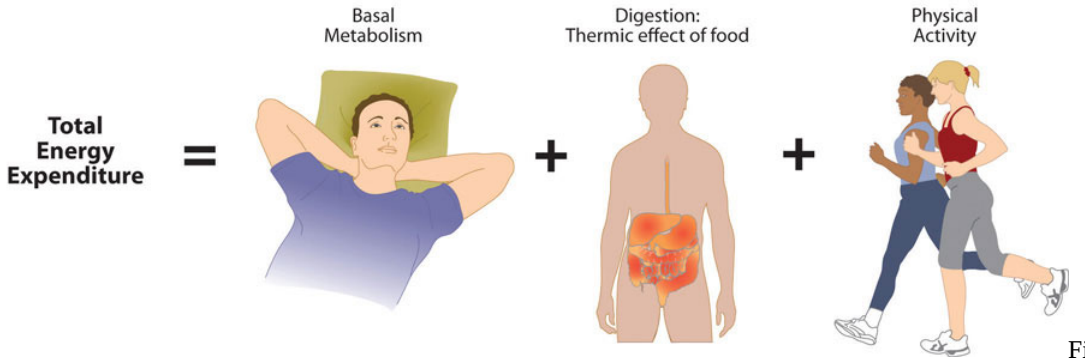


Figure 10.8.3.4.3.1: Total energy expenditure is the sum of energy expended at rest, during digestion, and during physical activity.

How to Calculate Total Energy Expenditure

Calculating TEE can be tedious, but has been made easier as there are now calculators available on the Web. TEE is dependent on age, sex, height, weight, and physical activity level. The equations are based on standardized formulas produced from actual measurements on groups of people with similar characteristics. To get accurate results from web-based TEE calculators, it is necessary to record your daily activities and the time spent performing them. A spreadsheet for doing so is available online at http://www.health-calc.com/Calculate_daily_energy_expenditure.pdf.

Interactive 11.4: Health-calc.com offers an interactive TEE calculator.

http://www.health-calc.com/diet/energy-expenditure-advanced

Factors Affecting Energy Intake

Physiology

In the last few decades scientific studies have revealed that how much we eat and what we eat is controlled not only by our own desires, but also is regulated physiologically and influenced by genetics. The hypothalamus in the brain is the main control point of appetite. It receives hormonal and neural signals, which determine if you feel hungry or full. Hunger is an unpleasant sensation of feeling empty that is communicated to the brain by both mechanical and chemical signals from the periphery. Conversely, satiety is the sensation of feeling full and it also is determined by mechanical and chemical signals relayed from the periphery. The hypothalamus contains distinct centers of neural circuits that regulate hunger and satiety (Figure 10.8.3.4.3.2).

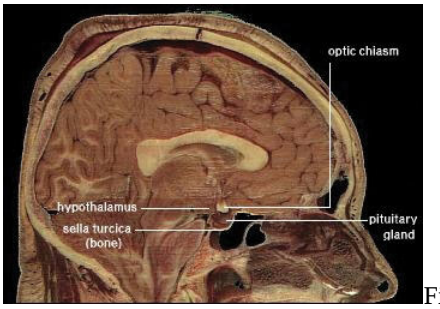


Figure 10.8.3.4.3.2: This is a scan of a brain. The hypothalamus contains distinct centers of neural circuits that regulate hunger and satiety. Source: Diabesity, Sixth Framework Programme. “Novel Molecular Targets for Obesity and Type 2 Diabetes.” 2002-2006. www.diabesity.eu/.honours.htm.

Hunger pangs are real and so is a “growling” stomach. When the stomach is empty it contracts, producing the characteristic pang and “growl.” The stomach’s mechanical movements relay neural signals to the hypothalamus, which relays other neural signals to parts of the brain. This results in the conscious feeling of the need to eat. Alternatively, after you eat a meal the stomach stretches and sends a neural signal to the brain stimulating the sensation of satiety and relaying the message to stop eating. The stomach also sends out certain hormones when it is full and others when it is empty. These hormones communicate to the hypothalamus and other areas of the brain either to stop eating or to find some food.

Fat tissue also plays a role in regulating food intake. Fat tissue produces the hormone leptin, which communicates to the satiety center in the hypothalamus that the body is in positive energy balance. The discovery of leptin's functions sparked a craze in the research world and in the diet pill industry as it was hypothesized that if you give leptin to a person who is overweight, they will decrease their food intake. Alas, this is not the case. In several clinical trials it was found that people who are overweight or obese are actually resistant to the hormone, meaning their brain does not respond as well to it.Dardeno, T. A. et al. "Leptin in Human Physiology and Therapeutics." *Front Neuroendocrinol* 31, no. 3 (2010): 377–93. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2916735/?tool=pubmed. Therefore, when you administer leptin to an overweight or obese person there is no sustained effect on food intake.

Nutrients themselves also play a role in influencing food intake. The hypothalamus senses nutrient levels in the blood. When they are low the hunger center is stimulated, and when they are high the satiety center is stimulated. Furthermore, cravings for salty and sweet foods have an underlying physiological basis. Both undernutrition and overnutrition affect hormone levels and the neural circuitry controlling appetite, which makes losing or gaining weight a substantial physiological hurdle.

Genetic Influences

Genetics certainly play a role in body fatness and weight and also affects food intake. Children who have been adopted typically are similar in weight and body fatness to their biological parents. Moreover, identical twins are twice as likely to be of similar weights as compared to fraternal twins. The scientific search for obesity genes is ongoing and a few have been identified, such as the gene that encodes for leptin. However, overweight and obesity that manifests in millions of people is not likely to be attributed to one or even a few genes, but to rather the interactions of hundreds of genes with the environment. In fact, when an individual has a mutated version of the gene coding for leptin, they are obese, but only a few dozen people around the world have been identified as having a completely defective leptin gene.

Psychological/Behavioral Influences

When your mouth waters in response to the smell of a roasting Thanksgiving turkey and steaming hot pies, you are experiencing a psychological influence on food intake. A person's perception of good-smelling and good-tasting food influences what they eat and how much they eat. Mood and emotions are associated with food intake. Depression, low self-esteem, compulsive disorders, and emotional trauma are sometimes linked with increased food intake and obesity.

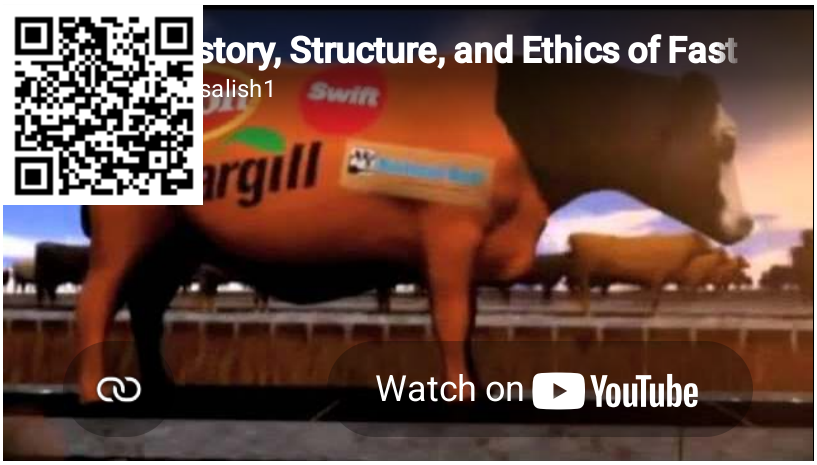
Certain behaviors can be predictive of how much a person eats. Some of these are how much food a person heaps onto their plate, how often they snack on calorie-dense, salty foods, how often they watch television or sit at a computer, and how often they eat out. A study published in a 2008 issue of *Obesity* looked at characteristics of Chinese buffet patrons. The study found that those who chose to immediately eat before browsing the buffet, used larger plates, used a fork rather than chopsticks, and chewed less per bite of food, had higher BMIs than patrons who did not exhibit these behaviors.Levin, B. E. "Developmental Gene X Environment Interactions Affecting Systems Regulating Energy Homeostasis and Obesity." *Front Neuroendocrinol* 3 (2010): 270–83. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2903638/?tool=pubmed. Of course many behaviors are reflective of what we have easy access to—a concept we will discuss next.

Societal Influences

It is without a doubt that the American society affects what and how much we eat. Portion sizes have increased dramatically in the past few decades. For example, a bagel is now more than twice the size it was in the 1960s. Today, American teenagers have access to a massive amount of calorie-dense foods and beverages, which is a large contributor to the recent rapid increase in overweight and obesity in adolescents in this country. Even different cultures within the United States have different eating habits. For instance, southern Americans, in general, consume more foods high in fat, which is a contributing factor to their higher incidences of overweight and obesity than Americans who live in the northern states. (Alaska is an exception because it also has a high incidence of overweight and obesity, which is also partly attributed to diet.)

The fast food industry in America not only supplies Americans with a large proportion of their diet, but because of its massive presence in society dominates the workings of the entire food system. To generalize, most fast food items have little nutritional merit as they are highly processed and rich in saturated fat, salt, and added sugars. Despite fast foods being a poor source of nourishment, Americans spend over one hundred billion dollars per year on fast food, up from six billion dollars in the early 1970s. The fast food business is likely to continue to grow in North America (and the rest of the world) and greatly affect the diets of

whole populations. Because it is unrealistic to say that Americans should abruptly quit eating fast food to save their health (because they will not) society needs to come up with ideas that push nutrient-dense whole foods into the fast food industry. You may have observed that this largely consumer-driven push is having some effect on the foods the fast food industry serves (just watch a recent Subway commercial, or check the options now available in a McDonald's Happy Meal). Pushing the fast food industry to serve healthier foods is a realistic and positive way to improve the American diet.



Video* 10.8.3.4.3.1*: *History, Structure, and Ethics of the Fast Food Industry (click to see video) A brief clip about the fast food industry and its effect on the United States.*

Tools for Change

Support the consumer movement of pushing the fast food industry and your favorite local restaurants into serving more nutrient-dense foods. You can begin this task by starting simple, such as requesting extra tomatoes and lettuce on your burger and more nutrient-dense choices in the salad bar. Also, choose their low-calorie menu options and help support the emerging market of healthier choices in the fast food industry. In today's fast-paced society, it is difficult for most people to avoid fast food all the time. When you do need a quick bite on the run, choose the fast food restaurants that serve healthier foods. Also, start asking for caloric contents of foods so that the restaurant becomes more aware that their patrons are being calorie conscious.

Factors Affecting Energy Expenditure

Physiological and Genetic Influences

Why is it so difficult for some people to lose weight and for others to gain weight? One theory is that every person has a "set point" of energy balance. This set point can also be called a fat-stat or lipostat, meaning the brain senses body fatness and triggers changes in energy intake or expenditure to maintain body fatness within a target range. Some believe that this theory provides an explanation as to why after dieting, most people return to their original weight not long after stopping the diet. Another theory is referred to as the "settling" point system, which takes into account (more so than the "set-point" theory) the contribution of the obesogenic environment to weight gain. In this model, the reservoir of body fatness responds to energy intake or energy expenditure, such that if a person is exposed to a greater amount of food, body fatness increases, or if a person watches more television body fatness increases. A major problem with these theories is that they overgeneralize and do not take into account that not all individuals respond in the same way to changes in food intake or energy expenditure. This brings up the importance of the interactions of genes and the environment.

Not all individuals who take a weight-loss drug lose weight and not all people who smoke are thin. An explanation for these discrepancies is that each individual's genes respond differently to a specific environment. Alternatively, environmental factors can influence a person's gene profile, which is exemplified by the effects of the prenatal environment on body weight and fatness and disease incidence later in life. One of the first scientific investigations of prenatal control over energy balance was conducted in Germany. In this observational study, scientists found that offspring born to mothers who experienced famine were more likely to be obese in adulthood than offspring born to mothers who were pregnant just after World War II who lived in the same

geographical locations.Matthews, C. E. “Amount of Time Spent in Sedentary Behaviors in the United States, 2003–2004.” *Am J Epidemiol* 167, no. 7 (2008): 875–81. doi: 10.1093/aje/kwm390. Other studies have shown that the offspring of women who were overweight during pregnancy have a greater propensity for being overweight and for developing Type 2 diabetes. Thus, undernutrition and overnutrition during pregnancy influence body weight and disease risk for offspring later in life. They do so by adapting energy metabolism to the early nutrient and hormonal environment in the womb.

Audio Link 11.1: Rethinking Thin - The Myths and Realities of Dieting

Listen to this NPR broadcast for scientific information about why it is so difficult for some people to lose weight.

Psychological/Behavioral Influence

Sedentary behavior is defined as the participation in the pursuits in which energy expenditure is no more than one-and-one-half times the amount of energy expended while at rest and include sitting, reclining, or lying down while awake. Of course, the sedentary lifestyle of many North Americans contributes to their average energy expenditure in daily life. Simply put, the more you sit, the less energy you expend. A study published in a 2008 issue of the *American Journal of Epidemiology* reports that 55 percent of Americans spend 7.7 hours in sedentary behavior daily.Matthews, C. E. “Amount of Time Spent in Sedentary Behaviors in the United States, 2003–2004.” *Am J Epidemiol* 167, no. 7 (2008): 875–81. doi: 10.1093/aje/kwm390. Fortunately, including only a small amount of low-level physical activity benefits weight control. A study published in the June 2001 issue of the *International Journal of Behavioral Nutrition and Physical Activity* reports that even breaking up sitting-time with frequent, but brief increased energy expenditure activities, such as walking for five minutes every hour, helps maintain weight and even aids in weight loss.Wu, Y. “Overweight and Obesity in China.” *Br Med J* 333, no. 7564 (2006): 362. doi: 10.1136/bmj.333.7564.362. Americans partake in an excessive amount of screen time, which is a sedentary behavior that not only reduces energy expenditure, but also contributes to weight gain because of the exposure to aggressive advertising campaigns for unhealthy foods.

Societal Influence

In the United States, many societal factors influence the number of calories burned in a day. Escalators, moving walkways, and elevators (not to mention cars!) are common modes of transportation that reduce average daily energy expenditure. Office work, high-stress jobs, and occupations requiring extended working hours are all societal pressures that reduce the time allotted for exercise of large populations of Americans. Even the remote controls that many have for various electronic devices in their homes contribute to the US society being less active. More “obesogenic” factors were discussed in the opening of this chapter.

Socioeconomic status has been found to be inversely proportional to weight gain. One reason for this relationship is that inhabitants of low-income neighborhoods have reduced access to safe streets and parks for walking. Another is that fitness clubs are expensive and few are found in lower-income neighborhoods. The recent and long-lasting economic crisis in this country is predicted to have profound effects on the average body weight of Americans. The number of homeless in this country is rising with many children and adults living in hotels and cars. As you can imagine neither of these “home spaces” has a kitchen, making it impossible to cook nutritious meals and resulting in increased economically-forced access to cheap, unhealthy foods, such as that at a nearby gas station.

Key Takeaways

Energy balance is achieved when energy intake is equal to energy expended. Energy balance is essential for maintaining weight. Knowing the number of calories you need each day is a useful reference point, but it is also important to obtain your calories from nutrient-dense foods and consume the macronutrients in their AMDRs. The amount of energy you expend every day includes not only the calories you burn during physical activity, but also the calories you burn at rest (basal metabolism), and the calories you burn when you digest food. Basal metabolic rate (BMR) is dependent on body size, body composition, sex, age, nutritional status, genetics, body temperature, and thyroid hormone levels. The great majority of energy expended (between 50 and 70 percent) daily comes from conducting life’s basic processes. The main control a person has over TEE is to increase physical activity. Energy intake is regulated by complex physiological responses and is influenced by genetics, behavior, and society. Energy expenditure is also regulated by complex physiological responses and is influenced by genetics, behavior, and society.

Discussion Starters

1. Some types of transportation are becoming economically unfeasible for obese people. Discuss whether or not it is acceptable that air carriers can enforce that obese people (or what they politely call “passengers of size” or “passengers requiring extra space”) pay more for their seats.
2. Many people have a hard time understanding the difficulties of being too skinny. Discuss with your peers how to empathize with the weight problems of underweight people. Read the article to understand that being skinny does not mean a person necessarily has a lower risk of chronic disease. http://www.msnbc.msn.com/id/18594089/ns/health-fitness/t/thin-people-can-be-fat-inside/

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10.8.3.4.4: Too Little or Too Much Weight?

Learning Objectives

- Discern the differences in health risks associated with being underweight and being overweight.

The number of people considered overweight and obese in the world has now surpassed the number that are starving, with some officials estimating that the number of overweight people is nearly double the number of underweight people worldwide. Countries that have more recently modernized, industrialized, and urbanized are experiencing a surge in their overweight and obese populations. China, the most populous country in the world, now has more than 215 million people, approximately one-fifth of their population, that are considered overweight or obese.Wu, Yangfeng. "Overweight and obesity in China." BMJ. 2006 August 19; 333(7564): 362–363. doi: 10.1136/bmj.333.7564.362. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1550451/. The increase in China's waistline is partly attributed to changes in the traditional diet, more sedentary lives, and a massive increase in motor vehicle use. Moreover, China's recent famines in the 1950s, which affected the poor and lower classes to a greater extent than the upper class, has sanctioned lax social attitudes toward body fat and reinspired the age-old Chinese belief that excess body fat represents health and prosperity.

One of the worst statistics regarding overweight and obesity in China is that more than ten million adolescents between ages seventeen and eighteen were overweight in 2000, which is twenty-eight times the number that were overweight in 1985.Wu, Y. "Overweight and Obesity in China." *Br Med J* 333, no. 7564 (2006): 362. doi: 10.1136/bmj.333.7564.362. The associated diseases of overweight and obesity happen over many years and signs and symptoms commonly take decades to manifest. With China's younger population and other developed countries experiencing a dramatic weight increase, the associated chronic diseases will come about much earlier in life than in previous generations. This will put an even greater burden on society.



Video **10.8.3.4.4.1**: Chinese Obesity: This video discusses the surge in Chinese obesity and how the country's rapid increase in modernization contributes to its obesity epidemic.

Health Risks of Being Overweight and Being Obese

The health consequences of obesity are great and are responsible for more than one hundred thousand deaths per year in the United States. According to the CDC, in the United States in 2007–2008:

- 34 percent of adults age twenty years and over are obese
- 34 percent of adults age twenty years and over are overweight (but not obese)
- 18 percent of adolescents age twelve to nineteen years are obese
- 20 percent of children age six to eleven years are obese
- 10 percent of children age two to five years are obeseThe Centers for Disease Control and Prevention. "Obesity and Overweight." Accessed October 8, 2011. http://www.cdc.gov/nchs/fastats/overwt.htm.

State Map of the Prevalence of Obesity in America

Visit www.cdc.gov/obesity/downloads/obesity_trends_2010.ppt to see the obesity trends from 1985 to 2010. As you will see, the percentages of obese adults are rising. 2 minute video of obesity trends in the U.S.A.: https://vimeo.com/15992923

As BMIs increase over 25, the risks increase for heart disease, Type 2 diabetes, hypertension, endometrial cancer, postmenopausal breast cancer, colon cancer, stroke, osteoarthritis, liver disease, gallbladder disorders, and hormonal disorders. The WHO reports that overweight and obesity are the fifth leading cause for deaths globally, and estimates that more than 2.8 million adults die annually as a result of being overweight or obese.World Health Organization. “Obesity and Overweight.” Accessed October 8, 2011. http://www.who.int/mediacentre/factsheets/fs311/en/. Moreover, overweight and obesity contribute to 44 percent of the Type 2 diabetes burden, 23 percent of the heart disease burden, and between 7 and 41 percent of the burden of certain cancers.World Health Organization. “Obesity and Overweight.” Accessed October 8, 2011. http://www.who.int/mediacentre/factsheets/fs311/en/.

Similar to other public health organizations, the WHO states the main causes of the obesity epidemic worldwide are the increased intake of energy-dense food and decreased level of physical activity that is mainly associated with modernization, industrialization, and urbanization. The environmental changes that contribute to the dietary and physical activity patterns of the world today are associated with the lack of policies that address the obesity epidemic in the health, urban planning, agriculture, food industry, and education sectors.

Health Risks of Being Underweight

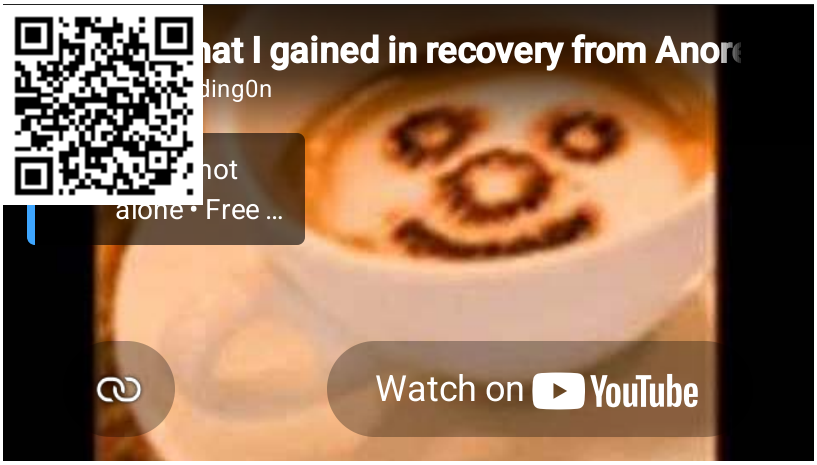
The 2003–2006 National Health and Nutrition Examination Survey (NHANES) estimated that 1.8 percent of adults and 3.3 percent of children and adolescents in the United States are underweight.Centers for Disease Control and Prevention. “NCHS Health E-Stat. Prevalence of Underweight among Children and Adolescents: United States, 2003–2006.” Accessed October 8, 2011. http://www.cdc.gov/nchs/data/hestat/underweight/underweight_children.htm. Being underweight is linked to nutritional deficiencies, especially iron-deficiency anemia, and to other problems such as delayed wound healing, hormonal abnormalities, increased susceptibility to infection, and increased risk of some chronic diseases such as osteoporosis. In children, being underweight can stunt growth. The most common underlying cause of underweight in America is inadequate nutrition. Other causes are wasting diseases, such as cancer, multiple sclerosis, tuberculosis, and eating disorders. People with wasting diseases are encouraged to seek nutritional counseling, as a healthy diet greatly affects survival and improves responses to disease treatments. Eating disorders that result in underweight affect about eight million Americans (seven million women and one million men).

Anorexia Nervosa

Anorexia nervosa, more often referred to as “anorexia,” is a psychiatric illness in which a person obssesses about their weight and about food that they eat. Anorexia results in extreme nutrient inadequacy and eventually to organ malfunction. Anorexia is relatively rare—the National Institute of Mental Health (NIMH) reports that 0.9 percent of females and 0.3 percent of males will have anorexia at some point in their lifetime,The National Institute of Mental Health. “Eating Disorders among Adults: Anorexia Nervosa.” Accessed October 8, 2011. mentalhealth.gov/statistics/1...DULT_ANX.shtml. but it is an extreme example of how an unbalanced diet can affect health. Anorexia frequently manifests during adolescence and it has the highest rate of mortality of all mental illnesses. People with anorexia consume, on average, fewer than 1,000 kilocalories per day and exercise excessively. They are in a tremendous caloric imbalance. Moreover, some may particpate in binge eating, self-induced vomiting, and purging with laxatives or enemas. The very first time a person starves him- or herself may trigger the onset of anorexia. The exact causes of anorexia are not completely known, but many things contribute to its development including economic status, as it is most prevalent in high-income families. It is a genetic disease and is often passed from one generation to the next. Pregnancy complications and abnormalities in the brain, endocrine system, and immune system may all contribute to the development of this illness.

The primary signs of anorexia are fear of being overweight, extreme dieting, an unusual perception of body image, and depression. The secondary signs and symptoms of anorexia are all related to the caloric and nutrient deficiencies of the unbalanced diet and include excessive weight loss, a multitude of skin abnormalities, diarrhea, cavities and tooth loss, osteoporosis, and liver, kidney, and heart failure. There is no physical test that can be used to diagnose anorexia and distinguish it from other mental illnesses. Therefore a correct diagnosis involves eliminating other mental illnesses, hormonal imbalances, and nervous system abnormalties.

Eliminating these other possibilities involves numerous blood tests, urine tests, and x-rays. Coexisting organ malfunction is also examined. Treatment of any mental illness involves not only the individual, but also family, friends, and a psychiatric counselor. Treating anorexia also involves a dietitian, who helps to provide dietary solutions that often have to be adjusted over time. The goals of treatment for anorexia are to restore a healthy body weight and significantly reduce the behaviors associated with causing the eating disorder. Relapse to an unbalanced diet is high. Many people do recover from anorexia, however most continue to have a lower-than-normal bodyweight for the rest of their lives.



Video **10.8.3.4.4.2**: What I Gained in Recovery from Anorexia. On a more positive note, watch this personal account of what can be gained from anorexia recovery.

Bulimia

Bulimia, like anorexia, is a psychiatric illness that can have severe health consequences. The NIMH reports that 0.5 percent of females and 0.1 percent of males will have bulimia at some point in their lifetime. (The National Institute of Mental Health. “Eating Disorders among Adults: Bulimia Nervosa.” Accessed October 8, 2011. mentalhealth.gov/statistics/1...ULT_RBUL.shtml). Bulimia is characterized by episodes of eating large amounts of food followed by purging, which is accomplished by vomiting and with the use of laxatives and diuretics. Unlike people with anorexia, those with bulimia often have a normal weight, making the disorder more difficult to detect and diagnose. The disorder is characterized by signs similar to anorexia such as fear of being overweight, extreme dieting, and bouts of excessive exercise. Secondary signs and symptoms include gastric reflux, severe erosion of tooth enamel, dehydration, electrolyte imbalances, lacerations in the mouth from vomiting, and peptic ulcers. Repeated damage to the esophagus puts people with bulimia at an increased risk for esophageal cancer. The disorder is also highly genetic, linked to depression and anxiety disorders, and most commonly occurs in adolescent girls and young women. Treatment often involves antidepressant medications and, like anorexia, has better results when both the family and the individual with the disorder participate in nutritional and psychiatric counseling.

Binge-Eating Disorder

Similar to those who experience anorexia and bulimia, people who have a binge-eating disorder have lost control over their eating. Binge-eating disorder is not currently diagnosed as a distinct psychiatric illness, although there is a proposal from the American Psychiatric Association to categorize it more specifically. People with binge-eating disorder will periodically overeat to the extreme, but their loss of control over eating is not followed by fasting, purging, or compulsive exercise. As a result, people with this disorder are often overweight or obese, and their chronic disease risks are those linked to having an abnormally high body weight such as hypertension, cardiovascular disease, and Type 2 diabetes. Additionally, they often experience guilt, shame, and depression. Binge-eating disorder is commonly associated with depression and anxiety disorders. According to the NIMH, binge-eating disorder is more prevalent than anorexia and bulimia, and affects 3.5 percent of females and 2.0 percent of males at some point during their lifetime.The National Institute of Mental Health. “Eating Disorders among Adults: Binge Eating Disorder.” Accessed October 8, 2011. www.nimh.nih.gov/statistics/1...ADULT_RB.shtml. Treatment often involves antidepressant medication as well as nutritional and psychiatric counseling.

Key Takeaways

The number of people considered overweight and obese in the world has now surpassed the number that is starving. As BMIs increase over 25, the risks increase for heart disease, Type 2 diabetes, hypertension, endometrial cancer, breast cancer, colon cancer, stroke, osteoarthritis, liver disease, gallbladder disorders, and hormonal disorders. Being underweight is linked to nutritional deficiencies. These deficiencies cause iron-deficiency anemia and also delayed wound healing, hormonal abnormalities, increased susceptibility to infection, and increased risk of some chronic diseases such as osteoporosis. In children, being underweight can stunt growth. Eating disorders resulting in being underweight can have severe consequences to health. The eating disorder anorexia nervosa has the highest mortality rate of all mental illnesses. All underweight people do not have anorexia and all overweight people do not have an eating disorder.

Discussion Starters

1. Visit the Food and Agriculture Organization of the United Nations website and discuss the impact of the rise in obesity in developing countries.

   www.fao.org/FOCUS/E/obesity/obes1.htm

2. Even as adults in this society we “profile” people with excess body fat as lazy and other disrespectful adjectives. Moreover, society commonly “profiles” people who are too skinny as being compulsive and vain. Propose ideas for improving body image during teenage years.

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10.8.3.4.5: Dietary, Behavioral, and Physical Activity Recommendations for Weight Management

Learning Objectives

- Explain the complementary actions of dietary changes and increased physical activity level on health.
- Formulate an exercise plan that fits your lifestyle and that follows the *2008 Physical Activity Guidelines for Americans*.

We have just considered the gravity of the obesity problem in America and worldwide. How is America combating its weight problem on a national level and have the approaches been successful?

Successful weight loss is defined as individuals intentionally losing at least 10 percent of their body weight and keeping it off for at least one year.Wing, R. R. and J. O. Hill. "Successful Weight Loss Maintenance." *Annu Rev Nutr* 21 (2001): 323–41. Accessed October 8, 2011. http://www.ncbi.nlm.nih.gov/pubmed/11375440?dopt=Abstract. Results from lifestyle intervention studies suggest fewer than 20 percent of participants are successful at weight loss. An evaluation of successful weight loss, involving more than fourteen thousand participants published in the November 2011 issue of the *International Journal of Obesity* estimates that more than one in six Americans who were overweight or obese were successful in achieving long-term weight loss.Kraschnewski, J. L. et al. "Long-Term Weight Loss Maintenance in the United States." *Int J Obes* 34, no. 11 (2010): 1644–54. http://www.ncbi.nlm.nih.gov/pubmed/20479763. However, these numbers are on the high end because many similar studies report fewer than 10 percent of participants as successful in weight loss.

The National Weight Control Registry (NWCR) tracks over ten thousand people who have been successful in losing at least 30 pounds and maintaining this weight loss for at least one year. Their research findings are that 98 percent of participants in the registry modified their food intake and 94 percent increased their physical activity (mainly walking.)The National Weight Control Registry. "Research Findings." Accessed October 8, 2011. http://www.nwcr.ws/Research/default.htm. Although there are a great variety of approaches taken by NWCR members to achieve successful weight loss, most report that their approach involved adhering to a low-calorie, low-fat diet and doing high levels of activity (about one hour of exercise per day). Moreover, most members eat breakfast every day, watch fewer than ten hours of television per week, and weigh themselves at least once per week. About half of them lost weight on their own and the other half used some type of weight-loss program. In most scientific studies successful weight loss is accomplished only by changing the diet *and* by increasing physical activity. Doing one without the other limits the amount of weight lost and the length of time that weight loss is sustained. On an individual level it is quite possible to achieve successful weight loss, as over ten thousand Americans can attest. Moreover, losing as little as 10 percent of your body weight can significantly improve health and reduce disease risk.National Heart, Lung, and Blood Institute. "Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: The Evidence Report." *Obes Res* 6 supplement (1998): 51S–210S. http://www.ncbi.nlm.nih.gov/books/NBK2003/. You do not have to be overweight or obese to reap benefits from eating a healthier diet and increasing physical activity as both provide numerous benefits beyond weight loss and maintenance.

Evidence-Based Dietary Recommendations

The *2010 Dietary Guidelines for Americans* offers specific, evidence-based recommendations for dietary changes aimed at keeping calorie intake in balance with physical activity, which is key for weight management. These recommendations include:US Department of Agriculture. *2010 Dietary Guidelines for Americans*. 2010. Accessed October 7, 2011. http://health.gov/dietaryguidelines/dga2010/DietaryGuidelines 2010.pdf.

- **Increase intake of whole grains, vegetables, and fruits.** Scientific evidence demonstrates that adults who have a higher intake of whole grains, mainly those high in dietary fiber, have lower body weights compared to adults who eat a smaller amount of whole grains. Moreover diets incorporating more whole grains reduce chronic disease risk . A higher intake of fruits and vegetables is scientifically shown to protect against weight gain in adults and there is some evidence that this is also true for children and adolescents.
- **Reduce intake of sugar-sweetened beverages.** There is good evidence that reducing consumption of sugar-sweetened beverages, especially in children and adolescents, decreases body weight and reduces chronic disease risk.

- **Monitor intake of 100 percent fruit juice for children and adolescents, especially those who are overweight or obese.** There is some evidence that increased intake of 100 percent juice exacerbates weight problems in children and adolescents who are already overweight or obese.
- **Monitor calorie intake from alcoholic beverages for adults.** Drinking in moderation is not linked to weight gain; however, excessive intake of alcohol over time is associated with weight gain.

Evidence-Based Behavioral Recommendations

In addition to the dietary recommendations, the *2010 Dietary Guidelines for Americans* offers specific evidence-based recommendations that address behavioral changes aimed to keep calorie intake in balance with physical activity. The recommendations include:

- **Focus on the total number of calories consumed.** Reducing calorie intake improves health and aids in weight management.
- **Monitoring food and caloric intake.** Being more aware of the calories in foods and beverages by reading the Nutrition Facts panel is helpful for consumers to monitor intake. Vigilant monitoring of food and caloric intake assists in weight management.
- **When eating out, choose smaller portions or lower-calorie options.** As mentioned in an earlier section of this chapter, eating out more often, especially at fast food restaurants, contributes to weight gain. The *Dietary Guidelines* advise people that when they are eating out to order smaller portions, share meals when possible, or take home part of the meal.
- **Prepare, serve, and consume smaller portions of foods and beverages, especially those high in calories.** Having less on your plate helps you eat less.
- **Eat a nutrient-dense breakfast.** The old adage that "breakfast is the most important meal of the day" holds true when you consider that not eating breakfast is associated with higher body weights, especially among children and adolescents. Moreover, eating a nutrient-dense breakfast has in some scientific studies been shown to stimulate weight loss.
- **Limit screen time.** In children, adolescents, and adults, the sedentary activities of watching television and spending time on the computer are linked to increased overweight and obesity. The *Dietary Guidelines* recommend children and adolescents spend no more than one to two hours daily watching television, playing electronic games, or using the computer (other than for homework).US Department of Agriculture. *2010 Dietary Guidelines for Americans*. 2010. Accessed October 7, 2011. http://health.gov/dietaryguidelines/dga2010/DietaryGuidelines 2010.pdf.

Evidence-Based Physical Activity Recommendations

The other part of the energy balance equation is physical activity. The *2010 Dietary Guidelines* are complemented by the *2008 Physical Activity Guidelines for Americans* issued by the Department of Health and Human Services in an effort to provide evidence-based guidelines for appropriate physical activity levels. The *2008 Physical Activity Guidelines* provide guidance to Americans aged six and older about how to improve health and reduce chronic disease risk through physical activity. Increased physical activity has been found in scientific studies to lower the risk of heart disease, stroke, high blood pressure, Type 2 diabetes, colon, breast, and lung cancer, falls and fractures, depression, and dying early. Increased physical activity not only reduces disease risk, but also improves overall health by increasing cardiovascular and muscular fitness, increasing bone density and strength, improving cognitive function, and assisting in weight loss and weight maintenance. The key guidelines for adults are the following (those for pregnant women, children, and older people will be given in elsewhere):US Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans*. 2008. Accessed October 8, 2011. http://www.health.gov/paguidelines/guidelines/chapter2.aspx.

- Even small amounts of activity are beneficial to your health.
- More substantial health benefits are obtained by doing at least two hours and thirty minutes per week of moderate-intensity, or one hour and fifteen minutes per week of vigorous-intensity aerobic physical activity, or an equivalent combination thereof. Aerobic activity has better benefits if performed for at least ten minutes at a time, spread throughout the week.
- More extensive health benefits occur when moderate aerobic physical activity is increased to five hours per week of moderate-intensity, or to two hours and thirty minutes of vigorous-intensity aerobic physical activity, or a combination thereof. Additional health benefits are gained by going beyond these recommended amounts of physical activity.
- Muscle-strengthening activities at moderate or high intensity involving all major muscle groups two or more days per week provides additional health benefits to aerobic exercise.

The *2008 Physical Activity Guidelines* broadly classify moderate physical activities as those when "you can talk while you do them, but can't sing" and vigorous activities as those when "you can only say a few words without stopping to catch your breath."US Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans*. 2008. Accessed October 8, 2011. http://www.health.gov/paguidelines/guidelines/chapter2.aspx.

Table **10.8.3.4.5.1**: Moderate and Vigorous Physical Activities

Moderate Activities	Vigorous Activities
Ballroom/line dancing	Aerobic dance
Biking on level ground	Biking (more than 10 miles per hour)
Canoeing	Heavy gardening (digging, hoeing)
Gardening	Hiking uphill
Baseball, softball, volleyball	Fast dancing
Tennis (doubles)	Jumping rope
Walking briskly	Martial arts (karate)
Water aerobics	Race walking
Using hand cyclers	Jogging or running
	Sports with running (basketball, hockey, soccer)
	Swimming laps
	Tennis (singles)
	Ice hockey

Source: US Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans.* 2008. http://www.health.gov/paguidelines/.

Interactive 10.8.3.4.5.1

To get started on ramping up your physical activity or following a new exercise program use the toolkit, "Be Active Your Way" available from HHS: www.health.gov/paguidelines/a...tiveguide.aspx.

Campaigns for a Healthy-Weight America

On a national level, strategies addressing overweight and obesity in the past have not been all that successful as obesity levels continue to climb. However, in the recent past (2007–2011) several newly created initiatives and organizations are actively reinforcing strategies aimed to meet the challenge of improving the health of all Americans.

In 2010 the national campaign to reduce obesity was reinforced when First Lady Michelle Obama launched the "Let's Move" initiative, which has the goal of "solving the challenge of childhood obesity within a generation so that children born today will reach adulthood at a healthy weight."The White House, Office of the First Lady. "First Lady Michelle Obama Launches Let's Move: America's Move to Raise a Healthier Generation of Kids." February 9, 2010. www.whitehouse.gov/the-press-...obama-launches -lets-move-americas-move-raise-a-healthier-genera. Another campaign, "Campaign to End Obesity," was recently established to try to enable more Americans to eat healthy and be active by bringing together leaders from academia and industry, as well as public-health policy-makers in order to create policies that will reverse the obesity trend and its associated diseases. It remains to be seen whether these new initiatives will finally help improve American health.



Video Link **10.8.3.4.5.1**: View this brief video on the Campaign to End Obesity.

The “Small-Change” Approach

Currently, most people are not obese in this country. The gradual rise in overweight is happening because, on average, people consume slightly more calories daily than they expend, resulting in a gradual weight gain of one to two pounds a year. In 2003 the idea was first published that promoting small lifestyle changes to reduce weight gain occurring over time in all age groups may better reduce obesity rates in the American population.Hill, J. O. “Can a Small-Changes Approach Help Address the Obesity Epidemic? A Report of the Joint Task Force of the American Society for Nutrition, Institute of Food Technologists, and International Food Information Council.” *Am J Clin Nutr* 89, no. 2 (2009): 477–84. http://www.ajcn.org/content/89/2/477.long. Scientific studies have demonstrated that asking people to increase the number of steps they take each day while providing them with pedometers that count the steps they take each day successfully prevented weight gain. A “small-changes” study published in the October 2007 issue of *Pediatrics* evaluated whether families that made two small lifestyle changes, which were to walk an additional two thousand steps per day and to eliminate 100 kilocalories per day from their typical diet by replacing dietary sugar with a noncaloric sweetener, would prevent weight gain in overweight children.Rodearmel, S. J. et al. “Small Changes in Dietary Sugar and Physical Activity As an Approach to Preventing Excessive Weight Gain: The America on the Move Family Study.” *Pediatrics* 120, no. 4 (2007): e869–79. http://pediatrics.aappublications.or...20/4/e869.long. The results of this study were that a higher percentage of children who made the small changes maintained or reduced their BMI in comparison to children of families given a pedometer but not asked to also make physical activity or dietary changes.Rodearmel, S. J. et al. “Small Changes in Dietary Sugar and Physical Activity As an Approach to Preventing Excessive Weight Gain: The America on the Move Family Study.” *Pediatrics* 120, no. 4 (2007): e869–79. http://pediatrics.aappublications.or...20/4/e869.long. Several more studies funded by the National Institutes of Health and USDA are ongoing and are evaluating the effectiveness of the “small-changes” approach in reducing weight gain.

In 2009, a report of the Joint Task Force of the American Society for Nutrition, Institute of Food Technologists, and International Food Information Council proposed that the “small-changes” approach when supported at the community, industry, and governmental levels will be more effective than current strategies in gradually reducing the obesity rate in America.Hill, J. O. “Can a Small-Changes Approach Help Address the Obesity Epidemic? A Report of the Joint Task Force of the American Society for Nutrition, Institute of Food Technologists, and International Food Information Council.” *Am J Clin Nutr* 89, no. 2 (2009): 477–84. http://www.ajcn.org/content/89/2/477.long. The HHS encouraged the approach and launched a “Small Step” website in 2008.

Key Takeaways

- Successful weight loss is defined as when individuals intentionally lose at least 10 percent of their body weight and keep it off for at least one year.
- Although there is a great variety of approaches to achieve successful weight loss most report that it involves adhering to a low-calorie, low-fat diet and doing high levels of activity (about one hour of exercise per day).
- The *2010 Dietary Guidelines for Americans* recommendations are based upon scientific evidence.
- The other part of the energy balance equation is physical activity. The *2010 Dietary Guidelines* were complemented by the *2008 Physical Activity Guidelines for Americans* issued by the HHS in an effort to provide evidence-based guidelines for appropriate

physical activity levels.

- On a national level, strategies addressing overweight and obesity in the past have not been all that successful as obesity levels continue to climb. However, in the recent past (2007–2011) several newly created initiatives and organizations are actively reinforcing strategies that aim to meet the challenge of improving the health of all Americans.

Discussion Starters

1. Discuss ways to address the childhood obesity problem in your own community.
2. Calculate your EER by using the formula in this chapter and determine whether your average daily intake of calories falls below, meets, or exceeds your EER.

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10.8.3.4.E: Energy Balance and Body Weight (Exercises)

It's Your Turn

1. Record in a dietary assessment diary the calories you consumed in one week. This can be done on your cell phone.
2. Calculate your EER by visiting http://www.health-calc.com/diet/energy-expenditure-advanced and determine whether your average daily intake of calories falls below, meets, or exceeds your EER.
3. Make a list of five strategies your local schools and community could implement to effectively address the childhood obesity problem.

Apply It

1. Calculate your BMI and waist-to-hip ratio. Make a list of five behavioral changes you can make to meet your goal of maintaining weight, reducing weight, or increasing weight.
2. Summarize in a paragraph or two why (with respect to reducing future chronic disease burden) it is of utmost importance to combat childhood obesity. Watch this video of First Lady Michelle Obama's unveiling of the initiative to combat childhood obesity to assist you in this assignment.

   US First Lady Michelle Obama Unveils Initiative to Battle Childhood Obesity: https://www.youtube.com/watch?v=6C9ShzCKgOU
3. The CDC website provides a list of physical activities and categorizes them as moderate or vigorous (http://www.cdc.gov/nccdphp/dnpa/physical/pdf/PA_Intensity_table_2_1.pdf). Use this source to develop an exercise program that fits your lifestyle and follows the recommended amounts of physical activity.

Expand Your Knowledge

1. Make a daily log of your physical activities using the spreadsheet available at http://www.health-calc.com/Calculate_daily_energy_expenditure.pdf. Then calculate your EER by visiting http://www.health-calc.com/diet/energy-expenditure-advanced.
2. Harvard Health Publications has a document that lists the calories burned for various physical activities. It is available at http://www.health.harvard.edu/newsweek/Calories-burned-in-30-minutes-of-leisure-and -routine-activities.htm. Use it to develop a physical activity program that is attractive to you and follows the recommended physical activity guidelines.

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SECTION OVERVIEW

10.8.3.5: Achieving Optimal Health - Wellness and Nutrition

In Chapter 15, we look at a number of topics of interest to students: diet trends, food supplements and food replacements, fitness, chronic diseases, and food safety. Also included in this chapter are tips for living a sustainable lifestyle, and information about careers in nutrition.

10.8.3.5.1: Chapter Introduction

10.8.3.5.2: Diet Trends and Health

10.8.3.5.3: Fitness and Health

10.8.3.5.4: Threats to Health

10.8.3.5.5: Foodborne Illness and Food Safety

10.8.3.5.6: Start Your Sustainable Future Today

10.8.3.5.7: Careers in Nutrition

10.8.3.5.8: Stress

10.8.3.5.E: Achieving Optimal Health - Wellness and Nutrition (Exercises)

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10.8.3.5.1: Chapter Introduction

Big Idea

- A groundbreaking study revealed the risk factors that can affect heart health.

The terms *risk factor*, *good cholesterol*, and *bad cholesterol* were not always on the tip of everyone's tongue when it came to cardiovascular disease. In fact, at one time doctors didn't even consider the concept of managing cholesterol levels to prevent heart disease. However, that was more than fifty years ago, before the Framingham Heart Study became one of the most important epidemiological studies in American health history. Conducted by what is now known as the National Heart, Lung, and Blood Institute in Massachusetts, the study changed the way healthcare professionals and consumers alike regard the prevention of heart disease.Framingham Heart Study. "History of the Framingham Heart Study." © 2011. www.framinghamheartstudy.org/...t/history.html.



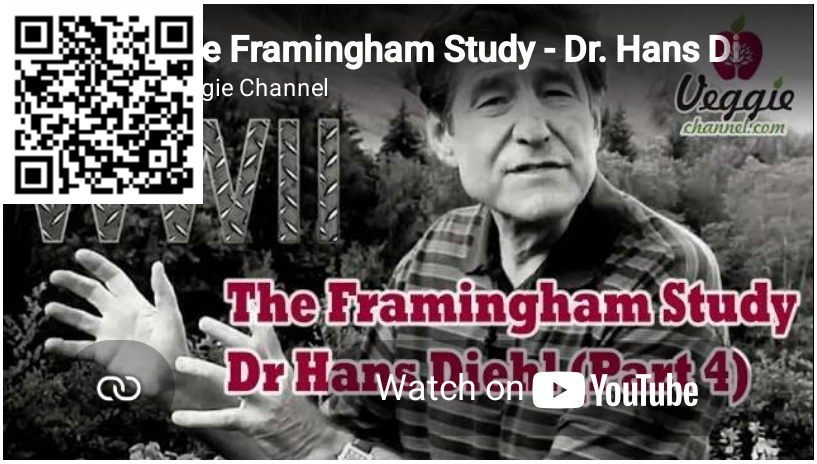
Figure **10.8.3.5.1.1**: Scientific evidence continues to correlate the relationship between good dietary habits, adequate exercise, and a healthy body. Lance Corporal Anthony M. Madonia emerges from the water during the swimming portion of the triathlon. Marines and Sailors of Marine Security Company and the Naval Support Facility in Thurmont, Maryland, participated in the Catoctin Mountain Triathlon July 20, 2005. Image is Public Domain.

In the 1940s, little was known about the general causes of heart disease and stroke. Most doctors thought a hardening of the arteries was a natural part of aging, and that rising blood pressure with age was not a serious issue. Yet, the death rates for cardiovascular disease had been increasing steadily since the early 1900s and had become an American epidemic. Growing concern led the US Public Health Service to commission a study to determine which biologic and environmental factors were behind the growing problem. The objective was to follow the development of cadiovascular disease over a long period of time in a large group of participants who had not yet developed overt symptoms. Researchers believed this approach would enable them to identify common characteristics and factors.

In 1948, researchers enrolled more than five thousand participants between ages thirty and sixty-two from Framingham, Massachusetts. The participants returned to the study every two years for a detailed medical examination and laboratory tests. In 1971, the Framingham Heart Study enrolled a second generation—the original participants' adult children and their spouses. In 2002, a third generation—the grandchildren of the original group—joined the study. Recognizing the need to establish a new study reflecting a more diverse population, an additional group of participants was selected in 1994.Framingham Heart Study. "History of the Framingham Heart Study." © 2011. www.framinghamheartstudy.org/...t/history.html.

The findings of these extensive, long-term studies have created a treasure trove of data for scientists that has revolutionized the way our nation looks at heart disease. The results revealed high blood pressure, diabetes, cholesterol, and LDL cholesterol in particular, as risk factors for heart disease. The study also identified lifestyle choices as factors which increased the risk of cardiovascular disease, including eating an unhealthy diet, remaining sedentary, and smoking. By utilizing new diagnostic technologies, the Framingham Study continues to make important strides in learning about heart disease. Framingham investigators also collaborate

with leading researchers from around the world on projects related to osteoporosis, arthritis, and diabetes. In addition, they have initiated the Framingham Nutrition Studies, which examine the connection between diet and nutrition to the risk and outcomes of cardiovascular disease. The discoveries of Framingham researchers can help discern opportunities for preventive nutrition intervention.Framingham Heart Study. “History of the Framingham Heart Study.” © 2011. www.framinghamheartstudy.org/...t/history.html.



Video 10.8.3.5.1.1: The Framingham Study. Dr. Hans Diehl discusses the driving forces behind the Framingham Heart Study.

You Decide

Are you ready to make the necessary changes to achieve optimal health?

How will you benefit from the knowledge about nutrition that you have gained thus far? The link between good nutrition and good health is an undebatable scientific fact. Given the consequences of poor dietary choices and lifestyle habits, it is worthwhile to assess your current food and activity profile to determine areas for improvement. It is important to remember that there are no quick fixes, but with dedication, hard work, and persistence, much can be accomplished. Of course, giving up what we once found enjoyable may not be the easiest task. In fact, it can be very hard to develop new thinking patterns that will translate into better dietary and lifestyle choices. Are you willing to put forth the effort necessary to create change in your life? As you read this chapter, you will be presented with tools and concepts to help you with this task. After that, it will be up to you.

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10.8.3.5.2: Diet Trends and Health

Learning Objectives

- Identify and describe the nutritional pros and cons of diets and food trends.
- Discuss the role of dietary supplements and the importance of using food as your primary nutritional source.

In the past, health was regarded merely as the absence of illness. However, a growing understanding of the complexity and potential of the human condition has prompted a new way of thinking about health. Today, we focus on the idea of wellness, which involves a great deal more than just not being sick. Wellness is a state of optimal well-being that enables an individual to maximize their potential. This concept includes a host of dimensions—physical, mental, emotional, social, environmental, and spiritual—which affect one's quality of life.University of Illinois at Urbana-Champaign, McKinley Health Center. "What Is Wellness?" © 2011 The Board of Trustees of the University of Illinois at Urbana-Champaign. www.mckinley.illinois.edu/Uni...d/wellness.htm. Striving for wellness begins with an examination of dietary choices.

Dietary Food Trends

Hundreds of years ago, when food was less accessible and daily life required much more physical activity, people worried less about obesity and more about simply getting enough to eat. In today's industrialized nations, conveniences have solved some problems and introduced new ones, including the hand-in-hand obesity and diabetes epidemics. Fad diets gained popularity as more North Americans struggled with excess pounds. However, new evidence-based approaches that emphasize more holistic measures are on the rise. These new dietary trends encourage those seeking to lose weight to eat healthy, whole foods first, while adopting a more active lifestyle. These sound practices put dietary choices in the context of wellness and a healthier approach to life.

Functional Foods

Many people seek out foods that provide the greatest health benefits. This trend is giving rise to the idea of functional foods, which not only help meet basic nutritional needs but also are reported to fight illness and aging. According to the Academy of Nutrition and Dietetics (AND), formerly known as the The Academy of Nutrition and Dietetics, functional foods may reduce the risk of disease or promote optimal health. The AND recognizes four types of functional foods.The Academy of Nutrition and Dietetics. "Functional Foods." *J Am Diet Assoc* 109, no. 4 (April 2009): 735–46. www.eatright.org/About/Content.aspx?id=8354. They are: conventional foods, modified foods, medical foods, and special dietary use foods.

The first group, **conventional foods**, represents the simplest form of functional foods. They are whole foods that have not been modified. Examples include whole fruits and vegetables (which are abundant in phytochemicals and antioxidants), yogurt and kefir (which contain natural probiotic bacteria that can help maintain digestive system health), and dark chocolate (which contains antioxidants).

Modified foods have been fortified, enriched, or enhanced with additional nutrients or bioactive compounds. Foods are modified using biotechnology to improve their nutritional value and health attributes. Examples of modified foods include calcium-fortified orange juice, breads enriched with B vitamins, iodized salt, cereals fortified with vitamins and minerals, margarine enhanced with plant sterols, and energy drinks that have been enriched with herbs (ginseng or guarana) or amino acids (taurine). It is important to consider that the health claims of some modified foods may be debatable, or entirely fraudulent. Check with a health professional regarding the effects of modified foods on your health.

Medical foods are designed for enteric administration under the guidance of a medical professional. (During enteric administration, food is treated so that it goes through the stomach undigested. Instead, the food is broken down in the intestines only.) Medical foods are created to meet very specific nutritional requirements. Examples of medical foods include liquid formulas for people with kidney disease, liver disease, diabetes, or other health issues. Medical food is also given to comatose patients through a gastronomy tube because they cannot eat by mouth.

Special dietary use foods do not have to be administered under a doctor's care and can be found in a variety of stores. Similar to medical foods, they address special dietary needs and meet the nutritional requirements of certain health conditions. For example, a bottled oral supplement administered under medical supervision is a medical food, but it becomes a special dietary use food when it

is sold to retail customers. Examples of special dietary use foods include gluten-free foods, lactose-free dairy products, and formulas and shakes that promote weight loss.

Popular Diets

The concept of functional foods represents initiatives aimed at addressing health problems. Certain diet plans take this concept one step further, by striving to prevent or treat specific conditions. For example, it is widely understood that people with diabetes need to follow a particular diet. Although some of these diet plans may be nutritionally sound, use caution because some diets may be fads or be so extreme that they actually *cause* health problems.Web MD. "Alternative Diet Programs: Topic Overview." Last modified June 30, 2009. http://www.webmd.com/diet/tc/alternative-diet-programs-topic-overview. Before experimenting with a diet, discuss your plans with your doctor or a registered dietitian. Throughout this section, we will discuss some of the more popular diets. Some fall under the category of fad diets, while others are backed by scientific evidence. Those that fall into the latter category provide a good foundation to build a solid regimen for optimal health.

The DASH Diet

The Dietary Approaches to Stop Hypertension, or DASH diet, focuses on reducing sodium intake to either 2,300 milligrams per day (as recommended by the *Dietary Guidelines for Americans*) or 1,500 milligrams per day. The DASH diet is an evidence-based eating plan that can help reduce high blood pressure. This plan may also decrease the risk of heart attack, stroke, diabetes, osteoporosis, and certain cancers.DASH Diet Oregon. "DASH Diet Eating Plan." © 2011 Nutrition Education Services/Oregon Dairy Council. http://www.dashdietoregon.org/. DASH tips to lower sodium include:

- Using spices instead of salt to add flavor
- Reading sodium content on processed or canned food labels, and choosing low-sodium options
- Removing some sodium from canned foods (such as beans) by rinsing the product before consumption
- Avoiding salt when cooking

DASH dieters eat lots of whole grains and high-fiber fruits and vegetables, and moderate amounts of low-fat dairy products, lean meats, and heart-healthy fish. In addition, DASH limits the use of saturated fats to less than 7 percent of total calories, and restricts the consumption of sweets and alcohol. The DASH diet also calls for consuming less added sugar and drinking fewer sugar-sweetened drinks. It replaces red meat with fish and legumes and calls for increased calcium, magnesium, potassium, and fiber. Also, even though some people on the DASH diet may find it lowers their HDL (good) cholesterol along with their LDL (bad) cholesterol, it still has a positive cumulative effect on heart health.DASH Diet Oregon. "DASH Diet Eating Plan." © 2011 Nutrition Education Services/Oregon Dairy Council. http://www.dashdietoregon.org/.

The Gluten-Free Diet

The gluten-free diet helps people whose bodies cannot tolerate **gluten**, a protein found in wheat, barley, and rye. One of the most important ways to treat this condition is to avoid the problematic foods, which is not easy. Although following a gluten-free diet is challenging, it is prescribed for patients with gluten intolerance and celiac disease, an autoimmune disorder with a genetic link. People who have celiac disease cannot consume gluten products without damaging their intestinal lining. Eating a gluten-free diet means finding replacements for bread, cereal, pasta, and more. It also means emphasizing fresh fruits, vegetables, and other foods without gluten. However, it is important to note that the gluten-free trend has become something of a fad even for those without a gluten intolerance. Celiac disease is a relatively rare condition found in only 1 percent of the population. Therefore, a gluten-free diet should be followed only with a physician's recommendation.

Low-Carb Diets

Low-carb diets, which include the Atkins Diet and the South Beach Diet, focus on limiting carbohydrates—such as grains, fruit, and starchy vegetables—to promote weight loss. The theory behind the low-carb diet is that insulin prevents the breakdown of fat by allowing sugar in the form of blood glucose to be used for energy. Proponents of this approach believe that because limiting carbs generally lowers insulin levels, it would then cause the body to burn stored fat instead. They believe this method not only brings about weight loss, but also reduces the risk factors for a number of conditions. However, some studies have shown that people who followed certain low-carb diet plans for two years lost an average of nearly 9 pounds, which is similar to the amount of

weight lost on higher carbohydrate diets.The Mayo Clinic. “Low-Carb Diet: Can It Help You Lose Weight?” Accessed December 21, 2011. www.mayoclinic.com/health/low...b-diet/NU00279.

The benefits of this kind of diet include an emphasis on whole, unprocessed foods and a de-emphasis of refined carbohydrates, such as white flour, white bread, and white sugar. However, there are a number of downsides. Typically, the first two weeks allow for only 20 grams of carbs per day, which can be dangerously low. In addition, dieters using the low-carb approach tend to consume twice as many saturated fats as people on a diet high in healthy carbohydrates. Low-carb diets are also associated with a higher energy intake, and the notion that “calories don’t count,” which is prevalent in this kind of diet, is not supported by scientific evidence.Steele, V. “Health and Nutritional Effects of Popular Diets.” Kellogg Nutrition Symposium, The Team of Registered Dietitians & Nutrition Professionals at Kellogg Canada Inc. Insert to *Canadian Journal of Dietetic Practice and Research* 64, no. 3 (Fall 2003).

The Macrobiotic Diet

The macrobiotic diet is part of a health and wellness regimen based in Eastern philosophy. It combines certain tenets of Zen Buddhism with a vegetarian diet and supports a balance of the oppositional forces *yin* and *yang*. Foods are paired based on their so-called yin or yang characteristics. Yin foods are thought to be sweet, cold, and passive, while yang foods are considered to be salty, hot, and aggressive.

Whole grains make up about 50 percent of the calories consumed and are believed to have the best balance of yin and yang. Raw and cooked vegetables comprise about 30 percent of the diet and include kale, cabbage, collards, bok choy, and broccoli on a daily basis, along with mushrooms and celery a few times a week. Bean or vegetable-based soups and broths can make up 5 to 10 percent of daily caloric intake. Additionally, the diet allows small amounts of fish and seafood several times a week, along with a few servings of nuts. The macrobiotic diet prohibits certain foods, such as chocolate, tropical fruits, and animal products, because they are believed to fall on the far end of the yin-yang spectrum, which would make it difficult to achieve a Zen-like balance.

The macrobiotic diet focuses on foods that are low in saturated fats and high in fiber, which can help to lower the risk of cardiovascular disease. Proponents of this diet also believe that it may protect against cancer. However, many nutritionists and healthcare providers express concerns, particularly if the diet is followed strictly. Extreme macrobiotic eating can be low in protein, low in calories, and pose a risk for starvation. In addition, the diet is also very low in essential vitamins and minerals.Zelman, K.M. “Macrobiotic Diet.” Web MD. Accessed December 21, 2011. http://www.webmd.com/diet/features/macrobiotic-diet.

The Mediterranean Diet

The traditional Mediterranean diet incorporates many elements of the dietary choices of people living in Greece and southern Italy. The Mediterranean diet focuses on small portions of nutritionally-sound food. This diet features food from plant sources, including vegetables, fruits, whole grains, beans, nuts, seeds, breads and potatoes, and olive oil. It also restricts the consumption of processed foods and recommends eating locally grown foods rich in micronutrients and antioxidants. Other aspects of this eating plan include consuming fish and poultry at least twice per week, eating red meat only a few times per month, having up to seven eggs per week, and drinking red wine in moderation and with meals. Unlike most diets, the Mediterranean diet does not cut fat consumption across the board. Instead, it incorporates low-fat cheese and dairy products, and it substitutes olive oil, canola oil, and other healthy oils for butter and margarine.

More than fifty years of nutritional and epidemiological research has shown that people who follow the Mediterranean diet have some of the lowest rates of chronic disease and the highest rates of longevity among the populations of the world. Studies have shown that the Mediterranean diet also helps to decrease excess body weight, blood pressure, blood fats, and blood sugar and insulin levels significantly.Kovacs, J. S. “Popular Diets of the World: The Mediterranean Diet.” Web MD. Accessed December 21, 2011. http://www.webmd.com/diet/features/the-mediterranean-diet.

Tools for Change

For six years, researchers from the University of Bordeaux in France followed the dietary habits of more than seven thousand individuals age sixty-five and over. Participants who described greater consumption of extra-virgin olive oil reportedly lowered their risk of suffering a stroke by 41 percent. The study controlled for stroke risk factors, such as smoking, alcohol intake, high blood pressure, and a sedentary lifestyle. To increase the amount of olive oil in your diet, try spreading olive oil instead of butter on your toast, making your own salad dressing using olive oil, vinegar or lemon juice, and herbs, cooking with olive oil exclusively, or

simply adding a dose of it to your favorite meal.Holohan, E. “More Olive Oil in Diet Could Cut Stroke Risk: Study.” HealthFinder.gov, US Department of Health and Human Services. © 2011 Health Day. healthfinder.gov/news/newssto...x?docID=653917.

The Raw Food Diet

The raw food diet is followed by those who avoid cooking as much as possible in order to take advantage of the full nutrient content of foods. The principle behind **raw foodism** is that plant foods in their natural state are the most wholesome for the body. The raw food diet is not a weight-loss plan, it is a lifestyle choice. People who practice raw foodism eat only uncooked and nonprocessed foods, emphasizing whole fruits and vegetables. Staples of the raw food diet include whole grains, beans, dried fruits, seeds and nuts, seaweed, sprouts, and unprocessed produce. As a result, food preparation mostly involves peeling, chopping, blending, straining, and dehydrating fruits and vegetables.

The positive aspects of this eating method include consuming foods that are high in fiber and nutrients, and low in calories and saturated fat. However, the raw food diet offers little in the way of protein, dairy, or fats, which can cause deficiencies of the vitamins A, D, E, and K. In addition, not all foods are healthier uncooked, such as spinach and tomatoes. Also, cooking eliminates potentially harmful microorganisms that can cause foodborne illnesses. Therefore, people who primarily eat raw foods should thoroughly clean all fruit and vegetables before eating them. Poultry and other meats should *always* be cooked before eating.Web MD. “Raw Food Diet.” Accessed December 21, 2011. www.webmd.com/diet/guide/raw-food-diet.

Vegetarian and Vegan Diets

Vegetarian and vegan diets have been followed for thousands of years for different reasons, including as part of a spiritual practice, to show respect for living things, for health reasons, or because of environmental concerns. For many people, being a vegetarian is a logical outgrowth of “thinking green.” When a food system is heavily focused on meat production there are deforestation issues, overgrazing of land and pasturage, and animal abuses. By avoiding animal flesh, vegetarians hope to look after their own health and that of the planet at the same time. Broadly speaking, vegetarians eat beans, grains, and fruits and vegetables, and do not eat red meat, poultry, seafood, or any other animal flesh. Some vegetarians, known as lactovegetarians, will eat dairy products. Others, known as lacto-ovo vegetarians, will eat dairy products and eggs. A vegan diet is the most restrictive vegetarian diet—vegans do not eat dairy, eggs, or other animal products, and some do not eat honey.

Vegetarian diets have a number of benefits. Well-balanced eating plans can lower the risk of a number of chronic conditions, including heart disease, diabetes, and obesity. They also help to promote sustainable agriculture. However, if a vegetarian does not vary his or her food choices, the diet may be insufficient in calcium, iron, omega-3 fatty acids, zinc, and vitamin B_{12}. Also, if people who follow these diets do not plan out their meals, they may gravitate toward foods high in fats.

Table **10.8.3.5.2.1**: The Pros and Cons of Seven Popular Diets

https://socialsci.libretexts.org/@go/page/310665

Diet	Pros	Cons
DASH Diet	• Recommended by the National Heart, Lung, and Blood Institute, the American Heart Association, and many physicians • Helps to lower blood pressure and cholesterol • Reduces risk of heart disease and stroke • Reduces risk of certain cancers • Reduces diabetes risk	• There are very few negative factors associated with the DASH diet
Gluten-Free Diet	• Reduces the symptoms of gluten intolerance, such as chronic diarrhea, cramping, constipation, and bloating • Promotes healing of the small intestines for people with celiac disease, preventing malnutrition • May support weight loss • May be beneficial for other autoimmune diseases, such as Parkinson's disease, rheumatoid arthritis, and multiple sclerosis • May be helpful for Types 1 and 2 diabetes and anemia	• Risk of folate and iron deficiencies • Special gluten-free products can be hard to find and expensive • Requires constant vigilance and careful food label reading, since gluten is found in many products
Low-Carb Diet	• Restricts refined carbohydrates, such as white flour and white sugar • May temporarily improve blood sugar or blood cholesterol levels	• Not entirely evidence-based • Results in higher fat and protein consumption
Macrobiotic Diet	• Low in saturated fats and high in fiber • Emphasizes whole foods and de-emphasizes processed foods • Rich in phytoestrogens, which may reduce the risk of estrogen-related cancers	• Not entirely evidence-based • Lacks certain vitamins and minerals; supplements are often required • Can result in a very low caloric intake • Lack of energy may result from inadequate protein
Mediterranean Diet	• A reduced risk of cardiovascular disease and mortality • A lower risk of cancer • De-emphasizes processed foods and emphasizes whole foods and healthy fats • Lower sodium intake, due to fewer processed foods • Emphasis on monosaturated fats leads to lower cholesterol • Highlighting fruits and vegetables raises consumption of antioxidants	• Does not specify daily serving amounts • Potential for high fat and high calorie intake as nuts and oils are calorie-dense foods • Drinking one to two glasses of wine per day may not be healthy for those with certain conditions
Raw Food Diet	• Emphasizes whole foods • Focuses on nutritionally-rich foods • High in fiber	• Not entirely evidence-based • Very restrictive and limits protein and healthy fat intake

Diet	Pros	Cons
		• Could encourage the development of foodborne illness • Extremely difficult to follow • Can cause deficiencies in essential vitamins
Vegetarianism and Veganism	• May reduce cancer risk • May reduce heart disease risk • May reduce obesity risk • May help prevent Type 2 diabetes • Helps with weight reduction and weight maintenance	• Guidelines regarding fat and nutrient consumption must be followed • Requires vigilance to watch out for hidden animal products • Requires negotiating meals and holidays with meat-eating friends and family

Food Supplements and Food Replacements

Current trends also include the use of supplementation to promote health and wellness. Vitamins, minerals, herbal remedies, and supplements of all kinds constitute big business and many of their advertising claims suggest that optimal health and eternal youth are just a pill away. The main types of dietary supplements are macronutrients (amino acids, proteins, essential fatty acids), micronutrients (vitamins and minerals that promote healthy body functions), probiotics (beneficial bacteria such as the kind found in the intestines), and herbal supplements, which often target a specific body part, such as bones.



Figure 10.8.3.5.2.2: Multivitamins contain multiple micronutrients, such as vitamins and dietary minerals. Are dietary supplements really necessary to achieve optimal health? from Rageross (via Wikipedia)

Some public health officials recommend a daily multivitamin due to the poor diet of most North Americans. The US Preventive Task Force also recommends a level of folate intake which can be easier to achieve with a supplement. In addition, the following people may benefit from taking daily vitamin and mineral supplements:

- women who are pregnant or breast-feeding
- premenopausal women who may need extra calcium and iron
- older adults
- people with health issues that affect their ability to eat
- vegetarians, vegans, and others avoiding certain food groupsWatson, S. “How to Evaluate Vitamins and Supplements.” Web MD. Accessed December 21, 2011. www.webmd.com/vitamins-and-su...ifestyle-guide -11/how-to-evaluate-vitamins-supplements.

However, before you begin using dietary supplementation, consider that the word *supplement* denotes something added. Vitamins, minerals, and other assorted remedies should be considered as extras. They are add-ons—not replacements—for a healthy diet. As food naturally contains nutrients in its proper package, remember that food should always be your primary source of nutrients. When considering taking supplements, it is important to recognize possible drawbacks that are specific to each kind:

- **Micronutrient Supplements.** Some vitamins and minerals are toxic at high doses. Therefore, it is vital to adhere to the Tolerable Upper Intake Levels (UL) so as not to consume too much of any vitamin. For example, too much vitamin A is toxic to the liver. Symptoms of vitamin A toxicity can include tinnitus (ringing in the ears), blurred vision, hair loss, and skin rash. Too much niacin can cause a peptic ulcer, hyperglycemia, dizziness, and gout.
- **Herbal Supplements.** Some herbs cause side effects, such as heart palpitations and high blood pressure, and must be taken very carefully. Also, some herbs have contraindications with certain medicines. For example, Valerian and St. John's Wort negatively interact with certain prescription medications, most notably antidepressants. Additionally, there is a real risk of overdosing on herbs because they do not come with warning labels or package inserts.
- **Amino Acid Supplements.** Certain amino acid supplements, which are taken by bodybuilders among others, can increase the risk of consuming too much protein. An occasional amino acid drink in the place of a meal is not a problem. However, problems may arise if you add the supplement to your existing diet. Most Americans receive two to three times the amount of protein required on a daily basis from their existing diets—taking amino acid supplements just adds to the excess.Web MD. "Choosing a Vitamin and Mineral Supplement—Topic Overview." Last revised May 4, 2011. www.webmd.com/food-recipes/tc...sing-a-vitamin -and-mineral-supplement-topic-overview.

Supplement Claims and Restrictions

The Food and Drug Administration (FDA) regulates supplements, but it treats them like food rather than pharmaceuticals. Dietary supplements must meet the FDA's Good Manufacturing Standards, but are not required to meet the standards for drugs, although some companies do so voluntarily. Also, although supplement manufacturers are allowed to say a particular ingredient may reduce the risk of a disease or disorder, or that it might specifically target certain body systems, these claims are not approved by the FDA. This is why labels that make structural and functional claims are required to carry a disclaimer saying the product is not intended "to diagnose, treat, cure, or prevent any disease." In addition, in the United States, supplements are taken off the market only after the FDA has proven that they are hazardous.Watson, S. "How to Evaluate Vitamins and Supplements." Web MD. Accessed December 21, 2011. www.webmd.com/vitamins-and-su...ifestyle-guide -11/how-to-evaluate-vitamins-supplements.

Before Taking Supplements

The phrase *caveat emptor* means "buyer beware," and it is important to keep the term in mind when considering supplementation. Just because a product is "natural" that does not mean it can't be harmful or dangerous, particularly if used inappropriately. The following are helpful questions to explore before deciding to take a supplement:

- Does the scientific community understand how this supplement works and are all its effects well known?
- Is there proof that the supplement actually performs in the manner that it claims?
- Does this supplement interact with food or medication?
- Is taking this supplement necessary for my health?
- Is the supplement affordable?
- Is the supplement safe and free from contaminants?

Lastly, please remember that a supplement is only as good as the diet that accompanies it. We cannot overstate the importance of eating a healthy, well-balanced diet designed to provide all of the necessary nutrients. Food contains many more beneficial substances, such as phytochemicals and fiber, that promote good health and cannot be duplicated with a pill or a regimen of supplements. Therefore, vitamins and other dietary supplements should never be a substitute for food. Nutrients should always be derived from food first.

Key Takeaways

Attitudes toward food change over time, so it is important to ground dietary choices in fact, not fashion. Popular, evidence-based diets, such as the Mediterranean diet, the DASH diet, vegetarianism, and the gluten-free diet offer different approaches to promoting health, and each has its own benefits and risks. It is important to weigh the pros and cons of dietary supplementation. There are risks of overdosing and risks of contraindications with certain medications. Although supplements can be helpful, it is important to remember—food first!

Discussion Starter

1. Discuss the Mediterranean diet. What foods do you already consume that are recommended by this diet? What changes could you make to follow the diet more closely? How can you modify any concerns so that this diet will work for you?

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10.8.3.5.3: Fitness and Health

Learning Objectives

- Define fitness and explain the essential elements of physical fitness.
- List the physical, mental, and emotional benefits of physical activity.

Becoming physically fit is an important part of achieving optimal health. A well-rounded exercise program is crucial to become and remain healthy. Physical activity improves your health in a number of ways. It promotes weight loss, strengthens muscles and bones, keeps the heart and lungs strong, and helps to protect against chronic disease. There are four essential elements of physical fitness: cardiorespiratory endurance, muscle strength, muscle endurance, and flexibility. Some enthusiasts might argue the relative importance of each, but optimal health requires some degree of balance between all four. Neither a muscle-bound weight lifter unable to bend down to tie his shoes nor a flexible yoga enthusiast who cannot lift her suitcase can be considered completely fit. All four elements of physical fitness are vital.

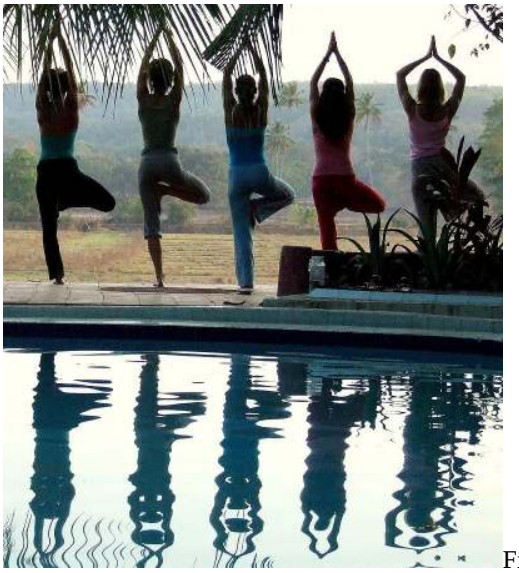
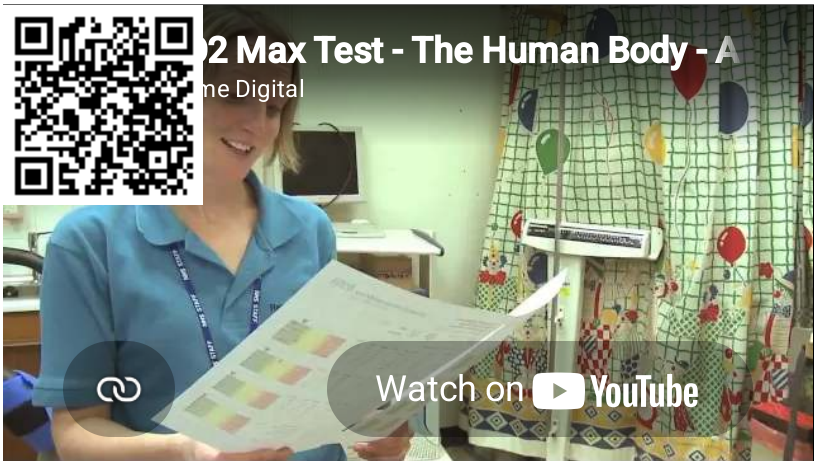


Figure **10.8.3.5.3.1**: What does it mean to be physically fit? What does physical fitness encompass? A group of women demonstrating Vrksasana, the tree posture. from Judith on Flickr,

The Essential Elements of Physical Fitness

Building cardiorespiratory endurance through aerobic exercise is an excellent way to maintain a healthy weight. Working on this element of physical fitness also improves your circulatory system. It boosts your ability to supply the body's cells with oxygen and nutrients, and to remove carbon dioxide and metabolic waste. In addition, aerobic exercise makes you breathe faster and more deeply, which maximizes oxygen levels in the blood. Regular, moderate aerobic activity, about thirty minutes at a time for five days per week, trains the body to deliver oxygen more efficiently, which strengthens the heart and lungs, and reduces the risk of cardiovascular disease.Mayo Clinic. "Fitness Training: Elements of a Well-Rounded Routine." September 3, 2011. www.mayoclinic.com/health/fit...aining/HQ01305.

The most common standard for evaluating cardiorespiratory endurance is the **VO_2 max** test. VO_2 max is your maximal oxygen uptake, and the VO_2 max test measures the amount of oxygen (in relation to body weight) that you can use per minute. A test subject usually walks or runs on a treadmill with an air mask over their face to measure oxygen consumption as exercise intensity increases (Video 15.2). At some point, the amount of oxygen consumed no longer increases despite an increase in exercise intensity. This value of oxygen consumption is referred to as VO_2 max, 'V' meaning volume, and 'max' meaning the maximum amount of oxygen (O_2) consumed independent of exercise intensity. The higher the number, the more oxygen you can consume, and the faster or longer you can walk, run, bike, or swim, among other aerobic activities.Ed Eyestone, "How to Improve Your VO_2 Max," *Runner's World*, 9 January 2008. http://www.runnersworld.com/article/0,7120,s6-238-244--12408-0,00.html.



Video **10.8.3.5.3.1**: VO_2 Max Test: The Human Body—A User's Guide. Watch two athletes take a VO_2 max test to measure their cardiorespiratory endurance. (click to see video).

Muscle strength and muscle endurance are two other essential elements of physical activity. They are not just crucial for athletes and bodybuilders—building muscle strength and endurance is important for children, seniors, and everyone in between. The support that your muscles provide allows you to work, play, and live more efficiently. Strength training involves the use of resistance machines, resistance bands, free weights, or other tools. However, you do not need to pay for a gym membership or expensive equipment to strengthen your muscles. Homemade weights, such as plastic bottles filled with sand, can work just as well. You can also use your own body weight and do push-ups, leg squats, abdominal crunches, and other exercises to build your muscles. If strength training is performed at least twice a week, it can help to improve muscle strength and endurance, and to increase bone strength. Strength training can also help you to maintain muscle mass during a weight-loss program.Mayo Clinic. "Fitness Training: Elements of a Well-Rounded Routine." September 3, 2011. www.mayoclinic.com/health/fit...aining/HQ01305.

Flexibility is the range of motion available to your joints. Yoga, tai chi, Pilates, and stretching exercises work to improve this element of fitness. Stretching not only improves your range of motion, it also promotes better posture, and helps you perform activities that can require greater flexibility, such as chores around the house. In addition to working on flexibility, older adults should include balance exercises in their regular routine. Balance tends to deteriorate with age, which can result in falls and fractures.Mayo Clinic. "Fitness Training: Elements of a Well-Rounded Routine." September 3, 2011. www.mayoclinic.com/health/fit...aining/HQ01305.

Some forms of exercise confer multiple benefits, which can help you to balance the different elements of physical fitness. For example, riding a bicycle for thirty minutes or more not only builds cardiorespiratory endurance, it also improves muscle strength and muscle endurance. Some forms of yoga can also build muscle strength and endurance, along with flexibility. However, addressing fitness standards in all four categories generally requires incorporating a range of activities into your regular routine.

Metabolic Fitness

Being fit also encompasses metabolic fitness. It relates to the number of calories you require to survive and the number of calories you burn during physical activity. Recall that **metabolism** is the sum of all chemical reactions that occur in the human body to conduct life's processes. Some are catabolic reactions that break down nutrients to supply the body with cellular energy. The rate at which a person burns calories depends on body shape, body composition, sex, age, nutritional status, and genetics.

One measurement of metabolic fitness is **resting metabolic rate**, or RMR, which is a measurement of the amount of energy required for the body to maintain its basic functions while at rest, i.e. breathing, heart beats, liver and kidney function, and so on. On average, RMR accounts for between 50 and 70 percent of a person's total daily energy expenditure. Different factors can affect the RMR, and as a result it is not a perfect measurement for metabolic fitness. For example, a slender person who is tall has more body surface area and therefore has a higher RMR. Also, muscle utilizes more energy at rest than fat, and a person with more muscle mass has a higher RMR.Moninger, J. "Metabolism Hacks: Tap into Your Calorie-Burning Power." Web MD. Accessed December 21, 2011. http://www.webmd.com/diet/features/metabolism-hacks.

A second measurement of metabolic fitness is the number of calories burned during physical activity. The amount of calories burned depends on the rate at which the heart beats, how much oxygen is delivered to tissues, and how efficiently metabolic reactions consume oxygen and burn calories. One of the best estimates of energy expenditure during exercise is how much oxygen a person consumes. Recall that VO_2 max is used to measure cardiorespiratory endurance. Greater VO_2 max is indicative of better oxygen metabolism and cardiovascular fitness, meaning more calories burned. In contrast to RMR, VO_2 max increases significantly with exercise training, from increasing blood flow to tissues to increasing the strength of heart muscle contraction. Greater blood flow into the tissues means more oxygen to muscle, which means more calories burned.

Increasing your daily activity and shedding excess weight helps to improve metabolic fitness. However, you do not have to be the perfect weight to be metabolically fit. Metabolic fitness is highly individualized. Also, any improvement to metabolic fitness is beneficial and means a decrease in the risk for developing diabetes, or other chronic conditions.

Keeping Fit: The Benefits of Physical Activity

Regular physical activity is one of the best things you can do to achieve optimal health. Individuals who are physically active for about seven hours per week lower the risk of dying early by 40 percent compared to those who are active for less than thirty minutes per week.Centers for Disease Control and Prevention. “Physical Activity and Health: The Benefits of Physical Activity.” Last updated February 16, 2011. http://www.cdc.gov/physicalactivity/everyone/health/index.html. Improving your overall fitness involves sticking with an exercise program on a regular basis. If you are nervous or unsure about becoming more active, the good news is that moderate-intensity activity, such as brisk walking, is safe for most people. Also, the health advantages of becoming active far outweigh the risks. Physical activity not only helps to maintain your weight, it also provides a wealth of benefits—physical, mental, and emotional.

Physical Benefits

Getting the recommended amount of physical activity each week, about 150 minutes of moderate, aerobic exercise, such as power walking or bicycling, does not require joining a gym, wearing spandex, or taking expensive, complicated classes. If you can’t commit to a formal workout four to five days per week, you can become more active in simple ways—by taking the stairs instead of the elevator, by walking more instead of driving, by going out dancing with your friends, or by doing your household chores at a faster pace. It is not necessary to perform at the level of a professional dancer or athlete, or to work out for several hours every day, to see real gains from exercise. Even slightly increased activity can lead to physical benefits, such as:

- **Longer life.** A regular exercise program can reduce your risk of dying early from heart disease, certain cancers, and other leading causes of death.
- **Healthier weight.** Exercise, along with a healthy, balanced eating plan, can help you lose extra weight, maintain weight loss, or prevent excessive weight gain.
- **Cardiovascular disease prevention.** Being active boosts HDL cholesterol and decreases unhealthy triglycerides, which reduces the risk of cardiovascular diseases.
- **Management of chronic conditions.** A regular routine can help to prevent or manage a wide range of conditions and concerns, such as metabolic syndrome, Type 2 diabetes, depression, arthritis, and certain types of cancer.
- **Energy boosts.** Regular physical activity can improve muscle tone and strength and provide a boost to your cardiovascular system. When the heart and lungs work more efficiently, you have more energy.
- **Strong bones.** Research shows that aerobic activity and strength training can slow the loss of bone density that typically accompanies aging.

Mental and Emotional Benefits

The benefits of an exercise program are not just physical, they are mental and emotional as well. Anyone who has gone for a walk to clear their head knows the mental benefits of exercise firsthand. Also, you do not have to be a marathoner on a “runner’s high” to enjoy the emotional benefits of becoming active. The mental and emotional benefits of physical activity include:

- **Mood improvement.** Aerobic activity, strength-training, and more contemplative activities such as yoga, all help break cycles of worry, absorption, and distraction, effectively draining tension from the body.
- **Reduced risk of depression, or limited symptoms of it.** Some people have called exercise “nature’s antidepressant,” and studies have shown that physical activity reduces the risk of and helps people cope with the symptoms of depression.

- **Cognitive skills retention.** Regular physical activity can help people maintain thinking, learning, and judgement as they age.
- **Better sleep.** A good night's sleep is essential for clear thinking, and regular exercise promotes healthy, sound sleep. It can also help you fall asleep faster and deepen your rest.

Changing to a More Active Lifestyle

A physically active lifestyle yields so many health benefits that it is recommended for everyone. Change is not always easy, but even small changes such as taking the stairs instead of the elevator, or parking farther away from a store to add a bit more walking into your day can lead to a more active lifestyle and set you on the road to optimal health. When people go one step further by walking or biking on a regular basis, or becoming active by growing and maintaining a garden, they do more than promote their own health—they safeguard the health of the planet, too.

As you change to a more active lifestyle, select an activity that you can integrate into your schedule smoothly, so you can maintain it. For example, instead of making time to get coffee with friends, you might suggest a walk, roller blading, or going for a swim in the campus pool. Also, find an activity that you will be motivated to do. Some people decide to participate in team sports, such as local soccer or softball leagues, because they enjoy being active with others or like knowing that a team relies on them. Others prefer to take a class, such as spinning or yoga, that is led by an instructor who will motivate them. Still others prefer more solitary pursuits, such as taking a jog alone in their neighborhood. No matter what your preference, you are more likely to stick to a workout program if you enjoy it.

Whatever activities people choose to do, if they expend an extra 500 calories per day, they will lose 1 pound per week, become more physically fit, and maintain a healthy nutritional profile. The exact number of calories expended per hour will vary, depending on an individual's weight and level of exertion. However, it can be helpful to keep these numbers in mind (which are for an adult who weighs about 160 pounds) when considering a program of aerobic activity:

- Walking at two miles per hour burns 204 calories per hour
- Bicycling burns 292 calories per hour
- Jogging burns 606 calories per hour
- Golf burns 314 calories per hour, if players carry their clubs
- Ballroom dance burns 219 calories per hour
- Tennis burns 584 calories per hourMayo Clinic. "Exercise for Weight Loss: Calories Burned in 1 Hour." © 1998–2012 Mayo Foundation for Medical Education and Research. Last updated August 2, 2011. www.mayoclinic.com/health/exercise/SM00109.

Key Takeaways

Physical fitness is an important part of the pursuit of optimal health. Regular exercise yields multiple benefits in terms of preventing disease and promoting health. The four essential elements of physical fitness are cardiorespiratory endurance, muscle strength, muscle endurance, and flexibility.

Discussion Starter

1. If exercise helps people feel better, why don't more people do it regularly? Discuss some ways to motivate more people to exercise. What are some of the ways that a regular routine could benefit someone currently leading a sedentary lifestyle?

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10.8.3.5.4: Threats to Health

Learning Objectives

- Discuss the roles of nutrition and lifestyle choices in the prevention and management of chronic disease.

Chronic Diseases

Chronic diseases are ongoing, life-threatening, and life-altering health challenges. They are the leading cause of death worldwide. Chronic conditions are increasing in frequency. They cause significant physical and emotional suffering and are an impediment to economic growth and vitality. It is important, now more than ever, to understand the different risk factors for chronic disease and to learn how to prevent their development.



Figure 10.8.3.5.4.1: Obesity is a risk factor for a number of conditions, including arthritis and certain cancers. A "super obese" male with a BMI of 53 kg/m^2: weight 182 kg (400 lb), height 185 cm (6 ft 1 in). Image is public domain.

The Risk Factors of Chronic Disease

A **risk factor** is a signal that your chances for acquiring a chronic disease may be increased. You might liken a risk factor to the flags that lifeguards sometimes set up at beaches. When you see these flags, you know immediately that swimming within the marked areas could be hazardous, and that if you choose to swim within these parameters anyway, you are doing so at your own risk. But, if you heed the warnings, you are taking the necessary step to protect your safety and health. Similarly, risk factors are warning signs that coincide with the development and progression of disease. However, risk factors are not a 100-percent guarantee that a person will develop a chronic disease, only that the conditions are right. For example, if a person gets sick with the flu, we can say with certainty that the illness was caused by a virus. However, we cannot say that a sedentary lifestyle caused the onset of cardiovascular disease in a patient, because a risk factor indicates a correlation, not a causation.

Chronic disease usually develops alongside a combination of the following risk factors: genetics, a prior disease such as obesity or hypertension, dietary and lifestyle choices, and environmental problems. Risk factors such as genetics and age cannot be changed. However, some risk factors can be altered to promote health and wellness (such as diet). For example, a person who continuously eats a diet high in sugars, saturated fats, and red meat is at risk for becoming obese and developing Type 2 diabetes, cardiovascular disease, or several other conditions. Making more healthy dietary choices can greatly reduce that risk. Being a woman over age sixty-five is a risk factor for developing osteoporosis, but that cannot be changed. Also, people without a genetic predisposition for a particular chronic illness can still develop it. Not having a genetic predipostion for a chronic disease is not a guarantee of immunity.

Identifying Your Risk Factors

To estimate your own risk factors for developing certain chronic diseases, search through your family's medical history. What diseases do you note showing up among close blood relatives? This may be of concern to you. At your next physical, pay attention to your blood tests and ask the doctor if any results are out of normal range. It is also helpful to note your vital signs, particularly your blood pressure and resting heart rate. In addition, you may wish to keep a food diary to make a note of the dietary choices that you make on a regular basis and be aware of foods that are high in saturated fat, among other unhealthy options. As a general rule, it is important to look for risk factors that you can modify.to promote your health. For example, if you discover that your grandmother, aunt, and uncle all suffered from high blood pressure, then you may decide to avoid a high sodium diet. Identifying your risk factors can arm you with the information you need to help ward off disease.

Cardiovascular Disease

Throughout the remainder of this section, we will examine some of the more prevalent chronic diseases, their risk factors, and the choices that can help to discourage their development or progression. Let's begin with cardiovascular disease. According to the Centers for Disease Control and Prevention (CDC), heart disease is the leading cause of death in the United States.Centers for Disease Control and Prevention. "Leading Causes of Death." Last updated September 6, 2011. http://www.cdc.gov/nchs/fastats/lcod.htm. The disease generally starts with atherosclerosis, or a hardening of the arteries, a chronic condition so common that most people show signs of it by the time they turn thirty. Arteries start to narrow and harden when fats accumulate along their inner walls and form plaques. A plaque is made of fat, cholesterol, calcium, and other substances found in blood.

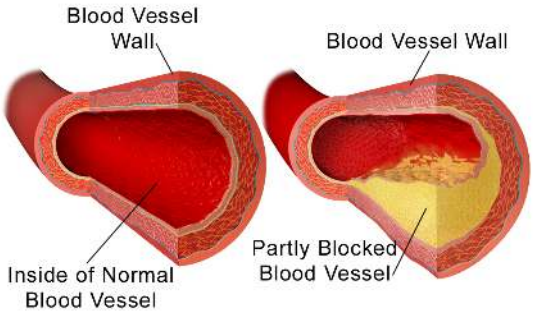


Figure 10.8.3.5.4.2: Illustration comparing a normal blood vessel and partially blocked vessel due to atherosclerotic plaque build-up. Plaque formation along arterial walls impedes blood flow and can create a thrombus, or stationary blood clot. from BruceBlaus (via Wikipedia). For a video of the process click here.

Plaque formation causes arteries to narrow and harden, which elevates blood pressure because the vessels can't expand effectively to accommodate blood pulses. Higher blood pressure strains the heart and causes more damage. Arterial walls can become so weakened due to high blood pressure that they balloon and form what is known as an aneurysm. If the aneurysm bursts, it becomes a life-threatening event. The plaques themselves can also rupture due to a spike in blood pressure or a tremor along an arterial wall, and the body responds to this perceived injury by forming blood clots. These clots are serious health threats, whether they are stationary (a thrombus) or moving (an embolus). A stable clot can slowly kill off surrounding tissue, or grow so big that it blocks blood circulation and causes thrombosis. When a moving clot becomes stuck in an artery too small for its passage, it cuts off blood flow and causes cell death. This is referred to as an embolism. Blood clots in heart and brain arteries can cause heart attacks or strokes.

Table **10.8.3.5.4.1**: The Risk Factors for Cardiovascular Disease

Unmodifiable Risk Factors	Modifiable Risk Factors
• **Age.** Risk increases for men at forty-five, and for women at fifty-five. • **Sex.** Men have a higher risk than women, though the risk for women steeply rises after menopause. • **Family history.** The more family members who have heart disease, the greater the risk.	• **Cigarette smoking.** Nicotine constricts blood vessels, and carbon monoxide damages their inner lining, which increases the risk of atherosclerosis. • **Obesity.** Excess weight worsens other risk factors. • **Diabetes.** This condition is associated with an increased risk of heart disease. Both types have certain risk factors in common, including obesity and high blood pressure. • **Physical inactivity.** Lack of exercise is associated with heart disease. • **Cholesterol levels.** High levels of blood cholesterol can increase the risk. A high level of low-density lipoprotein (LDL), or the "bad" cholesterol, is a common contributing factor. However, a low level of high-density lipoprotein (HDL), or "good" cholesterol, can also promote atherosclerosis.

Steps to Reducing the Risk of Cardiovascular Disease

Diet and nutrition can play a significant role in reducing the risk of cardiovascular disease. It is helpful to lower sodium intake, increase consumption of dietary fiber, and limit consumption of saturated fat, which promotes plaque formation. In addition, it is important to replace refined starches and added sugar, which can boost triglycerides, with whole grains, fruits, and vegetables. Eating foods rich in omega-3 fatty acids, especially fish, using alcohol in moderation, and opting for low or no-fat dairy products can all help reduce your cardiovascular disease risk. Emphasizing vegetable-based sources of protein, such as beans and legumes, can be beneficial, as well as consuming more soy products. It is also important to maintain a healthy weight, manage cholesterol levels, and avoid smoking or chewing tobacco.

Hypertension

Chronic high blood pressure, also known as hypertension, is a significant health hazard affecting one out of three adults in the United States.Centers for Disease Control and Prevention. "High Blood Pressure Facts." Last updated March 21, 2011. http://www.cdc.gov/bloodpressure/facts.htm. This chronic condition is a major cause of heart attacks and strokes, yet it has no symptoms until blood pressure reaches very high levels, which is why it is known as "the silent killer." The only way to find out if you have high blood pressure is to get an accurate reading of your resting blood pressure rate, which is best done by a medical professional and should be monitored regularly.

High blood pressure is such an important factor in cardiovascular disease, that keeping it within a healthy range is vitally important. As explained previosuly, blood pressure readings consist of two numbers. The top number measures **systolic** pressure (when the heart contracts) and the bottom number measures **diastolic** pressure (when the heart is at rest). The key blood pressure numbers to keep in mind are:

- **Ideal.** 120 over 80 or below
- **Prehypertension.** Higher than 120 over 80 and lower than 139 over 89
- **Hypertension.** Greater than 139 over 89

Table 10.8.3.5.4.2: The Risk Factors for Hypertension

Unmodifiable Risk Factors	Modifiable Risk Factors
• **Age.** After fifty-five, the risk of developing high blood pressure is 90 percent. • **Race.** African-Americans are more likely to develop hypertension, manifest it at a younger age, and have higher blood pressure readings. • **Family history.** There is a strong genetic component to high blood pressure, and an individual's risk goes up along with the number of family members who have hypertension.	• **Weight.** Roughly 60 percent of people with hypertension are obese. • **Sodium consumption.** The more salt in a person's diet, the more likely they are to have high blood pressure. • **Alcohol.** Drinking more than two drinks per day for men and one drink for women increases the likelihood of hypertension. • **Diet.** In addition to salt and alcohol consumption, other dietary factors increase chances of developing hypertension.

Steps to Reducing the Risk of High Blood Pressure

Although it is not possible to change one's age or genetics, there are actions that people can take to decrease their risk of hypertension. Techniques to reduce blood pressure include becoming physically active, maintaining a healthy weight, reducing sodium intake below 2,400 milligrams per day (or below 1,500 milligrams if you are in a high-risk group or already have been diagnosed with hypertension), using alcohol moderately, and following the DASH diet. Additionally, vitamin C, calcium, and potassium have all been shown to promote healthy blood pressure. It is also vital to monitor your blood pressure levels on a regular basis. Prompt intervention when readings rise above the ideal level (120 over 80) can save lives, which is why everyone should know the status of their blood pressure.

Cancer

More than one hundred diseases are classified as different forms of cancer, all of them characterized by the uncontrolled growth of abnormal cells. Cancer is triggered by mutations in a cell's genetic material. The cause of these changes may be inherited, or it may result from exposure to carcinogens, which are agents that can cause cancer. Carcinogens include chemicals, viruses, certain medical treatments such as radiation, pollution, or other substances and exposures that are known or suspected to cause cancer.American Cancer Society. "Known and Probable Human Carcinogens." Last medical review June 29, 2011. http://www.cancer.org/Cancer/CancerC...n-and-probable -human-carcinogens. The National Institutes of Health has classified fifty-four different compounds as known cancer-causing agents in humans.Brett Israel, "How Many Cancers Are Caused by the Environment?" *Scientific American*, 21 May 2010. www.scientificamerican.com/ar...fm?id=how-many -cancers-are-caused-by-the-environment.

Under normal conditions, a healthy cell will either repair any damage that has been done or self destruct so that no future cells will be affected. Cells become cancerous when their DNA is damaged, but they do not self-destruct or stop reproducing as normal cells would. As these abnormal cells continue their rapid growth, in most cancers they coalesce in a mass called a tumor. Cancer cells can overwhelm healthy cells and interfere with the healthy functioning of the body. They can also invade other organs and spread throughout the body in a process known as metastasis. Scientists and the medical community are giving considerable attention to the early stages of cancer, from the moment a healthy cell is exposed to a carcinogen to the point where cells with damaged DNA are replicating out of control. Intervention at any of these early stages could prove to be quite beneficial, because it is thought that most cancers are the result of lifestyle choices and environmental exposure.

The risk factors for different cancers can vary. For example, exposure to ultraviolet radiation from the sun and from tanning beds is a risk factor for skin cancer, while exposure to asbestos is a risk factor for mesothelioma cancer. Table **10.8.3.5.4.3** shows some common risk factors for a number of different types of cancer.

Table 10.8.3.5.4.3: The Risk Factors for Cancer

Unmodifiable Risk Factors	Modifiable Risk Factors
• **Age.** Most cancers occur in people over the age of sixty-five. However, people of all ages, including children, can get cancer. • **Family history.** Certain types of cancer have a genetic link. However, environmental factors may also play a part.	• **Tobacco.** Smoking or chewing tobacco greatly increases the risk for certain cancers, including cancer of the lungs, bladder, cervix, kidneys, mouth, and pancreas. • **Alcohol.** Drinking alcohol is linked to cancers of the mouth, throat, esophagus, and breast, as well as to cancers of the neck and head. • **Obesity.** Linked to cancers of the colon, uterus, pancreas, esophagus, kidney, and breast. • **Cooking techniques.** Grilling, smoking, and preparing meat at high temperatures forms carcinogens. • **Red meat.** The risk of colon cancer seems to increase with the consumption of red meat and processed meat. • **Cured meats.** According to a recent study, there is a mild risk of pancreatic cancer with the consumption of cured meats, such as sausage, pepperoni, bacon, ham, smoked turkey, salami, and hot dogs. • **Physical inactivity.** Linked to colon, breast, and other cancers. • **Exposure to chemicals.** People who have jobs that expose them to chemicals on a regular basis, such as construction workers and painters, have an increased risk of cancer. • **Viruses or bacteria.** Certain viruses or bacteria may increase the risk of developing cancer. For example, human papillomaviruses, which are sexually transmitted, are the primary cause of cervical cancer.

Steps to Reducing the Risk of Cancer

According to the American Cancer Society, half of all American men and one-third of American women will be diagnosed with some form of cancer in their lifetime.American Cancer Society. “What Is Cancer?” Last medical review March 19, 2010. http://www.cancer.org/Cancer/CancerB...what-is-cancer. Although cancer is one of the leading causes of death worldwide, ongoing research and innovations in treatment have improved the outlook for cancer patients to the point where millions now survive or live with cancer, making it a chronic disease.

The American Institute for Cancer Research (AICR) has published guidelines for preventing cancer and staying healthy. They include several dietary and lifestyle choices, such as participating in physical activity for thirty minutes per day or more, and maintaining a healthy weight. In addition, AICR recommends consuming a plant-based diet.American Institute for Cancer Research. “Guidelines for Cancer Prevention.” No. E93-GL. © November 2007. http://preventcancer.aicr.org/site/D...pdf?docID=3561. Several epidemiological studies have found a link between eating plenty of fruits and vegetables and a low incidence of certain cancers. Fruits and vegetables containing a wide variety of nutrients and phytochemicals may either prevent or reduce the oxidative damage to cell structures. Cruciferous vegetables, such as cauliflower, broccoli, and Brussels sprouts, may also reduce the risk of certain cancers, such as endometrial, esophageal, and others. Also, studies have shown that the more fiber you have in your diet, the lower your risk of colon cancer.

Supplementation may also be helpful to a limited degree. Vitamin D and antioxidants have been linked to lowering the risk of some cancers (however taking an iron supplement may promote others). But, obtaining vital nutrients from food first is the best way to help prevent or manage cancer. In addition, regular and vigorous exercise can lower the risk of breast and colon cancers, among others. Also, wear sunblock, stay in the shade, and avoid the midday sun to protect yourself from skin cancer, which is one of the most common kinds of cancer.Mayo Clinic. “Cancer Prevention: 7 Steps to Reduce Your Risk.” September 21, 2010. Accessed December 21, 2011. www.mayoclinic.com/health/cancer -prevention/CA00024.

Diabetes

The World Health Organization reports that more than 346 million people around the world have diabetes and they predict that deaths due to the consquences of diabetes will double from 2005 to 2030.World Health Organization. “Diabetes.” *Fact Sheet*, no. 312. August 2011. http://www.who.int/mediacentre/factsheets/fs312/en/. **Diabetes mellitus** is a metabolic disorder that results when the pancreas does not produce enough insulin to meet its needs or the body does not effectively utilize the insulin that it does produce. Insulin is the hormone that regulates blood glucose levels. The most common complication is hyperglycemia (elevated blood sugar), which gradually leads to damage in many of the body’s systems, most notably the eyes, kidneys, nerves, and heart and blood vessels.

There are three kinds of diabetes: Type 1, Type 2, and gestational. Formerly known as juvenile or childhood-onset diabetes, Type 1 diabetes is an autoimmune condition in which the pancreas does not produce insulin. Type 1 diabetes is not preventable, and it’s cause is unknown. Symptoms include excessive urination, thirst, persistant hunger, weight loss, vision problems, and fatigue.

Formerly known as adult-onset diabetes, Type 2 diabetes results when the pancreas produces enough insulin initially, but the body is unable to use the hormone properly (insulin resistance). Until recently, this disease was only found in adults. However, it is now found among children, too. More than 90 percent of diabetics have Type 2.National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health. “Diabetes Overview.” *NIH Publication No. 09–3873* (November 2008). diabetes.niddk.nih.gov/dm/pubs/overview/. Major contributing factors to the development of Type 2 diabetes include excessive body weight and physical inactivity. The symptoms for Type 2 diabetes are similar to Type 1, but are much less noticeable. As a result, Type 2 diabetes may remain undiagnosed for several years after the onset, generally after complications have already manifested.

About 3 to 8 percent of pregnant women develop gestational diabetes during the latter stages of pregnancy. This condition is caused by a shortage of insulin or by pregnancy hormones. Gestational diabetes has symptoms similar to Type 2 diabetes, and some women may not experience any symptoms at all. In general, gestational diabetes fades away after the birth of the baby. However, women who have had gestational diabetes are at a greater risk of developing Type 2 diabetes within five to ten years. Also, infants born of mothers who suffer from this condition are at an increased risk of developing Type 2 diabetes as they grow older.National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health. “Diabetes Overview.” *NIH Publication No. 09–3873* (November 2008). diabetes.niddk.nih.gov/dm/pubs/overview/.

Table **10.8.3.5.4.4**: The Risk Factors for Diabetes

Unmodifiable Risk Factors	Modifiable Risk Factors
• **Age.** Risk increases after age forty-five • **Medical history.** Diabetes during a previous pregnancy or recently giving birth to an infant who weighs more than 9 pounds. • **Family history.** A history of diabetes among one or more close relatives. • **Race and ethnicity.** Individuals from specific ethnic groups may have an increased risk for developing diabetes, including African Americans, Hispanic Americans, Asian Americans, and Native Americans. • **Viruses.** Exposure to: Epstein-Barr, Coxsackie, mumps, or cytomegalo viruses may trigger Type 1 diabetes.	• **Cigarette smoking.** Nicotine constricts blood vessels, and carbon monoxide damages their inner lining, which increases the risk of Type 2 diabetes. • **Obesity.** Excess body weight, especially around the waist, is a major contributing factor to Type 2 diabetes. • **Physical inactivity.** Lack of exercise is strongly associated with diabetes. • **High blood pressure.** Greater than or equal to 140/90 mmHg. • **Cholesterol levels.** HDL cholesterol under 35 mg/dL. • **Blood sugar.** Impaired glucose tolerance. • **Blood fats.** Elevated triglycerides (250 mg/dL or more).

Steps to Reducing the Risk of Diabetes

Unfortunately, Type 1 diabetes is almost impossible to prevent, although some clinical research suggests that breastfeeding an infant for at least three months may decrease the child’s risk of developing this condition. However, people who are at risk for Type 2 or gestational diabetes can take steps to avoid the disease. For example, it is crucial to achieve and maintain a healthy body weight through regular physical activity. If you are at risk, strive for at least thirty minutes of moderate to intense exercise at least three times per week. Proper nutrition is also vital, and it is important to restrict sugary snacks, beverages, and desserts, and to limit

the intake of trans fats and saturated fats. In addition, those who are at risk should consume whole grains, legumes, fruits, and vegetables, along with two servings of nonfried fish per week.

For people over age forty-five, it is important to have a glucose test every three years. Regular testing should begin at a younger age, and be performed frequently if you have any risk factors for developing Type 2 diabetes. In order to assess your health status, the following is recommended:

- Early diagnosis through blood testing
- Blood pressure measurement
- Blood lipid measurement

Food: The Best Medicine

Poor dietary choices and a sedentary lifestyle account for about 300–600 thousand deaths every year according to the US Department of Health and Human Services. That number is thirteen times higher than the deaths due to gun violence.Nutrition Policy, Center for Science in the Public Interest. “Why Good Nutrition Is Important.” Accessed December 21, 2011. http://www.cspinet.org/nutritionpoli...on_policy.html. The typical North American diet is too high in saturated fat, sodium, and sugar, and too low in fiber in the form of whole fruits, vegetables, and whole grains to keep people healthy. With so many threats to optimal health it is vital to address those factors that are under your control, namely dietary and lifestyle choices. A diet that supplies your body with the needed energy and nutrients daily will result in efficient body functioning and in protection from disease. Making sound nutritional choices can also provide support for individuals undergoing treatment for short-term or chronic conditions. Finding a balance between nutritional needs with concerns about drug interactions can hasten recovery, improve quality of life, and minimize the side effects from treatment protocols.

Key Takeaways

Chronic diseases such as cardiovascular disease, high blood pressure, cancer, and diabetes are major public health threats, and major causes of mortality. Knowing the modifiable risk factors (such as diet, level of physical activity, and cigarette smoking) for certain diseases can help you to adapt your lifestyle to protect them. By following a healthy diet, becoming active, and making other sound lifestyle choices, individuals can reduce their risk of developing chronic diseases, or better manage their condition to prevent further complications.

Discussion Starter

1. Assess your risk for developing one of the four chronic diseases discussed in this section. Which risk factors can be modified? Which risk factors can’t be modified? What can you do to lessen the chance that you will develop the disease?

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10.8.3.5.5: Foodborne Illness and Food Safety

Learning Objectives

- Describe the ideal environment for microorganisms to reproduce.
- Give examples of bacteria, viruses, parasites, and molds that have the potential to cause foodborne illness.
- Discuss government efforts to protect the health of the population, and precautions consumers can take to protect themselves.

Foodborne illness is another serious threat to health. Sometimes called “food poisoning,” foodborne illness is a common public health problem that can result from exposure to a pathogen or a toxin via food or beverages. Raw foods, such as seafood, produce, and meats, can all be contaminated during harvest (or slaughter for meats), processing, packaging, or during distribution, though meat and poultry are the most common source of foodborne illness. For all kinds of food, contamination also can occur during preparation and cooking in a home kitchen or in a restaurant. In many developing nations, contaminated water is also a major source of foodborne illness.

Many people are affected by foodborne illness each year, making food safety a very important issue. Annually, one out of six Americans becomes sick after consuming contaminated foods or beverages.Centers for Disease Control and Prevention. “Food Safety at CDC.” Last updated June 28, 2011. http://www.cdc.gov/foodsafety/facts.html. Foodborne illness can range from mild stomach upset to severe symptoms, or even fatalities. The problem of food contamination can not only be dangerous to your health, it can also be harmful to your wallet. Medical costs and lost wages due to salmonellosis, just one foodborne disease, are estimated at over $1 billion per year.

At-Risk Groups

No one is immune from consuming contaminated food. But, whether you become seriously ill depends on the microorganism, the amount you have consumed, and your overall health. In addition, some groups have a higher risk than others for developing severe complications to foodborne disease. Who is most at risk? Young children, elderly people, and pregnant women all have a higher chance of becoming very sick after consuming contaminated food. Other high-risk groups include people with compromised immune systems due to HIV/AIDS, immunosuppressive medications (such as after an organ transplant), and long-term steroid use for asthma or arthritis. Exposure to contaminated food could also pose problems for diabetics, cancer patients, people who have liver disease, and people who have stomach problems as a result of low stomach acid or previous stomach surgery. People in all of these groups should handle food carefully, make sure that what they eat has been cooked thoroughly, and avoid taking any chances that could lead to exposure.

The Major Types of Foodborne Illness

Foodborne illnesses are either infectious or toxic in nature. The difference depends on the agent that causes the condition. Microbes, such as bacteria, cause food infections, while toxins, such as the kind produced by molds, cause intoxications. Different diseases manifest in different ways, so signs and symptoms can vary with the source of contamination. However the illness occurs, the microbe or toxin enters the body through the gastrointestinal tract, and as a result common symptoms include diarrhea, nausea, and abdominal pain. Additional symptoms may include vomiting, dehydration, lightheadedness, and rapid heartbeat. More severe complications can include a high fever, diarrhea that lasts more than three days, prolonged vomiting, bloody stools, and signs of shock.

One of the biggest misconceptions about foodborne illness is that it is always triggered by the last meal that a person ate. However, it may take several days or more before the onset of symptoms. If you develop a foodborne illness, you should rest and drink plenty of fluids. Avoid antidiarrheal medications, because they could slow the elimination of the contaminant.

Food Infection

According to the CDC, more than 250 different foodborne diseases have been identified.Centers for Disease Control and Prevention. “Food Safety at CDC.” Last updated June 28, 2011. http://www.cdc.gov/foodsafety/facts.html. Most are food infections, which means they are caused from food contaminated by microorganisms, such as bacteria, by microscopic animals called parasites, or by viruses. The infection then grows inside the body and becomes the source of symptoms. Food infections can be sporadic and often are not reported to physicians. However, ocassional outbreaks occur that put communities, states and provinces, or even entire nations at risk. For example, in 1994, an outbreak of the infection salmonellosis occurred in the United States due to contaminated ice cream. An estimated 224,000 people became ill. In 1988, contaminated clams resulted in an outbreak of hepatitis A in China, which affected about 300,000 people.World Health Organization. “Food Safety and Foodborne Illness.” *Fact Sheet*, no. 237. Last reviewed March 2007. www.who.int/mediacentre/factsheets/fs237/en/.

The Reproduction of Microorganisms

Bacteria, one of the most common agents of food infection, are single-celled microorganisms that are too small to be seen with the human eye. Microbes live, die, and reproduce, and like all living creatures, they depend on certain conditions to survive and thrive. In order to reproduce within food, microorganisms require the following:

- **Temperature.** Between 40°F and 140°F, which is called the danger zone, bacteria grow rapidly.
- **Time.** More than two hours in the danger zone.
- **Water.** High moisture content is helpful. Fresh fruits and vegetables have the highest moisture content.
- **Oxygen.** Most microorganisms need oxygen to grow and multiply, but a few are anaerobic and do not.
- **Acidity and pH Level.** Foods that have a low level of acidity (or a high pH level) provide an ideal environment, since most microorganisms grow best around 7.0 pH and not many will grow below 4.0 pH. Examples of higher pH foods include meat, seafood, milk, and corn. Examples of low pH foods include citrus fruits, sauerkraut, tomatoes, and pineapples.
- **Nutrient Content.** Microorganisms need protein, starch, sugars, fats, and other compounds to grow. Typically high-protein foods are better for bacterial growth.

Food Intoxication

Other kinds of foodborne illness are food intoxications, which are caused by natural toxins or harmful chemicals. These and other unspecified agents are major contributors to episodes of acute gastroenteritis and other kinds of foodborne illness.Scallan, E. et al. “Foodborne Illness Acquired in the United States—Unspecified Agents.” *Emerg Infect Diseases* 17, no. 1. Like pathogens, toxins and chemicals can be introduced to food during cultivation, harvesting, processing, or distribution. Some toxins can lead to symptoms that are also common to food infection, such as abdominal cramping, while others can cause different kinds of symptoms and complications, some very severe. For example, mercury, which is sometimes found in fish, can cause neurological damage in infants and children. Exposure to cadmium can cause kidney damage, typically in elderly people.

The Causes of Food Contamination

Both food infections and food intoxications can create a burden on health systems, when patients require treatment and support, and on food systems, when companies must recall contaminated food or address public concerns. It all begins with the agent that causes the contamination. When a person ingests a food contaminant, it travels to the stomach and intestines. There, it can interfere with the body’s functions and make you sick. In the next part, we will focus on different types of food contaminants and examine common microbes, toxins, chemicals, and other substances that can cause food infections and intoxications. Let’s begin with pathogens, which include bacteria and viruses. About one hundred years ago, typhoid fever, tuberculosis, and cholera were common diseases caused by food and water contaminated by pathogens. Over time, improvements in food processing and water treatment eliminated most of those problems in North America. Today, other bacteria and viruses have become common causes of food infection.

Bacteria

All foods naturally contain small amounts of bacteria. However, poor handling and preparation of food, along with improper cooking or storage can multiply bacteria and cause illness. In addition, bacteria can multiply quickly when cooked food is left out at room temperature for more than a few hours. Most bacteria grow undetected because they do not change the color or texture of

food or produce a bad odor. Freezing and refrigeration slow or stop the growth of bacteria, but does not destroy the bacteria completely. The microbes can reactivate when the food is taken out and thawed.

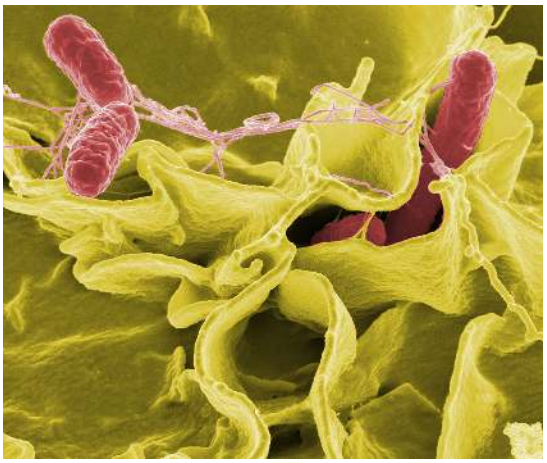


Figure 10.8.3.5.5.1: Salmonella was first identified in 1885 and many types of this kind of bacteria exist. The incidence of Salmonella infections has risen dramatically in the past few decades. Color-enhanced scanning electron micrograph showing Salmonella Typhimurium (red) invading cultured human cells (Credit: Rocky Mountain Laboratories, NIAID, NIH). Image is public domain.

Many different kinds of bacteria can lead to food infections. One of the most common is *Salmonella*, which is found in the intestines of birds, reptiles, and mammals. *Salmonella* can spread to humans via a variety of different animal-origin foods, including meats, poultry, eggs, dairy products, and seafood. The disease it causes, salmonellosis, typically brings about fever, diarrhea, and abdominal cramps within twelve to seventy-two hours after eating. Usually, the illness lasts four to seven days, and most people recover without treatment. However, in individuals with weakened immune systems, *Salmonella* can invade the bloodstream and lead to life-threatening complications, such as a high fever and severe diarrhea. Centers for Disease Control and Prevention. “Salmonella.” Last updated December 19, 2011. http://www.cdc.gov/salmonella/.

The bacterium *Listeria monocytogenes* is found in soft cheeses, unpasteurized milk, and seafood. It causes a disease called listeriosis that can bring about fever, headache, nausea, and vomiting. *Listeria monocytogenes* mostly affects pregnant women, newborns, older adults, and people with cancer and compromised immune systems.

The food infection *E. coli* is caused by *Escherichia coli*. Sources include raw or undercooked meat, raw vegetables, unpasteurized milk, minimally processed ciders and juices, and contaminated drinking water. Symptoms can occur a few days after eating, and include watery and bloody diarrhea, severe stomach cramps, and dehydration. More severe complications may include colitis, neurological symptoms, stroke, and hemolytic uremic syndrome. In young children, an *E. coli* infection can cause kidney failure and death.

The bacterium *Clostridium botulinum* causes botulism. Sources include improperly canned foods, lunch meats, and garlic. An infected person may experience symptoms within four to thirty-six hours after eating. Symptoms could include nerve dysfunction, such as double vision, inability to swallow, speech difficulty, and progressive paralysis of the respiratory system. Botulism can also be fatal.

Campylobacter jejuni causes the disease campylobacteriosis. It is the most commonly identified bacterial cause of diarrhea worldwide. Consuming undercooked chicken, or food contaminated with the juices of raw chicken, is the most frequent source of this infection. Other sources include raw meat and unpasteurized milk. Within two to five days after consumption, symptoms can begin and include diarrhea, stomach cramps, fever, and bloody stools. The duration of this disease is about seven to ten days.

The food infection shigellosis is caused by *Shigella*, of which there are several types. Sources include undercooked liquid or moist food that has been handled by an infected person. The onset of symptoms occurs one to seven days after eating, and can include stomach cramps, diarrhea, fever, and vomiting. Another common symptom is blood, pus, or mucus in stool. Once a person has had shigellosis, the individual is not likely to get infected with that specific type again for at least several years. However, they can still become infected with other types of *Shigella*.

Staphylococcus aureus causes staphylococcal food poisoning. Food workers who carry this kind of bacteria and handle food without washing their hands can cause contamination. Other sources include meat and poultry, egg products, cream-filled pastries, tuna, potato and macaroni salad, and foods left unrefrigerated for long periods of time. Symptoms can begin thirty minutes to eight hours after eating, and include diarrhea, vomiting, nausea, stomach pain, and cramps. This food infection usually lasts one to two days.

Found in raw oysters and other kinds of seafood, *Vibrio vulnificus* belongs to the same family as the bacteria which cause cholera. This food contaminant can result in the *Vibrio* infection. Symptoms can begin anywhere from six hours to a few days after consumption, and include chills, fever, nausea, and vomiting. This disease is very dangerous and can result in fatalities, especially in people with underlying health problems.Centers for Disease Control and Prevention. “Food Safety at CDC.” Last updated June 28, 2011. http://www.cdc.gov/foodsafety/facts.html.

Viruses

Viruses are another type of pathogen that can lead to food infections, however they are less predominant than bacteria. **Hepatitis A** is one of the more well-known food-contaminating viruses. Sources include raw shellfish from polluted water, and food handled by an infected person. This virus can go undetected for weeks and, on average, symptoms do not appear until about one month after exposure. At first, symptoms include malaise, loss of appetite, nausea, vomiting, and fever. Three to ten days later, additional symptoms can manifest, including jaundice and darkened urine. Severe cases of a hepatitis A can result in liver damage and death.

The most common form of contamination from handled foods is the **norovirus**, which is also known as the Norwalk-like virus, or the calicivirus. Sources include raw shellfish from polluted water, salads, sandwiches, and other ready-to-eat foods handled by an infected person. The norovirus causes gastroenteritis and within one to three days it leads to symptoms, such as nausea, vomiting, diarrhea, stomach pain, headache, and a low-grade fever.Centers for Disease Control and Prevention. “Food Safety at CDC.” Last updated June 28, 2011. http://www.cdc.gov/foodsafety/facts.html.

Parasitic Protozoa

Food-contaminating parasitic protozoa are microscopic organisms that may be spread in food and water. Several of these creatures pose major problems to food production worldwide. They include *Anisakis*, microscopic worms that invade the stomach or the intestines. Sources of this parasite include raw fish. This parasite can result in the Anisakis infection, with symptoms that begin within a day or less and include abdominal pain, which can be severe.

Cryptosporidium lives in the intestines of infected animals. Another common source is drinking water, when heavy rains wash animal wastes into reservoirs. One major problem with this pathogen is that it is extremely resistant to disinfection with chlorine. *Cryptosporidium* causes the disease cryptosporidiosis, with symptoms that begin one to twelve days after exposure and include watery stools, loss of appetite, vomiting, a low-grade fever, abdominal cramps, and diarrhea. For HIV/AIDS patients and others with weakened immune systems, the disease can be severe, and sometimes can lead to death.

Giardia lamblia is another parasite that is found in contaminated drinking water. In addition, it lives in the intestinal tracts of animals, and can wash into surface water and reservoirs, similar to *Cryptosporidium*. *Giardia* causes giardiasis, with symptoms that include abdominal cramping and diarrhea within one to three days. Although most people recover within one to two weeks, the disease can lead to a chronic condition, especially in people with compromised immune systems.

The parasite *Toxoplasma gondii* causes the infection toxoplasmosis, which is a leading cause of death attributed to foodborne illness in the United States. More than sixty million Americans carry *Toxoplasma gondii*, but very few have symptoms. Typically, the body’s immune system keeps the parasite from causing disease. Sources include raw or undercooked meat and unwashed fruits and vegetables. Handling the feces of a cat with an acute infection can also lead to the disease.Centers for Disease Control and Prevention. “Parasites.” Last updated November 2, 2010. http://www.cdc.gov/parasites/food.html.

Mold Toxins

Warm, humid, or damp conditions encourage mold to grow on food. Molds are microscopic fungi that live on animals and plants. No one knows how many species of fungi exist, but estimates range from ten- to three-hundred thousand. Unlike single-celled bacteria, molds are multicellular, and under a microscope look like slender mushrooms. They have stalks with spores that form at the ends. The spores give molds their color and can be transported by air, water, or insects. Spores also enable mold to reproduce.

Additionally, molds have root-like threads that may grow deep into food and be difficult to see. The threads are very deep when a food shows heavy mold growth. Foods that contain mold may also have bacteria growing alongside it.



Figure **10.8.3.5.5.2**: Mold can grow on fruits, vegetables, grains, meats, poultry, and dairy products, and typically appears as gray or green "fur." Moldy nectarines that were in a refrigerator. The nectarine with black mold is also affecting the nectarine underneath. from Roger McLassus 1951.

Some molds, like the kind found in blue cheese, are desirable in foods, while other molds can be dangerous. The spores of some molds can cause allergic reactions and respiratory problems. In the right conditions, a few molds produce mycotoxins, which are natural, poisonous substances that can make you sick if they are consumed. Mycotoxins are contained in and around mold threads, and in some cases, may have spread throughout the food. The Food and Agriculture Organization of the United Nations estimates that mycotoxins affect 25% of the world's food crops. They are found primarily in grains and nuts, but other sources include apples, celery, and other produce.

The most dangerous mycotoxins are **aflatoxins**, which are produced by strains of fungi called *Aspergillus* under certain temperature and humidity conditions. Contamination has occurred in peanuts, tree nuts, and corn. Aflatoxins can cause aflatoxicosis in humans, livestock, and domestic animals. Symptoms include vomiting and abdominal pain. Possible complications include liver failure, liver cancer, and even death. Many countries try to limit exposure to aflatoxins by monitoring their presence on food and feed products.US Department of Agriculture, Food Safety and Inspection Service. "Molds on Food: Are They Dangerous?" Last modified March 4, 2010. www.fsis.usda.gov/FactSheets/Molds_On_Food/.

Poisonous Mushrooms

Like molds, mushrooms are fungi and the poisonous kind produces mycotoxins that can cause food intoxication. Toxic mushrooms, also known as toadstools, can cause severe vomiting and other symptoms. However, only a few varieties are fatal. Toxic mushrooms cannot be made safe by cooking, freezing, canning, or processing. The only way to avoid food intoxication is to refrain from eating them. Mushroom guides can help wild gatherers distinguish between the edible and toxic kinds.US Department of Agriculture, Food Safety and Inspection Service. "Molds on Food: Are They Dangerous?" Last modified March 4, 2010. www.fsis.usda.gov/FactSheets/Molds_On_Food/.

Pesticides

Pesticides are important in food production to control diseases, weeds, insects, and other pests. They protect crops and ensure a large yield. However, synthetic pesticides can leave behind residues, particularly on produce, that can be harmful to human health. Foods that contain the highest levels of pesticide residue include conventionally-grown peaches, apples, bell peppers, celery, nectarines, strawberries, cherries, pears, spinach, lettuce, and potatoes. Foods that contain the lowest levels of pesticide residue include avocadoes, pineapples, bananas, mangoes, asparagus, cabbage, and broccoli.Hoffman, M. MD. "Safer Foods for a Healthier You." Web MD. © 2009 WebMD, LLC. http://www.webmd.com/health-ehome-9/pesticides-hormones-in-food. In many cases, the amount of pesticide exposure is too small to pose a risk. However, harmful exposures can lead to certain health problems and complications, including cancer. Also, infants and young children are more susceptible to the hazards of pesticides than adults. In addition, using synthetic pesticides, herbicides, and fertilizers contributes to soil and water pollution and can be hazardous to farm workers.

To protect the public and their workers, many farmers now rely on alternatives to synthetic pesticide use, including crop rotation, natural pesticides, and planting nonfood crops nearby to lure pests away. Some consumers choose to reduce their exposure to pesticides by purchasing organic produce. Organic foods are grown or produced without synthetic pesticides or fertilizer, and all growers and processors must be certified by the US Department of Agriculture (USDA). However, conventionally-grown produce should be fine for fruits and vegetables that appear on the low-residue list.

Pollutants

Pollutants are another kind of chemical contaminant that can make food harmful. Chemical runoff from factories can pollute food products and drinking water. For example, **dioxins** are chemical compounds created in industrial processes, such as manufacturing and bleaching pulp and paper. Fish that swim in dioxin-polluted waters can contain significant amounts of this pollutant, which causes cancer. When metals contaminate food, it can result in serious and even life-threatening health problems. A common metal contaminant is lead, which can be present in drinking water, soil, and air. Lead exposure most often affects children, who can suffer from physical and mental developmental delays as a result.

Methyl mercury occurs naturally in the environment and is also produced by human activities. Fish can absorb it, and the predatory fish that consume smaller, contaminated fish can have very high levels. This highly toxic chemical can cause mercury poisoning, which leads to developmental problems in children, as well as autoimmune effects. A condition called Minamata disease was identified in 1956 in Japan. It was named for the town of Minamata, which was the site of an environmental disaster when methyl mercury was released into the surface water near a factory. Many residents experienced neurological issues, including numbness in hands and feet, muscle weakness, a narrowing of the field of vision, damage to hearing and speech, and ataxia, which is a lack of muscle coordination.Ministry of the Environment, Government of Japan. “Minamata Disease: The History and Measures.” © 2002. Accessed December 21, 2011. http://www.env.go.jp/en/chemi/hs/minamata2002/.

PCBs, or polychlorinated biphenyls, are man-made organic compounds that are used commercially. Like methyl mercury, higher concentrations of this contaminant are found in predatory fish. Health effects include physical and neurological development in children, and this compound is potentially a carcinogen. PCB contamination also can affect the immune, reproductive, nervous, and endocrine systems.US Environmental Protection Agency. “Health Effects of PCBs.” Last updated August 08, 2008. http://www.epa.gov/epawaste/hazard/tsd/pcbs/pubs/effects.htm.

Protecting the Public Health

Most foodborne infections go unreported and undiagnosed. However, the CDC estimates that about seventy-six million people in the United States become ill from foodborne pathogens or other agents every year. In North America, a number of government agencies work to educate the public about food infections and intoxications, prevent the spread of disease, and quell any major problems or outbreaks. They include the CDC, the FDA, the USDA, and Health Canada, among other organizations.

Efforts on the Governmental Level

A number of government agencies work to ensure food safety and to protect the public from foodborne illness. The USDA and the FDA enforce laws regarding the safety of domestic and imported food. In addition, the Federal Food, Drug, and Cosmetic Act of 1938 gives the FDA authority over food ingredients. The CDC tracks outbreaks, identifies the causes of food infection and intoxication, and recommends ways to prevent foodborne illness. Other government agencies that play a role in protecting the public include the Food Safety and Inspection Service, a division of the USDA, which enforces laws regulating meat and poultry safety. The Agricultural Research Service, which is the research arm of the USDA, investigates a number of agricultural practices, including those related to animal and crop safety. The National Institute of Food and Agriculture conducts research and education programs on food safety for farmers and consumers. Also, the Environmental Protection Agency (EPA) regulates public drinking water.

Government agencies also monitor the use of pesticides. The EPA approves pesticides and other chemicals used in agriculture, and sets limits on how much residue can remain on food. The FDA analyzes food for surface residue and waxes. Processing methods can either reduce or concentrate pesticide residue in foods. Therefore, the Food Quality Protection Act, which was passed in 1996, requires manufacturers to show that pesticide levels are safe for children.

In Canada, Health Canada works with local governments, industries, and consumers to establish food safety throughout the nation. The agency’s scientists assess health risks from foodborne contaminants, conduct research, and evaluate data to better understand

the effects of pathogens, chemicals, and other foodborne agents on the body. Health Canada also monitors the levels of contaminants in foods and estimates the exposure of consumers. Another organization, the Canadian Food Inspection Agency, enforces the safety policies and standards set by Health Canada. They safeguard livestock, along with crops and other plants, to protect the public.

Efforts within the Food Industry

As discussed in Chapter 14 "Nutrition and Society: Food Politics and Perspectives", the Hazard Analysis Critical Control Points (HACCP) is a system within the food industry designed to promote food safety and prevent contamination by identifying all areas in food production and retail where contamination could occur. Companies and retailers determine the points during processing, packaging, shipping, or shelving where hazards could occur. Those companies or retailers must then take measures to prevent, control, or eliminate the potential for food contamination. The USDA requires the food industry to follow HACCP for meat and poultry, while the FDA requires it for seafood, low-acid canned-food, and juice. HACCP is voluntary for all other food products.

Efforts on the Consumer Level: What You Can Do

Consumers can also take steps to prevent foodborne illness and protect their health. Although you can often detect when mold is present, you can't see, smell, or taste bacteria or other agents of foodborne disease. Therefore, it is crucial to take measures to protect yourself from disease. The four most important steps for handling, preparing, and serving food are:

1. **Clean.** Wash hands thoroughly. Clean surfaces often and wash utensils after each use. Wash fruits and vegetables (even if you plan to peel them).
2. **Separate.** Don't cross-contaminate food during preparation and storage. Use separate cutting boards for produce and for meat, poultry, seafood, and eggs. Store food products separately in the refrigerator.
3. **Cook.** Heat food to proper temperatures. Use a food thermometer to check the temperature of food while it is cooking. Keep food hot after it has been cooked.
4. **Chill.** Refrigerate any leftovers within two hours. Never thaw or marinate food on the counter. Know when to keep food and when to throw it out. It can be helpful to check the website http://www.stilltasty.com, which explains how long refrigerated food remains fresh.US Department of Health and Human Services. "Keep Food Safe." Food Safety.gov. Accessed December 21, 2011. http://www.foodsafety.gov/keep/index.html.

Buying Food

It is best to buy your food from reputable grocers with clean, sanitary facilities, that keep products at appropriate temperatures. Consumers should examine food carefully before they purchase it. It is important to look at food in glass jars, check the stems on fresh produce, and avoid bruised fruit. Do not buy canned goods with dents or bulges, which are at risk for contamination with *Clostridium botulinum*. Fresh meat and poultry are usually free from mold, but cured and cooked meats should be examined carefully. Also, avoid torn, crushed, or open food packages, and do not buy food with frost or ice crystals, which indicates that the product has been stored for a long time, or thawed and refrozen. It is also a good idea to keep meat, poultry, seafood, and eggs separate from other items in your shopping cart as you move through the grocery store.



Video **10.8.3.5.5.1**: Start at the Store: Prevent Foodborne Illness. This video provides tips to follow when selecting and purchasing food at the supermarket to help to prevent foodborne illness and protect your health (click to see video).

Storing Food

Refrigerate perishable foods quickly; they should not be left out for more than two hours. The refrigerator should be kept at 40°F (or 4°C) or colder, and checked periodically with a thermometer. Store eggs in a carton on a shelf in the refrigerator, and not on the refrigerator door where the temperature is warmest. Wrap meat packages tightly and store them at the bottom of the refrigerator, so juices won't leak out onto other foods. Raw meat, poultry, and seafood should be kept in a refrigerator for only two days. Otherwise, they should be stored in the freezer, which should be kept at 0°F (or −18°C). Store potatoes and onions in a cool, dark place, but not under a sink because leakage from pipes could contaminate them. Empty cans of perishable foods or beverages that have been opened into containers, and promptly place them in a refrigerator. Also, be sure to consume leftovers within three to five days, so mold does not have a chance to grow.

Preparing Food

Wash hands thoroughly with warm, soapy water for at least twenty seconds before preparing food and every time after handling raw foods. Washing hands is important for many reasons. One is to prevent cross-contamination between foods. Also, some pathogens can be passed from person to person, so hand washing can help to prevent this. Fresh fruits and vegetables should also be rinsed thoroughly under running water to clean off pesticide residue.California Department of Pesticide Regulation. "Pesticides and Food: How We Test for Safety." *Pesticide Info: What You Should Know about Pesticides*, no. #E09/REV. Accessed December 21, 2011. www.cdpr.ca.gov/docs/dept/factshts/residu2. This is particularly important for produce that contains a high level of residue, such as apples, pears, spinach, and potatoes. Washing also removes most dirt and bacteria from the surface of produce.

Other tips to keep foods safe during preparation include defrosting meat, poultry, and seafood in the refrigerator, microwave, or in a water-tight plastic bag submerged in cold water. Never defrost at room temperature because that is an ideal temperature for bacteria to grow. Also, marinate foods in the refrigerator and discard leftover marinade after use because it contains raw juices. Always use clean cutting boards, which should be washed with soap and warm water by hand or in a dishwasher after each use. Another way to sanitize cutting boards is to rinse them with a solution of 5 milliliters (1 teaspoon) chlorine bleach to about 1 liter (1 quart) of water. If possible, use separate cutting boards for fresh produce and for raw meat. Also, wash the top before opening canned foods to prevent dirt from coming into contact with food.

Cooking Food

Cooked food is safe to eat only after it has been heated to a temperature that is high enough to kill bacteria. You cannot judge the state of "cooked" by color and texture alone. Instead, use a food thermometer to be sure. The appropriate minimum cooking temperature varies depending on the type of food. Seafood should be cooked to an internal temperature of 145°F, beef, lamb, and pork to 145°F, ground chicken and turkey to 165°F, poultry breasts to 165°F, and whole poultry and thighs to 165°F. When microwaving, rotate the dish and stir contents several times to ensure even cooking. Here is a link to the Safe Minimum Internal Temperatures for meat from the USDA.

Serving Food

After food has been cooked, the possibility of bacterial growth increases as the temperature drops. So, food should be kept above the safe temperature of 140°F, using a heat source such as a chafing dish, warming tray, or slow cooker. Cold foods should be kept at 40°F or lower. When serving food, keep it covered to block exposure to any mold spores hanging in the air. Use plastic wrap to cover foods that you want to remain moist, such as fresh fruits, vegetables, and salads. After a meal, do not keep leftovers at room temperature for more than two hours. They should be refrigerated as promptly as possible. It is also helpful to date leftovers, so they can be used within a safe time, which is generally three to five days when stored in a refrigerator.

Key Takeaways

Foodborne illness is caused by pathogens, such as bacteria and viruses, toxins, such as those produced by molds and poisonous mushrooms, and chemical contaminants, such as pesticide residues and pollutants. A number of government agencies work to regulate food, manage outbreaks, and inform the public about foodborne illness and food safety. Consumers also should take measures to protect their health, including following the rules for four key steps: clean, separate, cook, and chill.

Discussion Starter

1. Discuss tactics that government agencies or consumer groups could take to educate the public about food safety. What key points do you think consumers need to know about foodborne illness and food safety? How do you think government organizations or other groups can best get that information out to the public?

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10.8.3.5.6: Start Your Sustainable Future Today

Learning Objectives

- Discuss forms of activism in areas of food and nutrition.
- List steps individuals can take to support sustainable agriculture.

As we near the end of our journey in the world of health and nutrition, let's address how to adjust your lifestyle today to ensure better health and wellness tomorrow. Adopting sustainable practices can go a long way toward helping you achieve optimal health, while also helping to protect the health of our planet. Remember, that sustainability involves meeting present nutritional needs while preserving resources for the future. It includes agricultural practices and processes, along with the choices that consumers make when they shop for their food. Ideally, sustainable practices include methods that are healthy, conserve the environment, protect livestock, respect food industry workers, provide fair wages to farmers, and support farming communities. When a practice or a process is sustainable, it can be maintained for decades, or even centuries, to come.

Living a Sustainable Lifestyle

There are a number of steps you can take to live a more sustainable lifestyle. Utilizing an environmentally-friendly approach to good nutrition is a great way to remain and stay healthy. As an initial step, you might try to buy more whole foods rather than processed foods. You might also drink more water, rather than sodas and juices with added sugar. It is also a good idea to drink from a reusable water bottle to avoid adding more plastic to your local landfill, not to mention saving the fuel it takes to ship bottles of water. Here are some other suggestions to live a more sustainable lifestyle:

- **Learn more about food.** Learn about your local food system, what is native to the area, what is imported or shipped in, how food moves from farms to processors to retail in your area, and what practices are used. Read labels to see where food comes from and what the growing and processing practices are. You might also try taking a cooking class to learn more about food in general.
- **Eat a plant-based diet.** A plant-based diet is not necessarily vegetarian or vegan; it simply emphasizes whole grains, fruits, vegetables, and legumes over meat and poultry. Plant-based foods are good sources of carbohydrates, protein, fat, vitamins, and minerals. They also help to decrease your risk for cancer and other chronic conditions.
- **Support local farmers.** Purchase more locally grown food to promote sustainability. This could involve going to a farmer's market or a nearby farm. Locally grown food requires less fossil fuel because it does not have to travel great distances. Locally grown food also puts money back into your community and helps farmers in your area. Shopping at a farmer's market or a local farm may also provide an opportunity to talk to the farmer who grew the food to learn more about what you put on your plate.
- **Join a community garden.** You can't get more local than food that is grown in your own backyard. Consider growing your own food, or trying a community garden if you do not have the space at your home. Produce from a local garden will not only be fresher, it will often taste better. In addition, it will provide an opportunity to get to know like-minded individuals in your community.
- **Help spread the word.** Talk to friends and family members about food, nutrition, and living a sustainable lifestyle. Also, pay attention to food and nutrition policy at the federal, state, and local levels. Take a look at what foods are available in your community. Are there supermarkets or corner stores? What is available in the university dining hall? If healthy options are lacking, can you talk to someone to bring about changes?

Tools for Change

Another option to support local farmers is to sign up for a CSA (community-supported agriculture). Prior to a planting season, consumers who join a CSA purchase a produce share from a local farmer. When harvesting begins, farmers provide in-season, locally grown vegetables to shareholders at a local drop spot each week throughout the growing season. Some CSAs also include fruit, dairy products, meat, and more. CSA farmers often will allow you to visit the farm to learn more about the crops they grow or even volunteer to help with the harvest. Joining a CSA provides a direct connection between the local farming community and you.

Changing Your Behavior

Living a sustainable lifestyle and achieving optimal health is not easy. Taking steps to exercise more, eat healthier foods, and work harder to avoid food contamination may involve making major changes in your life. However, change is a process, and researchers have long studied the various stages of that process, as well as what helps or hinders it. While creating and implementing change is not easy, the more conscious you are of the process, and the more you prepare, the greater the chances are for success. Learning about the different stages of behavioral change can help you take a proactive approach to living a sustainable lifestyle.

The Transtheoretical Model of Behavioral Change

The Transtheoretical Model of Behavioral Change identifies the five stages of change, along with things that can help people move through these different stages. It also includes strategies which help people make, create, and continue behavioral change. Learning about these different stages and techniques helps you decide how to best approach making healthy changes in your life.

The five stages of the Transtheoretical Model of Behavioral Change are (Figure 10.8.3.5.6.1):

1. **Precontemplation.** At this stage, an individual has no plans to make any changes, and may not be aware that change is needed. For example, a person who has never thought of eating healthier or being more active is in the precontemplation stage. In this stage, a person often underestimates the pros of changing, and underestimates the cons of maintaining the status quo.
2. **Contemplation.** An individual begins to see the importance of altering behavior, and plans to do so within the next six months. Someone who has realized that they need to add more physical activity to their life, but hasn't made any concrete plans to start doing it, is in the contemplation stage. Although they may be more aware of the benefits of change, the individual may still exaggerate the negative aspects of change.
3. **Preparation.** At this stage, an individual becomes serious about making a change, and plans to implement that change within thirty days. The person may have already started to alter behavior, or told friends about any plans or intentions. For example, someone who wants to eat better and has started gathering healthier recipes is in the preparation stage.
4. **Action.** At this point, an individual is in the midst of change or has made a consistent change in behavior within the past six months. For example, someone in the action stage would have started eating better and exercising on a regular basis.
5. **Maintenance.** At this final stage, an individual has successfully changed their behavior for six months or more and intends to maintain it in the future.



Figure 10.8.3.5.6.1: This is a graphic representation of the "Stages of Change" in the Transtheoretical Model of Behavior Change. from Philciaccio (via Wikipedia).

Adopting a healthier lifestyle requires changes not only in behavior, but also in attitude and perception. The Transtheoretical Model calls them *decisional balance* and *self-efficacy*. Decisional balance means a person has realized that the benefits of making healthy changes outweigh any risks. Self-efficacy means a person has self-belief and the confidence to make and maintain positive changes. Both decisional balance and self-efficacy help people progress through the different stages of change. The Theoretical Model of Behavioral Change also includes ten techniques and strategies for bringing about change:

1. **Consciousness-raising.** Different methods that are used to raise awareness of healthier choices.
2. **Dramatic Relief.** The use of emotions through testimonials, role-playing, and the media to support change.
3. **Environmental Reevaluation.** Helping people become aware of how they affect others, and how a change on their part can also help those around them.
4. **Social Liberation.** Helping individuals realize that society may be more welcoming if they change their behavior.
5. **Self-Liberation.** Allowing people to believe in their ability to change, and make a commitment to it.
6. **Helping Relationships.** Providing connections between people seeking positive change with others who support their efforts.
7. **Counterconditioning.** Finding healthier substitutes for the unhealthy behavior.
8. **Reinforcement Management.** Increasing rewards for healthy behavior and reducing those for negative behavior.

9. **Stimulus Control.** Being aware of and eliminating cues for unhealthy behavior, and replacing them with cues for healthy choices.
10. **Self-reevaluation.** Changing your self-image to fit with a newer, healthier lifestyle.

Prochaska and colleagues state that their research related to the transtheoretical model shows that interventions to change behavior are more effective if they are "stage-matched," that is, "matched to each individual's stage of change (Figure **10.8.3.5.6.2**).

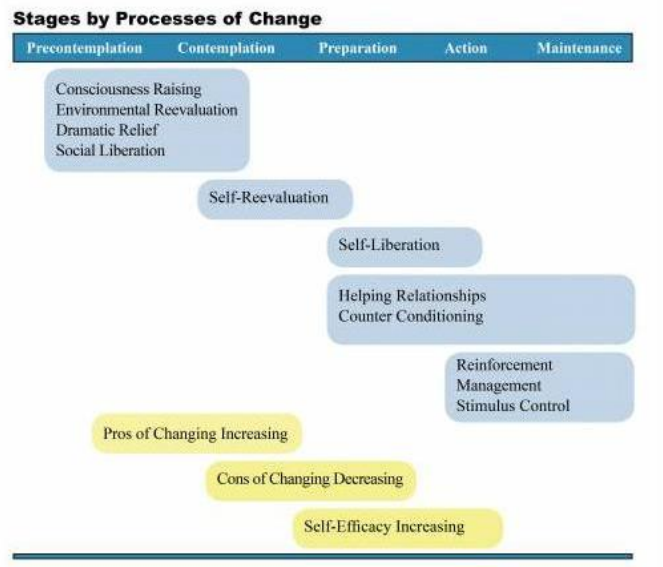


Figure **10.8.3.5.6.2**: Processes of Change. from Wikipedia

Some of these processes of change are more effective at different points in the process. A person who is not even contemplating change could tune out emotional appeals or reinforcement management. However, combining knowledge of the change process with the effective use of strategies can help everyone turn their good intentions into healthier lifestyles.Center for Health Communications Research. “Transtheoretical Model (Stages of Change).” © 2009 The Regents of University of Michigan. Accessed December 21, 2011. chcr.umich.edu/how_we_do_it/h..._document_view.

Key Takeaways

Living a sustainable lifestyle can help you to work toward achieving optimal health. There are a number of steps you can take to promote sustainable practices, such as buying locally grown food, eating a plant-based diet, and becoming aware of food and nutrition issues in your community. The Transtheoretical Model of Behavioral Change outlines the different stages of the process of change, and provides tools and techniques to enable major changes.

Discussion Starter

1. Think of a change you might want to make in your life to become healthier, and discuss ways you can use the transtheoretical model to make this change.

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10.8.3.5.7: Careers in Nutrition

Learning Objectives

- List some of the jobs available to students who are interested in a career in food and nutrition.

If you are considering a career in nutrition, it is important to understand the opportunities that may be available to you. Both dietitians and nutritionists provide nutrion-related services to people in the private and public sectors. A dietitian is a healthcare professional who has registered credentials and can provide nutritional care in the areas of health and wellness for both individuals and groups. A nutritionist is an unregistered professional who may have the credentials of a dietitian, or may have acquired the knowledge via other avenues. People in both professions work to apply nutritional science, using evidence-based best practices, to help people nourish their bodies and improve their lives.

Becoming a registered dietitian requires a Bachelor's or Master's degree in dietetics, including courses in biology, chemistry, biochemistry, microbiology, anatomy and physiology, nutrition, and food-service management. Other suggested courses include economics, business, statistics, computer science, psychology, and sociology. In addition, people who pursue this path must complete a dietetic internship and pass a national exam. Also, some states have licensure that requires additional forms and documentation. To become a registered dietetic technician you must complete a dietetic technician program that involves supervised practice. Forty-seven states have licensure requirements for registered dietitians and nutritionists. A few remaining states do not have laws that regulate this profession.Bureau of Labor Statistics. "Dietitians and Nutritionists." *Occupational Outlook Handbook, 2010-11 Edition.* Last modified April 7, 2010. www.bls.gov/oco/ocos077.htm. Go to www.cdrnet.org/certifications...sure/index.cfm to learn more.

Working in Nutrition

Dietitians and nutritionists plan food and nutrition programs, promote healthy eating habits, and recommend dietary modifications. For example, a dietitian might teach a patient with hypertension how to follow the DASH diet and reduce their sodium intake. Nutrition-related careers can be extremely varied. Some individuals work in the government, while others are solely in the private sector. Some jobs in nutrition focus on working with athletes, while others provide guidance to patients with long-term, life-threatening diseases. But no matter the circumstance or the clientele, working in the field of diet and nutrition focuses on helping people improve their dietary habits by translating nutritional science into food choices.

In the public sector, careers in nutrition span from government work to community outreach. Nutritionists and dietitians who work for the government may become involved with federal food programs, federal agencies, communication campaigns, or creating and analyzing public policy. On the local level, clinical careers include working in hospitals and nursing-care facilities. This requires creating meal plans and providing nutritional guidance to help patients restore their health or manage chronic conditions. Clinical dietitians also confer with doctors and other health-care professionals to coordinate dietary recommendations with medical needs. Nutrition jobs in the community often involve working in public health clinics, cooperative extension offices, and HMOs to prevent disease and promote the health of the local community. Nutrition jobs in the nonprofit world involve antihunger organizations, public health organizations, and activist groups.

Nutritionists and dietitians can also find work in the private sector. Increased public awareness of food, diet, and nutrition has led to employment opportunities in advertising, marketing, and food manufacturing. Dietitians working in these areas analyze foods, prepare marketing materials, or report on issues such as the impact of vitamins and herbal supplements. Consultant careers can include working in wellness programs, supermarkets, physicians' offices, gyms, and weight-loss clinics. Consultants in private practice perform nutrition screenings for clients and use their findings to provide guidance on diet-related issues, such as weight reduction. Nutrition careers in the corporate world include designing wellness strategies and nutrition components for companies, working as representatives for food or supplement companies, designing marketing and educational campaigns, and becoming lobbyists. Others in the private sector work in food-service management at health-care facilities or at company and school cafeterias. Sustainable agricultural practices are also providing interesting private sector careers on farms and in food systems. There are employment opportunities in farm management, marketing and sales, compliance, finance, and land surveying and appraisal.

Working toward Tomorrow

Whether you pursue nutrition as a career or simply work to improve your own dietary choices, what you have learned in this course can provide a solid foundation for the future. Remember, your ability to wake up, to think clearly, communicate, hope, dream, go to school, gain knowledge, and earn a living are totally dependent upon one factor—your health. Good health allows you to function normally and work hard to pursue your goals. Yet, achieving optimal health cannot be underestimated. It is a complex process, involving multiple dimensions of wellness, along with your physical or medical reality. The knowledge you have now acquired is also key. However, it is not enough to pass this nutrition class with good grades. Nutrition knowledge must be applied to make a difference in your life, throughout your life.

Throughout this textbook, we have focused on the different aspects of nutritional science, which helps to optimize health and prevent disease. Scientific evidence provides the basis for dietary guidelines and recommendations. In addition, researchers in the field of nutrition work to advance our knowledge of food production and distribution. Nutritional science also examines the ill effects of malnutrition and food insecurity. The findings that are uncovered today will influence not only what we eat, but how we grow it, distribute it, prepare it, and even enjoy it tomorrow.



Video **10.8.3.5.7.1**: Farms of the Future. This video examines the philosophy and science behind vertical farming. Could it provide our nutrients in the future (click to see video)?

Summary and Key Takeaway

There are many paths that one can take to become a professional in the field of nutrition, including working as a nutritionist or becoming a registered dietitian. Some confuse the terms "dietitian" and "nutritionist," and this tends to be erroneous. A nutritionist is a person who advises on matters of food and nutrition impacts on health. In contrast, A dietitian is an expert in the relationship between human nutrition and the regulation of diet; a dietitian alters their patient's nutrition based upon their medical condition and individual needs.

Discussion Starter

1. Compare and contrast nutrition-related careers in the public and private sectors. Discuss which area would most interest you and the reasons why.

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SECTION OVERVIEW

10.8.3.5.8: Stress

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10.8.3.5.E: Achieving Optimal Health - Wellness and Nutrition (Exercises)

It's Your Turn

1. Summarize the four elements of physical fitness in a table.
2. Create a list of toxins and chemical compounds that can cause foodborne illness.
3. Write a short newspaper article about interesting, nutrition-related careers.

Apply It

1. People who are over eighteen, in good health, and want to acquire a better sense of their overall fitness can take the President's Challenge and participate in the Adult Fitness Test. The challenge involves tests in key fitness areas, after which you have the option to send in your results and receive an evaluation online. Go to this website to learn more: http://www.presidentschallenge.org/c...ge/adult.shtml.
2. Provide a list of three or four tips for a patient who suffers from hypertension. What foods would you recommend? What items would you limit? For more information on the ways that food and nutrition can affect blood pressure visit the following website: http://dashdiet.org/.
3. Identify common risk factors for cardiovascular disease and diabetes, along with steps to avoid these chronic conditions.

Expand Your Knowledge

1. Write a short script for a public service announcement that explains the dangers of foodborne illness. What do you believe the public should know about the agents that cause food infection and food intoxication?
2. Draw a comic strip that shows the different ways consumers can protect themselves from foodborne illness and promote food safety.
3. In a written essay, summarize steps that people can take to live a more sustainable lifestyle and approach making major changes in their lives.

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10.9: End of Chapter Wrap-Up

5.7: Chapter Wrap-Up

Here are the key takeaways for Chapter 5:

- Stress is a multifaceted phenomenon encompassing stimulus events, cognitive processes, and physiological reactions. It can be adaptive, enhancing our performance in challenging situations, but it can also be maladaptive, leading to health issues when prolonged. Stressors vary from acute events to chronic pressures, with both genetic and environmental factors influencing our responses. Coping strategies, ranging from problem-solving to seeking social support, play a crucial role in managing stress. Understanding the interplay between stressors, coping mechanisms, and individual contexts is essential for effectively addressing stress and promoting resilience.
- Effective coping strategies are essential for managing stress and its negative health implications. Coping styles can be categorized into problem-focused coping, where one addresses the stressor directly, and emotion-focused coping, which targets the emotions associated with stress. While problem-focused coping is suitable for controllable stressors, emotion-focused coping is more effective for uncontrollable stressors. Perceived control over stressors significantly influences our stress response and overall well-being. Additionally, social support plays a crucial role in stress management and has been linked to better health outcomes. Beyond these, stress reduction techniques such as exercise, relaxation response, and biofeedback offer effective means of combating stress and promoting overall well-being.
- Wellness is a dynamic and multifaceted concept influenced by various factors such as individual attributes, social and economic circumstances, environmental factors, and personality traits. It emerges from the integrative and dynamic whole of these factors rather than from their sum. Environmental contexts, life-span developmental changes, and awareness are central to understanding wellness. Factors such as attachment in infancy, emotional intelligence, social and economic circumstances, and personality dimensions like openness, conscientiousness, extraversion, agreeableness, and neuroticism all contribute to shaping an individual's wellness. Understanding and addressing these factors holistically are essential for promoting and maintaining overall well-being.
- In the pursuit of wellness, individual goals may vary, but their underlying intention remains the same: to enhance personal well-being. True wellness encompasses various dimensions of life beyond physical and mental health, extending to emotional, intellectual, spiritual, social, environmental, occupational, financial, and cultural aspects. Achieving holistic wellness requires balance and attention to each dimension. Setting specific, measurable goals within each dimension and making gradual lifestyle changes are key strategies for fostering overall well-being. Overcoming barriers to change, such as denial, lack of knowledge, and low self-efficacy, is crucial in this journey. Seeking support from others and staying motivated by understanding the "why" behind the change can greatly contribute to long-term success in enhancing personal wellness.
- Happiness is a multifaceted concept encompassing various dimensions such as pleasure, engagement, and meaning. While subjective in nature, it generally involves experiencing joy, contentment, and a sense of fulfillment in life. Factors like social relationships, marriage, and meaningful work contribute significantly to overall happiness. Despite its complexity, research suggests that happiness can be cultivated and sustained through interventions aimed at promoting positive emotions and well-being. Positive psychology, focusing on strengths and virtues, offers insights into fostering happiness and leading a fulfilling life. Ultimately, understanding and nurturing happiness can lead to individual and societal well-being, enhancing the quality of life for all.



Chapter Attributions

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CHAPTER OVERVIEW

11: Yoga and Buddhism as Personality Development Paths

11.1: Chapter Introduction
11.2: Zen Buddhism in America
11.3: Historical Description of Yoga
11.4: The Yoga Sutras of Patanjali
11.5: The Bhagavad Gita
11.6: Pathways to Personal Growth - Schools of Yoga
11.7: Obstacles to Personal Growth- Patanjali's Five Hindrances
11.8: Yoga in America- The Self-Realization Fellowship and Transcendental Meditation
11.9: Historical Description of Buddhism
11.10: The Four Noble Truths of Human Life
11.11: Obstacles to Personal Growth- The Three Poisons of Buddhism
11.S: Chapter Summary

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11.1: Chapter Introduction

Yoga and Buddhism are vast subjects, spanning many thousands of years, and they are amazing philosophies. But, are they philosophy or religion? They both certainly have significant religious overtones, and are considered to be religions by many people. Actually, however, they are styles of life that developed in order to help people be more in tune with their religion and with God. Yoga, which means unity, was a practice that developed within the Hindu religion to help Hindus achieve unity with God. So it developed as a practice in one's daily life that led to religious fulfillment. The **Buddha** was a Yogi, and did not consider himself to be different than other people. His followers, however, have so fervently held to his teachings that the practice of Buddhism is often viewed as a religion, and over time it became mixed with religious stories and myths, as people tried to fit Buddhism into their traditional culture.

We will look at Yoga and Buddhism as lifestyles, which lead individuals toward a healthy psychological development. We will not be able to avoid the obvious religious and metaphysical overtones, nor should we try. It will actually be quite interesting to compare Yoga and Buddhism to the lifestyle philosophies of Judaism, Christianity, and Islam (which cover at least the traditional religions of most American students), since Judaism, Christianity, and Islam certainly have no shortage of guidelines for living one's daily life in the service of God. Indeed, Alice Bailey (1927), who has offered an inspiring commentary on the earliest teachings on Yoga, suggests that in order for students to have a complete picture of the fulfillment of the soul they need to have read three books: the **Yoga Sutras** and the **Bhagavad Gita**, the philosophy of which will be covered briefly in this chapter, and the *New Testament*, covered in the next chapter.

Before beginning this chapter and the next one, however, it should be noted that there are many translations of the classic books on Yoga and Buddhism and terminology varies from translation to translation. One must simply accept this, since the only alternative is for each one of us to learn all of the languages in which these books were written. In this chapter, we will only be exploring the basic concepts of these different perspectives on human nature and intentional personality development.

Toward the end of each section we will take a look at how Yoga and Buddhism have influenced America and Western psychology. Quite a lot has been written on this topic, including works by some of the most famous personality theorists (Freud, Jung, Fromm, James, etc.). However, only recently has there been sufficient interest in the field of personality for these discussions to start becoming more common. Since religion and spirituality are an important aspect of positive psychology, which is itself a rapidly growing force in psychology, it is likely that knowledge of the overlap between Yoga, Buddhism, and other spiritual aspects of human nature and personality theory will continue to grow.

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11.2: Zen Buddhism in America

Zen Buddhism is probably the best-known school of Buddhism in America due to the influence of D. T. Suzuki, who first visited America in the year 1897. Suzuki was a renowned Buddhist scholar, who wrote extensively on Zen Buddhism and its relationships to such diverse topics as Christian mysticism (Suzuki, 1957) and psychoanalysis, the latter book being co-authored by Erich Fromm (Suzuki et al., 1960). Zen Buddhism has also made its way into popular literature in the United States. The famous "Beat generation" author Jack Kerouac, who had many discussions with D. T. Suzuki (Suzuki taught for a few years at Columbia University, which happened to be Kerouac's alma mater), wrote a most entertaining book about his own pursuits on the path of Zen called *The Dharma Bums* (Kerouac, 1958). And there was the immensely popular classic entitled *Zen and the Art of Motorcycle Maintenance*, first published in 1974 (Pirsig, 1999), which opened the eyes of a whole new generation of Americans to the philosophy of the Far East.

Buddhism, and Zen Buddhism in particular, is also beginning to have more and more influence on psychotherapy in America today. Although a discussion of therapy techniques is beyond the scope of this chapter, it is becoming easy to find such material. There are books on Zen and psychotherapy (Brazier, 1995; Mruk and Hartzell, 2003), Buddhism and well-being (Brach, 2003), comparisons of psychoanalysis and Buddhism (Epstein, 1995; Suzuki et al., 1960), and a variety of chapters in spiritually oriented handbooks on psychotherapy (e.g., Cooper, 2005; Corbett & Stein, 2005; Crawford, 2005; Finn & Rubin, 2000; Lukoff & Lu, 2005; Roland, 2005; Sharma, 2000; Tan & Johnson, 2005). Not only does this blending of Eastern and Western philosophy promise to expand the horizons and potential effectiveness of psychotherapy, learning more about the different cultural perspectives that led to these different lifestyles will help to prepare psychologists to recognize more quickly and easily the culturally-related issues that are affecting their patients or clients.

Sangha: A Community Practicing Together

The concepts of togetherness, friendship, social support, etc. are certainly well known in the West, despite the fact that Western cultures are generally considered to be individualistic. Adler identified developing friendships as one of three main tasks in life, and the value of social support during times of stress and grief has been well documented. In Yoga and Buddhism these concepts have been central for thousands of years. Buddhists refer to the **Three Jewels** (also known as the Three Gems or the Three Refuges): the Buddha, the **Dharma**, and the **Sangha**. A Buddha is one who is fully enlightened (not just Gotama Buddha), and the Dharma is the way of understanding and love taught by Gotama Buddha. A Sangha is a community of Buddhists who practice the Dharma and seek enlightenment together (Suzuki, 1960; Thich Nhat Hanh, 1995). The Sangha is not, however, just a get-together of companions with similar interests. The Sangha can renew our inspiration and energy, and it can help us to keep practicing when our own motivation wanes (Goldstein & Kornfield, 1987). The energy and motivation we gain from being part of a Sangha can help us to develop Bodhicitta, the altruistic desire to help all people achieve enlightenment. The ceremony to actively generate Bodhicitta within us begins with a series of visualizations in which we imagine Gotama Buddha being with us, surrounded by other Buddhas, great sages, and all sentient beings (Dalai Lama, 2001). Being filled with Bodhicitta makes us a Bodhisattva right away (Thich Nhat Hanh, 1999). This is not simply a belief or devotion, however. Taking refuge in the Sangha is a practice, one that can only take place in the company of others and with their support (Thich Nhat Hanh, 1995).

The Sangha is by no means unique to Buddhism. In Yoga they refer to Satsanga, associating with the truth or with someone virtuous such as a guru (Feuerstein, 2003; Yogananda, 1946). I remember when a monk, and a monk in training, from the Self Realization Fellowship visited the Yoga retreat center I visit. During the evening they offered Satsanga, a brief lesson followed by a question and answer discussion. In this semi-formal setting we were all able to expand our understanding of Yoga and share our interests and experiences. Indeed, some people practicing traditional Yoga or Buddhism consider the guru (or lama, in Tibetan) to be a fourth jewel in which to seek refuge (Feuerstein, 2003).

? discussion question 11.2.1

Buddhists strongly support a Sangha, a community of believers. Can you imagine practicing Buddhism alone? What about your own personal groups, whether church groups, clubs,

> friends, family, etc.? Are they supportive? How important are those groups to the way you live your life, and could you imagine your life without them?

A Final Note

This chapter and the one that follows have very religious overtones. So I would like to say a little more about the importance of covering these topics in a personality textbook. Alfred Adler said that if you want to understand someone, look at their style of life. As stated at the outset of this chapter, I have tried to present this material as guides for one's lifestyle that have developed within different cultures. There are three basic moral codes that influence our lives: community, autonomy, and divinity (see Triandis & Suh, 2002). In collectivistic cultures there is an emphasis on community moral codes, whereas autonomy codes are more influential in individualistic cultures. Both cultures emphasize moral codes related to divinity (as religion or spirituality). If we tried to separate religious culture absolutely from our study of personality, we might very well end up with an academic discipline that misses the richness and wonder of human life. More importantly, what happens to people who ignore spirituality in their own development? Abraham Maslow lamented the defense mechanism of desacralization, the failure of people to consider anything to be truly important and meaningful. Yehudi Menuhin, in his introduction to Light on Yoga by B. K. S. Iyengar (1966), offers a striking impression of those who do not seek harmony with the universe:

What is the alternative? Thwarted, warped people condemning the order of things, cripples criticizing the upright, autocrats slumped in expectant coronary attitudes, the tragic spectacle of people working out their own imbalance and frustration on others. (pg. 12)

I don't know whether Maslow considered desacralization to be this frightening a possibility, but it certainly gives one reason to consider the value of spiritual aspects of human development, especially since spirituality is one of the cultural universals (Ferraro, 2006a; Murdock, 1945). And given that spirituality is universal, these matters are certainly not unique to Eastern culture. In the next chapter we will consider spiritually guided lifestyle recommendations as they apply to cultures influenced by the Abrahamic religions: Judaism, Christianity, and Islam.

Personality Theory in Real Life: Are You Really You?

We ended the first chapter in this book by asking an interesting question: Who are you? In this chapter, we have addressed the possibility that everything you know about yourself is an illusion, and that even knowing is an illusion. How can this be? The answer may be found, or perhaps not found, in the mystery that is God. The Christian Bible teaches that God's ways are not Man's ways. Paramahansa Yogananda provides a marvelous image of the mystery of the Godhead being so far beyond our comprehension that it defies description (Yogananda, 1946); and Dante's awesome description of the appearance of the divine essence in *Paradiso* is difficult to envision, even as one reads Dante's words (in Milano, 1947). Perhaps some things are beyond our comprehension.

How then, should we proceed to live our life? Based on the concept of Karma, our past actions will influence our future experiences. Consider things you have done in your life. Have you regretted some of them? Did they seem out of character for you? Try to determine if unfortunate events followed those actions you regret. On the positive side, are there things you have done that make you proud or happy? Have those things involved other people, or were they done for other people? Try to determine whether those good things you have done resulted in favorable consequences for you and for others.

Now, here comes the tricky part. When you have done good things, do they feel more like you than the bad things did? If the answer is yes, it may be that you have begun to touch something special within yourself. You are responsible for both the good things and the bad things you have done in this life. But perhaps the good things feel better, feel more like you, because they begin to connect you with your transcendental self, that spark of the divine within you, which may be called spirit or soul. Thinking this way is a deep and powerful challenge, which requires you to have some faith in yourself. Meditate on this, and see what happens!

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11.3: Historical Description of Yoga

Yoga dates back thousands of years. Yoga as we know it today stems primarily from the writings of Patanjali. Patanjali was one of the first to write down an ancient oral tradition, in his *Yoga Sutras* (the rules of Yoga), sometime between 800 B.C. and 300 A.D. (though some claim it is much older). Divided into four short books, they contain a profound philosophy that continues to have significant influence today. There are many branches of Yoga now, but the type that was brought to the West, specifically to the United States by Paramahansa Yogananda in the 1920s (Yogananda, 1946), traces its roots directly to the Yoga of Patanjali.

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11.4: The Yoga Sutras of Patanjali

An early translation of the *Yoga Sutras* lists 195 sutras in the four books, totaling only sixteen pages (Bailey, 1927). And yet, the philosophy contained within them is amazing, although somewhat difficult to understand without having prepared oneself for this very different Eastern philosophy. A more Americanized version of the *Yoga Sutras* has recently been provided by Hartranft (2003), along with a section by section interpretation of the text.

The first verse of the first book states very clearly what Yoga is about. “Aum. The following instruction concerneth the Science of Union.” (*Yoga Sutras* I:1; Bailey, 1927). Aum, or **Om**, is the sound of creation, which many Christians may relate to the Word of God in the New Testament (John 1:1; Holy Bible, 1962). The union refers to the union of the individual with the divine creator. Don’t be confused by the fact that Hindus believe in many gods. In reality, they view those lesser gods as aspects or manifestations of the one true God, much as Christians believe in one God but refer often to Father, Son, and Holy Spirit (the Holy Trinity) and the angels and demons (including Satan).

The second and third verses then set the stage for the purpose of practicing Yoga: restraining one’s inquisitive nature and controlling the mind, so that we might see ourselves realistically. The primary way in which we control the mind is to meditate. The remaining verses describe the nature of man, the universe, and the divine, the proper practice of Yoga through **meditation**, the challenges one is likely to face along the way, and the marvelous benefits of Yoga. Thousands of books, describing many different approaches to Yoga, have followed these simple and straightforward guidelines. No matter which type of Yoga one may choose to study, it would be valuable for anyone to return to this primary source of information to be reminded of the basic goal and purpose of Yoga.

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11.5: The Bhagavad Gita

The *Bhagavad Gita*, or "Song of the Blessed One," is a fascinating story, with great religious significance if one accepts it at face value (Mitchell, 2000). It consists primarily of a conversation between **Krishna**, a great **Avatar** or divine incarnation, and Arjuna, a great warrior, on the eve of a battle. The battle is a civil war, with noble warriors and relatives split between both sides. Arjuna decides that no good can come of killing so many people in this battle, and he decides not to fight. Krishna, who is driving Arjuna's chariot, instructs Arjuna in Yoga as he discusses what is right both for Arjuna and for all people. Many of the principles of Yoga derive from what Krishna told Arjuna, thus it is believed by many that these Yoga principles come from the mouth of God. This is similar to what Jews, Christians, and Muslims believe about the Torah, the Bible, and the Koran: that they are divinely inspired texts.

My favorite quote from the *Bhagavad Gita* refers directly to the self:

The Self is a friend for him who masters himself by the Self;

but for him who is not self-mastered, the self is the cruelest foe.

(pg. 89; Mitchell, 2000)

This quote suggests that we can be our own best friend, or our own worst enemy. Indeed, Krishna tells Arjuna that what he must do is to be himself. It is only through his own actions that Arjuna can fulfill his potential. However, Arjuna must not remain attached to the consequences of his actions; he must simply act and allow the universe to move forward as it will. Only by truly understanding the nature of the universe, and the nature of ourselves, can we properly make this choice. The practice of Yoga helps us to see this reality, and the *Bhagavad Gita* helps to describe the essential practices.

Figure **11.5.1**

The altar prepared for the ceremony when the author was initiated into Kriya Yoga.

Together, the *Bhagavad Gita* and the *Yoga Sutras* contain all of the basic information on Yoga we will explore in this chapter. There is actually a fair amount of overlap between the books, but it is unclear which one may have been written first. Most scholars believe that the *Bhagavad Gita* was written between 500 B.C. and 100 A.D. (Mitchell, 2000), which falls right in the middle of when Patanjali is believed to have written down the *Yoga Sutras*. Since both philosophies seem to come from much older sources, it may well be that they owe their commonalities to some older tradition that can no longer be specifically identified.

Placing Yoga in Context: An Ancient Plan for Self Development

Yoga is much older than any other theory described in this book, with the exception of those parts of other theories that were borrowed from Yoga and Buddhism. The ancient **Vedas**, which provide much of the mythological and philosophical basis for Hinduism, are 4,000 to 5,000 years old (placing them amongst the oldest recorded literature in the world). The *Yoga Sutras* of Patanjali and the *Bhagavad Gita*, which provide the basic teachings of traditional Yoga, were written as early as 600 B.C. (though there is little consensus on exactly when). Kriya-Yoga, the yoga believed by many to be the original Yoga of Patanjali, was lost to the world for many centuries, until it was reintroduced by Lahiri Mahasaya in 1861. Yoga continues to evolve today, with many different styles being introduced and revised, both in the East and the West.

Although this ancient philosophy may not seem relevant to modern personality theory, it has actually been part of psychology from the very beginning. Most notably, Jung and Rogers were clearly influenced by their travels to India and China, respectively. The knowledge of Yoga and Buddhism they developed as a result of those and other experiences helped to shape their personality theories. Fromm also examined how psychoanalysis and Buddhist meditation compare to each other. Today, as positive psychology examines topics such as happiness and well being, and as spiritual psychotherapists examine the important role that spirituality plays in the lives of many people, those practices that Yoga, Buddhism, and other spiritual disciplines have in common are being examined more closely by psychologists. In the next chapter we will examine similar spiritual disciplines that exist within the Jewish, Christian, and Muslim traditions.

Spirit, Nature, and Consciousness

In the metaphysics of Yoga there is believed to be a duality between spirit and nature. Spirit is pure consciousness; nature is the opposite of spirit. Human beings are a combination of spirit and nature. The body and mind come from nature, but the *transcendental* self comes from spirit. A key point here is that it is the transcendental self that comes from spirit, not the self we are aware of every day. Our thoughts, feelings, sensations, indeed our mind itself, are all the result of neural activity in our brain, and our brain is part of our body. Thus, our awareness is not our consciousness.

Our true self, the transcendental self, is a temporary manifestation of Spirit in essence. The great mistake in our lives is to confuse our body and mind with who we really are, to believe that this body and this mind are our self. The practice of Yoga, however, teaches us to still our minds, to eliminate all thought and sensation, so that we might be in union with our transcendental self and the universal spirit. Once we have accomplished this task, by subjugating our natural tendency to think and restraining our mind itself, we will know who and what we really are (*Yoga Sutras* I:2,3 [Bailey, 1927]). This is not an easy task, but it has a great reward. As Sri Yukteswar told Yogananda:

The soul expanded into Spirit remains alone in the region of lightless light, darkless dark, thoughtless thought, intoxicated with its ecstasy of joy in God's dream of cosmic creation (Yogananda, 1946; pgs. 489-490).

William James, America's foremost psychologist, is best known for his theory on the stream of consciousness. According to James, it is the continuity of consciousness that defines our self. This is in direct contradiction to Eastern philosophies, which consider the conscious mind to be derived from the natural world, and therefore only an illusion. Eastern philosophies consider the transcendental self to be real, but obscured from us by the distraction of the so-called conscious mind. Can we find some compromise between these points of view? No! However, such a contradiction would probably not bother James. James (1892) did talk about the soul, the transcendental ego, and spirit as possible sources for the conscious self, but considered that possibility to be outside the realm of psychological study

Discussion Question 11.5.1

Do you believe in a transcendental self (whether you call it self, spirit, soul…whatever)? What does this make you feel about your physical body? As for all of nature can you really believe it is just an illusion?

Karma

Karma is a difficult concept to grasp. We generally think of karma as the consequences of things we have done wrong, but karma does not apply simply to our misbehavior, it applies to all of our actions. An easy to understand discussion of karma has been written by Goldstein and Kornfield (2001). The law of karma can be understood on two levels. First, karma refers to cause and effect. Whenever we perform an action, we experience some consequence at a later time. The second level of karma may be more important, as it refers to our state of mind at the time when we performed the action in question. Our intentions, or the motives behind an action, determine the nature of the consequences we experience. The

importance of this point is that we control the nature of our karma. This, of course, has important implications for personality development. Once we understand the karmic law, it is only natural that we should begin to plant the seeds of healthy karma. In other words, we should be inclined to act only in ways that are healthy and socially beneficial, so that the consequences we then experience will lead to greater well-being for ourselves.

The second level of karma, that it is our intentions and motivation that affect the outcome of our lives, seems quite similar to cognitive theories in psychology. Cognitive psychology focuses on the nature of our thought, and problems often arise when we are trapped in a series of automatic thoughts that create problems for us. In other words, when we view the world negatively, we react in negative and maladaptive ways. Similarly, our past karma influences the karma we create for the future. If we think and act in negative ways, we create negative karma, but it is also true that if we think and act in positive ways we create positive karma. Cognitive therapy resembles much of what is written in the East about recognizing the cause-and-effect pattern that our karma traps us within. Successful cognitive therapy is something like enlightenment: when we realize the truth of what we are doing we have a chance to break that pattern and move in a healthy direction.

discussion question 11.5.2

Karma refers to the cosmic law of cause and effect, the idea that our past actions will someday affect our current and future lives. Do you believe this, and can you provide any examples of this happening to you?

The Three Principles of Creation

Would it be possible for us to avoid or circumvent the law of karma by remaining inactive? Sometimes many of us do just want to get away from everything and everyone. However, social withdrawal is often an early sign of psychological distress or mental illness, suggesting that this is generally not a healthy action. According to Yoga, all nature is composed of three aspects called the **gunas: rajas, tamas,** and **sattva.** According to Krishna, as recorded in the *Bhagavad Gita*, the three gunas "bind to the mortal body the deathless embodied Self" (pg. 158; Mitchell, 2000). Rajas (born of craving) binds us to action, tamas (born of ignorance) binds us to dullness, and sattva (untainted and luminous) binds us to knowledge and joy. Only through faithful Yoga practice can an individual transcend the gunas and achieve unity with God. Only then will the individual be free from any attachment to action and free from the law of karma.

Another important and practical question that arises from an understanding of the three gunas is: what should we eat? In America we generally associate being vegetarian with practicing Yoga or being a Buddhist. But is there a good reason for this? Everything is made from the three gunas, but in different proportions. So we might say that a hot, spicy dish like Gang Garee from Thailand (a personal favorite) is predominantly rajas. Heavy food, with a thick sauce or gravy is predominantly tamas. Fruits and vegetables, however, are lighter and more refreshing; they are predominantly sattva. So a vegetarian diet should increase the relative amount of sattva in our body, thus making us a better person. This is just like

the old saying: “You are what you eat!” This goes beyond diet, however, since diet only directly affects the body. What about the mind? Everything we take in is comprised of the three gunas: words and ideas that we hear, music, the emotions expressed by people we spend time with, and so on (Vivekananda, 1955a). It is important not only that we eat well, but also that we spend time in relaxing and healthy environments, associate with good people, and generally try to cultivate a life that moves more toward sattva than the other gunas.

The Guru or Teacher

Spirit vs. nature, consciousness, karma, the three gunas, it can all seem very strange to those of us who did not grow up with these concepts. Another common source of confusion is the distinction between the terms **yogi** and **guru**. A yogi is anyone who practices Yoga. A guru is a teacher, someone advanced in Yoga and capable of leading others on the path. A true guru is typically revered in the East, and in English they are often referred to as prophets, or saints.

Many believe that a guru is essential to the practice of Yoga. The practice of Yoga can be difficult, and the principles can be confusing. Some argue that only through initiation by a guru can an individual truly and correctly use **mantras** such as Om. Otherwise, the would-be student of Yoga will not know the correct frequency or nature of the mantra. Perhaps most important, though, is the spiritual consciousness provided by the guru. As described by Yogananda:

…If I entered the hermitage in a worried or indifferent frame of mind, my attitude imperceptibly changed. A healing calm descended at the mere sight of my guru. Each day with him was a new experience in joy, peace, and wisdom. Never did I find him deluded or emotionally intoxicated with greed, anger, or human attachment. (pg. 137; Yogananda, 1946)

Another aspect involved in the importance of a guru is his or her lineage. In Western culture we are very individualistic, so it is common for each new teacher or leader to try establishing a new beginning. In the collectivist cultures of the East, however, they pay more attention to the earlier teachers of current teachers. Establishing this lineage is very important, not to suggest that one line of Yoga is better than another, but to connect the past to the present and, presumably, the present to the future. Recent research in the field of positive psychology has suggested that such a balanced time perspective, emphasizing the past, present, and future, is an important facet of psychological well-being (Boniwell, 2005; Boniwell & Zimbardo, 2003).

Discussion question 11.5.3

In Eastern cultures they talk about gurus, in Western cultures we often hear about mentors. Do the words “guru” and “mentor” mean the same thing to you? Have you ever been inspired by someone you thought of as a guru or mentor?

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11.6: Pathways to Personal Growth - Schools of Yoga

There are many schools of Yoga, and the styles depend somewhat on which translations and which authors you happen to read. In her discourse accompanying the translation of Patanjali's Yoga Sutras, Bailey refers to four types of Yoga that developed as humanity developed (1927). In chronological order they are **Hatha-Yoga, Laya-Yoga, Bhakti-Yoga,** and **Raja-Yoga** (also known as **Kriya-Yoga**, see Yogananda [1946]). Feuerstein (2003) adds three more to what he describes as the seven major branches of the tree of Hindu Yoga: **Jnana-Yoga, Karma-Yoga,** and **Mantra-Yoga.**

The purpose of each of these schools of Yoga, in their own way, is to guide the individual toward the fulfillment of their life. This fulfillment is not necessarily **enlightenment**, or what we in the West may think of as heaven, but may instead be preparation for steadily improving lives over subsequent reincarnations. In accordance with the concept of karma, if we do our best to live this life as a good and faithful person, then in our future lives we will benefit from the seeds of good karma we have planted in this life. As humans we can achieve enlightenment in this life, but we are not doomed to eternal damnation if we don't quite make it. So, Yoga offers us a hopeful guide toward being a good person, and teaches ways in which to continue our personal growth.

Hatha-Yoga

Hatha-Yoga is the Yoga of power, referring primarily to the **Kundalini energy** and **prana** (vital energy) within the body. The practices of Hatha-Yoga are intended to strengthen and prepare the body for controlling the life forces within. An important aspect is the practice of **asanas**, the postures that are often misidentified as being Hatha-Yoga itself. However, traditional Hatha-Yoga also involves celibacy, a vegetarian diet, breathing and concentration exercises (meditation), and cleansing the nasal passages and the alimentary canal.

Laya-Yoga

Laya-Yoga focuses on meditative absorption of the psyche or mind to the point of ecstatic realization, or **samadhi**. As an advancement from Hatha-Yoga, Laya-Yoga leaves behind the physical focus of Hatha-Yoga for a highly developed state of meditation in which one's sense of self dissolves into transcendental self-realization (i.e., realization of the true self, the transcendental spirit).

Bhakti-Yoga

Bhakti-Yoga is the Yoga of devotion or love, in which the force of human emotion is channeled toward the Divine. This devotion develops along nine stages, the first being to listen to the names of God. The second is to chant praises in honor of the Lord, which is why chanting is so common in the practice of Yoga and Buddhism. The remaining stages involve a variety of practices or rituals. As simple as the first two stages may seem, together they have given rise to a special form of musical prayer: **Kirtan**, the practice of singing the many names of God (see the section on spiritual music below).

Bakti-Yoga is more than just a simple devotion to **atman** (the Supreme Soul that is God). It is a deep, genuine searching for the Lord that begins, continues, and ends in love (Vivekananda, 1955a). The secret of Bhakti-Yoga is that the great sages of ancient India realized that passionate human emotions are not wrong in themselves, they are not to be avoided and repressed, but rather they should be carefully harnessed and turned toward a higher spiritual direction. This is the direction of God, and the true nature of Bhakti-Yoga. However, there can also be dark side to Bhakti-Yoga, among those who have not turned toward a higher direction. Individuals who become trapped in the lowest level of Bhakti-Yoga can become religious fanatics. The only way they see to truly love one ideal is to hate all others (Vivekananda, 1955a). Religious fanaticism has caused great torment throughout the history of the human race, but it should never be confused with the true ideals of religion or spirituality.

Raja-Yoga or Kriya-Yoga

Raja-Yoga, or Royal Yoga, combines the principles, though not necessarily the practices, of other forms of Yoga and thus supersedes them all (Bailey, 1927). Raja-Yoga is that which was originally taught by Patanjali in the *Yoga Sutras*. It is also known by the name Kriya-Yoga, and it is this term that Yogananda used when bringing Yoga to the United States in 1920. According to Yogananda, this form of Yoga is more than just a practice developed by a great man. Patanjali is believed to be one of the ancient avatars of India, making this form of Yoga a direct divine inspiration (Yogananda, 1946). Furthermore, this form of Yoga was lost to humanity for centuries, until another avatar named Babaji revealed it again to the Indian guru named Lahiri Mahasaya in 1861

(Yogananda, 1946). Of particular interest to Americans may be the fact that Babaji inspired Yogananda to come to America, through Babaji's disciples Lahiri Mahasaya and Sri Yukteswar. Thus, Yoga came to the United States, as well as the rest of the Western world, at the behest of Babaji, a divine incarnation believed by many to be as significant as Gotama Buddha or Jesus Christ!

Jnana-Yoga

Jnana-Yoga is the Yoga of wisdom or knowledge. It is a rigorous discipline in which one uses the intellect to discern reality from **maya**. Maya is often misunderstood, and described as the cosmic delusion that our Self is this body in this life. However, Swami Vivekananda has offered an excellent explanation of what maya really is: simply a matter of fact statement about the nature of the world and of man (Vivekananda, 1955b). The philosophy from which our understanding of maya comes is neither optimistic nor pessimistic, but it does challenge our basic understanding of everything we believe is real. There is no good without evil, no happiness without misery, no beauty without ugliness. Consequently, there will never be a perfect world, a world in which there is no suffering or death. Even the basic existence of the world must be considered in the context of no-existence. This strange and challenging philosophy is described by Vivekananda in the following passage:

What, then, does the statement that the world exists mean? It really means that the world has no existence. What, again, does the statement that the world has no existence mean? It means that it has no absolute existence: it exists only in relation to my mind, to your mind, and to the mind of everyone else. We see this world with the five senses, but if we had another sense, we would see in it something more. If we had yet another sense, it would appear as something still different. It has, therefore, no real existence; it has no unchangeable, immovable, infinite existence. Nor can it be said to have non-existence, since it exists and we have to work in and through it. It is a mixture of existence and non-existence. (pg. 27-28).

As you can see from this passage, Jnana-Yoga requires not only a keen intellect, but an open-minded willingness to embrace a different perspective. This perspective had a strong influence on the development of Chinese religion and philosophy, and similar concepts can be found in the famous *Tao Te Ching* of Lao Tsu, which provides the basis for Taoism (Lao Tsu, c. 600 B.C.).

The question of whether or not we recognize the reality of our world is central to cognitive psychology. In cognitive therapy, it is taken for granted that an individual does not view their environment realistically, that automatic thoughts of a maladaptive nature turn each situation into another instance of the person's typical problem. With the help of an objective therapist, the individual may come to realize the nature of their maladaptive thought processes, and learn to control and re-evaluate their thoughts and feelings, so that they can react appropriately to other people and to new situations. In a similar way, the principles of Yoga, under the guidance of a guru, can help us to understand our world and the role we play in determining our future (creating good or bad karma).

Karma-Yoga

Because we are inseparably compelled by the gunas (the three aspects of existence), existence involves action. Karma-Yoga teaches us to act without attachment to the consequences of our actions and without any expectations. But it is not enough to control our actions, we must understand why we are controlling our mind. As Krishna tells Arjuna in the third chapter of the *Bhagavad Gita*:

He who controls his actions, but lets his mind dwell on sense-objects, is deluding himself and spoiling his search for the deepest truth. The superior man is he whose mind can control his senses; with no attachment to results, he engages in the yoga of action (pgs. 62-63).

The practical values of Karma-Yoga are many. According to Vivekananda (1955a), the true character of a person can be seen by watching their actions. Those who work for work's sake, just because good will come of it, and who have given up any sense of self or attachment to their works, has achieved the ideal of Karma-Yoga. As difficult as it may be to take control of one's life, in other words to direct one's own karma, it can be done. If we learn to look at our past and present bad circumstances simply as facts that have happened, it is really our own opinion that allows those circumstances to affect our self-image (Schied, 1986). If we can look past those negative circumstances, indeed even look for the positive aspects in all situations, we can begin to act in positive ways that will create good karma for our future.

> *"In the end, these things matter most: How well did you love?*
>
> *How fully did you live? How deeply did you learn*

To let go?" – Kornfield, 1994

Mantra-Yoga

Mantra-Yoga is the Yoga of sound or vibration. The universe is believed to be in constant vibration. **Om**, the most sacred mantra, is believed to be the word representing the fundamental vibration of the universe. As such, meditating while chanting Om is believed to have almost magical transformative powers over the body and mind (Feuerstein, 2003). It is also common to chant short prayer phrases, such as Om Namah Shivaya (I bow to Shiva), the Hare Krishna mantra (the mahamantra, or great mantra), and Om Mani Padme Hum (a Tibetan Buddhist chant that has no direct translation). The CD *Pilgrim Heart*, by Krishna Das (2002), offers both insightful description and a modern musical presentation of some of these chants.

Connections Across Cultures: Franchised Yoga Centers in America

If you take a look at the magazine section of a major bookstore, you will find several magazines devoted to the practice of Yoga. In those magazines, you can find dozens of Yoga training centers and retreats. Many colleges and universities in America offer courses in Yoga. Yoga is very much a part of life for many Americans. But has it made its way into the mainstream? There is some interesting evidence to suggest that if it hasn't yet, it will very soon. The days when Yoga centers were only individual operations, run by a small group of devoted yogis, appear to be over.

In 2003, internet entrepreneurs George Lichter and Rob Wrubel (formerly with the search engine Ask Jeeves International) were looking to move into a new business venture. When the two men realized that both were practicing Yoga (primarily the physical aspects of Hatha-Yoga), they decided to create a chain of Yoga centers across America. Beginning with the purchase of an established yoga center in Los Angeles, they have plans to expand to a variety of major cities, and ultimately to smaller locations around the country. Although a business model may fit well with American capitalism, can such an approach fit with Yoga? They hope that by having the company focus on the business aspects of running a Yoga studio, the instructors can be freed to focus on teaching Yoga to their students.

Many Americans still view Yoga as an odd curiosity and, primarily, as a form of exercise. Before I first began going to a Yoga retreat center I wondered if it would be too strange for me (even though I knew someone who had been going there for years). I had a wonderful time, and have returned there many times. But, like so many others, it is a retreat center all by itself. As Yoga centers based on the model of chain stores, with some consistency in terms of the services and environment they offer, spread across America, I think more people will take a chance on beginning to examine this curious path toward relaxation and peace of mind.

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11.7: Obstacles to Personal Growth- Patanjali's Five Hindrances

Patanjali's five hindrances refer to conditions that block our personal development. The hindrances are identified as: **avidya** (ignorance), sense of personality, desire, hate, and sense of attachment. It may seem confusing to us that a sense of personality is a hindrance to personal development. Isn't the goal in life to become aware of and comfortable with our true selves? Unfortunately, from the perspective of Yoga, that belief is the result of the single most challenging hindrance, the one that is the source of all other difficulties: ignorance. The problem, according to Patanjali, is that our sense of personality is a mistaken identification of our mental awareness, a product of our brain (nature), with our true and transcendental self (spirit). Specifically, the fifth Sutra of Book II states that "avidya is the condition of confusing the permanent, pure, blissful and the Self with that which is impermanent, impure, painful and the not-Self" (Bailey, 1927; pg. 115). The latter point refers specifically to the duality between our true self, that temporary manifestation of spirit in nature, with the body/mind of this world that will cease to exist when we die (though death does not really exist in the same sense in the perspective of Yoga).

It is also something of a problem to use the term attachment in a negative way. In Western psychology attachment is typically used to refer to the bonding between parent and child. Thus, we consider attachment to be a necessary condition of healthy development. In Yoga, however, any form of attachment is a delusion in which we consider elements of the natural world to be of importance. Only the universal spirit is perspective, even the love of a parent for a child is a delusion that keeps us attached to this world, and would therefore be a hindrance to our union with God. Actually, things are not as bleak as that might make them seem at first. Since there is only one universal spirit, we and our children, indeed everyone everywhere, is one and the same universal spirit, both past and present (hence the meaninglessness of death). So it is not wrong to love, it is only a mistake to think that love for a person or love for a thing is the most important thing in life. What is important is to practice Yoga in order to overcome these hindrances, to escape the laws of karma, to quiet the mind and transcend the natural world. Then one will know their union with God and all creation.

? discussion question 11.7.1

According to Patanjali, the single greatest obstacle to personal growth is avidya (ignorance). How has your education helped you to grow as a person? Have you taken any courses specifically designed to help you with personal development? What plans, if any, do you have for continuing your education after you finish school?

Classic Indian Stages of Life

According to the Vedic teaching of ancient India, each Hindu male should progress through four stages of life: student, householder, hermit or forest-dweller, and finally renunciant. At a young age the child would be sent to live with a guru, so that he might devote himself to spiritual development, studying the **Vedas** (ancient Indian texts that provide much of the philosophy, practices, rituals and other guides for Hindu life), and mastering Yoga. Then the young man returns home, takes a wife (usually an arranged marriage), runs the family business, and basically takes care of the business of maintaining the Indian society. As the man grows older, and his children become ready to take over as the householders, he becomes a hermit, once again devoting himself to Yoga. Finally, the old man leaves society completely behind and focuses himself entirely on unity with God. For Hindu females all that can be said is that, unfortunately, this philosophy comes from an old and patriarchal society. There are no classic stages of life for women in the Vedic teachings.

These four stages are an ideal of the traditional Hindu life. As in our own culture, both personal and family values change over time. Many Hindus do not follow these ancient ways. Though this style of life is certainly not necessary for the practice of Yoga, one can see the advantage of beginning and ending one's life with the sole purpose of practicing and mastering Yoga. Another interesting issue raised by these stages of life is the importance of middle age. In America we often hear about the so-called midlife crisis. There is some debate as to whether the midlife crisis exists, and whether it exists for both men and women, but in traditional Indian culture there is a profound difference: middle age is not the beginning of a decline toward old age and death, but rather a time to focus on the future and one's enlightenment. Therefore, middle age should be a particularly hopeful and peaceful time.

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11.8: Yoga in America- The Self-Realization Fellowship and Transcendental Meditation

Although many different gurus have come to America, teaching many different types of Yoga, perhaps the two most influential have been Paramahansa Yogananda and Maharishi Mahesh Yogi. Yogananda established the Self-Realization Fellowship (SRF) in 1920 (Yogananda, 1946). Yogananda was one of the first gurus to come to America, and the SRF may be the oldest continuing school of Yoga in the West. Headquartered in California, SRF is dedicated to combining the Yoga of old with the predominant religion of the new world: Christianity. One of Yogananda's most important works is *The Second Coming of Christ*, a two volume discussion of the Christian Gospels viewed from a Yogic perspective (Yogananda, 2004a,b). The basic premise of this work is that God is within us as the Christ consciousness, it is His presence that gives us life, and when we realize that He is within our selves (thus, the name Self-Realization) we cannot help but lead a better life. As strange as this may seem to many Christians, blending religious and philosophical beliefs is commonly accepted in Eastern cultures. They seek the best points of view in a variety of perspectives, and try to live according to those beliefs that are common and which benefit everyone in their community. More information on the SRF can be found on their website (listed at the end of the chapter).

In 1958, a guru named Maharishi Mahesh Yogi began formally teaching **Transcendental Meditation** (TM; Maharishi Mahesh Yogi, 1963). TM became a very popular meditation technique in America, and as many as 6 million people around the world have learned the TM technique (this website is also listed at the end of the chapter). Yogi's first book on TM was originally entitled *The Science of Being and the Art of Living*, and he stated very clearly the purpose of life: "Expansion of happiness is the purpose of life…" (pg. 64) and "When one does not live a normal life or a life using his full potential, he feels miserable and tense and suffers in many ways" (pg. 69). This reference to the necessity of using one's full potential sounds very similar to Roger's and Maslow's concept of self-actualization (or perhaps self-realization as described in the preceding paragraph). As is true of the SRF, the TM program does not advocate or reject any organized religion. Instead, TM is presented as a means to fulfill one's life, regardless of the situation in which one is living.

Connections with Western Religious Practice

Contemplative Prayer

Consider the following quote: "Listen carefully, my son, to the master's instructions, and attend to them with the ear of your heart. This is advice from a father who loves you; welcome it, and faithfully put it into practice. The labor of obedience will bring you back to him from whom you had drifted through the sloth of disobedience. This message of mine is for you, then, if you are ready to give up your own will…" This sounds like the words of a guru, especially the part about giving up your own will. Doesn't that sound like the Yoga philosophy of transcending the mind in order to be in union with the spirit? Actually, this was written by St. Benedict, a Catholic monk who lived from 480-547 (Fry, 1982). In fact, this is the very beginning of the Rule of St. Benedict, and it is interesting to note that the very first word is "Listen…" Remember the first stage of devotion in Bhakti-Yoga? It is not easy to listen, and listening intently with our whole being is something that takes a lifetime to master (deWaal, 1984). Naturally, it is easier to listen when we are focused, and either the practice of Yoga or contemplative prayer can help to still our mind, to tune out the distractions of our daily lives, so that we can listen to and/or be in union with God.

During the twentieth century, a Benedictine monk named John Main (1926-1982) tried to help the Christian world rediscover meditation and contemplative prayer. In addition to his own efforts, he inspired the creation of the *World Community for Christian Meditation*, an international community that practices and teaches meditation in the Christian tradition (see the website list at the end of the chapter). As is true of many practitioners of meditation, Fr. Main recommended meditating twice a day, once in the morning and once in the evening. A marvelous collection of Fr. Main's writings has been compiled by Paul Harris (2003). The readings are quite short, and there is one for each day of the year. They can be used as a starting point for contemplation and prayer on the day assigned for each reading (if one chooses to follow that pattern). We will cover Christian mysticism, meditation, and contemplative prayer in more detail in the next chapter.

Spiritual Music

Another interesting comparison between Eastern and Western spiritualism is the use of music and song. The importance of chanting was mentioned above, but now we will take a closer look at the importance of music. The Yoga of Patanjali focuses on

withdrawing from all sensory experience. The goal of meditation is to focus and then clear the mind, so that one is no longer distracted by the events of this world. However, in Bhakti-Yoga, the Yoga of devotion, some yogis embrace the fullness of refined human emotion (Mandala Publishing Group, 2000). Music is one of the best ways to fully express our emotional connection with all that is around us. A special type of musical prayer called Kirtan grew out of the first two stages of Bhakti-Yoga. Kirtan refers to the practice of singing the many names of God (including Goddess names). In the practice of Kirtan, the words that are sung are typically short mantras, and a wide variety of emotional states can be accommodated. Regardless of how one feels when beginning Kirtan, the practice of Kirtan can lead to a transformational, meditative state that "creates a safe, calm haven for the flower of the heart to unfold" (Jai Uttal, 2003). A wonderful CD of Kirtan, including an explanation of this practice in English, has been recorded by Jai Uttal (2003). If you would like to learn more about Kirtan, especially if you are interested in reducing stress in your life, this CD is highly recommended.

Although most Christian church services include some music, few are thought of as profoundly inspirational and emotionally moving as the gospel choirs associated with Black churches, especially those in the Southern United States. Much of this music is rooted in the **spirituals** sung by American slaves. Much like Kirtan as a practice within Yoga, the spirituals helped to hold onto an identity shared by Africans brought to America as slaves. The music was not strictly religious, but religious themes were common. More importantly, the spirituals helped to connect the slaves to their African ancestry, and to provide a context within which they could share the lives they had come to know in a new country (Cone, 1972; Lovell, Jr., 1972). As slavery came to an end in the United States, prejudice and discrimination certainly did not. On one hand the spirituals gave rise to the blues, but on the other hand they gave rise to distinctly religious gospel music (Boyer and Yearwood, 1995; Broughton, 1985). Gospel music can be so passionate that it has been described as "hinting at a vocal imperative which was said to induce religious convulsions in their audiences…" (Broughton, 1985). Perhaps it should not be surprising that Black gospel music is so deeply emotional, since it arose from a group of people who had been slaves, and were still suffering from rampant discrimination in a country that claimed to hold freedom above all else. Although such raw emotion is not common to Kirtan, it is still deeply passionate for those who feel its intimate connection to the universal spirit.

? discussion question 11.8.1

Using music during prayer or religious services has a long and rich history. Many of our social gatherings are centered on music. How has music influence your life? Do you listen to inspirational music when you feel a need to clear your mind and relax, or do you listen to lively and entertaining music to enhance the enjoyment of being with family and/or friends?

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11.9: Historical Description of Buddhism

Siddhattha Gotama

Siddhattha Gotama is recognized as the Buddha, but this is technically incorrect. Anyone can be a Buddha, there were many before Gotama Buddha, many after, and more to come. Indeed, Siddhattha Gotama had lived many lives before he was born into that earthly identity (if, of course, you believe in such things), and this had an important impact on his life. According to legend, Dipankara Buddha foretold that Siddhattha Gotama would be born as a prince in the kingdom of the Shakyas (so he is also referred to as Prince Shakyamuni and as Shakyamuni Buddha), and that in that lifetime he would become a Buddha. Sometime around the fifth or sixth century B.C., Prince Shakyamuni was born. Not wanting his son to leave the kingdom, the king indulged his son with every sensual pleasure known to man. The king also protected his son from knowing the unpleasant realities of life (disease, death, etc.). However, the prince's destiny was set. Prince Shakyamuni decided he wanted to see the kingdom. In order to prevent the prince from seeing the reality of life, the king ordered that everything in the city should be cleaned and decorated and everyone should be on their best behavior. However, four heavenly beings appeared to Prince Shakyamuni: the first as someone suffering the ravages of old age, the second as someone stricken with disease, the third as a corpse, and the fourth as a wandering monk. These visitors made a profound impression on the young prince, who left his wife, child, and home to seek enlightenment.

Living in India, the path to spiritual enlightenment that he followed was to become a yogi. He studied meditation, he became an accomplished ascetic (it is said he lived for a time on one grain of rice a day), but he failed to achieve anything satisfying. So finally he had a nice lunch and sat down under a Bodhi tree, vowing to remain seated until he achieved enlightenment. Finally, he was "awakened," which is the meaning of the word Buddha. In his first sermon, Gotama Buddha revealed the **Four Noble Truths** and the **Middle Way**, the latter also being known as the **Eightfold Path**. Those who have followed his teachings have come to be known as Buddhists. For more on the life of the Buddha, an excellent chapter has been written by Goldstein and Kornfield (2001). The sayings of the Buddha have also been collected, and are readily available (e.g., see Byrom, 1993). In his own words, we can see the relationship between Buddhism and psychology, and how these teachings were meant to guide people toward a healthy and happy life. In the teaching entitled "Choices," the Buddha says:

We are what we think.

All that we are arises with our thoughts.

With our thoughts we make the world.

Speak or act with a pure mind

And happiness will follow you

As your shadow, unshakable. (pgs. 1-2)

Bodhidharma

Bodhidharma (c. 440-528) is recognized as the monk responsible for bringing **Zen** Buddhism from India into China. He was also present during the construction of the Shaolin Temple, and was one of the first monks there. During his time at Shaolin Temple he is most famous for spending nine years in meditation, staring at the wall of a cave. He is also credited with developing kung-fu, the well-known martial arts technique, so that the temple monks could protect themselves from bandits. Although Bodhidharma may have spent a great deal of time in meditation, his Zen teaching was based more on a sword of wisdom (Red Pine, 1987). Some of the strange practices in Zen that we will examine in this chapter can be described as almost surprising people into enlightenment. Of course, many years of practice and discipline are necessary in order to be ready for this enlightenment. Some of Bodhidharma's writings are still available to us today (e.g., Red Pine, 1987), and in his own words (translated, of course) we can get a glimpse of just how strange a Zen understanding of the truth can be:

If you use your mind to study reality, you won't understand either your mind or reality. If you study reality without using your mind, you'll understand both. Those who don't understand, don't understand understanding. And those who understand, understand not understanding. People capable of true vision know that the mind is empty. They transcend both understanding and not understanding. The absence of both understanding and not understanding is true understanding. (pg. 55)

His Holiness the Dalai Lama

Unlike the historical figures Gotama Buddha and Bodhidharma, the Dalai Lama is alive today. Although his home is Tibet, where he was born in 1935, he lives in exile in India. He is believed to be the 14th Dalai Lama, a reincarnation of the previous Dalai Lamas, the first of whom is believed to have been the reincarnation of a boy who lived during the time of Gotama Buddha. That boy was an incarnation of Chenrezig (also known as Avalokiteshvara), the Bodhisattva of Compassion (a Bodhisattva is like a Buddha – see below), and the Dalai Lamas have served for over 650 years as the religious leader of the Tibetan people. Due to political circumstances in Tibet today, it is unclear what may happen to Tibetan culture. The Dalai Lama himself does not know whether he will be the last of the Dalai Lamas, but he hopes that choice will someday be made by a free and democratic Tibetan society (Dalai Lama, 2002).

Placing Buddhism in Context: The First Psychology?

Both Buddhism and Yoga share roots in ancient traditions among the Vedic people. Siddhattha Gotama was a yogi seeking enlightenment, and it was his followers who established Buddhism as the practice of his new path: the Middle Way. Since most people think of Buddhism and Yoga as separate, it makes things easier to treat them separately.

Buddhism is as old as the Yoga of Patanjali, perhaps even older, and like Yoga had a profound influence on some well-known personality theorists (such as Rogers and Fromm). Since Yoga is usually thought of as a form of exercise in America, because of the popularity of Hatha Yoga, when people think of meditation they often think first of Buddhism. Zen Buddhism emphasizes meditation, and Zen has been the most popular and best-known form of Buddhism in America, largely due to the arrival of D. T. Suzuki in 1897.

There are two major schools of Buddhism in the world today. The Theravada tradition is most popular in southeast Asia. It emphasizes self-discipline and seeking nirvana. The Mahayana tradition is most popular in China, Tibet, Korea, and Japan. The Mahayana tradition emphasizes compassion, and is the school within which Zen developed. Tibetan Buddhism, which also developed within the Mahayana tradition, enjoys something of a celebrity status due to the renown of the Dalai Lama, who is recognized as the spiritual leader of the Tibetan people.

In many ways one can find connections between Buddhism and psychology today. As an interesting example, the well-known author and spiritual leader Jack Kornfield became a Thai Buddhist monk before returning to the United States and becoming a clinical psychologist. Many of the books comparing Eastern philosophy to Western psychology have focused on Zen Buddhism. Zen emphasizes meditation, which in one form or another has become a common element of many types of psychotherapy, particularly in humanistic and cognitive approaches. Since Buddhism shares the same tradition as Yoga, it would make no sense to say that Buddhism has influenced psychology more than Yoga. They are fundamentally the same, and their influence continues to grow.

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11.10: The Four Noble Truths of Human Life

Following his enlightenment, the Buddha began to teach what he had realized. In his first lesson, he described the Four Noble Truths: 1) suffering is an unavoidable reality in human life; 2) the source of suffering is craving or desire, and the bad karma it creates; 3) the craving that leads to suffering can be destroyed; 4) the Middle Way is the path to eliminate craving and suffering (Suzuki, 1960; World's Great Religions, 1957; Wilkins, 1967). People often ask why there is so much suffering in the world. When this question is asked, there is usually an unspoken desire to remove this suffering from the world. The Buddha, however, taught us that we cannot escape from reality. Who has never been sick? Who never dies? Who can live without desiring something? The problem is that when our cravings are satisfied, we typically find that we want something else, or something more, we never seem to be really satisfied. And so this cycle of craving, temporary satisfaction, craving again, and so on, continues throughout our life, unless we consciously do something to break the pattern. The Buddha taught us how to do that: by following the Middle Way.

The Middle Way is also known as the Eightfold Path, because there are eight aspects to it: 1) right knowledge, 2) right intention, 3) right speech, 4) right conduct, 5) right livelihood, 6) right effort, 7) right mindfulness, and 8) right concentration. Some believe that each step depends on what goes before it, so that in order to reach higher levels of this discipline one must accomplish the lower levels (Wilkins, 1967). A hierarchical series of steps like this is reminiscent of Maslow's hierarchy of needs. In Buddhism, we must begin with an understanding of how things really are, an understanding of the four noble truths, impermanence, and **interbeing** (right knowledge). We must then develop the right intentions, to want to be compassionate, selflessly detached, loving, and non-violent. Once we have developed a conducive state of mind, we can choose to refrain from lying, gossiping, swearing, and other misuse of language (right speech). We can avoid doing things that are immoral, irresponsible, cruel, or illegal (right conduct), and we would not choose a career which required us to do any such things (right livelihood). Then we would be able to focus our will on avoiding any unhealthy states of mind, and on eliminating them quickly should they arise (right effort). Finally we could become more aware of our sensations, feelings, minds, and bodies (right mindfulness), so that we might focus on the discipline necessary to continue our practice of the Middle Way (right concentration).

These principles provide the basis for a practical code of conduct, which all Buddhists must follow, known as the **Five Precepts**. They are: 1) to abstain from killing, 2) to abstain from stealing, 3) to abstain from sexual misconduct, 4) to abstain from lying, and 5) to abstain from mind-altering intoxicants (World's Great Religions, 1957). The first four seem to follow naturally from the Eightfold Path, but the last one is somewhat more interesting. The problem with intoxicating drugs, such as alcohol, is that they cloud the mind. They make it difficult for us to make responsible choices, which is what the Middle Way is all about. Also, if you think back to our discussion of karma, the intentions behind your actions are as important, if not more important, than the actions themselves. When you have made a choice to use intoxicating drugs, and then violate any of the other precepts, it is the consequence of your earlier choice. And who needs bad karma on top of bad karma?

"Calm and compassion are so precious. Make sure not to lose them through intoxication." – Kornfield, 1994

Characteristics of Existence

Impermanence

The Buddha said that "everything arises and passes away…existence is illusion" (in Byrom, 1993). The idea that nothing is permanent is a central belief in Buddhism. People are born, grow up, grow old, and die. Buildings wear down, cars break down, and enormous trees wither away. Even mountains are eventually worn down by erosion. However, children are born, new cars and buildings are built, new plants grow, and life goes on. The implications for Buddhism are quite interesting. If everything, and everyone, changes, then even someone who is enlightened will change! One cannot be a Buddha, for they will change. We must always continue to grow. Likewise, Buddhism itself will change, so most of their doctrines are not seen as static. They anticipate change over time.

For psychology, this has both good and not so good implications. For people who are depressed or anxious, they might take heart in impermanence, since things should eventually get better. Indeed, studies on the effects of psychotherapy often show that some people get better over time without treatment. However, if things seem to be going great, if you are happy and having lots of fun, those things will change too. But knowing this, we can prepare ourselves for it. An important aspect of coping with life's challenges is a sense of being in control. Although there are a wide variety of variables that contribute to individual resilience,

maintaining a positive state of mind can help, and knowledge can help to maintain that positive state of mind (Bonnano, 2004, 2005; Folkman and Moskowitz, 2000; Ray, 2004).

If we practice **mindfulness** and meditation, we can begin to see the impermanence of our lives. As we let go of our attachments to our self-image, our life will flow by like the pictures of a movie, each one a separate image, which only appears to flow smoothly when viewed at high speed. As we observe these fleeting images, we see how our sensations, thoughts, feelings, every aspect of our lives, change so quickly. We might then embrace the change that is truly our life. This process of letting go can be very difficult, but also very liberating (Goldstein and Kornfield, 2001).

"Do not seek perfection in a changing world. Instead, perfect your love." – Kornfield, 1994

Suffering

As we learned with the first of the Four Noble Truths, suffering is an integral part of the human experience. It is easy for us to think of suffering in terms of big pictures: war, famine, natural disasters, and the like. But how often do we think of suffering as an inherent part of our daily lives? Life is difficult, it is a struggle, especially the way most of us live it. A struggle can only lead to suffering. The ultimate outcome of life's struggle, should we lose the battle, is death. If we could defeat death we would end up alone, and that loneliness might be even worse than the original suffering itself (Suzuki, 1962). Still, we do not even need to look at suffering in terms of a lifetime battle against aging and death, we can see suffering in every moment of the day. Goldstein and Kornfield offer a marvelous description of the daily challenge to be satisfied (2001). It goes something like this. Suppose we woke up on a day when we had no obligations at all. It might be tempting to stay in bed all day, but eventually we become uncomfortable because we have to go to the bathroom. Finally we go, and then crawl back into bed to get warm. But then we get hungry, so finally we get up to get something to eat. Then we get bored, so maybe we watch TV. Then we get uncomfortable, and have to change positions. Even each pleasurable moment is brief, and fails to bring lasting satisfaction. So on, and so forth. We just keep suffering!

The source of this suffering is attachment. We are attached to pleasurable things because we crave them. We are also attached to things that are not pleasant, because they occupy our mind and we cannot be free. The Buddha says, "Free yourself from pleasure and pain. For in craving pleasure or in nursing pain, there is only sorrow" (in Byrom, 1993). It may seem strange that we would be attached to our pain, but the word is used differently here than in most of Western psychology. Traditionally, psychologists think of attachment in a positive way, such as the attachment a child feels toward his or her parents. And yet, some cognitive psychologists do talk about individuals whose automatic thoughts lead them into consistently negative states of mind by disqualifying positive events, catastrophizing events, taking everything too personally, etc. (Pretzer and Beck, 2005). In Buddhism, attachment is neither positive nor negative, it is simply anything that reflects our illusion that the natural world is real. Only when we let go of our attachments to this world can we be one with the universal spirit, and only then can we end our suffering. There is also something hopeful in suffering. Bodhidharma taught that every suffering is a Buddha-seed, because suffering leads us to seek wisdom (in Red Pine, 1987). In this analogy, he describes the body and mind as a field. Suffering is the seed, wisdom the sprout, and Buddhahood the grain.

? discussion question 11.10.1

Gotama Buddha taught that suffering is the result of craving or desire. Many of us have heard the saying that money is the root of all evil. Is our society excessively focused on buying more and bigger things? Do you ever find yourself obsessed with some material purchase? What problems, if any, have you experienced because people were more concerned with getting things than caring about the people around them?

Selflessness

In keeping with its origins in Yoga, Buddhism teaches that there is no immortal, unchanging soul. All that we are is a temporary collection of attributes, made up of the body, the feelings, the perceptions, the reactions, and the consciousness of the mind (which, coming from the brain, is really part of the body). It is because we confuse our true self (the transcendental self) with this temporary collection of illusory things that we crave satisfaction, and ultimately suffer as a result. Now it may seem illogical to reject everything we are familiar with, including our own physical body, as an illusion, but Buddhists would suggest that there is a

danger in choosing intellectual logic over faith. According to D.T. Suzuki (1962), “Faith lives and the intellect kills.” Try the following exercise. Consider your body. Is it real? How much food have you eaten in your life, and where is it now? How many times have you gone to the bathroom, and where did all of that come from? It certainly isn’t the same as when you ate it! Your body has been replaced many, many times. It is being replaced right now. It isn’t real, it is only temporary, ever changing. The same is true with your mind. Even when William James discussed the stream of consciousness, he described a constantly changing awareness, one in which you cannot have the same thought twice. It just isn’t possible. James (1892) realized that we cannot establish a *substantial* identity continuing from day to day, but concluded that our sense of continuity must reveal a *functional* identity. Arriving at a very different conclusion, Buddhists consider this to be maya, our inability to see things as they truly are (Suzuki, 1960).

These three characteristics of existence (impermanence, suffering, and selflessness) can be somewhat unsettling. It is not very appealing to believe that we don’t really exist, that we will suffer as long as we believe we do exist, and all of it will just eventually pass away anyway. So, how does one continue in this practice? It is important to keep as our goal a true understanding of the way things are, and the practice of meditation and other aspects of Yoga and Buddhism will help to deepen our realization of these basic truths (Goldstein & Kornfield, 2001). The practice remains challenging, however, because as we deepen our understanding the characteristic most often occupying the center of our greatest realization is that of suffering (Goldstein & Kornfield, 2001; Suzuki, 1962). We must then put aside our intellectualizing, we must slay it and throw it to the dogs, experiencing what Buddhists call the “Great Death” (Suzuki, 1962). Only then will we know the greatest wisdom and compassion. This is the beginning of our transcendence. It is not a separation from others, but a realization that we are all one. In other words, we are all in this together.

Interbeing – A Connection Between All People and All Things

Many people are familiar with the golden rule: do unto others as you would have others do unto you! This Christian saying also has great implications when considered from a Buddhist perspective. Based on the same philosophical/cosmological perspective as Yoga, Buddhists believe that there is one universal spirit. Therefore, we are really all the same, indeed the entire universe of living creatures and even inanimate objects in the physical world come from and return to the same, single source of creation. Thus, we could alter the golden rule to something like: as you do unto others you are doing unto yourself! This concept is not simply about being nice to other people for your own good, however. Much more importantly, it is about appreciating the relationships between all things. For example, when you drink a refreshing glass of milk, maybe after eating a few chocolate chip cookies, can you taste the grass and feel the falling rain? After all, the cow could not have grown up to give milk if it hadn’t eaten grass, and the grass would not have grown if there hadn’t been any rain. When you enjoy that milk do you remember to thank the farmer who milked the cow, or the grocer who sold the milk to you? And what about the worms that helped to create and aerate the soil in which the grass grew? Appreciating the concept of interbeing helps us to understand the importance of everyone and everything.

The value of this concept of interbeing is that it can be much more than simply a curious academic topic. The Vietnamese Buddhist monk Thich Nhat Hanh writes very eloquently about interbeing and its potential for promoting healthy relationships, both between people and between societies (Thich Nhat Hanh, 1995):

“Looking deeply” means observing something or someone with so much concentration that the distinction between observer and observed disappears. The result is insight into the true nature of the object. When we look into the heart of a flower, we see clouds, sunshine, minerals, time, the earth, and everything else in the cosmos in it. Without clouds, there could be no rain, and there would be no flower. Without time, the flower could not bloom. In fact, the flower is made entirely of non-flower elements; it has no independent, individual existence. It “inter-is” with everything else in the universe. … When we see the nature of interbeing, barriers between ourselves and others are dissolved, and peace, love, and understanding are possible. Whenever there is understanding, compassion is born. (pg. 10)

Having understood this concept, how might it apply to personality? One of the best known cross-cultural topics in psychology today is the distinction between collectivistic vs. individualistic cultures (Triandis & Suh, 2002; Triandis et al., 1988). It is generally accepted that Western cultures focus on the individual, whereas Eastern cultures focus on society as a collective group. One can easily imagine how people whose religious and cultural philosophy focus on a single, universal spirit (the basis of interbeing) would focus more on their family and societal groups than on the individual. Both individualistic and collectivistic cultures seem to have advantages. People living in individualistic cultures report higher levels of subjective well-being and self-esteem, whereas people in collectivistic cultures have tend to have lower levels of stress and correspondingly lower levels of

cardiovascular disease (Triandis & Suh, 2002; Triandis et al., 1988). In collectivistic cultures people tend to view the environment as relatively fixed, and themselves as more flexible, more ready to fit in (Triandis & Suh, 2002). The collectivistic perspective supports the value of social cooperation and social interest (something Alfred Adler would likely appreciate). Still, even within cultures there are individual differences. There are idiocentric persons (those who favor individuality) living in collectivistic cultures, and allocentric persons (those who favor ingroups) living in individualistic cultures. The best relationship between personality and culture may be the "culture fit" model, which suggests that it is best to live in the culture that matches your personal inclinations.

? discussion question 11.10.2

The concept of interbeing suggests that all things are ultimately connected. Have you ever taken the time to think about all the things that had to happen, and all the people who were involved, in producing anything you hold in your hand? What about all the things that had to happen, and all the people who were involved, in your creation? And if we are all connected in some way, if we are all interbeing, what have you done to value those relationships?

Connections Across Cultures:

The Non-Violent Struggles of Mahatma Gandhi, Thich Nhat Hanh, Martin Luther King, Jr., and the 14 th Dalai Lama

The four men listed above are famous in a variety of ways, but they are probably best known for their commitment to nonviolence as a way to achieve political and social justice. Most importantly, they vowed non-violence while those around them were committed to terrible violence in order to deny justice to others. The two who are not alive today were both assassinated, and the other two were forced to live in exile. Gandhi was a Hindu who practiced Yoga, Thich Nhat Hanh and the Dalai Lama are Buddhists, and M. L. King, Jr. was a Christian, and it was their spiritual beliefs that so profoundly determined those aspects of their personalities that demanded peace.

Gandhi (1869-1948) is considered the father of modern India. He was born when the British ruled India, and spent much of his life fighting for the independence of his homeland. Twice he was imprisoned by the government, even though he insisted that all protests should be nonviolent. Indeed, he had established a movement of nonviolence known as **Satyagraha**. Ultimately this movement was successful, and India achieved its independence. Gandhi, however, was assassinated less than a year later. As he died, he spoke the name of God: Rama (Easwaran, 1972; Wilkinson, 2005).

Thich Nhat Hanh (1926-present) was born in Vietnam, and saw his country dominated first by the French and then by communists. During those difficult times he helped to develop what he and his friends called "engaged Buddhism." Rather than sitting in the temple meditating, they went out into the villages and tried to help the poor people of Vietnam. When confronted by soldiers they did their best to remain mindful, and to feel compassion for the soldiers who threatened them. After all, it was clear to Thich Nhat Hanh that many of those young soldiers were frightened themselves, and so their behavior was very hard to predict. Thus, the calm and peace that accompany mindfulness was often essential for protecting everyone in those terrifying encounters. After being exiled from Vietnam in 1966, he established a community called Plum Village in France, where he still resides today (Thich Nhat Hanh, 1966, 2003).

Martin Luther King, Jr. (1929-1968) was a major figure in America's civil rights movement of the 1950s and 60s. The King children learned at an early age about the realities of racism in America. Coming from an educated and socially active family, both his father and grandfather were ministers, he vowed at an early age to work against racial injustice. According to his sister, he said he would turn the world upside down (Farris, 2003). However, he always insisted on doing so in a nonviolent fashion. For this commitment to nonviolence, in 1964 he became the youngest person to ever receive the Nobel Peace Prize. Despite the peace prize and the passage of both the 1964 Civil Rights Act and the Voting Rights Act in 1965, discrimination continued in America. So did the nonviolent protests led by Dr. King. Then, in 1968, Martin Luther King, Jr. was assassinated (Burns, 2004; Hansen, 2003; Patrick, 1990).

The Dalai Lama (1935-present) lives in exile in India, though he also spends a great deal of time in America. When China invaded Tibet in 1950, he appealed to the United Nations, other countries, and even tried to reach an agreement with the Chinese leadership.

Eventually, however, he was forced to leave Tibet in 1959. Today, nearly 50 years later, he continues to seek a peaceful resolution resulting in freedom for Tibet. He also works to deliberately cultivate feelings of compassion for the Chinese, believing that someday those who have harmed the people of Tibet will have to face the consequences of their actions (Dalai Lama, 2002). The Dalai Lama received the Nobel Peace Prize in 1989.

These men have more in common than simply their shared belief in nonviolence. In addition to M. L. King, Jr. and the Dalai Lama receiving the Nobel Peace Prize, as Nobel Laureates are entitled to do, Dr. King nominated Thich Nhat Hanh for the same award. Dr. King had received a letter from Thich Nhat Hanh asking for help in protesting the Vietnam war, which by the 1960s involved the United States. Dr. King was impressed by the Buddhist monk, and once appeared with him at a press conference in Chicago (Burns, 2004). Dr. King was also familiar with and impressed by the teachings of Gandhi. In 1959 he traveled to India to learn firsthand about Gandhi's Satyagraha, the basis for Gandhi's nonviolent independence movement (King, 2000). In 1966, Dr. King delivered the Gandhi Memorial Lecture at Howard University (Hansen, 2003). Since both the Dalai Lama and Thich Nhat Hanh are alive today, they have met one another and the Dalai Lama has written several forewords for books by Thich Nhat Hanh. If these men from different countries and different cultures can share so much through the simple (though not easy) practice of nonviolence, perhaps there is something special here for everyone to learn more about.

Meditation

Meditation Techniques

Meditation is the means by which we control our mind and guide it in a more virtuous direction (Dalai Lama, 2001). Modern brain imaging techniques have even begun to identify the brain regions involved in these processes (Barinaga, 2003). There are many different meditation techniques in Yoga and Buddhism, and no one technique is necessarily better than another. What is most important is to pick one type of meditation and stick with it. Meditation takes practice. Most of us find it very difficult to relax and clear our mind. Even when we do, it is difficult to stay relaxed and keep our mind clear. We are distracted by constant thoughts, getting uncomfortable, we have itches and sneezes and whatever… But over time we can get better at relaxing. It helps to have a well-described procedure, and it can be very helpful to meditate in a group (especially if they offer classes or lessons on how to meditate). If you try meditation, don't get discouraged the first few times. Keep it up. As with all paths toward self-improvement, it takes time to progress in your ability to meditate.

Some of the writings of Master Dogen (1200-1253), the monk who founded Japanese Soto Zen, have survived during the 800 years since he lived (in Cook, 2002). Master Dogen recommends a very traditional form of seated meditation. Basically, sit straight up on a comfortable cushion with your legs crossed. Place your right hand in your lap, palm up, and your left hand on your right hand in the same manner, so that your thumbs touch slightly. Keep the eyes slightly open, the mouth closed, and breathe softly. Next comes the hard part: "Think about the unthinkable. How do you think about the unthinkable? Non-thinking."

Non-thinking may sound strange, but it is a fascinating experience for those who achieve it. It can actually make a 3- or 6-hour mediation seem to go by more quickly than a shorter meditation in which you never quite clear your mind. If it sounds a little too strange, don't worry, it isn't the goal of every form of meditation. Some forms of meditation focus on a mantra, or in Christian mediation a short prayer. Trying to focus on God through the celestial eye (in the middle of the forehead) is also a common technique. The Dalai Lama describes several different approaches in one of his books (Dalai Lama, 2001), and Thich Nhat Hanh discusses being reasonable in one's approach to longer meditations (Thich Nhat Hanh, 1991). Once again, there is not a right or wrong method of meditation. Whatever technique you try, whether from a book, a guru, a teacher, or a group, it is whatever works for you on your path to personal development.

Soto Zen and Zazen

Soto Zen is one of the two forms of Zen popular in Japan. Soto Zen emphasizes **zazen**, which translates loosely as "sitting meditation." It is believed that this form of meditation, common to the way most Americans envision meditation, is a tribute to the legend of Zen founder Bodhidharma spending nine years meditating while staring at a wall (Suzuki, 1962). However, there is a problem in the literature on zazen. For those who believe that zazen can help to achieve Buddhahood, the masters have taught that it cannot work. Still, it remains the essential core practice. How can this be? According to Alan Watts (1957), it may be better to consider an alternative translation of zazen, in which it translates as "sitting just to sit." In this view, zazen results in a clear mind, the condition necessary for enlightenment. A wonderful resource for practicing basic meditation of this type has been provided by

Jack Kornfield, a clinical psychologist who trained as a Buddhist monk. *Meditation for Beginners* (Kornfield, 2004) not only briefly describes the history, purpose, and benefits of meditation, but it also includes a CD with guided meditations led by the author.

Rinzai Zen and the Koan

The other form of Zen popular in Japan is Rinzai Zen, founded by the monk Eisai (1141-1215). Buddhists in the Rinzai school practice zazen, but they also emphasize the curious practice of meditating on a koan, a riddle that has no answer. The Soto school of Zen frowns upon the use of the koan, considering it to be superficial and possibly misguided, something of a gimmick. But within the Rinzai school the Zen masters became concerned about what they saw as problems within the communities practicing Zen. One of the chief concerns of the Rinzai masters was the reliance on absolute quietude, pure meditation purely for the sake of meditation. They believed that Zen comes from life, and therefore must grow out of life (Suzuki, 1962). They were also concerned about the intellectualization of Zen, the belief that discerning logic could lead to enlightenment (again, concerned that the pursuit of logical ideas became its own pursuit). And so they developed the **koan**. The purpose of these unsolvable riddles is to put an end to logical thinking, to stop the wandering minds of students and to create a profound sense of doubt in the student's mind (Reps and Senzaki, 1994; Suzuki, 1960, 1962; Watts, 1957). The presentation of the student's views on a koan to the Zen master is an important time, and advanced students may even challenge whether the master appreciates how deeply the student understands Zen. These periodic visits to the Zen master to present an answer to a koan are known as **sanzen** (Suzuki, 1962; Watts, 1957).

Although koan are considered unsolvable, they do have answers. Certainly the most famous koan is the one in which the monk Joshu is asked: Does a dog have Buddha-nature? Joshu replied, "Mu!" Mu is the Chinese symbol for "no thing" or "not." The understanding of this koan is not found in the odd answer, or in Joshu's apparent refusal to provide a straight answer, "Mu" is Buddha-nature! If you find this particularly difficult to understand, I suggest you back up to the quote I gave you from the writings of Bodhidharma. I doubt it will make it any more clear, but perhaps it will help to illuminate the philosophy of non-attachment: don't worry too hard about understanding, just understand.

A student of the Rinzai school of Zen will actually study many koan, and the process is kept quite secret. Obviously if the answers to these koan were known, then students could offer the apparent answers. I say apparent answers because a Zen master would clearly recognize the mindless answer of one who really does not understand the koan. Since the process is kept secret, not many koan are publicly known, but there are some available. Not all koan are quite as odd as Joshu's "Mu;" some are seemingly easier to understand, but challenge our concepts of defining aspects of the natural world. For example, the monk Daie used to carry a short bamboo stick, and he would say, "If you call this a stick, you affirm; if you call it not a stick, you negate. Beyond affirmation and negation, what would you call it?" (Suzuki, 1962) This is clearly a challenge to move beyond logic, beyond the normal way of thinking about things. Enlightenment, of course, does not come from normal ways. Through the use of meditation to clear our minds, and the use of koan to challenge our perspectives, Rinzai Zen seeks to offer a path toward enlightenment that will be successful.

? discussion question 11.10.3

Have you ever practiced meditation, or perhaps contemplative prayer? If you have, how does it make you feel? If you haven't, does it sound attractive? Were you surprised to learn that the practice of meditation is so old, and that it has counterparts in all of the major religions?

Mindfulness

Mindfulness is a form of meditation that occurs throughout every moment of the day. Indeed, it is very important to live fully in every moment, and to look deeply into each experience (Thich Nhat Hanh, 1991, 1995). By being mindful, we can enter into awareness of our body and our emotions. Thich Nhat Hanh relates a story in which the Buddha was asked when he and his monks practiced. The Buddha replied that they practiced when they sat, when they walked, and when they ate. When the person questioning the Buddha replied that everyone sits, walks, and eats, the Buddha replied that he and his monks *knew* they were sitting, *knew* they were walking, and *knew* they were eating (Thich Nhat Hanh, 1995). Mindfulness can also be applied to acts as

simple as breathing. According to Thich Nhat Hanh, conscious breathing is the most basic Buddhist technique for touching peace (Thich Nhat Hanh, 1991, 1995). He suggests silently reciting the following lines while breathing mindfully:

Breathing in, I calm my body.

Breathing out, I smile.

Dwelling in the present moment,

I know this is a wonderful moment!

The concept of mindfulness, viewed in its traditional way, is also being used today in psychotherapy. Two recent books address the use of mindfulness either in combination with cognitive behavioral therapy to treat depression (McQuaid and Carmona, 2004) or as its own approach to the treatment of anxiety (Brantley, 2003). McQuaid and Carmona (2004) discuss how combining cognitive behavioral therapy and mindfulness together can provide a much stronger approach to treatment than either technique alone. Since the approaches have much in common, they amplify the effectiveness of each, and given their differences, they offer a complete path to moving beyond simple recovery toward more positive self development. Dr. Brantley (2003) moves more completely into the practice of mindfulness, emphasizing that it must become a way of life. It is not simply a clever therapeutic technique or gimmick.

? Discussion question **11.10.4**

Mindfulness refers to maintaining a meditative state throughout the day. A similar approach is essential to cognitive/behavioral therapy. Are you aware of what you do during the day, or are you overwhelmed with being too busy? Could you see the practice of mindfulness as a helpful way to deal with your hectic life, and perhaps reduce stress at the same time?

Enlightenment and the Ideal Person

Concepts of Enlightenment

There are a wide variety of different concepts of enlightenment. One concept that is somewhat familiar in America is **nirvana**. Nirvana refers to the extinction of all ideas and concepts, thus resulting in the end of suffering due to the craving that results from being attached to anything in the natural world. In the Theravada tradition this should be the goal of all Buddhists, and a person who achieves nirvana is referred to as an **Arhat**. Other Buddhists, however, seek to avoid nirvana, because it leaves all others behind.

In the Mahayana tradition, an ideal person would be a Bodhisattva, one who vows to forego complete enlightenment until all other beings have been enlightened. According to Thich Nhat Hanh (1995), such individuals touch mindfulness, and as a result of living mindfully they can touch the Buddha and shine their light of awareness on everything they do. The desire to help others achieve enlightenment comes from the deep compassion developed by **Bodhisattvas**. Mindfulness leads to this compassion, as it leads one to develop **Bodhicitta**. Bodhicitta, which means “mind of enlightenment” or “mind of love,” is an inner drive to fully realize oneself and to work for the well-being of all (in other words, it is the driving force of being a Bodhisattva; Dalai Lama, 2001; Thich Nhat Hanh, 1995, 1999).

Curiously, some Buddhists distinguish between “bodhi” as a temporary flash of enlightenment, which can even occur following arduous meditation or by accident, and “nirvana” or true liberation, which can only result from proper knowledge and dedicated practice (Mathew, 2001). This concept is similar to what Maslow described as the difference between a peak experience and a plateau experience. A peak experience is a brief period of fulfillment, usually associated with a particular event. A plateau experience, on the other hand, is a lasting feeling of oneness with the world around us. What is of particular importance for the study of personality is the recognition that individuals with certain personality characteristics, such as being kind-hearted and open-minded, can more easily accomplish long-term fulfillment, whether we call it nirvana or self-actualization.

Compassion and Loving-Kindness

“Just as compassion is the wish that all sentient beings be free of suffering, loving-kindness is the wish that all may enjoy happiness” (Dalai Lama, 2001). With these simple words about Buddhism, His Holiness the Dalai Lama has captured the history of psychology briefly presented in the introductory chapter: that psychology focused for many years on helping to identify and treat mental illness (hopefully freeing people from suffering), whereas now there is a strong movement toward positive psychology (hoping to improve well-being for all). This recognition of compassion as the strong feeling or wish that others be freed from suffering comes from mindfulness. As one becomes truly aware of the suffering involved in human life, and if one is able to feel genuine empathy for others, then compassion naturally arises (Chappell, 2003; Dalai Lama, 2001; Goldstein & Kornfield, 2001; Thich Nhat Hanh, 1995). Compassion has described as the ideal emotional state (Bankart et al., 2003; Cook, 2002; Dockett & North-Schulte, 2003; Ragsdale, 2003), and Carl Rogers considered genuine empathy to be essential for client-centered therapy to be successful. Aside from Rogers, however, have other psychologists begun to examine the value of compassion and loving-kindness? The answer is an unequivocal “Yes” (Bankart et al., 2003; Batson et al., 2005; Cassell, 2005; Dockett & North-Schulte, 2003; Keyes & Lopez, 2005; Khong, 2003; Ragsdale, 2003; Schulman, 2005; Young-Eisendrath, 2003)!

“Life is so hard, how can we be anything but kind?”

- Kornfield, 1994

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11.11: Obstacles to Personal Growth- The Three Poisons of Buddhism

Buddhists believe in **three poisons,** the great obstacles to personal development. They are greed, anger, and delusion. These poisons, or realms as they are often called, have no nature of their own, they are created by us and they depend on us. Greed flows from attachment, anger flows from our emotions, and delusion flows from maya. By following the practices of Buddhism, we can free ourselves from these poisons as did the Buddha. According to Bodhidharma, the Buddha made three vows. He vowed to put an end to all evil, by practicing moral prohibitions to counter the poison of greed. He vowed to cultivate virtue by practicing meditation to counter the poison of anger. And he vowed to liberate all beings by practicing wisdom to counter the poison of delusion (in Red Pine, 1987). Likewise, we can devote ourselves to the three pure practices of morality, meditation, and wisdom.

It is interesting to note how well this philosophy fits with the growing field of positive psychology (e.g., see Compton, 2005; Peterson, 2006). Indeed, whole books have been written on the study of virtue in psychology (Fowers, 2005; Peterson & Seligman, 2004). Note, however, that these books are quite recent. Although the seeds of positive psychology, studies on virtue and similar topics have been around since the earliest days of psychology in the Western world, we seem to be just starting to “discover” concepts that have been well established in Eastern philosophy/psychology for thousands of years. As we recognize more similarities between traditional Eastern perspectives and current Western perspectives, it may help to guide these developing areas of psychological research in the Western world.

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11.S: Chapter Summary

Review of Key Points

- Although Yoga and Buddhism have significant religious overtones, they are actually lifestyle guidelines that promote psychological well-being.
- The principles of Yoga are outlined in the *Yoga Sutras* of Patanjali and in the *Bhagavad Gita*, both of which are approximately 2,500 years old.
- In Yoga there is a dichotomy between spirit and nature, with spirit being pure consciousness. Our belief that we are actually our physical selves (our natural self) is an illusion.
- Karma refers to the cosmic law of cause and effect. Our past actions, both good and bad, affect our future.
- Everything in the natural world is composed of three gunas: rajas (craving and action), tamas (ignorance and dullness), and sattva (light and joy).
- A guru is a teacher, someone who is advanced in their practice of Yoga. The guru is essential for a student to properly follow the complex teachings and practices of Yoga.
- There are a wide variety of schools within Yoga, including Hatha-Yoga (which is popular in America), Bhakti-Yoga (devotional Yoga), Kriya-Yoga (believed to be the original Yoga of Patanjali), and Mantra-Yoga (which emphasizes the chanting of mantras, such as the sacred Om).
- Patanjali described five hindrances to personal development: avidya (ignorance), sense of personality, desire, hate, and sense of attachment.
- The ancient Vedic teachings propose four stages in the ideal life: student, householder, hermit or forest-dweller, renunciant.
- Yoga is well established in America, having been taught formally for over 85 years. This mixing of cultures has been possible, in part, because of similarities between Yoga and Christian practices. Two such common practices are contemplative prayer (which is similar to meditation) and singing to God.
- Buddhism is based on the 2,500 year-old teachings of Siddhattha Gotama, who is also known as Gotama Buddha. Bodhidharma brought Zen Buddhism to China some 1,500 years ago, and the Dalai Lama is a very famous Tibetan Buddhist leader alive today.
- The Buddha taught that there are four noble truths: suffering is a reality in human life, suffering comes from craving, the craving that leads to suffering can be destroyed, the path to destroy craving is the Middle Way (aka, the Eightfold Path).
- Buddhists believe in three basic characteristics of existence: nothing is permanent, suffering is an integral part of human life, and we have no immortal, unchanging soul.
- The Buddhist concept of interbeing emphasizes the connection between all living things, and even inanimate objects, because there is only one single source of all creation.
- Meditation, the common element in all forms of Yoga and Buddhism, is a means for controlling our mind and moving it in a more virtuous direction. Soto Zen emphasizes sitting meditation alone, whereas Rinzai Zen adds to seated meditation the practice of meditating on a koan, an unsolvable riddle.
- Mindfulness is the practice of maintaining a meditative state throughout our daily routine.
- In a very general sense, enlightenment refers to transcending this life, thus eliminating craving and suffering and escaping from the cause and effect of karma. In the Mahayana tradition, some Buddhists forego complete enlightenment so that they might remain in the world to help others achieve enlightenment.
- The ideal emotional state for Buddhists is compassion. Both compassion and loving-kindness flow naturally from mindfulness, since mindful individuals recognize the reality of our existence.
- Buddhists believe in three poisons, or obstacles to personal growth: greed, anger, and delusion.
- Zen Buddhism has been taught in the United States for over 100 years. It has found its way into popular literature and has had a clear influence on psychology.
- Buddhists refer to the Three Jewels: the Buddha, the Dharma (the teachings of the Buddha), and the Sangha (a community of Buddhists). The importance of community is by no means unique to Eastern thought, but certainly takes on great significance in a culture that is generally recognized as collectivistic.

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CHAPTER OVERVIEW

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12.1: Sex vs. Gender

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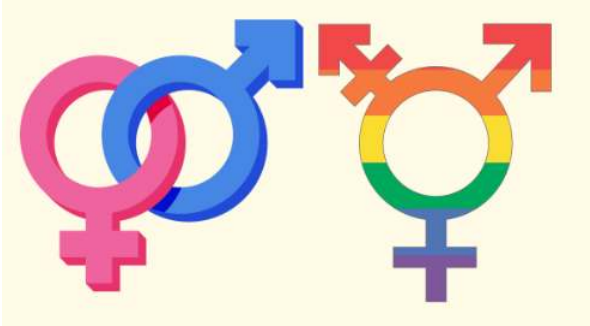
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12.7: Gender Differences

4.4: Gender Differences

Gender Norms

Gender norms are societal expectations and behaviors deemed appropriate for individuals based on their perceived gender. These norms shape personal identity, roles, and relationships, influencing how individuals perceive themselves and others. From a personal psychology perspective, adherence to or deviation from these norms can significantly impact self-esteem, mental health, and social interactions.

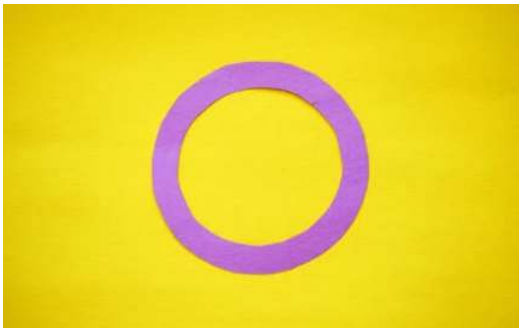


Biological Sex

Biological sex refers to physical characteristics defining male and female bodies, such as chromosomes, hormones, reproductive organs, and secondary sexual traits. Individuals are typically classified as male or female at birth based on these characteristics, although this binary classification does not encompass the full spectrum of human biological diversity.

Intersex Variations

Intersex variations, also known as Differences of Sex Development (DSD), are congenital conditions where an individual's reproductive or sexual anatomy does not fit typical definitions of male or female. These variations can involve differences in chromosomes, gonads, or genitals and can be identified at different life stages. The prevalence of intersex conditions is difficult to determine due to limited data and social stigma.





Medical Treatment and Advocacy

Historically, medical treatment for intersex individuals has often involved surgeries during infancy to assign a binary sex, typically without the individual's consent. These procedures can have long-term health consequences. Advocacy groups now urge delaying such decisions until the individual can participate in the decision-making process, emphasizing bodily autonomy and informed consent.

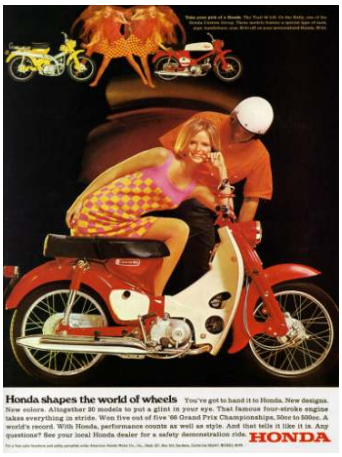
Health and Well-being

Research, primarily from Europe, indicates that intersex individuals face higher rates of health issues compared to the general population. A recent U.S.-based study of 198 intersex adults revealed diverse gender identities and sexual orientations, with many participants reporting good or better physical health but also significant chronic conditions like asthma, high blood pressure, and osteoporosis. Mental health concerns were prevalent, including high rates of anxiety, depression, and PTSD, especially among

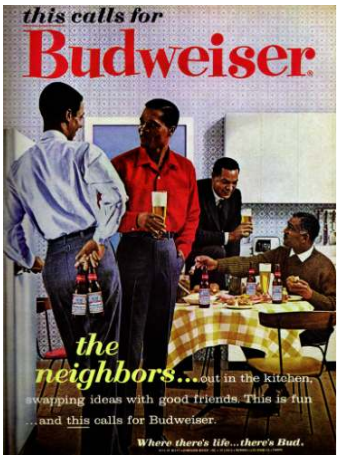
younger participants. There is a notable lack of dedicated healthcare services for intersex adults, who often encounter stigma and insufficient provider knowledge.

Gender as a Social Construct

Gender as a social construct refers to the roles, behaviors, and attributes that society considers appropriate for men and women. Unlike biological sex, gender is shaped by cultural, historical, and social influences. Personal psychology explores how individuals internalize and express their gender identity based on societal expectations and personal experiences. This process involves negotiating between self-concept and external pressures.







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Psychosocial Elements of Gender

The psychosocial aspects of gender involve the interaction between psychological factors and social influences in shaping gender identity. Key elements include:

1. Identity Development: How individuals understand and accept their gender identity, influenced by family, peers, and media.
2. Role Expectations: Societal expectations affecting career choices, hobbies, and personal relationships.
3. Mental Health: The impact of societal acceptance or rejection on mental health, including anxiety, depression, and self-esteem.

Philosophical Perspectives on Gender

Philosophical discussions challenge traditional notions of gender, emphasizing fluidity and diversity. Concepts like gender performativity (proposed by Judith Butler) suggest that gender is an ongoing performance shaped by repeated actions and societal reinforcement. Personal psychology incorporates these insights to understand how individuals construct and express their gender identity.

Social Elements of Gender

The social aspects of gender encompass broader societal structures and cultural norms influencing gender roles and relations. These include:

1. Socialization: The process through which individuals learn and adopt gender norms from an early age.
2. Institutional Influences: The role of institutions like education, media, and the workplace in perpetuating or challenging gender norms.
3. Intersectionality: The understanding that gender intersects with other social categories like race, class, and sexuality, affecting individuals' experiences and identities uniquely.

Conclusion

Through the lens of personal psychology, gender norms, biological sex, and gender as a social construct are deeply interconnected with individual identity and well-being. Recognizing the diversity of human experiences, including those of intersex individuals, and challenging restrictive gender norms can promote greater acceptance, mental health, and social equity. Comprehensive research and improved healthcare policies are essential to address the unique needs of intersex individuals. Personal psychology provides a framework for understanding and supporting individuals as they navigate their gender journeys within a complex and evolving social landscape.

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12.8: Sexual Response

Sexuality: Sexuality is a multifaceted aspect of human experience that encompasses biological, psychological, and social dimensions. This section covered the physiological and psychological aspects of sexual development, orientation, and behavior. We explored theories of sexual motivation, such as the Evolutionary Perspective, which considers reproductive success as a central driver, and the Biopsychosocial Model, which integrates biological, psychological, and social factors. The chapter also addressed the diversity of sexual orientations and identities, promoting an understanding and acceptance of sexual diversity. We discussed the impact of cultural and societal norms on sexual behavior and attitudes, as well as the importance of sexual health and education in fostering healthy and respectful sexual relationships.

Through examining these interconnected areas, the chapter provided a comprehensive understanding of how emotions, motivation, and sexuality influence our lives. By integrating theoretical perspectives with practical applications, readers gained insights into managing emotions, enhancing motivation, and embracing a healthy and informed approach to sexuality. This holistic understanding empowers individuals to navigate their emotional and motivational landscapes more effectively, contributing to overall well-being and personal growth.

4.5: Sexual Response

Sexual response is both biological and based on socialization factors. Each individual person has a natural degree to which they become aroused in response to sexual stimuli similar to how some people react more intensely to loud sounds or have a low to high pain tolerance. Life experiences across the lifespan continue to influence and change these as well. Individual differences in how sexual stimuli are experienced will influence the degree of desire to engage in certain sexual behaviors. Social factors, such as shame and stigma around certain sexual behaviors, can also influence this process by reworking the way that touch and sexual contact are perceived. In this section, we will look at different aspects of the nervous system that are implicated in this process, explore the groundbreaking Masters and Johnson research on the sexual response cycle, and discuss additional theories that have been developed over time that explore the ways the social environment interacts with sensory experiences.

Sex on the Brain

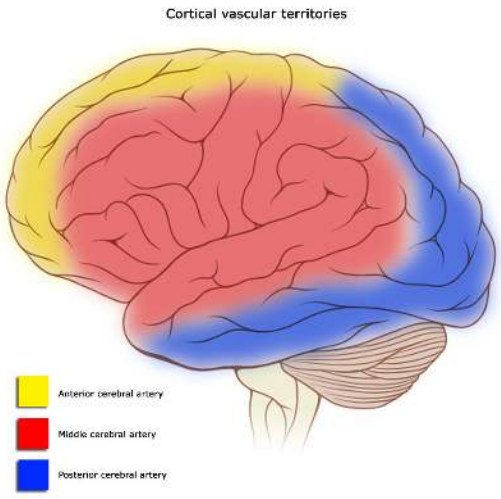


Figure 3: Some of the many regions of the brain and brainstem activated during pleasure experiences. [Image: Frank Gaillard, https://goo.gl/yCKuQ2, CC-BY-SA 3.0. Identifying marks added]

At first glance—or touch for that matter—the clitoris and penis are the parts of our anatomies that seem to bring the most pleasure. However, these two organs pale in comparison to our central nervous system's capacity for pleasure. Extensive regions of the brain and brainstem are activated when a person experiences pleasure, including: the insula, temporal cortex, limbic system, nucleus accumbens, basal ganglia, superior parietal cortex, dorsolateral prefrontal cortex, and cerebellum (see Figure 3, Ortigue et al., 2007). Neuroimaging techniques show that these regions of the brain are active when patients have spontaneous orgasms involving no direct stimulation of the skin (e.g., Fadul et al., 2005) and when experimental participants self-stimulate erogenous zones (e.g., Komisaruk et al., 2011). Erogenous zones are sensitive areas of skin that are connected, via the nervous system, to the somatosensory cortex in the brain.

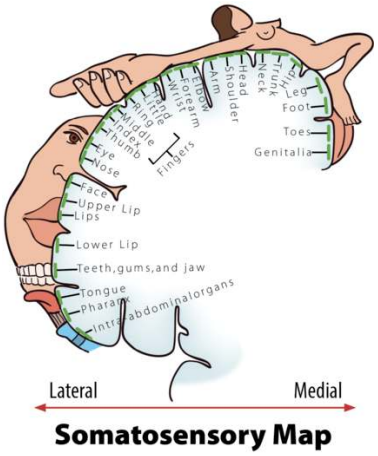


Figure 4: Erogenous Zones Mapped on the Somatosensory Cortex.

The somatosensory cortex (SC) is the part of the brain primarily responsible for processing sensory information from the skin. The more sensitive an area of your skin is (e.g., your lips), the larger the corresponding area of the SC will be; the less sensitive an area of your skin is (e.g., your trunk), the smaller the corresponding area of the SC will be (see Figure 4, Penfield & Boldrey, 1937). When a sensitive area of a person's body is touched, it is typically interpreted by the brain in one of three ways: "That tickles!" "That hurts!" or, "That…you need to do again!" Thus, the more sensitive areas of our bodies have greater potential to evoke pleasure. A study by Nummenmaa and his colleagues (2016) used a unique method to test this hypothesis. The Nummenmaa research team showed experimental participants images of same- and opposite-sex bodies. They then asked the participants to color the regions of the body that, when touched, they or members of the opposite sex would experience as sexually arousing while masturbating or having sex with a partner. Nummenmaa found the expected "hotspot" erogenous zones around the external sex organs, breasts, and anus, but also reported areas of the skin beyond these hotspots: "[T]actile stimulation of practically all bodily regions trigger sexual arousal…." Moreover, he concluded, "[H]aving sex with a partner…"—beyond the hotspots—"…reflects the role of touching in the maintenance of…pair bonds."

Sensation and Perception

Sensation is the way the nervous system, such as different areas of the brain, processes sensory information from the environment, such as light, sound, smell, and touch/pain. Let's take a look at touch in the context of sensual contact by explaining the process of transduction–receptors in the skin relay the message of being touched to transmitters in the spinal cord that converts this to neural signals interpreted by the brain which then allows effectors, neurons within muscles, to signal a response to the stimuli, such as by jerking away the hand when something is hot. Perception is how an individual associates meaning with what they are sensing. For instance, masturbation will cause the genital's skin receptor sites and nervous system to respond to this sensation producing arousal; however, the self-talk regarding the morality of masturbation will impact the way the person perceives the arousal. Pay attention to the way that stigma and shame around pleasure and sensuality have influenced the way you attach meaning to your physiological experiences.

Exploring your erogenous zones: What areas of your body feel particularly pleasurable to the touch? Some common areas, apart from the genitals, are the lower back, inner thighs, lips, nipples, feet, hands, and more! Each individual will have specific areas so explore this question with your sexual partners as well.

Sensate focus is sometimes utilized within sex therapy to increase control over physiological responses and to provide insight into sexual partners' pleasure points in addition to one's own without touching or stimulating the genitals. Anxiety is experienced by many individuals as being sensual can feel very vulnerable and scary. Sensate focus uses aspects of cognitive-behavioral therapy and behavioral modification to focus on the senses and alter the meaning that has been associated with sexual interactions. Check out this article on sensate focus techniques from Cornell University (2019). These techniques can be utilized by anyone who is interested and can enhance sexual pleasure through increasing self-awareness and communication focused on pleasure with partners.

Hormones and Pheromones

Androgens, estrogen, and progestin bind to hormone receptor sites that allow the synthesis of neurochemicals (Hyde & DeLamater, 2017). During excitement and arousal, dopamine, oxytocin, and norepinephrine are released into the bloodstream, and during

orgasm, opioids and endocannabinoids are released (Hyde & DeLamater, 2017). Hormones have activating effects in which they can activate and deactivate sexual arousal. Testosterone is particularly implicated in increasing desire for sex. Too high or too low of testosterone reduces desire. Intense emotions increase sexual arousal such as happiness, anger, anxiety, sadness, etc. because of their physiological impacts on our endocrine and nervous systems. For instance, sex and aggression both involve the hormones epinephrine and norepinephrine (which are also neurotransmitters) as they invoke a sense of excitement then resolution. This connection between emotions and our physiological reactions is a growing focus within research (Hyde & DeLamater, 2017).

While hormones are typically released within the bloodstream and influence sexual arousal, pheromones are biochemicals secreted outside the body that communicate to others on a chemical level about hormonal levels and ovulation which subconsciously attracts us to them based on our own body's chemistry (Hyde & DeLamater, 2017). Researchers are still trying to understand the role of pheromones in sexual responses, but what is known is that when people are presented with the scent of others they are typically more attracted to the smell of someone in a way that matches with their sexual orientation even without any other information provided (Savic, 2014). Additionally, the scent of people who are biologically related is rated as less attractive and possibly connects to evolution protecting against unintentional incest (Savic, 2014). Animal studies on male monkeys indicate that they experience increases in testosterone when exposed to an ovulating female's urine (Hyde & DeLamater, 2017). Pheromones are believed to influence the hormones in others and this can be seen by women's menstrual cycles syncing up when they spend a lot of time with each other as well. This further showcases how interconnected humans are with one another biologically in addition to socially.

Theories and Models Regarding Sexual Response

Masters and Johnson

Although people have always had sex, the scientific study of it has remained taboo until relatively recently. In fact, the study of sexual anatomy, physiology, and behavior wasn't formally undertaken until the late 19th century, and only began to be taken seriously as recently as the 1950's. Notably, William Masters (1915-2001) and Virginia Johnson (1925-2013) formed a research team in 1957 that expanded studies of sexuality from merely asking people about their sex lives to measuring people's anatomy and physiology while they were actually having sex. Masters was a former Navy lieutenant, married father of two, and trained gynecologist with an interest in studying prostitutes. Johnson was a former country music singer, single mother of two, three-time divorcee, and two-time college dropout with an interest in studying sociology. And yes, if it piques your curiosity, Masters and Johnson were lovers (when Masters was still married); they eventually married each other, but later divorced. Despite their colorful private lives they were dedicated researchers with an interest in understanding sex from a scientific perspective.

Masters and Johnson used primarily plethysmography (the measuring of changes in blood- or airflow to organs) to determine sexual responses in a wide range of body parts—breasts, skin, various muscle structures, bladder, rectum, external sex organs, and lungs—as well as measurements of people's pulse and blood pressure. They measured more than 10,000 orgasms in 700 individuals (18 to 89 years of age), during sex with partners or alone. Masters and Johnson's findings were initially published in two best-selling books: Human Sexual Response, 1966, and Human Sexual Inadequacy, 1970. Their initial experimental techniques and data form the bases of our contemporary understanding of sexual anatomy and physiology.

Physiology and the Sexual Response Cycle

The brain and other sex organs respond to sexual stimuli in a universal fashion known as the sexual response cycle (SRC; Masters & Johnson, 1966). The SRC is composed of four phases:

1. Excitement: Activation of the sympathetic branch of the autonomic nervous system defines the excitement phase; heart rate and breathing accelerates, along with increased blood flow to the penis, vaginal walls, clitoris, and nipples (vasocongestion). Involuntary muscular movements (myotonia), such as facial grimaces, also occur during this phase.
2. Plateau: Blood flow, heart rate, and breathing intensify during the plateau phase. During this phase, often referred to as "foreplay," females experience an orgasmic platform—the outer third of the vaginal walls tightening—and males experience a release of pre-seminal fluid containing healthy sperm cells (Killick et al., 2011). This early release of fluid makes penile withdrawal a relatively ineffective form of birth control (Aisch & Marsh, 2014). (Question: What do you call a couple who use the withdrawal method of birth control? Answer: Parents.)
3. Orgasm: The shortest but most pleasurable phase is the orgasm phase. After reaching its climax, neuromuscular tension is released and the hormone oxytocin floods the bloodstream—facilitating emotional bonding. Although the rhythmic muscular contractions of an orgasm are temporally associated with ejaculation, this association is not necessary because

orgasm and ejaculation are two separate physiological processes.
4. Resolution: The body returns to a pre-aroused state in the resolution phase. Most males enter a refractory period of being unresponsive to sexual stimuli. The length of this period depends on age, frequency of recent sexual relations, level of intimacy with a partner, and novelty. Because most females do not have a refractory period, they have a greater potential—physiologically—of having multiple orgasms.

Of interest to note, the SRC occurs regardless of the type of sexual behavior—whether the behavior is masturbation; romantic kissing; or oral, vaginal, or anal sex (Masters & Johnson, 1966). Further, a partner or environmental object is sufficient, but not necessary, for the SRC to occur.

Kaplan's Triphasic Model

Helen Singer Kaplan was a sex therapist seeking a model that would aid her in explaining the sexual response cycle to her clients. Kaplan adjusted Masters and Johnsons' model by adding the desire phase and reduced excitement and plateau to just the excitement phase in which she focused on vasocongestion occurring. By focusing on the psychological and physiological processes more than trying to separate these experiences, her model became:

1. Desire: Desire activates excitement and excitement can cause desire, motivating a person toward sexual activity. This phase is psychological while the next two are physiological.
2. Arousal: Vasocongestion causes blood to flow to the genitals and increase in blood pressure and is controlled by the parasympathetic division of the autonomic nervous system (Hyde & DeLamater, 2017, p. 191)
3. Orgasm: Reflex muscular contractions also involve anatomical structures and are connected to the nervous system. The ejaculation reflex can be controlled whereas the erection reflex typically cannot. Ejaculation and orgasm are controlled by the sympathetic division of the autonomic nervous system in order to return the body to homeostasis.

Unfortunately, Kaplan's model did not seem to reflect women's experience (Lieblum, 2000). Many women never experience spontaneous desire and for those who do, it does not always lead to sexual engagement or arousal. Furthermore, for many people, arousal occurs before desire. Finally, Kaplan's model didn't address sexual satisfaction (though her clinical work was built on that).

Basson's Nonlinear Approach to Sexual Response

In response to to Masters & Johnson, linear model (where there is a start, a middle, and a finish line) and Kaplan's incomplete model, Rosemary Basson articulated a more complex, circular model of sexual response. Basson's circular diagram shows how sex is cyclical: desire often comes in response to something else, like a touch or an erotic conversation. If the sex is hot, even the fading memory of it could become motivation for more sex/arousal later on. Finally, sexual encounters don't have to end with a mutual orgasm. They end with satisfaction, however a couple defines that, whether that's five orgasms or none.

While this model was first conceptualized with female sexuality in mind, it's applicable to all.

The Dual Control Model

This model was developed by former Kinsey Institute director Dr. John Bancroft and Dr. Erick Janssen in the late 1990s. It "proposes that two basic processes underlie human sexual response: excitation (responding with arousal to sexual stimuli) and inhibition (inhibiting sexual arousal)" (Hyde & DeLamater, 2017, p. 191). We have evolutionarily developed an inhibition aspect to the sexual response process to protect us from dying. Imagine you are in the middle of having sex and a dinosaur begins to run at you. Survival requires the ability to inhibit sexual arousal to focus on getting away to safety. Or, perhaps a more realistic example could be masturbating in the privacy of a bedroom when there is a sudden knock on the door and mom saying she is coming in. Mom is not a dinosaur but she is going to have that same inhibiting impact.

This perspective also explores the reason why some people may be more easily aroused by sexual stimuli while others may be less impacted. Every person has their own degree of excitation and inhibition similar to how each person has different tolerances for loud sounds or pain. If a person has high excitation and low inhibition, it may be easier for them to become aroused and take more time to return to homeostasis. Touch and sensations may be heightened and they may require less stimulation to reach orgasm. On the other hand, if someone has low excitation and high inhibition, sexual stimuli may be less arousing and they may require a broader range of sensual stimulation to achieve orgasm. Excitation and inhibition are negatively correlated with one another because as one increases the other decreases.

We are genetically predisposed to having a certain combination of sexual excitation and inhibition. However, the dual control model also recognizes that there are cognitive factors shaping this process. Our experiences impact the interpretation of the senses and can cause heightened distress or increased tolerance. Early learning and culture can then drastically shape someone's excitation and inhibition combination. Many researchers liken it to having both a gas pedal (excitation or SES) and a brake pedal (inhibition or SIS) in a car – people will often engage one or both pedals to a differing degree in any particular sexual situation, depending on their unique sexual physiology, history, and personality.

In thinking about intersecting identities, how could generation, physical health, mental health, religion, education, family background, financial resources, body image, and more influence excitation and inhibition? What messages about various sexual behaviors have you internalized, and how might this influence your neurological sexual response? Having a conversation with your partners about their degree of excitation and inhibition can be helpful to know in relation to your own as well.

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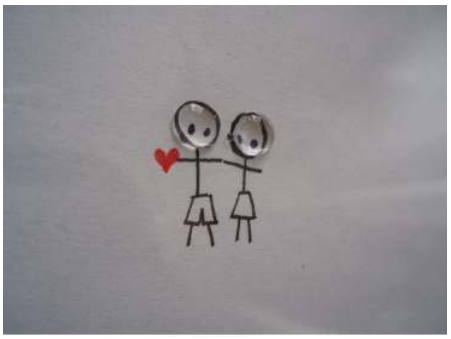
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12.9: The Biochemistry of Love

4.6: The Biochemistry of Love

Love is deeply biological. It pervades every aspect of our lives and has inspired countless works of art. Love also has a profound effect on our mental and physical state. A “broken heart” or a failed relationship can have disastrous effects; bereavement disrupts human physiology and may even precipitate death. Without loving relationships, humans fail to flourish, even if all of their other basic needs are met. As such, love is clearly not “just” an emotion; it is a biological process that is both dynamic and bidirectional in several dimensions. Social interactions between individuals, for example, trigger cognitive and physiological processes that influence emotional and mental states. In turn, these changes influence future social interactions. Similarly, the maintenance of loving relationships requires constant feedback through sensory and cognitive systems; the body seeks love and responds constantly to interactions with loved ones or to the absence of such interactions. The evolutionary principles and ancient hormonal and neural systems that support the beneficial and healing effects of loving relationships are described here.

Introduction to the Study of Love



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Although evidence exists for the healing power of love, only recently has science turned its attention to providing a physiological explanation for love. The study of love in this context offers insight into many important topics, including the biological basis of interpersonal relationships and why and how disruptions in social bonds have such pervasive consequences for behavior and physiology. Some of the answers will be found in our growing knowledge of the neurobiological and endocrinological mechanisms of social behavior and interpersonal engagement.

The evolution of social behavior

Nothing in biology makes sense except in the light of evolution. Life on earth is fundamentally social: The ability to dynamically interact with other living organisms to support mutual homeostasis, growth, and reproduction evolved very early. Social interactions are present in primitive invertebrates and even among prokaryotes: Bacteria recognize and approach members of their own species. Bacteria also reproduce more successfully in the presence of their own kind and are able to form communities with physical and chemical characteristics that go far beyond the capabilities of the individual cell (Ingham & Ben-Jacob, 2008).

The evolutionary pathways that led from reptiles to mammals allowed the emergence of the unique anatomical systems and biochemical mechanisms that enable social engagement and selectively reciprocal sociality. Reptiles show minimal parental investment in offspring and form nonselective relationships between individuals. Pet owners may become emotionally attached to their turtle or snake, but this relationship is not reciprocal. In contrast, most mammals show intense parental investment in offspring and form lasting bonds with their children. Many mammalian species—including humans, wolves, and prairie voles—also develop long-lasting, reciprocal, and selective relationships between adults, with several features of what humans experience as “love.” In turn, these reciprocal interactions trigger dynamic feedback mechanisms that foster growth and health.

What is love? An evolutionary and physiological perspective

Human love is more complex than simple feedback mechanisms. Love may create its own reality. The biology of love originates in the primitive parts of the brain—the emotional core of the human nervous system—which evolved long before the cerebral cortex. The brain “in love” is flooded with vague sensations, often transmitted by the vagus nerve, and creating much of what we experience as emotion. The modern cortex struggles to interpret love’s messages, and weaves a narrative around incoming visceral experiences, potentially reacting to that narrative rather than to reality. It also is helpful to realize that mammalian social behavior is

supported by biological components that were repurposed or co-opted over the course of mammalian evolution, eventually permitting lasting relationships between adults.

Stress and love

Emotional bonds can form during periods of extreme duress, especially when the survival of one individual depends on the presence and support of another. There also is evidence that oxytocin is released in response to acutely stressful experiences, perhaps serving as hormonal “insurance” against overwhelming stress. Oxytocin may help to ensure that parents and others will engage with and care for infants; develop stable, loving relationships; and seek out and receive support from others in times of need.

The absence of love in early life can be detrimental to mental and physical health

During early life in particular, trauma or neglect may produce behaviors and emotional states in humans that are socially pathological. Because the processes involved in creating social behaviors and social emotions are delicately balanced, these be may be triggered in inappropriate contexts, leading to aggression toward friends or family. Alternatively, bonds may be formed with prospective partners who fail to provide social support or protection.



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Loving relationships in early life can have epigenetic consequences

Love is “epigenetic.” That is, positive experiences in early life can act upon and alter the expression of specific genes. These changes in gene expression may have behavioral consequences through simple biochemical changes, such as adding a methyl group to a particular site within the genome (Zhang & Meaney, 2010). It is possible that these changes in the genome may even be passed to the next generation.

Although we are all born with a finite set of genes, experiences in childhood will cause some genes to express themselves (e.g., encourage certain personality traits), while other genes will remain dormant.

Social behaviors, emotional attachment to others, and long-lasting reciprocal relationships also are both plastic and adaptive, and so is the biology upon which they are based. For example, infants of traumatized or highly stressed parents might be chronically exposed to vasopressin, either through their own increased production of the peptide, or through higher levels of vasopressin in maternal milk. Such increased exposure could sensitize the infant to defensive behaviors or create a lifelong tendency to overreact to threat. Based on research in rats, it seems that in response to adverse early experiences of chronic isolation, the genes for vasopressin receptors can become upregulated (Zhang et al., 2012), leading to an increased sensitivity to acute stressors or anxiety that may persist throughout life.

Epigenetic programming triggered by early life experiences is adaptive in allowing neuroendocrine systems to project and plan for future behavioral demands. But epigenetic changes that are long-lasting also can create atypical social or emotional behaviors (Zhang & Meaney, 2010) that may be especially likely to surface in later life, and in the face of social or emotional challenges.

Exposure to exogenous hormones in early life also may be epigenetic. For example, prairie voles treated postnatally with vasopressin (especially males) were later more aggressive, whereas those exposed to a vasopressin antagonist showed less aggression in adulthood. Conversely, in voles the exposure of infants to slightly increased levels of oxytocin during development increased the tendency to show a pair bond. However, these studies also showed that a single exposure to a higher level of oxytocin in early life could disrupt the later capacity to pair bond (Carter et al., 2009).

There is little doubt that either early social experiences or the effects of developmental exposure to these neuropeptides holds the potential to have long-lasting effects on behavior. Both parental care and exposure to oxytocin in early life can permanently modify hormonal systems, altering the capacity to form relationships and influence the expression of love across the life span. Our preliminary findings in voles further suggest that early life experiences affect the methylation of the oxytocin receptor gene and its expression (Connelly, Kenkel, Erickson, & Carter, 2011). Thus, we can plausibly argue that love is epigenetic.

The absence of social behavior or isolation also has consequences for the oxytocin system

Given the power of positive social experiences, it is not surprising that a lack of social relationships also may lead to alterations in behavior as well as changes in oxytocin and vasopressin pathways. We have found that social isolation reduced the expression of the gene for the oxytocin receptor, and at the same time increased the expression of genes for the vasopressin peptide. In female prairie voles, isolation also was accompanied by an increase in blood levels of oxytocin, possibly as a coping mechanism. However, over time, isolated prairie voles of both sexes showed increases in measures of depression, anxiety, and physiological arousal, and these changes were observed even when endogenous oxytocin was elevated. Thus, even the hormonal insurance provided by endogenous oxytocin in face of the chronic stress of isolation was not sufficient to dampen the consequences of living alone. Predictably, when isolated voles were given additional exogenous oxytocin, this treatment did restore many of these functions to normal (Grippo, Trahanas, Zimmerman, Porges, & Carter, 2009).

In modern societies, humans can survive, at least after childhood, with little or no human contact. Communication technology, social media, electronic parenting, and many other recent technological advances may reduce social behaviors, placing both children and adults at risk for social isolation and disorders of the autonomic nervous system, including deficits in their capacity for social engagement and love (Porges, 2011).

Social engagement actually helps us to cope with stress. The same hormones and areas of the brain that increase the capacity of the body to survive stress also enable us to better adapt to an ever-changing social and physical environment. Individuals with strong emotional support and relationships are more resilient in the face of stressors than those who feel isolated or lonely. Lesions in various bodily tissues, including the brain, heal more quickly in animals that are living socially versus in isolation (Karelina & DeVries, 2011). The protective effects of positive sociality seem to rely on the same cocktail of hormones that carries a biological message of “love” throughout the body.

Can love—or perhaps oxytocin—be a medicine?



"your love is like bad medicine" by Rakka is licensed under CC BY-NC-ND 2.0.

Although research has only begun to examine the physiological effects of these peptides beyond social behavior, there is a wealth of new evidence showing that oxytocin can influence physiological responses to stress and injury. As only one example, the molecules associated with love have restorative properties, including the ability to literally heal a “broken heart.” Oxytocin receptors are expressed in the heart, and precursors for oxytocin appear to be critical for the development of the fetal heart (Danalache, Gutkowska, Slusarz, Berezowska, & Jankowski, 2010). Oxytocin exerts protective and restorative effects in part through its capacity to convert undifferentiated stem cells into cardiomyocytes. Oxytocin can facilitate adult neurogenesis and tissue repair, especially after a stressful experience. We now know that oxytocin has direct anti-inflammatory and antioxidant properties in in vitro models of atherosclerosis (Szeto et al., 2008). The heart seems to rely on oxytocin as part of a normal process of protection and self-healing. Researchers are interested in the medical/therapeutic potential of oxytocin.

Thus, oxytocin exposure early in life not only regulates our ability to love and form social bonds, it also affects our health and well-being. Oxytocin modulates the hypothalamic–pituitary adrenal (HPA) axis, especially in response to disruptions in homeostasis (Carter, 1998), and coordinates demands on the immune system and energy balance. Long-term, secure relationships provide

emotional support and down-regulate reactivity of the HPA axis, whereas intense stressors, including birth, trigger activation of the HPA axis and sympathetic nervous system. The ability of oxytocin to regulate these systems probably explains the exceptional capacity of most women to cope with the challenges of childbirth and childrearing.

Dozens of ongoing clinical trials are currently attempting to examine the therapeutic potential of oxytocin in disorders ranging from autism to heart disease. Of course, as in hormonal studies in voles, the effects are likely to depend on the history of the individual and the context, and to be dose-dependent. As this research is emerging, a variety of individual differences and apparent discrepancies in the effects of exogenous oxytocin are being reported. Most of these studies do not include any information on the endogenous hormones, or on the oxytocin or vasopressin receptors, which are likely to affect the outcome of such treatments.

Research in this field is new and there is much left to understand. However, it is already clear that both love and oxytocin are powerful. Of course, with power comes responsibility. Although research into mechanisms through which love—or hormones such as oxytocin—may protect us against stress and disease is in its infancy, this knowledge will ultimately increase our understanding of the way that our emotions impact upon health and disease. The same molecules that allow us to give and receive love also link our need for others with health and well-being.

Conclusion

In this section, we've discussed historical and emerging approaches to sexual response. An important take-away to this section is that sexual responsiveness isn't simply physiological: Psychological factors are also present. At the same time, biology matters and consideration for hormonal and neurological information can be important in our sexual experiences. Keeping an intersectional lens can be a helpful way of learning, evaluating and growing in your own sexual responses.

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https://www.youtube.com/watch?v=HILY0wWBlBM

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CHAPTER OVERVIEW

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13.1: Introduction to Emotional and Mental Health

8.1: Introduction to Emotional and Mental Health

Learning Objectives:

Learning Objectives

- Describe what mental, emotional, and psychological health entails.
- Recognize warning signs of emotional distress
- Relate Maslow's Hierarchy of Needs to emotional health
- Recognize emotional defense mechanisms

Do you feel you are living up to your potential?

Do you find opportunities throughout the day to focus on happiness?

Do you feel good about yourself?

Have you ever felt sad for a prolonged amount of time?

Have you, or do you know someone who has, felt depressed or had anxiety?

Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. Mental health is fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life. Although more emphasis is often placed on our physical wellness, mental and physical health are equally important components of overall health.

Although poor mental health and mental illness are terms that are often used interchangeably, poor mental health and mental illness are not the same. A person can experience poor mental health and not be diagnosed with a mental illness. Likewise, a person diagnosed with a mental illness can experience periods of physical, mental, and social well-being.

According to the World Health Organization:

> - Mental health is more than the absence of mental disorders.
> - Mental health is an integral part of health; indeed, there is no health without mental health.
> - Mental health is determined by a range of socioeconomic, biological and environmental factors

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13.2: Emotion

4.2: Emotion

Why do we do the things we do? What motivations underlie our behaviors? Motivation describes the wants or needs that direct behavior toward a goal. In addition to biological motives, motivations can be intrinsic (arising from internal factors) or extrinsic(arising from external factors) (Figure 10.2). Intrinsically motivated behaviors are performed because of the sense of personal satisfaction that they bring, while extrinsically motivated behaviors are performed in order to receive something from others.

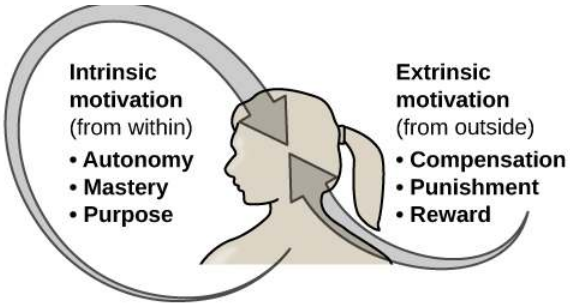


Figure 10.2 Intrinsic motivation comes from within the individual, while extrinsic motivation comes from outside the individual.

Think about why you are currently in college. Are you here because you enjoy learning and want to pursue an education to make yourself a more well-rounded individual? If so, then you are intrinsically motivated. However, if you are here because you want to get a college degree to make yourself more marketable for a high-paying career or to satisfy the demands of your parents, then your motivation is more extrinsic in nature.

In reality, our motivations are often a mix of both intrinsic and extrinsic factors, but the nature of the mix of these factors might change over time (often in ways that seem counter-intuitive). There is an old adage: “Choose a job that you love, and you will never have to work a day in your life,” meaning that if you enjoy your occupation, work doesn’t seem like . . . well, work. Some research suggests that this isn’t necessarily the case (Daniel & Esser, 1980; Deci, 1972; Deci, Koestner, & Ryan, 1999). According to this research, receiving some sort of extrinsic reinforcement (i.e., getting paid) for engaging in behaviors that we enjoy leads to those behaviors being thought of as work no longer providing that same enjoyment. As a result, we might spend less time engaging in these reclassified behaviors in the absence of any extrinsic reinforcement. For example, Odessa loves baking, so in her free time, she bakes for fun. Oftentimes, after stocking shelves at her grocery store job, she often whips up pastries in the evenings because she enjoys baking. When a coworker in the store’s bakery department leaves his job, Odessa applies for his position and gets transferred to the bakery department. Although she enjoys what she does in her new job, after a few months, she no longer has much desire to concoct tasty treats in her free time. Baking has become work in a way that changes her motivation to do it (Figure 10.3). What Odessa has experienced is called the overjustification effect—intrinsic motivation is diminished when extrinsic motivation is given. This can lead to extinguishing the intrinsic motivation and creating a dependence on extrinsic rewards for continued performance (Deci et al., 1999).



Figure 10.3 Research suggests that when something we love to do, like icing cakes, becomes our job, our intrinsic and extrinsic motivations to do it may change. (credit: Agustín Ruiz)

Other studies suggest that intrinsic motivation may not be so vulnerable to the effects of extrinsic reinforcements, and in fact, reinforcements such as verbal praise might actually increase intrinsic motivation (Arnold, 1976; Cameron & Pierce, 1994). In that case, Odessa's motivation to bake in her free time might remain high if, for example, customers regularly compliment her baking or cake decorating skills.

These apparent discrepancies in the researchers' findings may be understood by considering several factors. For one, physical reinforcement (such as money) and verbal reinforcement (such as praise) may affect an individual in very different ways. In fact, tangible rewards (i.e., money) tend to have more negative effects on intrinsic motivation than do intangible rewards (i.e., praise). Furthermore, the expectation of the extrinsic motivator by an individual is crucial: If the person expects to receive an extrinsic reward, then intrinsic motivation for the task tends to be reduced. If, however, there is no such expectation, and the extrinsic motivation is presented as a surprise, then intrinsic motivation for the task tends to persist (Deci et al., 1999).

In educational settings, students are more likely to experience intrinsic motivation to learn when they feel a sense of belonging and respect in the classroom. This internalization can be enhanced if the evaluative aspects of the classroom are de-emphasized and if students feel that they exercise some control over the learning environment. Furthermore, providing students with activities that are challenging, yet doable, along with a rationale for engaging in various learning activities can enhance intrinsic motivation for those tasks (Niemiec & Ryan, 2009). Consider Hakim, a first-year law student with two courses this semester: Family Law and Criminal Law. The Family Law professor has a rather intimidating classroom: He likes to put students on the spot with tough questions, which often leaves students feeling belittled or embarrassed. Grades are based exclusively on quizzes and exams, and the instructor posts results of each test on the classroom door. In contrast, the Criminal Law professor facilitates classroom discussions and respectful debates in small groups. The majority of the course grade is not exam-based, but centers on a student-designed research project on a crime issue of the student's choice. Research suggests that Hakim will be less intrinsically motivated in his Family Law course, where students are intimidated in the classroom setting, and there is an emphasis on teacher-driven evaluations. Hakim is likely to experience a higher level of intrinsic motivation in his Criminal Law course, where the class setting encourages inclusive collaboration and a respect for ideas, and where students have more influence over their learning activities.

Theories About Motivation

William James (1842–1910) was an important contributor to early research into motivation, and he is often referred to as the father of psychology in the United States. James theorized that behavior was driven by a number of instincts, which aid survival (Figure 10.4). From a biological perspective, an instinct is a species-specific pattern of behavior that is not learned. There was, however, considerable controversy among James and his contemporaries over the exact definition of instinct. James proposed several dozen special human instincts, but many of his contemporaries had their own lists that differed. A mother's protection of her baby, the urge to lick sugar, and hunting prey were among the human behaviors proposed as true instincts during James's era. This view—that human behavior is driven by instincts—received a fair amount of criticism because of the undeniable role of learning in shaping all sorts of human behavior. In fact, as early as the 1900s, some instinctive behaviors were experimentally demonstrated to result from associative learning (recall when you learned about Watson's conditioning of fear response in "Little Albert") (Faris, 1921).

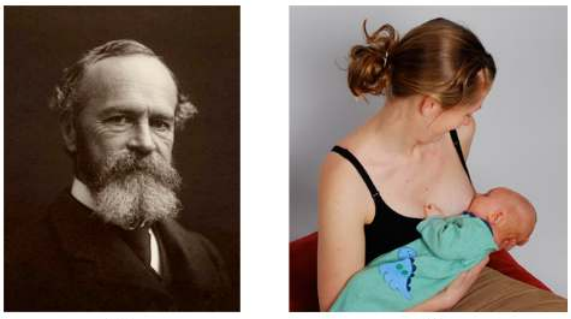


Figure 10.4 (a) William James proposed the instinct theory of motivation, asserting that behavior is driven by instincts. (b) In humans, instincts may include behaviors such as an infant's rooting for a nipple and sucking. (credit b: modification of work by "Mothering Touch"/Flickr)

Another early theory of motivation proposed that the maintenance of homeostasis is particularly important in directing behavior. You may recall from your earlier reading that homeostasis is the tendency to maintain a balance, or optimal level, within a

biological system. In a body system, a control center (which is often part of the brain) receives input from receptors (which are often complexes of neurons). The control center directs effectors (which may be other neurons) to correct any imbalance detected by the control center.

According to the drive theory of motivation, deviations from homeostasis create physiological needs. These needs result in psychological drive states that direct behavior to meet the need and, ultimately, bring the system back to homeostasis. For example, if it's been a while since you ate, your blood sugar levels will drop below normal. This low blood sugar will induce a physiological need and a corresponding drive state (i.e., hunger) that will direct you to seek out and consume food (Figure 10.5). Eating will eliminate the hunger, and, ultimately, your blood sugar levels will return to normal. Interestingly, drive theory also emphasizes the role that habits play in the type of behavioral response in which we engage. A habit is a pattern of behavior in which we regularly engage. Once we have engaged in a behavior that successfully reduces a drive, we are more likely to engage in that behavior whenever faced with that drive in the future (Graham & Weiner, 1996).



Figure 10.5 Hunger and subsequent eating are the result of complex physiological processes that maintain homeostasis. (credit "left": modification of work by "Gracie and Viv"/Flickr; credit "center": modification of work by Steven Depolo; credit "right": modification of work by Monica Renata)

Extensions of drive theory take into account levels of arousal as potential motivators. As you recall from your study of learning, these theories assert that there is an optimal level of arousal that we all try to maintain (Figure 10.6). If we are underaroused, we become bored and will seek out some sort of stimulation. On the other hand, if we are overaroused, we will engage in behaviors to reduce our arousal (Berlyne, 1960). Most students have experienced this need to maintain optimal levels of arousal over the course of their academic career. Think about how much stress students experience toward the end of spring semester. They feel overwhelmed with seemingly endless exams, papers, and major assignments that must be completed on time. They probably yearn for the rest and relaxation that awaits them over the extended summer break. However, once they finish the semester, it doesn't take too long before they begin to feel bored. Generally, by the time the next semester is beginning in the fall, many students are quite happy to return to school. This is an example of how arousal theory works.

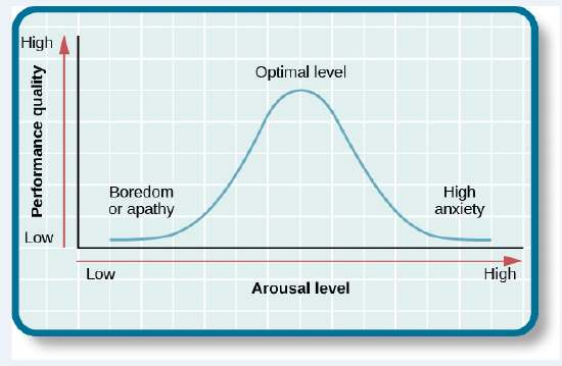


figure 10.6 The concept of optimal arousal in relation to performance on a task is depicted here. Performance is maximized at the optimal level of arousal, and it tapers off during under- and over arousal.

So what is the optimal level of arousal? What level leads to the best performance? Research shows that moderate arousal is generally best; when arousal is very high or very low, performance tends to suffer (Yerkes & Dodson, 1908). Think of your arousal level regarding taking an exam for this class. If your level is very low, such as boredom and apathy, your performance will likely suffer. Similarly, a very high level, such as extreme anxiety, can be paralyzing and hinder performance. Consider the example of a softball team facing a tournament. They are favored to win their first game by a large margin, so they go into the game with a lower level of arousal and get beat by a less skilled team.

But optimal arousal level is more complex than a simple answer that the middle level is always best. Researchers Robert Yerkes (pronounced “Yerk-EES”) and John Dodson discovered that the optimal arousal level depends on the complexity and difficulty of the task to be performed (Figure 10.7). This relationship is known as Yerkes-Dodson law, which holds that a simple task is performed best when arousal levels are relatively high and complex tasks are best performed when arousal levels are lower.

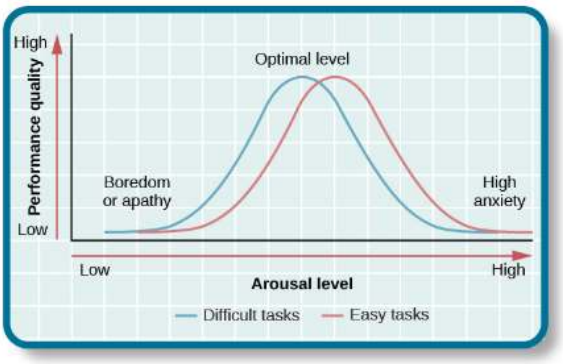


Figure 10.7 Task performance is best when arousal levels are in a middle range, with difficult tasks best performed under lower levels of arousal and simple tasks best performed under higher levels of arousal.

Self-efficacy and Social Motives

Self-efficacy is an individual’s belief in her own capability to complete a task, which may include a previous successful completion of the exact task or a similar task. Albert Bandura (1994) theorized that an individual’s sense of self-efficacy plays a pivotal role in motivating behavior. Bandura argues that motivation derives from expectations that we have about the consequences of our behaviors, and ultimately, it is the appreciation of our capacity to engage in a given behavior that will determine what we do and the future goals that we set for ourselves. For example, if you have a sincere belief in your ability to achieve at the highest level, you are more likely to take on challenging tasks and to not let setbacks dissuade you from seeing the task through to the end.

A number of theorists have focused their research on understanding social motives (McAdams & Constantian, 1983; McClelland & Liberman, 1949; Murray et al., 1938). Among the motives they describe are needs for achievement, affiliation, and intimacy. It is the need for achievement that drives accomplishment and performance. The need for affiliation encourages positive interactions with others, and the need for intimacy causes us to seek deep, meaningful relationships. Henry Murray et al. (1938) categorized these needs into domains. For example, the need for achievement and recognition falls under the domain of ambition. Dominance and aggression were recognized as needs under the domain of human power, and play was a recognized need in the domain of interpersonal affection.

Maslow’s Hierarchy of Needs

While the theories of motivation described earlier relate to basic biological drives, individual characteristics, or social contexts, Abraham Maslow (1943) proposed a hierarchy of needs that spans the spectrum of motives ranging from the biological to the individual to the social. These needs are often depicted as a pyramid (Figure 10.8).

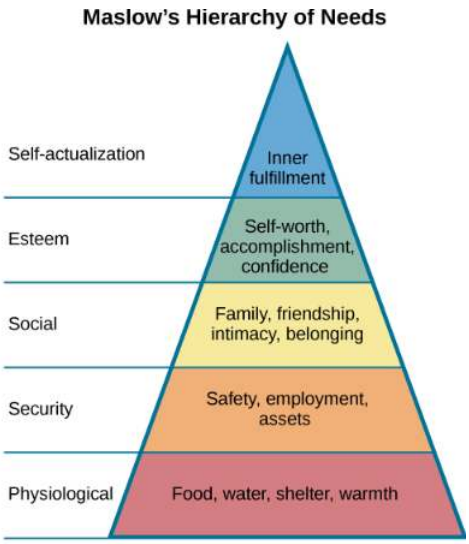


Figure 10.8 Maslow's hierarchy of needs is illustrated here. In some versions of the pyramid, cognitive and aesthetic needs are also included between esteem and self-actualization. Others include another tier at the top of the pyramid for self-transcendence.

At the base of the pyramid are all of the physiological needs that are necessary for survival. These are followed by basic needs for security and safety, the need to be loved and to have a sense of belonging, and the need to have self-worth and confidence. The top tier of the pyramid is self-actualization, which is a need that essentially equates to achieving one's full potential, and it can only be realized when needs lower on the pyramid have been met. To Maslow and humanistic theorists, self-actualization reflects the humanistic emphasis on positive aspects of human nature. Maslow suggested that this is an ongoing, life-long process and that only a small percentage of people actually achieve a self-actualized state (Francis & Kritsonis, 2006; Maslow, 1943).

According to Maslow (1943), one must satisfy lower-level needs before addressing those needs that occur higher in the pyramid. So, for example, if someone is struggling to find enough food to meet his nutritional requirements, it is quite unlikely that he would spend an inordinate amount of time thinking about whether others viewed him as a good person or not. Instead, all of his energies would be geared toward finding something to eat. However, it should be pointed out that Maslow's theory has been criticized for its subjective nature and its inability to account for phenomena that occur in the real world (Leonard, 1982). Other research has more recently addressed that late in life, Maslow proposed a self-transcendence level above self-actualization—to represent striving for meaning and purpose beyond the concerns of oneself (Koltko-Rivera, 2006). For example, people sometimes make self-sacrifices in order to make a political statement or in an attempt to improve the conditions of others. Mohandas K. Gandhi, a world-renowned advocate for independence through nonviolent protest, on several occasions went on hunger strikes to protest a particular situation. People may starve themselves or otherwise put themselves in danger displaying higher-level motives beyond their own needs.

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SECTION OVERVIEW

13.2.1: Emotion and Mood

13.2.1.1: Foundational and Contemporary Theories of Emotion

13.2.1.2: What Category of Feelings Are Considered as the “Basic Emotions”?

13.2.1.3: What Is the Contribution of Brain Structures in Emotional States?

13.2.1.4: Mood and Emotional Disorders Associated with Depression

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13.2.1.1: Foundational and Contemporary Theories of Emotion

Learning Objectives

By the end of this section, you should be able to

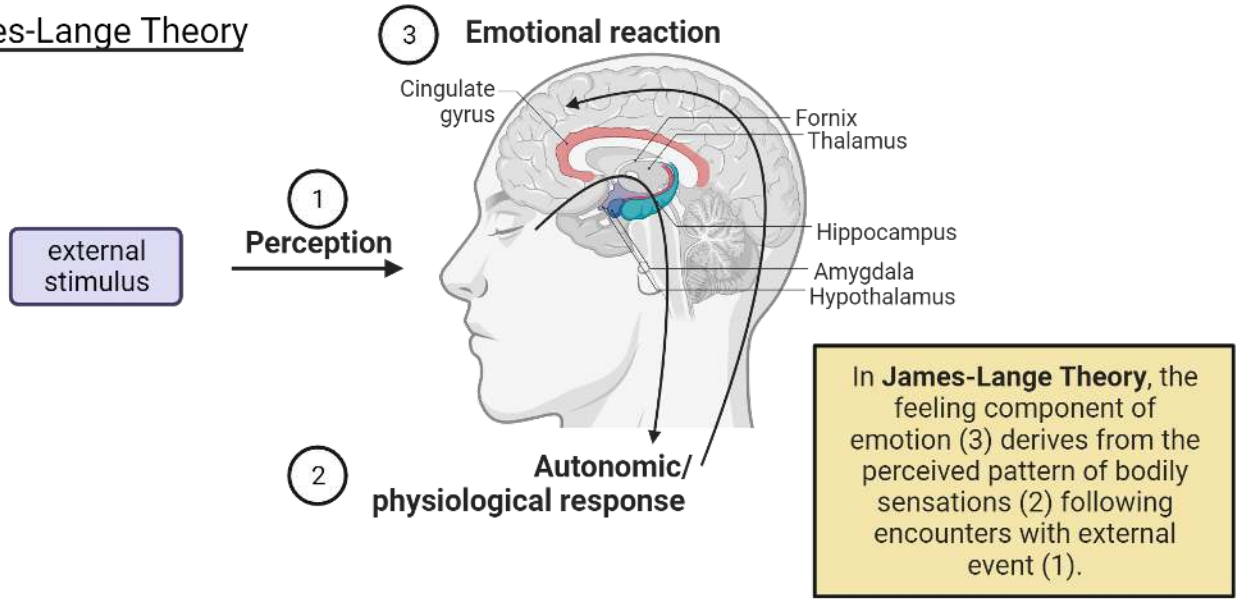
- 13.1.1 Discuss the similarities and differences between the early theories of emotion.
- 13.1.2 Understand the shortcomings of early theories of emotion and list some specific behavioral conditions that early theories cannot adequately explain.
- 13.1.3 .Describe how the shortcomings of early theories led to more contemporary theories of emotion that describe emotions as complex interactions between cognitive, neural and physiological changes to external events

Three interrelated variables are presented repeatedly throughout this chapter to discuss the most important factors underlying emotions. The first involves the environmental context we inhabit. The environmental context is the source of ever-changing external stimuli and events that are perceived by the organism. Second, stimuli encompassing a given context possess the capacity to elevate or reduce bodily or physiological states by their impact on sympathetic or parasympathetic divisions of the autonomic nervous system, respectively. Third, autonomic changes, in turn, influence brain systems that appraise environment-body interactions, and provide cognitive resources to generate the broad range of conscious emotions and the behavioral responses to adapt appropriately to environmental events. Although each variable is vital in the generation of emotions, we shall see below that the major theories differ in their explanations of how each component of this triad, contributes to the conscious development of feelings, mood and emotions.

James Lange

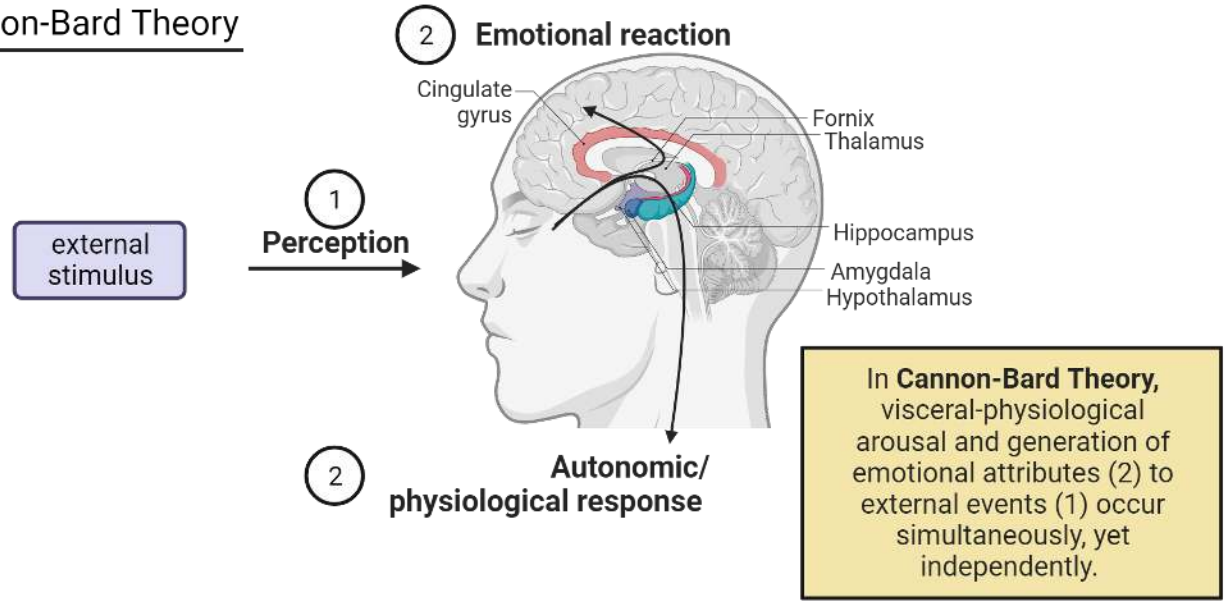
William James (1884) and Carl Lange (1885) independently proposed a theory to explain how the experience of emotion influences behavior. Their collective views became known as the James-Lange theory of emotion. According to their understanding, “the conscious experience of emotion develops, only after an organism’s perception of its body’s level of autonomic arousal” to some external stimulus or event (see Step #3 in Figure 13.3).

James-Lange Theory



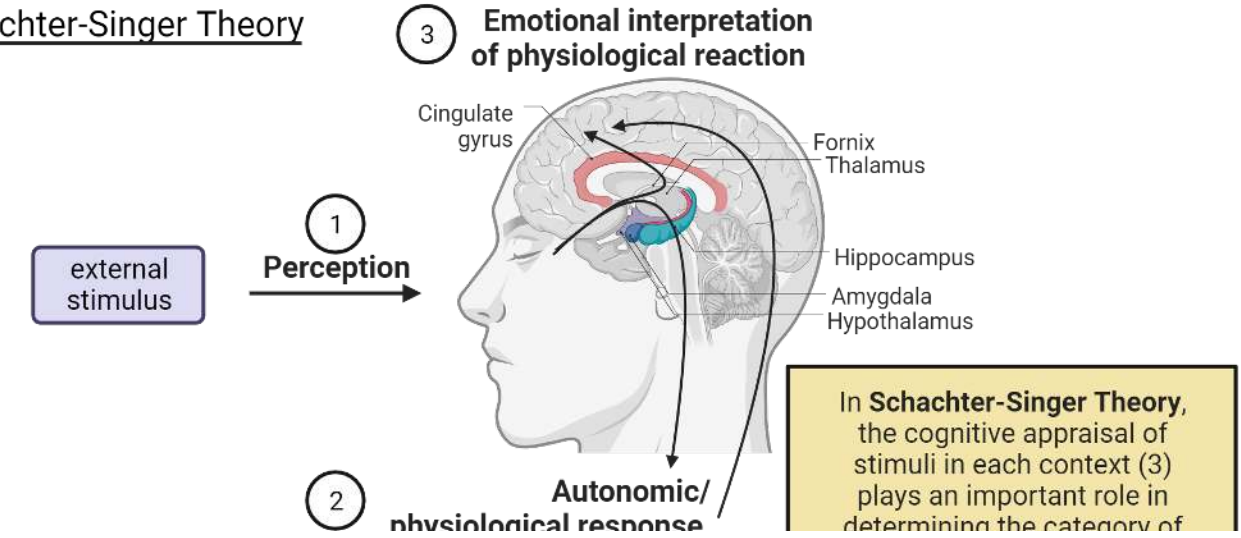
In **James-Lange Theory**, the feeling component of emotion (3) derives from the perceived pattern of bodily sensations (2) following encounters with external event (1).

Cannon-Bard Theory



In **Cannon-Bard Theory,** visceral-physiological arousal and generation of emotional attributes (2) to external events (1) occur simultaneously, yet independently.

Schachter-Singer Theory



In **Schachter-Singer Theory**, the cognitive appraisal of stimuli in each context (3) plays an important role in determining the category of

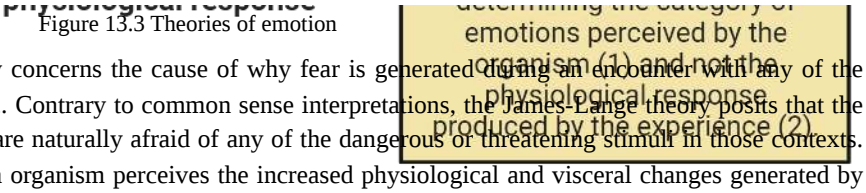


Figure 13.3 Theories of emotion

One common example to describe their theory concerns the cause of why fear is generated during an encounter with any of the three pictures in the second row of Figure 13.2. Contrary to common sense interpretations, the James-Lange theory posits that the emotion of fear is not developed because you are naturally afraid of any of the dangerous or threatening stimuli in those contexts. Rather, the feeling of fear is generated *after* an organism perceives the increased physiological and visceral changes generated by the autonomic nervous system following direct experience with those events. Put simply, we become afraid not because of the stimulus, but because of the internal physiological changes the stimulus produces within us. *That is, the feeling component of emotion derives from the perceived pattern of bodily sensations following encounters with external events.*The James-Lange theory places an emphasis on autonomic specificity, which assumes that different patterns of physiological arousal shown as Step #2 in Figure 13.3 (e.g. elevations or reductions in heart rate, respiration, blood pressure, skin conductance, secretion of adrenal hormones, etc.) are the basis for the experience of distinct emotional states or feelings that are given the labels of fear, happiness, anger, sadness or the like. Several empirical studies report that discrete patterns of autonomic nervous system responses to a given external stimulus are correlated with the differentiation of separate emotion categories (Stephens, Christie and Friedman, 2010). For example, it is well-documented that the emotions of sadness or fear can be produced by exposing human participants to visual film clips or auditory stimuli. These types of experiments report that the emotion of fear is accompanied by predicted changes in heart rate acceleration, elevated blood pressure, increased skin conductance and faster respiration (Kreibig et al., 2007; Bosch et al., 2001). In contrast, laboratory conditions that induce the emotion of sadness produce consistent decelerations in cardiac functioning, deep and slow breathing and increased activation of the corrugator supercilii and zygomaticus facial muscles that have a dedicated role in producing frowning and other related facial expressions that correspond to suppressed mood states (Bosch et al., 2001; Ritz, et al., 2005).

The James-Lange theory is known as a bottom-up theory because, as Figure 13.3 illustrates, exposure to external stimuli (1) directly impacts physiological activity in the peripheral autonomic nervous system (2), that in turn is projected to the brain (3) to produce emotional reactions. Thus, the behavioral responses of fleeing from, or completely freezing to, some threatening stimulus will, according to James, elicit heightened visceral activity. Perception of these elevated bodily changes is the critical factor, James assumes, that leads to the direct *feeling of fear*. James supported his argument by stating that when emotions are stripped of their *bodily manifestations*, they are no longer emotions, but simply cold and neutral states of intellection perception (James, 1884, p. 193). Moreover, James suggested to imagine feeling sad without tears or sighing; feeling angry in the absence of muscle tension or heat in the face; experiencing fear when there is no racing of the heart or unsettling reactions in the stomach. Because this is not possible, James contends that *bodily responses* are necessary for the subjective feelings and play a causal role in generating those feelings that are commonly known as emotions.

Cannon-Bard

An extension of the James-Lange theory was proposed by Walter Cannon and his graduate student Philp Bard. Their theory came from observations of experiments in physiology and emotion in cats. The Cannon-Bard theory challenged James' initial propositions on three separate grounds. First, they asserted that autonomic and visceral changes that follow exposure to external stimuli develop much too slowly to generate the type of emotional feelings that occur almost instantaneously when organisms are exposed to emotion-provoking stimuli. Second, artificially generating visceral changes in the body by injecting the stress hormone adrenaline to increase sympathetic drive does not always induce discrete conscious emotions (Schachter and Singer 1962). Moreover, when visceral reactions are blocked pharmacologically with drugs, the perception and feeling of emotional reactions are not abolished (Reisenzein, 1983). The Cannon-Bard position was also strengthened by the finding that their cats continued to display species typical emotional reactions to threatening stimuli, even when signals representing heightened physiological states were blocked. They interrupted the flow of updated information from the viscera to the brain by severing visceral and spinal nerves that normally transmit important fluctuations in bodily states to discrete brain structures. Despite the absence of intact nerves to relay elevated changes in the viscera to the brain, Cannon and Bard observed that presentation of a threatening canine still elicited emotional reactions such as hissing, fighting responses or reflexive muscular responses leading to piloerection in their denervated cats. Similar findings are reported in humans who continue to display appropriate emotional reactions to events, even after spinal cord transections from accidents or surgery interrupt the flow of communication regarding changes in autonomic activity to the brain (Bermond, Niewenhuyse, Fasotti & Schuerman, 1991).

Cannon and Bard also noted the extensive number of visceral organs in the autonomic nervous system that show changes in activity to salient stimuli from the environment (e.g. heart, lungs, adrenals, stomach, liver, etc). As such, they concluded that the body's anatomy contains an insufficient number of nerves to convey the multiple changes across these organs to brain systems involved in generating conscious differences in emotional experiences. Based upon these limitations, the Cannon-Bard theory took issue with the neat sequential three-stage explanations of James-Lang and as depicted in Figure 13.3. They expanded this view by asserting that during an encounter with external stimuli (1), the thalamus is activated by the external event. The thalamus then sends the information in two simultaneous directions. It relays the specifics of the encounter to cerebral cortical structures (e.g. prefrontal, cingulate and insula cortex) to appraise the possible danger, safety or other emotional features of an experience (3). It also sends neural signals to subcortical structures such as the hypothalamus and amygdala to initiate physiological reactions in the body to adapt to the specific nature of the experience (2).

The Cannon-Bard theory of emotion introduces the idea that visceral-physiological arousal and generation of emotional attributes to external events occur simultaneously, yet independently. Therefore, exposure to an alerting event such as a vicious canine or hissing snake will result in the feeling of fear during the same time that the body shows adaptive increases in sympathetic activation to initiate the behavioral response of fleeing or freezing to the external event. In contrast to the James-Lange theory, this viewpoint is considered a top-down theory since the initiation of emotional states are generated in cortical regions of the brain, and downstream projections from the thalamus to hypothalamus are attributed a role in producing the visceral physiological reactions in the organs of the body.

Schachter-Singer Two-Factor view

Stanley Schacter and Jerome Singer developed a theory of how human emotions evolve by incorporating the main premises from both Cannon-Bard and James-Lange. As such, it was named the two-factor theory since emotions were proposed to develop from interactions between autonomic physiological changes in the body with cognitive appraisals generated in the brain. According to the Two-Factor theory, (1) encounters with broad categories of external stimuli will (2) elicit increased autonomic activity within the body. However, (3) the brain plays an important role in *interpreting the context* in which the changes are elicited, before assigning a label or discrete emotion to the feelings that are experienced. This appraisal process involves obtaining knowledge regarding the nature of the immediate context and evaluating the personal significance (i.e. beneficial, harmful, rewarding, etc.) of what is happening in the environment. For example, encountering a hissing snake that jumps into the air will unmistakably evoke increased physiological arousal whether it is encountered in the woods, or while viewing an exhibit with a snake handler at a zoo. The Two-Factor theory proposes that although bodily changes are heightened in both circumstances, cognitive appraisal of the respective contexts will determine whether the emotion of fear and responses of startle and fleeing are generated in the woods, or the emotion of amazement or being astounded, surprised and entertained develops in the context of the zoo. Thus, cognitive interpretations of the actual items, events or stimuli in a context interact cooperatively with changes in body physiology to determine the exact label the brain assigns as a bona-fide emotion. It is these interactions that capture the true essence of any meaning we derive from a given experience.

The significance of cognitive processes and their importance in interpreting contextual attributes prior to assigning emotional labels was nicely illustrated in a well-cited study by the authors of this theory (Schacter & Singer, 1962). *Contextual influences* were assessed by assigning human participants to groups that completed a survey of subjective emotional reactions. Participants were assigned to either a pleasant context containing a euphoric actor or an unpleasant context where the actor was instructed to display a great deal of anger, pessimism, or discontent (Figure 13.4). *Physiological changes* were induced in participants by injecting either a placebo drug consisting of saline (0.9% NaCl) or the stress hormone epinephrine to produce arousal and physiological changes (i.e. increased heart rate, sweating, etc.) via the autonomic nervous system. The relative impact of *cognitive interpretive processing* on emotional perception was assessed by informing one group of the reactions to expect from the injection (i.e. you will experience a change in heart rate), while providing no information regarding the effects of the stress hormone to a second group.

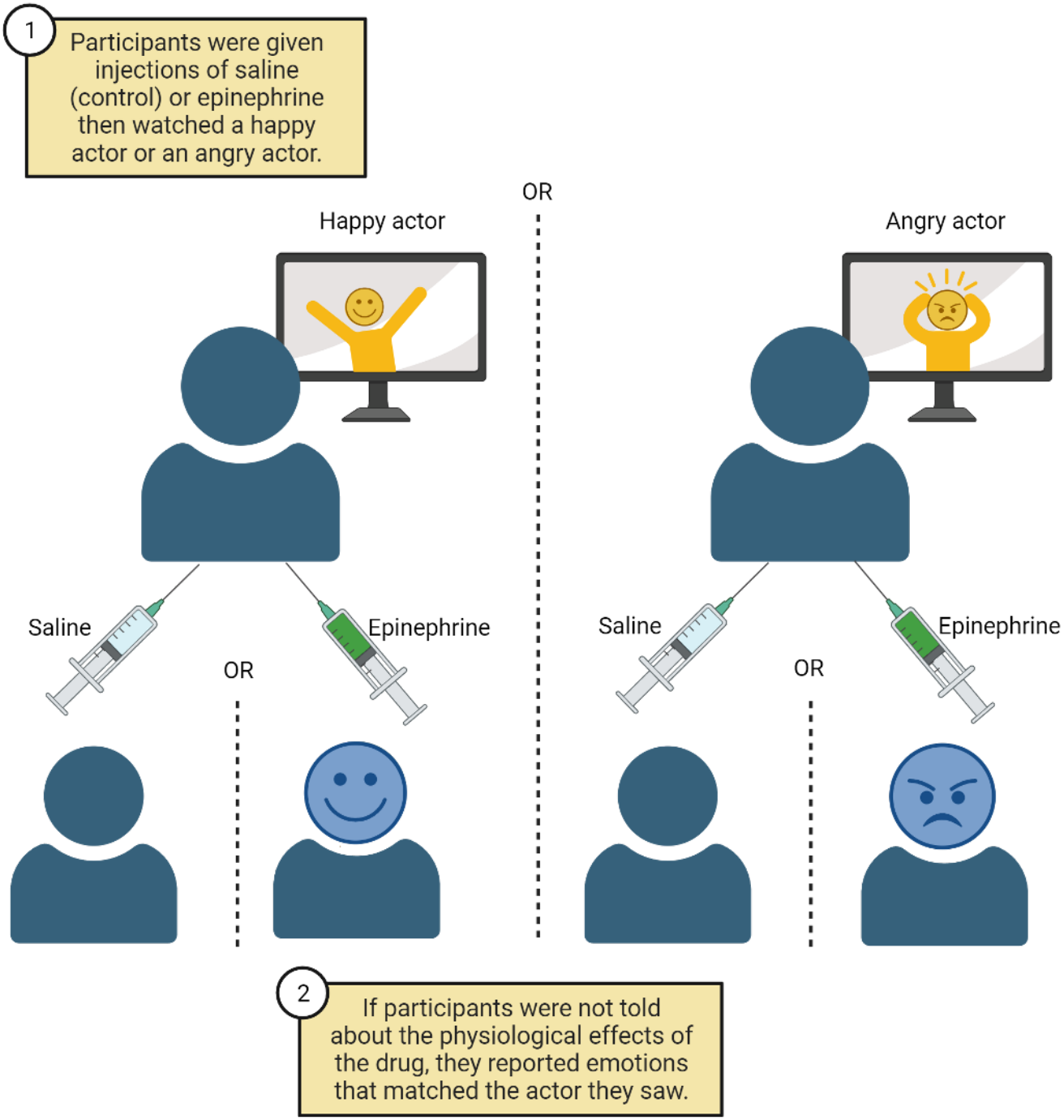


Figure 13.4 Schachter-Singer experiment

The most striking finding from this experiment is that the group given adrenaline and not informed about its effects reported intense emotional reactions. This finding supports the James-Lange viewpoint. However, the specific emotion experienced (i.e. euphoria or anger) actually matched the *emotion displayed by the actor placed in the CONTEXT* where unsuspecting participants completed the subjective emotional questionnaires. Thus, epinephrine-injected participants placed with the euphoric actor reported intense pleasant feelings, whereas epinephrine-injected participants grouped with the angry actor experienced intense anger. It should be noted that only mild emotional responses were reported in participants *informed about the reactions of the adrenaline injection* and placed in either the happy or angry context. The authors noted that only mild responses were reported in these participants because they attributed the changes in physiological and emotional state directly to their knowledge (i.e. cognitive

appraisal) regarding the actions of the injection *and not to the actors*. Taken together, both findings reveal that bodily/physiological changes may intensify any emotional experience but more importantly, *the cognitive appraisals of the context* in which these bodily changes occur has a direct impact on the type of emotion attributed to any given experience and the corresponding behaviors that are manifested therein.

To shed light on the distinctions between the Schachter-Singer and James-Lange models, consider how the experience of riding a thrilling roller coaster versus enduring extreme turbulence while flying in an airplane, may lead to completely opposing emotional reactions. Both conditions involve rapid changes in velocity or speed, unsteady elevated and dropping movements that lead to a bumpy uncomfortable ride. Both conditions also produce profound elevations in cardiac output, blood pressure and a number of other autonomic physiological variables. Despite the similarity in physiological changes produced by both conditions, most individuals experience emotions of joy, excitement and exhilaration after a roller coaster ride, while the emotions of fear, helplessness and worry are generally attributed to undergoing turbulence during an airplane flight. Notice that both experiences produce similar physiological outcomes. Yet, the emotions attributed to each are totally dependent on how the brain *interprets the context* that physiological changes occur in, prior to assigning labels to the conscious emotion that is experienced. In the context of the roller coaster, you are likely to view others laughing, raising their arms in excitement, and smiling widely. In contrast, the context of the turbulent flight may be filled with others displaying facial signs of distress and fear, as well as auditory signs such as sighs or moans, etc. This example reveals a shortcoming of the James-Lange theory of autonomic specificity that assumes specific categories of subjective emotions are produced by distinct physiological signatures. *According to the Schachter-Singer model, the cognitive appraisal of stimuli in each context, plays an important role in determining the category of emotions perceived by the organism and not the physiological response produced by the experience.*

Appraisal Theory Perspectives

There are several other viewpoints of emotion that belong to the category of appraisal-based theories. These theories are similar to the Schacter-Singer model in stressing that the same external event will not produce identical emotions across all individuals. Appraisal theories assert that emotional reactions are very different from one individual to another because of several complex processes that are initiated collectively to produce a final emotion. The foundation of these theories stress that what produces emotional reactions *is not the stimuli we encounter externally*, but how we *subjectively interpret or appraise* these stimuli relative to several personal variables. These variables include the meaning that external stimuli present in terms of our goals in life and concerns regarding our own well-being, as well as that of others, our job, country, etc.

Magda Arnold (1960) was one of the first Appraisal theorists who believed that physiological changes are not the only basis for emotional feelings. Rather, the act of cognitive appraisal of daily experiences is the defining feature and cause of emotional reactions. This view was later echoed by Richard Lazarus (1977) who also advanced the idea that appraisal *causes emotions*. The emotions are then ultimately expressed internally through physiological and motivational changes, and externally through behavioral responses. A defining feature of most of Appraisal theories is the insistence that emotions are not generated solely as reactions to events faced on a daily basis in the world. Instead, emotions are responses to our “ongoing relationships with the environment”, that result in our evaluation of whether a given array of stimuli and events will serve to benefit or harm us (Lazarus, 1991). Lazarus viewed the Appraisal process in terms of two separate themes. The first identifies emotions as a consequence of forming evaluative judgments that renders meaning to our circumstances. The second concerns the role of emotions, as Appraisal theories provide a nice extension to the propositions developed by Schacter-Singer. They do so by defining the category or types of appraisals employed to evaluate the significance and relevance of circumstances we find ourselves in daily.

Here is how Lazarus describes these processes:

“This approach to emotion contains two basic themes: First, emotion is a response to evaluative judgments or meaning; second, these judgments are about ongoing relationships with the environment, namely how one is doing in the agenda of living and whether the encounter of the environment is one of harm or benefit.”

The following list is not exhaustive but summarizes the types of appraisal dimensions organisms consider while appraising not only the context, but also the potential value any new experience presents to them. Appraisal theories assert that, for any environmental encounter, the resulting emotion is a product of the individual evaluating the present situation relative to 1) *novelty*, or whether or not we have ever experienced this set of features before, 2) *expectedness*, is this event predictable based upon the configuration of environmental events, 3) *pleasantness*, is the circumstance one that will be positive and beneficial or aversive and bad for me, 4)

goal oriented, is the situation congruent with my present goals or a distraction, 5) *fairness*, is the circumstance fair and just or dishonest and deceitful, 6) *control*, can I control the present events or is the locus of control outside of my responding, 7) *certainty*, which is similar to *expectedness* in being capable of predicting the outcome of this encounter, 8) *morality*, is the event in line with my concepts of what is or is not morally acceptable, and 9) *self-concept relevance*, will this event influence how I feel or view myself.

Answers derived from evaluating how new events rate on these, or a subset of these, dimensions determine how a given event will produce the emotion of happiness, sadness, fear, anger, same, disgust, or any combination of these states. Richard Lazarus (1991) categorized the list of appraisal dimensions into either primary appraisals or secondary appraisals. The former term is used to denote the type of assessments that directly influence an organism's well-being such as whether a given encounter is *goal oriented*, *pleasant*, *fair*, has *relevance to self-concept* or grouped collectively will impact how an organism will feel about itself. As such, primary appraisals determine the type of emotional response to any new encounter. *Secondary* appraisals assess how well one may be able to cope with a new encounter. These evaluations are derived by considering the appraisal dimensions of *expectedness*, *fairness* , *control* and *certainty*. Assessment of these dimensions allows organisms to reach the conclusion of whether they are competent enough to address the conditions of a new experience, or alternatively, if the present circumstances will require some form of emotion regulation to accept the lack of control of any given event.

Constructionist Theory view

Constructionist theories of emotion believe the memories representing your previous encounters with natural or inanimate objects, living organisms or personal episodes involving these events play an important role in generating emotions. According to this view, the vast reservoir of stored information regarding previously experienced stimuli, your reaction to these events, and the outcome of your responses is used by the brain to provide some of the conceptual meaning or perceptions to any new experiences an organism will face. The Constructionist's perspective is a bit different from those of previously discussed theories. Those viewpoints consider the brain as a passive medium to transduce or convert auditory, visual, tactile, etc. components of new events into neural activity. It is this constellation of inputs from various sensory modalities that provide an internal representation of what you are currently experiencing in the external or real world.

In contrast to these views, constructionist theory asserts a primary role of the brain in combining stimuli within your immediate context with past episodes saved in memory. These two sources of information are then used to construct a hypothesis or prediction of what an organism is experiencing. The point made with constructionist theories of emotion is that the brain itself, rather than individual features of environmental stimuli, is what *constructs* meaning to, or predictions of, what is occurring in our immediate circumstances. In essence, the brain is viewed as actively creating explanations for the sensory input it receives during new events, by generating internal models to infer the nature or causes of what we experience from the environment.

The merit of this concept explains why a single event may produce variations or totally different emotional reactions from one individual to the next. If the brain simply played a role in converting sound, sight, smells, taste and touch into neural patterns of activity to represent the features of environmental stimuli, then everyone would experience the same reactions. The constructionist's viewpoint readily accounts for why variations of emotional reactions occur to identical circumstances. Their premise is that the brain uses both previously stored knowledge, along with the configuration of newly imposed environmental stimuli, to create *simulations* or hypotheses about your immediate circumstances. Since the content of stored knowledge and memory varies from one individual to the next, it is conceivable that the actual perceptions everyone creates from environmental events will also vary.

This point is illustrated in Figure 13.5; where the same event (i.e. a funeral) creates opposing emotional reactions due to how the brain constructs the actual meaning to be attributed to any environmental encounter.



Celebration at a funeral



Sadness at a funeral

Figure 13.5 Differences in emotional reactivity to the same event, a funeral Constructionist theories assert the brain combines memory of previous events (we celebrate vs mourn death) with stimuli representing your immediate circumstances (funeral attendance) to construct emotions appropriate for honoring the death of a loved one at a funeral. Note the difference in emotional reactions to the same category of emotional experience. Image credit: Right: Picture provided by Carl and Lorraine Aveni and their world travels. From aveniadventure.weebly.com/blo...-jazz-funerals. CC BY NC SA 4.0; Left: By Eric Draper - White House Photo Essay, Public Domain, commons.wikimedia.org/w/inde...?curid=2550424

The image on the left depicts a traditional funeral in New Orleans, where many inhabitants have learned from an early age that death is actually celebrated. The response of celebration, rather than of mourning, evolves from learned *cultural beliefs or concepts*, that through death, their loved ones are advancing, graduating, or moving on to a much better place than the present earth. Contrast the emotions observed in this image with those in the image on the right, where individuals display sad and solemn emotions. Here, the *brain's learned concept* of funerals generates these opposing emotions because loved ones have learned that funerals are where you mourn the permanent loss or absence of the valuable roles they remember the deceased played in their lives. Thus, concepts learned through experience and embedded within memory are used by the brain as a foundation for guessing or predicting what is occurring in the world and in selecting the most appropriate behavioral responses to adapt flexibly to any given event.

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13.2.1.2: What Category of Feelings Are Considered as the “Basic Emotions”?

Learning Objectives

By the end of this section, you should be able to

- 13.2.1 Describe the basic category of emotions that are generally accepted in this field.
- 13.2.2 Understand how complex interactions between the 6 basic emotions lead to subcategories of emotional reactions.
- 13.2.3 Use Plutchik’s “Wheel of Emotions” to discuss how extensions to the 6 basic emotions provide a more ecologically valid illustration of the complex range of emotions experienced by humans and animals.

Are there categories of basic emotions for all humans? The potential for contextual stimuli from the environment to signal opportunities for social engagement, rewards, safety or signs of danger are appraised by cognitive processes in the brain. The interpretations evolving from this process coordinate a range of appropriate behavioral reactions that fall into the class of either approach towards, or avoidance from, stimuli in the immediate environment. In essence, the collection of brain systems that contribute to the appraisal process allow organisms to learn what will work in a given context. Brain systems also encode in memory the environment-body-brain interactions and use these memories to guide behavior in a more automatic and seamless fashion when similar events arise in the future. As we have learned, the selection of either form of engagement with the environment (approach or withdrawal) is determined by both the level of physiological arousal elicited by the experience and the emotional labels assigned to the represent the subjective feelings created inwardly from that transient event. This framework of understanding leads to another important topic in the field of emotion research, *are there categories of basic emotions that are present across all human species*?

Answers to this question were not initially addressed through direct investigations. They evolved from studies questioning whether the same appraisal processes that generate subjective affective experiences (i.e. conscious awareness of a state of feeling) are also capable of interpreting the nature of emotions inferred in facial expressions that accompany different emotional states of others. For example, when we are enthralled in an emotionally-laden circumstance, a cascade of involuntary unconscious changes occur such as split second changes in body functions in the autonomic nervous system, the volume, pitch and rate of our speaking, as well as the generation of different expressions on our face. Expressions involving smiles, frowns, clinched eyebrows and other forms of facial utterances are overt expressions of the internal emotions humans and animals may experience. This observation implies that feelings and emotions can be inferred through body language and more specifically, facial expressions.

Paul Eckman.

Paul Eckman and Wallace Friesen (Eckman & Friesen, 1975) were the first researchers to provide empirical support that humans possess a core set of six or more fundamental emotions. Their initial research examined whether research participants could identify the emotion a person was experiencing in a series of photographs by paying attention to different cues among the facial expressions, similar to those shown in Figure 13.6:

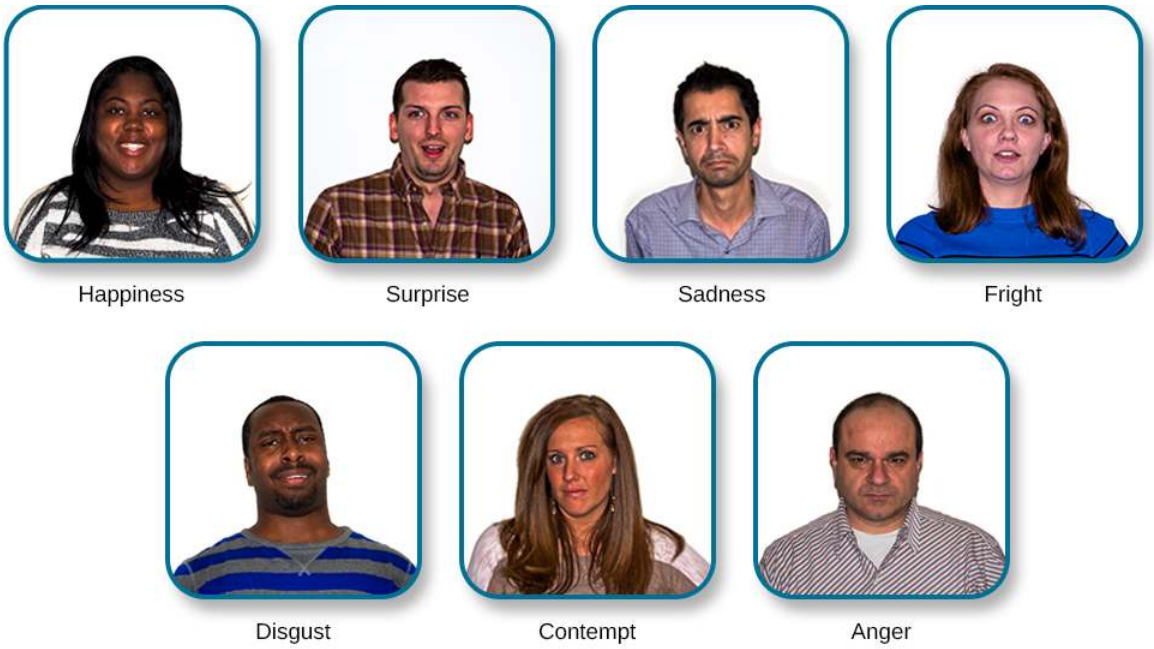


Figure 13.6 Facial expression of basic emotions The initial research by Paul Eckman determined if participants from several cultures could identify the emotion a person is experiencing from a series of photographs similar to those shown here. Image credit: Image courtesy of David Matsumoto and Humintell, LLC www.humintell.com

Eckman's research participants revealed a great deal of accuracy and uniformity in discerning the emotions of *anger, disgust, fear, happiness, sadness or surprise* from the facial expressions portrayed in photographs. His group solidified these findings by repeating the experiment with participants living in different cultures such as Argentina, Brazil, Chile, and Japan. The spoken language of these cultures differs drastically, yet participants showed a remarkable degree of overlap in identifying the six basic emotions across cultures.

The experimental procedures to generate these findings were also applied to three separate groups of non-English speaking natives in New Guinea who were completely unfamiliar with Western Culture. Ekman's team considered it vital to include these essential experimental groups to verify that the ability to perceive emotions from facial expressions shown across cultural boundaries was not the result of exposure to Western cultural influences such as television, magazines, newspaper or theatrical movies. Ekman found that three separate native groups could also identify the six basic emotions from the expressions of models in photographs, although with less accuracy than the combined Western and non-Western participants.

Taken together, Paul Ekman's group was instrumental in revealing that all humans are endowed with an innate capacity to identify a basic set of internal core emotions through the combination of stimuli that comprise different facial expressions. From these and similar empirical studies, Ekman and Cordaro (2011) provided operational definitions to categorize the following six basic emotions.

Anger: the response to interference with our pursuit of a goal we care about. Anger is also triggered by someone attempting to harm us or someone we care about either physically or psychologically. In addition to removing the obstacle or stopping the harm, anger often involves the wish to hurt the target.

Fear: the response to the threat of harm, physical or psychological. Fear activates impulses to freeze or flee. Often fear triggers anger.

Surprise: the response to a sudden unexpected event. It is the briefest emotion.

Sadness: the response to the loss of an object or person to which you are very attached. The prototypical experience is the death of a loved child, parent, or spouse. In sadness, there is resignation, but it can turn into anguish in which there is agitation and protest over the loss and then return to sadness again.

Disgust: repulsion by the sight, smell, or taste of something; disgust may also be provoked by people whose actions are revolting or by ideas that are offensive.

Happiness: feelings that are enjoyed or sought by the person. There are a number of quite different enjoyable emotions, each triggered by a different event, involving a different signal and likely behavior. The evidence is not as strong for all of these as it is for the emotions listed above.

The concept that there are a core set of basic emotions has been corroborated by research using extensions of the procedures developed by Ekman's group. It is essential to note here that other psychological theories of emotion include more than 6 basic emotions, as we will see in the section on Robert Plutchik. Despite this disagreement about the number of core emotions, other research studies have identified specific changes in the body that accompany the 6 basic emotion categories identified by Ekman and colleagues.

The diagrams depicted in Figure 13.7; represent what is known as body maps and they reveal how the induction of each basic emotion is reflected by elevations (i.e. red to yellow shading) or reductions (i.e. black to blue shading) in a diverse number of bodily regions (Nummenmaa, Glerean, Hari, & Hietanen, 2014).

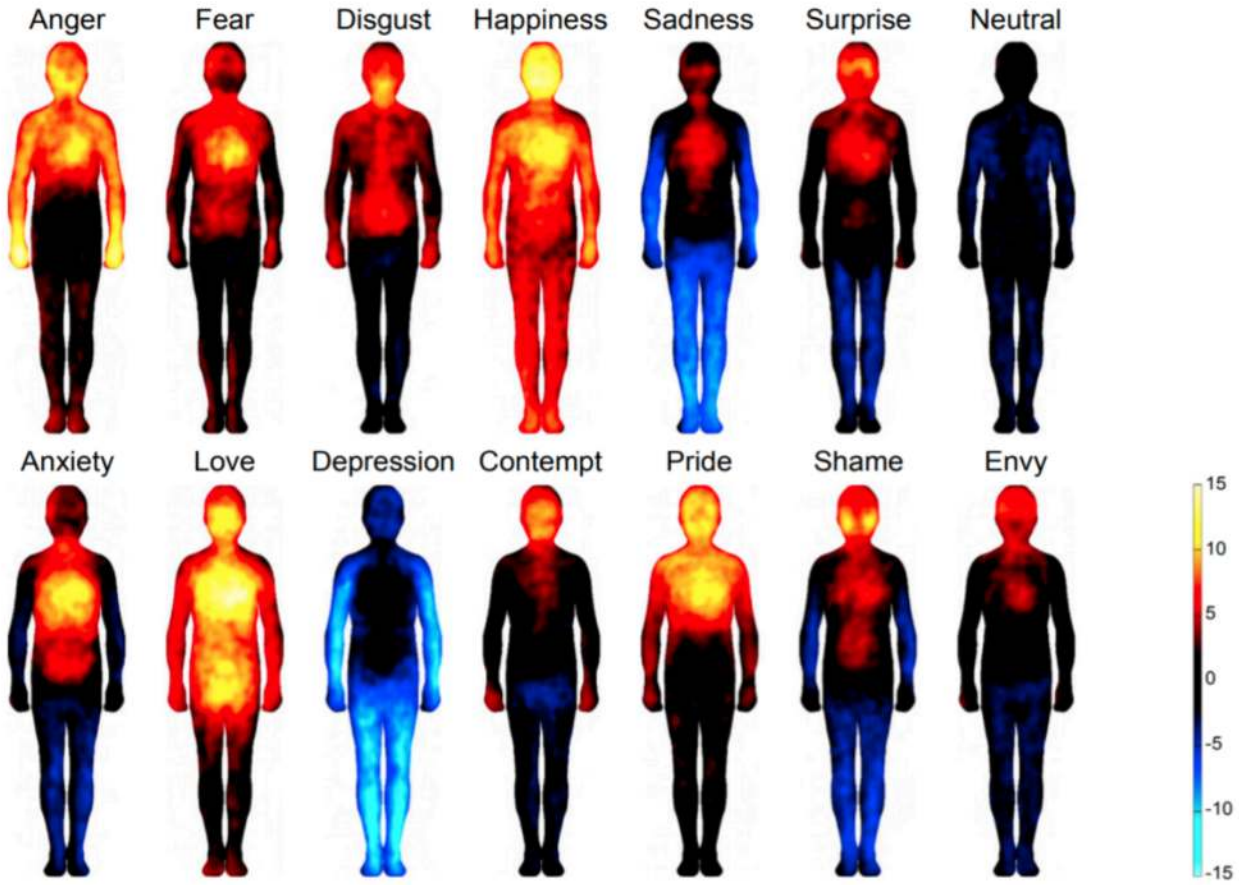
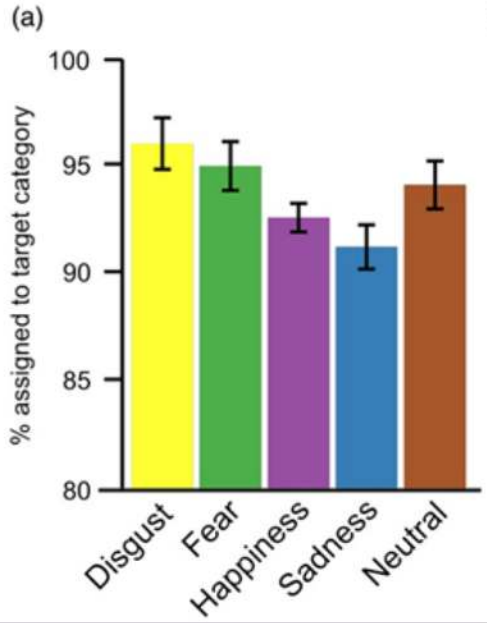


Figure 13.7 Body maps associated with each basic emotion The Body Maps reveal how experiencing each basic emotion elicit elevations (i.e. red to yellow shading) or reductions (i.e. black to blue shading) in bodily activity. Image credit: Mummenmaa et al., 2014. "Bodily maps of emotions." Proceedings of the National Academy of Sciences 111 (2) 646-651; DOI: 10.1073/pnas.1321664111.

For example, states of Anger correspond to increased blood flow to the hands and arms presumably to prepare organisms to defend themselves or fight in the face of threatening environmental stimuli (Levenson, Ekman, & Friesen, 1990). In contrast, states of Fear direct blood flow away from the hands and arms and distribute increased circulation to the legs and feet to prepare organisms to escape and flee from external signals of danger (Ekman, 2003). External stimuli that lead to Disgust (also see row 3 of Figure 13.2) trigger intense muscle activation in the face. Depending on the intensity or modality of the stimuli, this emotion may also induce a gag reflex and restrict further airflow to the nose to reduce the repugnant nature of external olfactory stimuli (Koerner & Antony, 2010). The positive emotion of Happiness increases circulation throughout the body as a consequence of elevated output of oxytocin and serotonin (Uvnaes-Moberg, 1998), whereas states of Sadness are reported to reduce circulation to external limbs used to interact with the environment and direct blood flow to internal visceral organs. The final emotion of Surprise affects facial

expression by raising the eyebrows and increasing respiratory functioning in the lungs to prepare organisms to generate sudden approach or avoidance responses to rapidly presented stimuli (Ekman & Friesen, 1975).

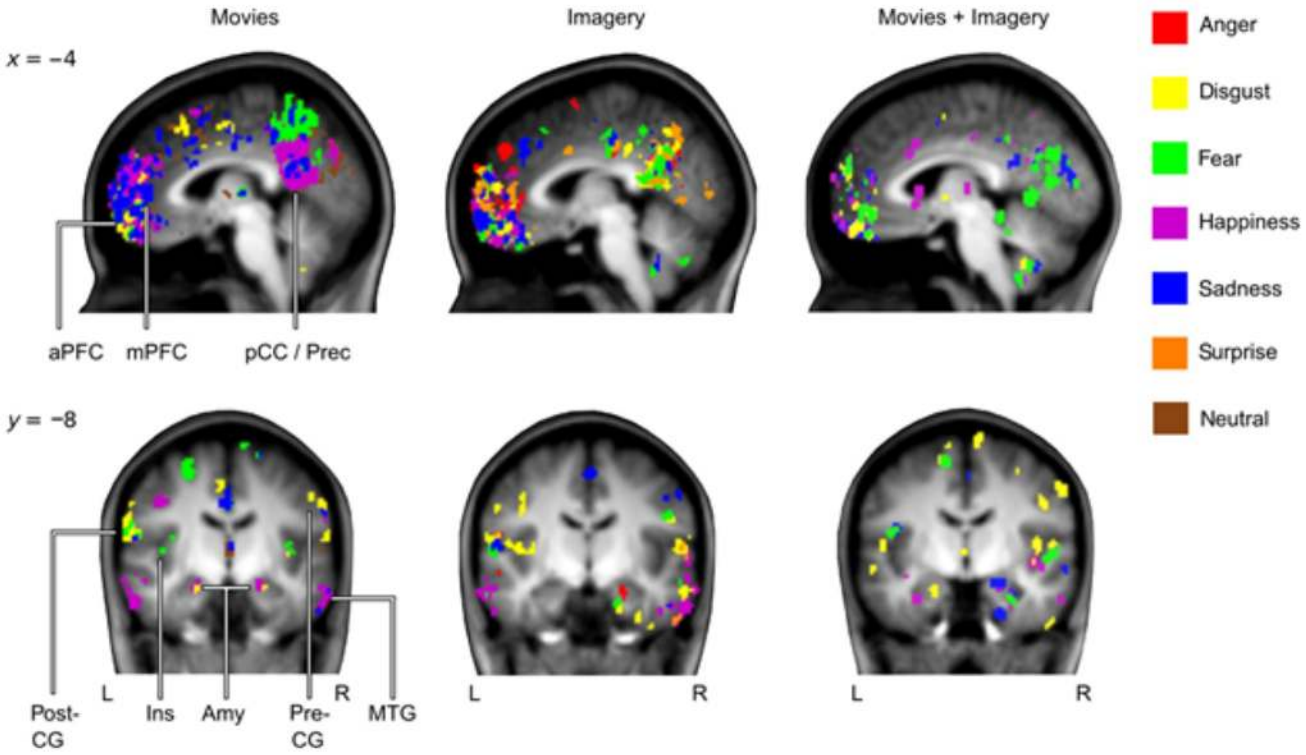
Findings from neuroimaging studies with functional magnetic resonance imaging (fMRI) capture the collection of brain neural systems that are engaged in response to experiencing each of the core basic emotions (Saarimäki et al., 2016) (see Methods: fMRI). To provide this snapshot, the brains of human participants were scanned with fMRI while they viewed 10 second affective movie clips that were selected from a database, with scenes representing 5 emotion categories. A second experiment assessed brain related changes in response to emotional imagery. Imagery was manipulated by presenting words to study subjects that commonly evoke affective feelings associated with anger, disgust, fear, happiness, sadness or surprise. It is important to note that all participants were given 36 emotion words (i.e. 6 per words per emotion category) one-week prior to be scanned in the fMRI. The 7-day interval was imposed to allow participants to devise a personal method of eliciting emotions to each word category by either, a) imagining a previous event associated with the words, b) relating the words to a movie scene, or c) producing a body state that corresponds to emotions associated with the word categories. The data in the top left of Figure 13.8 shows that the experimental procedures were successful in generating a specific emotion. Participants were between 90-95% accurate in subjectively identifying the specific emotion category researcher's intended to induce through presentation of the short movie clips.





Study participants were 90-95% accurate in identifying the appropriate emotion category presented during the emotion induction procedure with either movie scenes or word imagery.

Participants' behavioral similarity ratings yield a network of related emotions where wider links denote more similar the words.



Functional magnetic resonance imaging (fMRI) of brain structures activated in test subjects while they viewed 10 second affective movies with scenes

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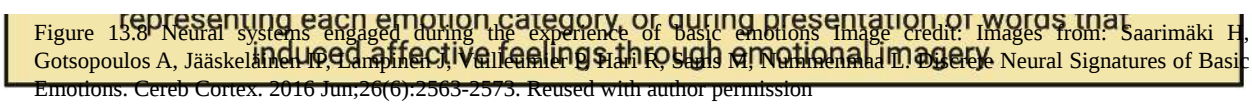


Figure 13.8 Neural systems engaged during the experience of basic emotions Image credit: Images from: Saarimäki H, Gotsopoulos A, Jääskeläinen IP, Lampinen J, Vuilleumier P, Hari R, Sams M, Nummenmaa L. Discrete Neural Signatures of Basic Emotions. Cereb Cortex. 2016 Jun;26(6):2563-2573. Reused with author permission

Data in the top right of Figure 13.8 represents a cluster analysis to show that the pre-selected emotion words specifically induced feelings associated with a specific emotion. The separation of presented words into clearly defined categories provides evidence that select words evoked affective reactions in discrete emotion categories, as opposed to across more than one emotion category.

The findings from fMRI scans are shown in the bottom of Figure 13.8 (brain diagram). The separate emotion categories are represented by the different colors displayed on the right of the figure. The location of brain regions that actively responded to emotions induced by movies or imagery are displayed in brain images on the left of the figure (see abbreviations below). One striking finding that is easily identified in the brain diagrams is that specific emotion categories are not represented in a single brain structure, but rather across brain regions. Take for instance the color purple, that represents Happiness. When this emotion was elicited by movies, imagery or both procedures, there are clear functional changes in the medial and anterior prefrontal cortex (mPFC, aPFC), posterior cingulate cortex (pCC), amygdala and medial temporal gyrus. The remaining fMRI results did not reveal a one-to-one correspondence between changes in any specific brain region with a given emotion category. Rather, some brain structures, such as the insula (Ins), displayed increased activity to stimuli generating the emotions of fear and disgust. There were also notable increases in the amygdala (Amy) by words or movie scenes that induced the emotions of happiness, fear and disgust.

We will discuss the brain systems mediating emotion much more in 13.3 What Is the Contribution of Brain Structures in Emotional States?. For now, we can learn from this experiment that, although we may subjectively discern one given emotion from another, the lack of selective activation of specific brain regions per emotion category reflects that the process of generating emotions from internal states involves several brain systems. This involvement of multiple regions to generate single emotions is quite reasonable given that any given emotion is a collection of processes that result from binding together the context the emotion occurs in, evaluating the constellation of bodily changes created by an event, the value of stimuli that elicits the emotion and the role of memory in retrieving affective states associated with previous encounters with similar events. These findings illustrate how distinct categories of emotion translate into characteristic patterns of neural activity or neural signatures across a network of brain structures, rather than within any specific brain structure. The neural signatures were induced in subjects by a wide spectrum of emotion-eliciting training conditions and the changes produced in the specific distribution of brain networks were consistent across individual participants. These findings raise the question of whether our current imaging tools are sophisticated enough to predict the subjective emotion an individual is experiencing from using solely brain activity.

Robert Plutchik

Ekman's group was instrumental in identifying a basic category of emotions generated by environmental stimuli across all cultures. However, you may judge this discovery as being somewhat limited when considering the range of emotions you experience personally at any single point in time is both complex and multifaceted. This type of concern was raised by Robert Plutchik who opposed this abbreviated category of emotions. He proposed that the vast range of subjective feelings humans experience may be better explained by considering that basic emotions do not occur in isolation, but may combine to capture the richness and intensity of personal experiences generated by external events. For example, one may immediately experience the emotion of happiness when notified in an email of a job promotion that also comes with a major increase in salary. It is not a far stretch to say that the emotion of happiness garnered by reading this document may also be combined with some fear and apprehension of the greater responsibilities, expectations and demands on time that accompany this new promotion. In a similar vein, consider the range of emotions generated when you are the subject of a surprise birthday party. The unpredicted festive event may be filled with cherished individuals that bring you great joy, happiness and comfort. When all are combined, the joy, happiness and comfort elicited by the surprise party may also be met with extreme anger when considering that the organizers of this event are well aware of your previously stated disdain of surprises. Sports fans are quite familiar with the subjective feeling of disgust over an unfair call by a referee during the final seconds of a match with your rival team. However, when your team is victorious, joy, happiness and excitement join the feelings of disgust that were generated only seconds ago by the referee's error.

The inability for current theories to account for the consequences inherent in each type of scenario described above motivated Robert Plutchik (1960; 1984) to propose that the rich constellation of emotions experienced in humans are a byproduct of eight basic emotions (e.g. *joy, trust, fear, surprise, sadness, disgust, anger and anticipation*) that are depicted in the table and color wheel in the second circle from the center of Figure 13.9.

The constellation of emotions experienced in humans are a byproduct of eight basic emotions, which can each have varying levels of intensity.

Lower Intensity	BASIC EMOTION	Higher Intensity
Serenity	Joy	Ecstasy
Acceptance	Trust	Admiration
Apprehension	Fear	Terror
Distraction	Surprise	Amazement
Pensiveness	Sadness	Grief
Boredom	Disgust	Loathing
Annoyance	Anger	Rage
Interest	Anticipation	Vigilance

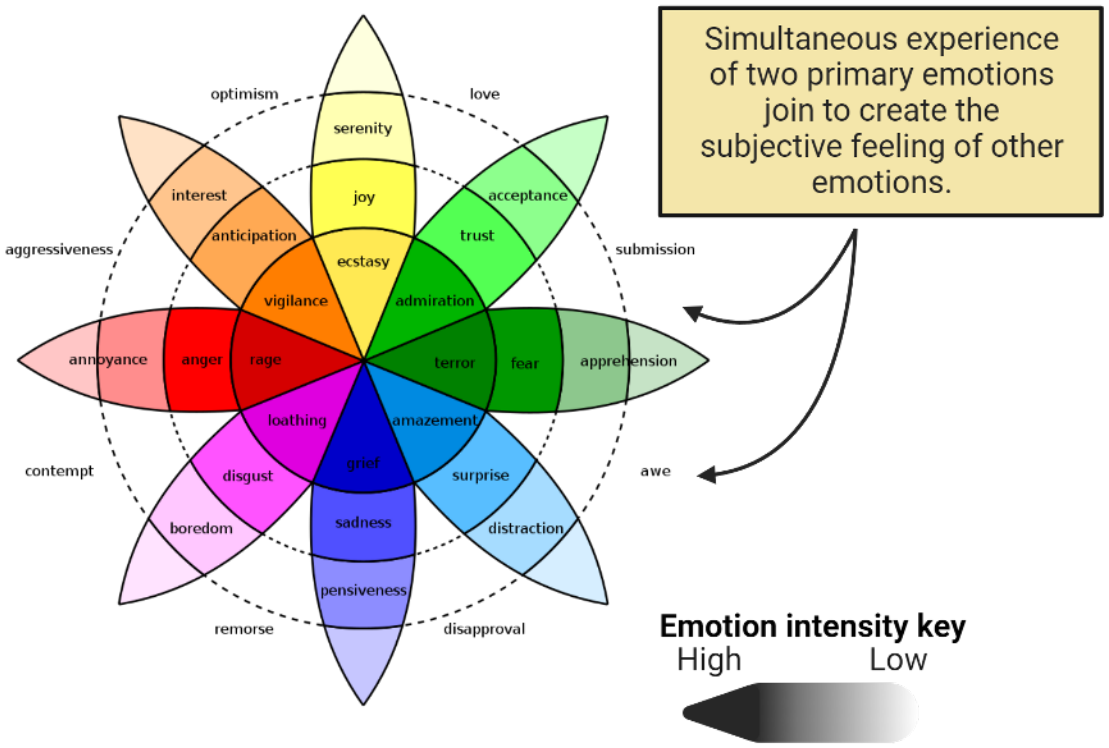


Figure 13.9 Wheel of emotions Image credit: Color wheel from public domain: https://commons.wikimedia.org/wiki/F...chik-wheel.svg

There are low and high degrees of intensity of Plutchik's eight basic emotions that are represented by the lighter and darker hues of colors on the wheel, respectively. Plutchik envisioned basic emotions as building blocks with more complex emotions being blends of the basic ones shown in the second circle. For example, the Covid-19 related mask mandates on airplanes garnered different emotions depending on how serious one may view the long-term health consequences of this virus. An individual may initially experience the lower intensity emotion of *annoyance* by viewing someone in the waiting area without a mask. However, the more

intense emotions of *anger* may erupt once you hear the mask-less passenger sneezing upon entering the plane and the higher intensity emotion of *rage* may result when you realize the “mask-less, sneezer” seat is next to yours on a 6-hour flight.

According to Plutchik, the extensive number of subjective emotions produced during any encounter arise from some unique clustering of the emotions included in this spectrum. The separate emotions shown without colors in the outer sphere of the wheel demonstrate how the simultaneous experience of two primary emotions join to create the subjective feeling of other emotions. For example, life experiences that foster both *anticipation* and *joy* will combine to produce *optimism*, or a positive view on future events, whereas events that generate *disgust* and *anger* lead to the experience of *contempt*. The three-dimensional form of the Wheel of Emotions is a separate way to demonstrate that as the color of the emotion moves from the exterior to the center, the intensity of the emotion experienced, intensifies within an individual. Using the airline flight example above, anger that is manifested at its lowest level of intensity is annoyance, yet when combined with anger will lead to the full expression of rage. Plutchik’s Wheel of Emotions can also explain how polar opposite emotions may evolve within the same experience. Take for example the emotions you may experience while attending a funeral for a cherished loved one who battled cancer for the past three years. Although it is clear one will experience extreme grief and sadness (depicted as blue in the wheel) at this lost, these subjective emotions may be accompanied by both a sense of serenity and joy (depicted as light yellow in the wheel) by knowing that the loved one is now free from constant pain, a loss of independence and daily suffering.

Neuroscience in the Lab

How emotions are studied in neuroscience: methods and techniques

Ekman and Cordaro (2011) provided a list of forms of emotional expression that are common across the human species. This list suggests that there are representative overt and internal changes that accompany the experiential or subjective feeling of a given emotion. The four overt responses include changes in verbalizations (i.e. tone, speed, and pitch), facial expressions, body posture and physical responses (i.e. affiliative or positive bonding reactions or aggressive and opposing actions) toward individuals or objects that elicited the emotion. The two internal or unobservable responses include physiological changes in the body and neural changes in activity across critical brain structures. The sheer range of internal and external changes that represent the onset of a given emotion produces a challenge for those studying the underpinnings of emotions. Fortunately, there are several technical tools to address these challenges. In a general sense, there are 2 core components of any emotion experiment. The first includes procedures for eliciting a selected emotion and the second includes the use of technology to capture and quantify how the experimentally elicited emotion impacts any of the overt or internal changes. The following section provides an overview of the tools available to researchers to combine these approaches in understanding brain-behavior relationships.

Emotion Induction, a traditional method of eliciting emotions involves presentation of words, pictures, sounds or movie clips that are already verified to induce a certain emotion. There are several databases containing thousands of pictures that have been evaluated by large, heterogeneous groups of men and women to ensure the pictures elicit emotions in a given category. One commonly used database is known as the International Affective Picture System (IAPS) that was developed by Peter Lang and Margaret Bradley at the University of Florida. Pictures developed for the IAPS have been verified across a large number of research studies and each photo is assigned a rating number so that potential users are informed on how well a picture in the database is rated for emotional arousal and valence in terms of positive or negative impact. There are a number of other emotional picture datasets including the Open Affective Standardized Image Set (OASIS) Emotional Picture Set (EmoPicS) and Geneva affective picture database (GAPED) just to name a few. Movie clips, sounds, words and other emotion-eliciting stimuli are also extracted from commercial databases or other emotion research labs that have validated that these stimuli elicit a targeted emotion with a high degree of accuracy.

Assessing Emotional Reactions. The impact of stimuli used to induce emotions are measured by a number of tools and devices that can reveal changes in either the subjective experience of feelings or fluctuations in the body or brain. The *subjective experience of emotions* is traditionally assessed by providing study participants with a SELF-REPORT survey that contains questions to identify the subject’s personal reflection of the emotion experienced, its intensity and duration. A commonly used measure of *physiological change*s that correspond to emotional arousal involves the use of a Polygraph Test. As shown in Figure 13.10, the polygraph contains several sensors that measure the magnitude of an emotional stimulus on several bodily changes.

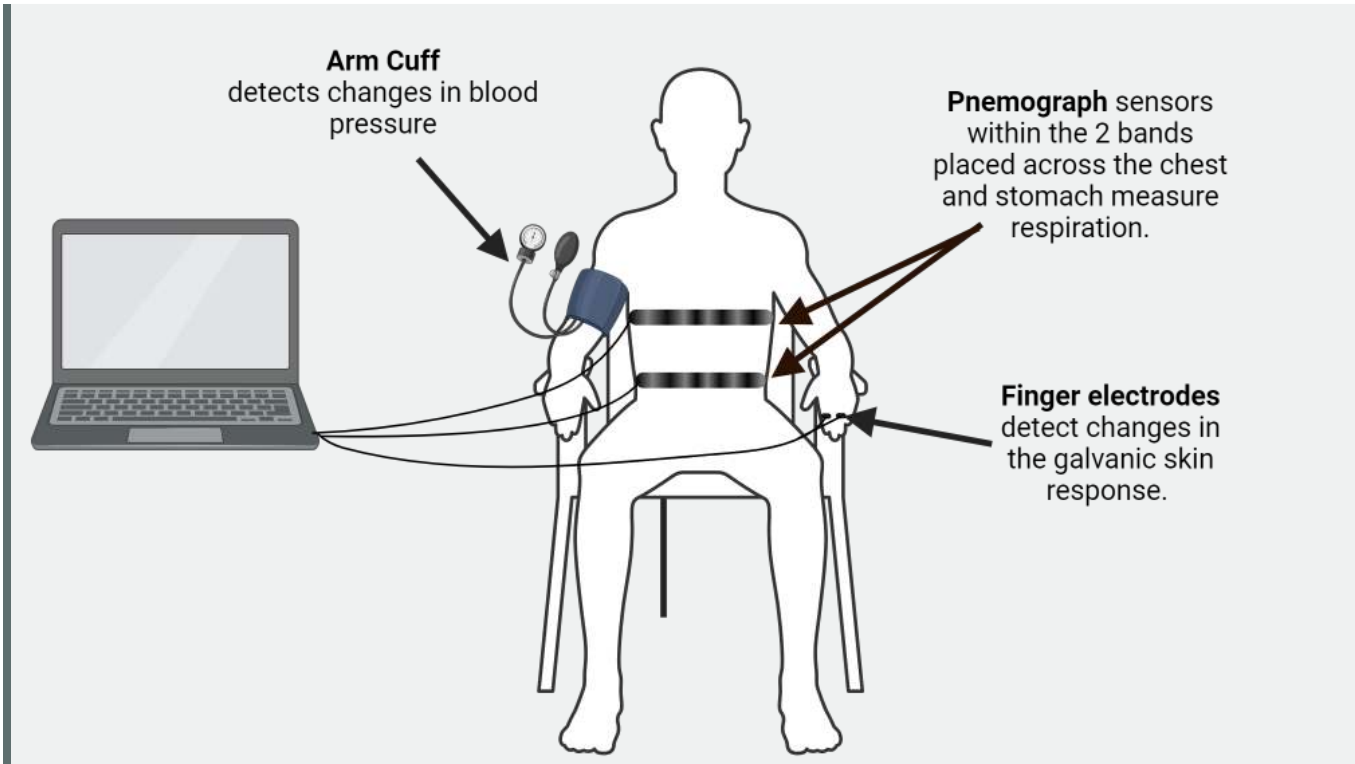


Figure 13.10 Methods of identifying changes in physiological arousal after the induction of emotions Image credit: Photo by Sherkiya Wedgeworth - federalsoup.com/articles/201...pplicants.aspx, CC BY-SA 4.0, commons.wikimedia.org/w/inde...urid=110940529

This device detects the Galvanic Skin Response (GSR), a measure of electrodermal fluctuations in skin (i.e. sweat) that occurs when arousal-induced stimuli increase activity in the sympathetic nervous system. Although GSR is a reliable indicator of physiological changes, this type of measurement is poor at identifying the source of the arousal. For example, increased GSR responses may occur rapidly after presenting research participants with a vivid picture of a snake. However, the GSR cannot reveal whether the picture-related arousal is due to elevations in heart rate, blood pressure, respiration, dilation of the pupils, or the secretion of stress hormones such as epinephrine or cortisol. These changes reflect intense activation of the sympathetic division of the autonomic nervous system and are reflected by electrodes shown in Figure 13.10. When multiple electrodes are used with the polygraph, researchers are able to develop a profile or “physiological fingerprint” that corresponds to the induction for emotions triggered by stimuli that produce sadness, anger, fear, happiness, disgust, etc.

The gold standard used in the search to unravel which brain areas are absolutely essential for generating the basic emotions is functional Magnetic Resonance Imaging (see Methods: fMRI). fMRI is an imaging technique that is capable of capturing the structure and location of individual brain structures that respond to emotional encounters. fMRI scans of participant’s brains are recorded before, during and following the induction of emotions. In brief, the brain scans document how these time-locked events activate or suppress neural activity across different brain regions by tracking changes in blood flow across several brain regions that may be critical for processing and generating emotional responses. fMRI is a valuable tool for understanding if individual categories of emotion are mediated by changes in specific brain regions, or alternatively, revealing the constellation of brain structures that are responsible for this process. Functional imaging is also necessary for identifying how the separate stages of emotion perception, emotion evaluation and emotion regulation are effectively carried out by changes across different brain regions.

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13.2.1.3: What Is the Contribution of Brain Structures in Emotional States?

Learning Objectives

By the end of this section, you should be able to

- 13.3.1 Describe how information conveyed from sensory systems and autonomic nervous system inputs to the CNS influence the functioning of limbic areas to generate emotions.
- 13.3.2 Discuss how the coordination of neural input into limbic brain structures are integrated to produce characteristic patterns of physiological and neural changes that evolve into appropriate emotional responses to a given external stimulus.
- 13.3.3 Describe an example of a limitation in generalizing findings from animal studies to humans.
- 13.3.4 Define the roles of specific cortical limbic structures in appraisal of emotionally-salient stimuli, generating the "feelings" from appraisals to develop adaptive strategies, and generating decisions and motor plans for responding to emotional stimuli.

An extensive amount of research is directed toward identifying the source or substrate of individual emotions in the brain. These efforts are quite challenging since distinct brain regions have multiple inter-connections with a diffuse set of other regions that in themselves process different types of internal and external stimuli. Thus, the search for a specific "neural signature or fingerprint" for each category of emotions has been a difficult process. The large variation in neural patterns observed within brain circuits during different states of internal arousal may explain why individual emotions are perceived as feeling different from one another. Still, decades of research in animal models and in humans have given us some insight into the major structures that mediate the experience of emotion and our behavioral/physiological responses to it. In this section, you will then learn how the brain integrates information from both internal systems and external sensory perception to form cognitive appraisal and evaluative functions to generate emotions that are appropriate for any given circumstance.

Papez circuit overview

The complicated but essential process of emotional experience and expression is regulated in part by an assembly of brain structures that comprise the Papez Circuit (Papez, 1937; MacLean, 1952). The important contributors to this neural system include the thalamus, hypothalamus, amygdala, hippocampus, anterior cingulate cortex , orbitofrontal cortex, insula cortex and striatum. This interconnected circuit of cortical and subcortical brain regions takes inputs from the internal and external environment and helps to evaluate those cues to generate emotional responses to them. Figure 13.11 shows the anatomical location of several of these major structures, as well as a schematic for how they connect to one another.

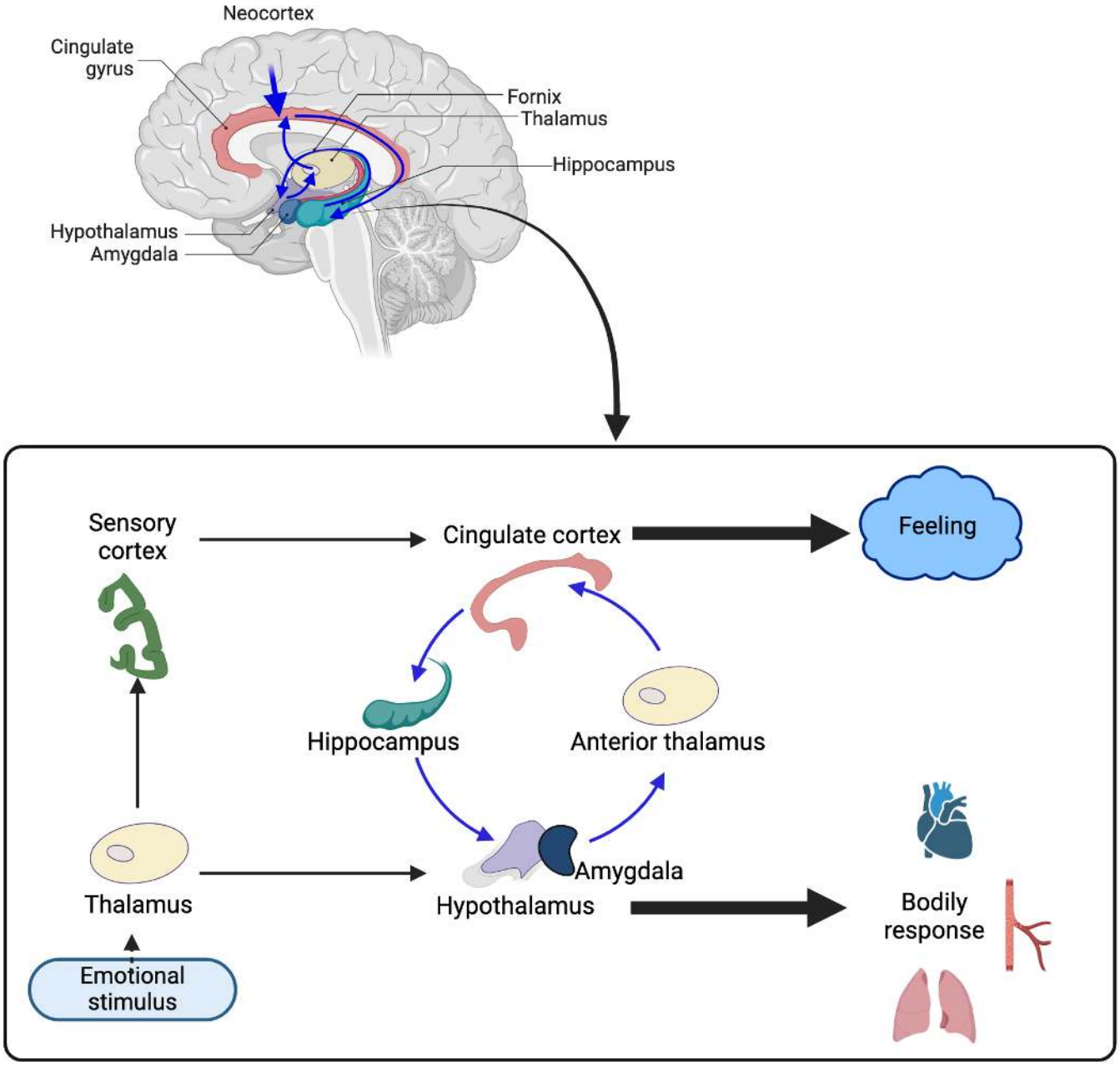


Figure 13.11 Papez circuit and interrelated structures The limbic and subcortical structures of the Papez circuit allow organisms to adapt to changes in the environment. These structures initiate neural and behavioral programs that return internal physiological and psychological states to an ideal balance. Image inspired by work of Dalgleish, T. The emotional brain. (2004). Nature Reviews Neuroscience, 5, 583–589.

The initial evidence that structures in the Papez circuit are involved in constructing emotions was provided by Heinrich Klüver and Paul Bucy (1938). These scientists removed large parts of the temporal lobe in monkeys that included the amygdala, hippocampus and selective white matter tracts or nerve bundles that connect some of the components comprising the Papez circuit. The range of behavioral and emotional deficits produced by removing these critical brain areas is now commonly known as the Kluver-Bucy Syndrome. One key deficit in Kluver-Bucy syndrome that pointed to the importance of these temporal lobe regions in emotion is a complete absence of the agonistic emotions of anger or fear to threatening stimuli (placidity). Appetitive-related emotional responses involving feeding are also severely impaired as subjects that have been satiated by a previous meal will still eat excessive quantities of food or other objects that do not even resemble food. Other perceptual and behavioral impairments included difficulty in identifying objects by sight, the sound of stimuli or touch, even when there is no damage to brain areas that process these three stimulus modalities. There is also severe global amnesia manifested by the inability to convert short-term memory into long-term

memory, most likely due to the selective damage to the amygdala or hippocampus (see Chapter 18 Learning and Memory). Compulsive-like interests in exploring the immediate environment (hypermetamorphosis) is also frequently observed in Kluver-Bucy syndrome. These types of impairments were first observed in early studies of monkeys and cats and then were later observed clinically in humans with temporal lobe damage from accidents or following bilateral temporal lobe surgery to alleviate the debilitating symptoms of epilepsy.

Kluver-Bucy syndrome provided some clues to the functions of several components of the Papez circuitry. We now have a more detailed understanding of the unique roles that each brain area in the Papez circuit plays. In the subsequent sections, we will walk through the specific roles of several of these regions.

The thalamus relays interoceptive and exteroceptive sensory information

We will begin our tour of the individual components of the Papez circuit by first understanding the sensory information inputs that generate emotional responses. According to a recent view, emotions are constructed when internal physiological sensations are so intense that they are in the foreground of our awareness. This process of monitoring internal physiological conditions is called interoception. It stands in contrast to exteroception, which is our sensory perception of the external environment (Figure 13.12). Both of these senses contribute to our emotions. The converted signals from collective receptor cells of both forms of sensation (interoceptors and exteroceptors) are conveyed by different nerve pathways to individual regions of the thalamus. The thalamus, in turn, relays this information to both the hypothalamus and amygdala as shown in Figure 13.11. Both of these downstream structures are considered reflexive in nature, in that thalamic activation of particular regions within either structure automatically initiates behavioral, emotional and physiological responses without conscious awareness or thought.

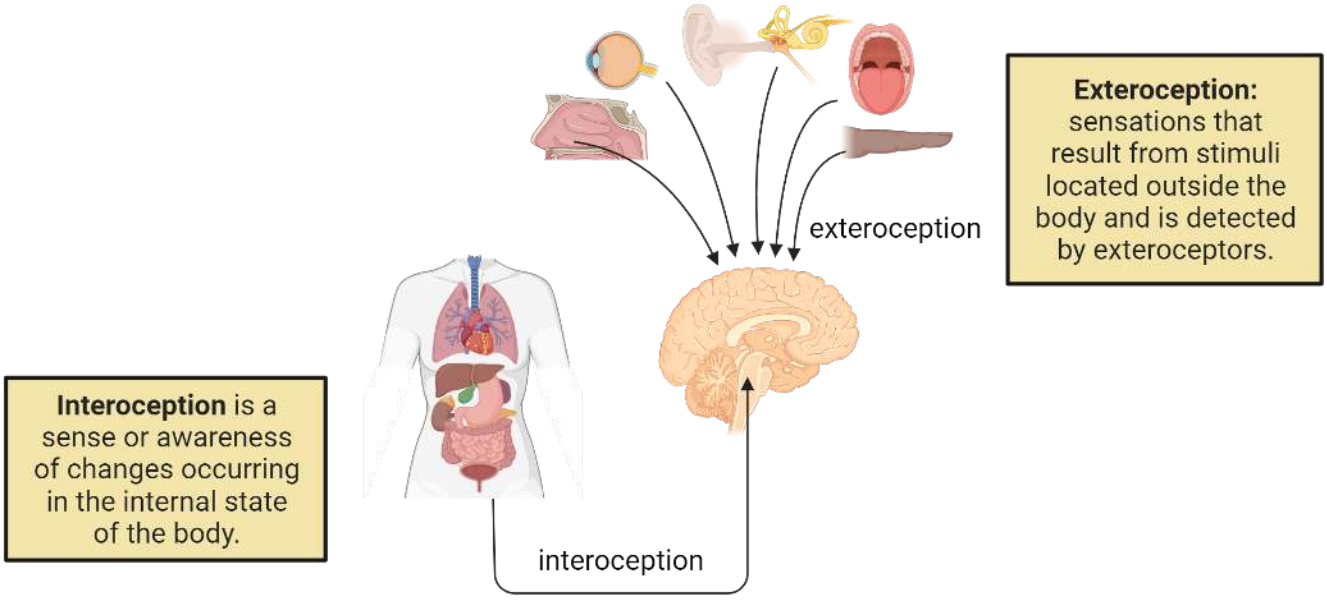


Figure 13.12 Interoception and exteroception

The reflexive emotional responses generated by the hypothalamus

The hypothalamus is critical to coordinating our bodily and psychological responses to the changing demands of our environment. Organisms must constantly adapt to changing environmental conditions in order to survive and reproduce. Fortunately, humans and animals are successful in adapting to dynamic external changes through the aid of body machinery and selective behavioral programs that return internal physiological and psychological states to some comfortable, ideal balance when a change in the environment occurs. We refer to the desired, ideal balance as homeostasis (see Chapter 16 Homeostasis). The hypothalamus receives interoceptive input from throughout the body, via the relays in the thalamus, which it then uses to direct a number of physiological and behavioral responses.

The hypothalamus is composed of many individual nuclei, each of which can elicit specific emotion-related behaviors and their accompanying physiological changes. These behaviors fall broadly in to 3 categories:appetitive responses (*e.g. energy needs, replacement of nutrients and temperature regulation)*, agonistic behaviors (*e.g. self-protecting defending or attack behaviors)* and reproductive mating instincts. The early German researcher Walter Hess (1933) demonstrated in awake cats how applying electrical stimulation to activate neurons in discrete regions of the hypothalamus would produce a host of agonistic, appetitive or autonomic changes. For example, stimulation directed at one group of hypothalamic nuclei could cause the appearance of the emotions of fear and anger (agonistic behaviors). These readily observable emotional signs were accompanied by intense physiological changes in autonomic functioning (e.g. increased heart rate), as well as motor signs and instinctive behaviors where the stimulated cat would attack the first available object in its environment. Moreover, this set of bodily, emotional and behavioral changes persisted as long as the stimulation was applied and ceased only when the stimulation was terminated. In contrast, stimulation applied to other divisions of the hypothalamus slowed down the cat's heart rate and rendered the animal calm, tame, and sleepy (appetitive responses). These and other related findings of the provocation of physiological, emotional and behavioral changes by artificial stimulation of the brain strengthened the belief that physiological changes in the body lead to the development of discrete emotions that in turn determined the nature of behavioral responses an organism will emit on external environmental stimuli. These new discoveries also pointed to a critical contribution of the hypothalamus as a major initiator of behavior and physiological response to emotional stimuli.

The amygdala's reflexive role in emotional learning and fear

The response profiles in the amygdala are similar to those in the hypothalamus. One characteristic distinction between the two is that subdivisions of nuclei within the amygdala may produce reflexive changes not only to important external stimuli that are immediately threatening or rewarding, but also to neutral or once *unattended stimuli* that occur in concert with important events. In other words, the amygdala can form memories about the relationships between two or more stimuli that occur together or even in some sequential fashion during our daily interactions if one of the stimuli has emotional importance. For example, the hypothalamus may initiate feelings of hunger when children are in a classroom simply through olfactory stimuli associated with the smell of food from the cafeteria. The amygdala, however, may generate the same feelings of hunger by simply seeing students from an adjacent class line up in the hallway to head to the cafeteria. This extension is produced by the capacity of amygdala neurons to form associations between previously neutral stimuli (i.e. students from a neighboring class proceeding to the cafeteria to eat) that serve to predict the eventual satisfaction of a meal you will eventually encounter in the cafeteria. The previous scenario is an example of associative learning that takes place in the amygdala, yet not in the hypothalamus. These learned associations equip humans and animals to use the predictive value of once *unattended stimuli* to anticipate appetitive or aversive events (see Chapter 18 Learning and Memory).

In addition to mediating emotion-related learning, the amygdala also appears to have a particular importance for generating the emotion of fear. Key evidence for the necessity of the amygdala for generating fear in humans has come from study of rare disorders that impair amygdala function, such as Urbach-Wiethe's disease. Urbach-Wiethe's disease is a rare disorder that causes a slow bilateral calcification and destruction of the amygdala starting around age 10 (Markowitsch, 1994) in roughly 50 to 75% of cases examined thus far (Staut & Naidich, 1998).

One of the most extensive case studies of Urbach-Wiethe's disease involves patient SM who was first documented by Tranel & Hyman in 1990. The late onset of the disease (starting in later childhood and progressing slowly from there) may explain why patient SM failed to notice that she did not feel the emotion of fear or threat until she went to the hospital for treatment of epilepsy at age 20. It was during these exams that SM was given brain scans with computed tomography (CT), and later magnetic resonance imaging (MRI), to reveal severe atrophy and destruction of the amygdala in both hemispheres.

Further neuropsychological exams revealed that SM showed unique highly specialized deficits associated with the expression of fear (Adolphs, Tranel & Damasio, 1994). She also failed to recognize facial expressions of fear in photographs similar to those used in the research discussed by Ekman and Pulchik discussed in 13.2 What Category of Feelings Are Considered as the "Basic Emotions"?. She had difficulty discerning what fearful facial expressions mean, yet expressions of happiness, disgust or joy were easily identified. SM is actually an experienced artist, but could not draw or sketch a scared face, since she expressed no knowledge of what such a face would look like. One researcher noted that SM displayed little if any emotional reactions when discussing highly emotional and traumatic life experiences (Tranel et al., 2006). The apparent damage to each of SM's amygdala was also manifested by major impairments in memory for nonverbal visual information, social behavior, and executive control functions,

however, other specialized test confirmed that SM's general intelligence and language were no different than normal healthy adults (Tranel and Hyman, 1990). You can read more about the kinds of test done with SM in Diagnostic tests of patient SM.

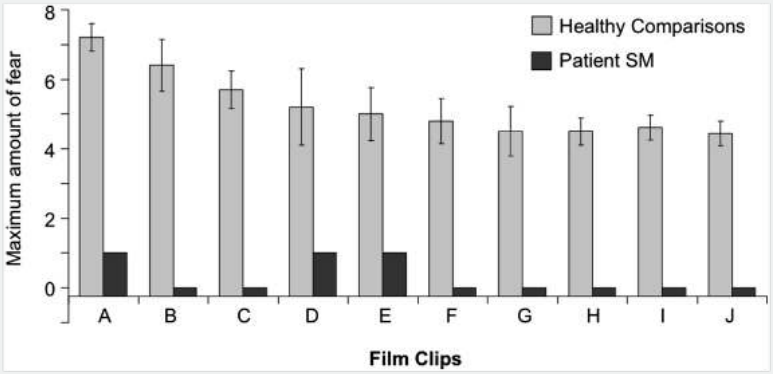
Diagnostic tests of patient SM

Patient SM had a rare genetic disorder that caused her bilateral amygdala to be destroyed. Careful study of her emotional responses helped reveal a specific deficit in experiencing or expressing fear in a variety of contexts. In a study conducted by Feinstein, Adolphs, Damasio, and Tranel (2011), the emotional reactions of SM were examined under three conditions that produce moderate to extreme fear in normal adults. As shown in the top of Figure 13.13, SM was taken to an exotic pet store and actually handled both a large threatening snake and frightening tarantula spider. Despite her stated hate for snakes and spiders, when asked to rate her fear during these encounters from "0" (no fear) to "10" (intense fear), her fear levels never exceeded the rating of 2. Although, she did express the feeling of extreme curiosity, rather than fear. She also was accompanied by researchers into the building shown in top right of Figure 13.13, the previous Waverly Hills Sanatorium, one of the most notorious "naturally haunted" buildings in existence. It is converted into a tourist attraction during Halloween. This tourist attraction-made-"lab test" for SM was complete with haunting noises, monsters, and actors dressed in horrifying costumes that would often jump out from hidden locations to scare and frighten visitors. SM failed to display the slightest emotion of fright or fear during the tour but rather was observed laughing and scaring the monsters by poking them in the head. In a separate component of the study, Feinstein's group also documented SM's emotional response to a series of short movies that elicit different emotional reactions and included ten video clips from notable horror films. As shown in the middle of Figure 13.13, the maximum amount of fear elicited by these scary film clips in SM involved a rating of "1". Note how different the emotion of fear was expressed in SM relative to healthy controls who rated their subjective feelings of being frightened by the scary clips from "5 to 8".

SM showed no fearful reaction to typical fear-inducing stimuli, including snakes and spiders that she said she hated.



SM handling a snake. | The tarantula SM tried to touch. | Waverly Hills Sanatorium Haunted House



SM showed much lower fear induced by viewing film clips of notable horror films than health controls.

SM shows impairment in recognizing fear compared to healthy controls (HC).

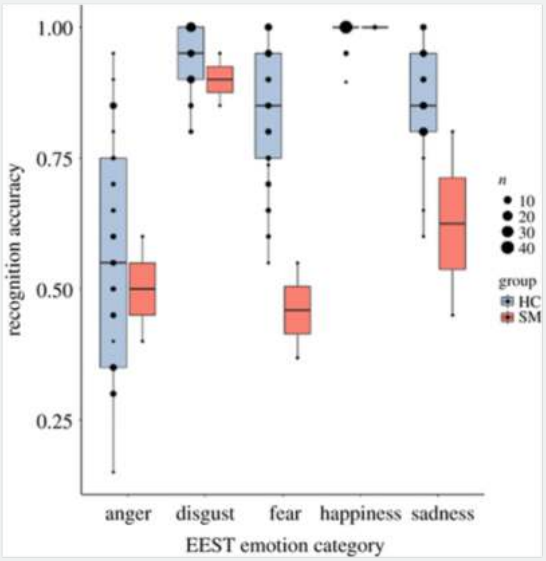


Figure 13.13 The human amygdala and the induction and experience of fear Image credit: Top photo and middle graph: Reprinted from Current Biology, Vol 21, Feinstein, J. S., Adolphs, R., Damasio, A., Tranel, D. The Human Amygdala and the Induction and Experience of Fear, Pages No. 34-38, Copyright 2011, with permission from Elsevier; Bottom box plot: Cardinale, E. M., Rever, J., O'Cpnnell, K., Turkeltaub, P. E., Trancel, D., Buchanan, T. W., Marsh, A.A. (2021). Bilateral amygdala damage linked to impaired ability to predict others' fear but preserved moral judgements about causing others fear. Proceedings of the Royal Society B. Vol 288 (1943). doi.org/10.1098/rspb.2020.2651. Reproduced with permission

More recent findings with patient SM verified a role of the amygdala in recognizing and appraising fear related stimuli in social conditions (Cardinale, et al., 2021). SM and healthy controls were given a series of 100 written statements previously shown to

cause the reader to experience different levels of fear. The phrases included statements such as *('I could easily hurt you', 'I don't want to be friends anymore')*. Both SM and controls were tasked with predicting which emotion category (i.e. anger, disgust, fear, happiness or sadness) someone would experience when a given statement was directed to them. The results, displayed in the bottom of Figure 13.13, confirm the essential nature of the amygdala in registering and generating emotional responses to fear and threat-related environment stimuli. SM's ability to accurately recognize verbal stimuli that generates fear and sadness was significantly poorer than controls. In contrast, her capacity to identify statements leading to the emotions of happiness, disgust or anger were no different than the control group. The reliability of these results was demonstrated by documenting SM's performance across two separate test sessions. She displayed consistent poor emotion recognition performance for fear-eliciting statements in both sessions with a score of 55% accuracy relative to controls performance of 98% in the first session and an even worse 36% accuracy vs the control performance of 99% during the final testing session. The documented inability to experience fear as a result of bilateral and almost complete destruction of the amygdala in the case study involving SM provides convincing support for the important role played by the amygdala in both the appraisal and expression of one category of emotions involving both fear and sadness. These findings are supported by the growing amount of evidence showing a critical role of the amygdala in emotion-related disorders such as post-traumatic stress disorder (PTSD), anxiety and depression.

Neuroscience in the Lab

Neuroscientific Approaches in examining Fear/Threat Conditioning: An animal model of fear and anxiety in humans

The section above highlighted the role of the amygdala in producing the emotion of fear in response to threat related stimuli from the environment. In addition to studying diseases like Urbach-Weithe's disease, a great deal of animal research has confirmed the role of the amygdala in fear by showing that experimental lesions of parts of this brain region led to the apparent absence of fear. Today, more sophisticated approaches such as optogenetics are now available to study how brain regions mediate emotions in animal models. Optogenetics takes advantage of the finding that light sensitive proteins known as Channelrhodopsins-2 (ChR2) become active when exposed to light and release a number of excitatory ions that can be used to activate neurons in specific neural circuits. Methods: Optogenetics has more details about this method, but in short, by genetically expressing ChR2 in neurons and then shining a fiberoptic light on those neurons researchers can make neurons fire and then study what kinds of behavioral responses they see.

A study conducted by Kwon and colleagues (Kwon et al., 2014) employed the optogenetic technique to reveal how associative learning (*i.e. forming learned associations between 2 or more events that occur together in space or time*) in a fear conditioning task produces specific, plastic changes within the amygdala that results in the emotional expression of fear (see Chapter 18 Learning and Memory). In traditional forms of fear conditioning (top of Figure 13.14), a neutral tone is presented at a decibel that does not scare or induce any fear reactions in an animal. After 30 seconds of tone presentation, a mildly aversive footshock is administered to the animal's paws through the metal grid panels in the floor. Generally, only 5 to 6 "tone-footshock" pairings are necessary before the animal learns the predictive value of the "once-neutral" tone and begins to exhibit extreme emotional fear responses to the neutral tone, even before the footshock appears. The characteristic response indicative of the emotion of fear is the agonistic "freezing response". This form of associative learning discussed earlier is produced by the amygdala forming associations between the external auditory "tone" stimulus with the threatening and painful "footshock" stimulus applied to the animal's paws.

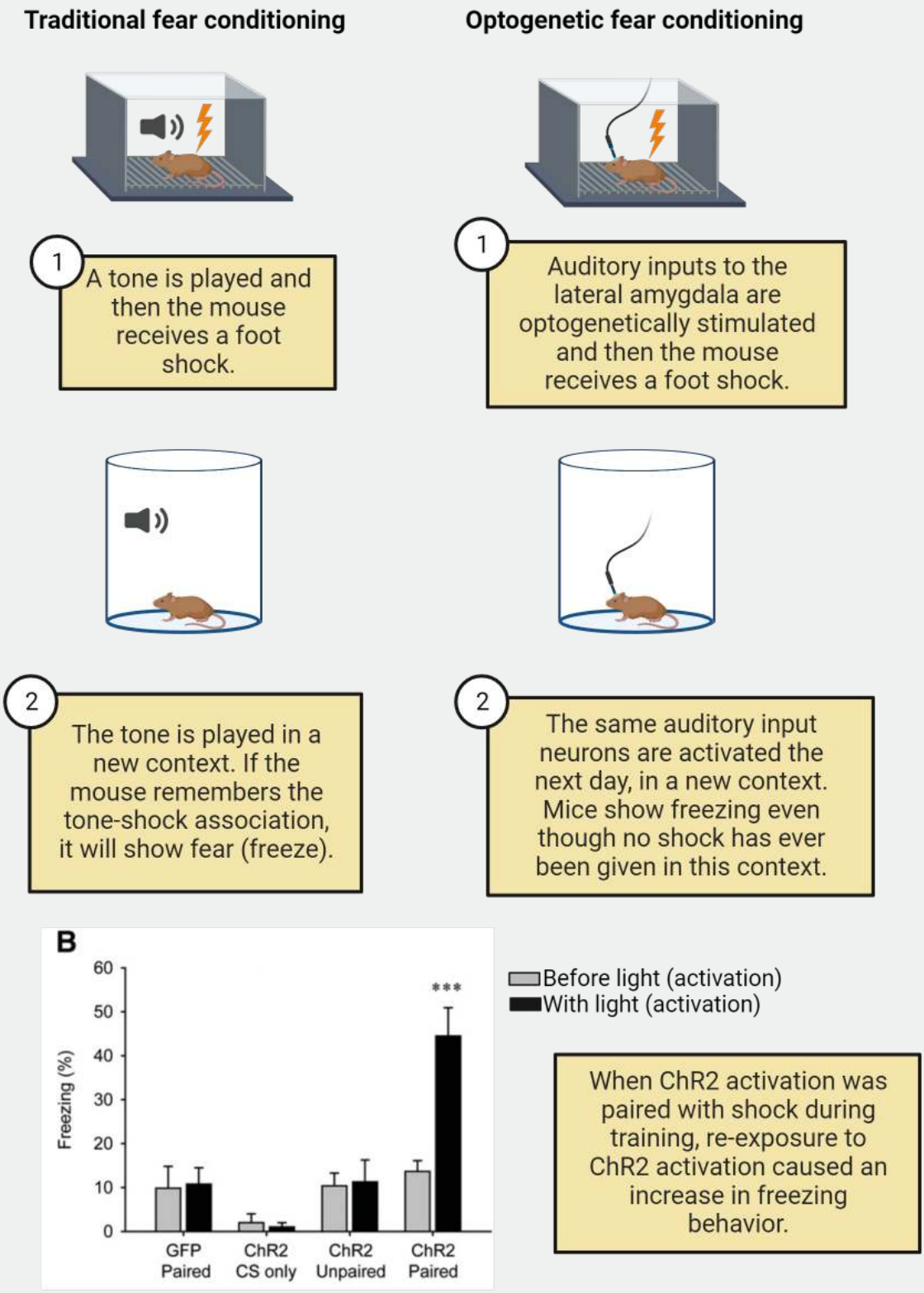


Figure 13.14 Optogenetic activation of fear memory Data from: Kwon et al., "Optogenetic activation of presynaptic inputs in lateral amygdala forms associative fear memory." Learn Mem. 2014 Nov; 21(11): 627–633. CC BY-NC 4.0

Kwon's group used optogenetics to determine if the amygdala is the actual site where associations between the tone is formed with the footshock during the generation of fear to neutral stimuli. The main manipulation involved using viral vectors to incorporate

ChR2 within the parts of the auditory cortex that provide one source of auditory input to the lateral amygdala. The clever part of this study involved substituting the neutral tone with optogenetic activation of the auditory projections. To produce associative learning in this study, experimental animals received six pairings of optogenetic stimulation of auditory axons innervating the amygdala with a footshock, *rather than tone*-shock pairings (middle of Figure 13.14). The main question of interest here is whether associative memories develop following this artificial form of simulating auditory stimuli and pairing this experience with a threatening event.

This question was assessed twenty-four hours later by placing the animals in a new context (Context B), void of any previous associations and essentially fearless since no footshock was presented during this memory test. While in this neutral context, auditory inputs innervating the lateral amygdala were activated once again with optogenetic blue lights to represent the stimulus that was previously paired with the fearful footshock. The authors found that reactivating the connections between auditory inputs and the lateral amygdala (i.e. ChR2 paired group) was sufficient to produce the emotional response of fear even though no footshock was given in this new context. Notice in the graph in the bottom of Figure 13.14, the low level of fear learning observed in mice that received only optogenetic stimulation without footshock (ChR2 CS only) or those given optogenetic activation of auditory inputs that were not paired directly with footshock delivery (i.e. ChR2 Unpaired). The absence of associative learning in these group reveal that stimulation of inputs to the amygdala is not sufficient to produce emotional learning. Associative processes leading to learning in the lateral amygdala occurs only when auditory stimulation is paired with some emotion provoking event such as footshock delivery. The findings demonstrate that activation of auditory signals in the lateral amygdala serve as a potent conditioned stimulus that forms long term memories with the footshock to produce emotional responses of fear.

Insula Cortex

Thus far, we have discussed more reflexive regions of the Papez circuit, the amygdala and hypothalamus. Now, we will move on to brain regions that form cognitive appraisal and evaluative functions to generate emotions that are appropriate for any given circumstance. One major area that is involved in this process is the insula cortex. Insula cortex activity leads to an awareness of affective feelings and eventual emotions. Early studies conducted by the famous neurosurgeon Walter Penfield established that patients receiving electrical stimulation in the insula cortex reported unusual visceral sensations consistent with the experience of disgust associated with uneasy sensations in the stomach or throat, smelling or tasting something bad, and the experience of nausea (Penfield & Faulk 1955). In subsequent studies, it was found that insula stimulation produces a range of other emotions including feelings of empathy, intuition, unfairness, risk and uncertainty, trust and cooperation. The unique behavioral deficits that emerge after damage to the anterior insula cortex provide even greater clues to its function in emotions. Following insula lesions, patients do not express the emotion of disgust to unpleasant scenes involving body products, mutilations, etc. that are evoked in humans with an intact insula (Adolphs et al. 2003). They are also impaired in identifying signs of other emotions from either the facial expressions or inflections in voice produced by others.

The clinical and empirical observations discussed above make sense, given that the insula receives representations of the current state of internal bodily sensations (interoception) along with recreated replicas of the external environment (exteroception). The insula also has bi-directional communication with a variety of other cortical brain regions involved in emotion, memory, language and reasoning, such as the amygdala, ventral striatum, ventral medial prefrontal cortex, dorsolateral prefrontal cortex and anterior cingulate cortex. These connections are shown in Figure 13.15. Together, communication between these regions permit the insula to form appraisals of each emotional event by incorporating interoceptive and exteroceptive changes already processed in this area, with subjective feelings, personal reflections on the feelings and the cognitive resources to express them.

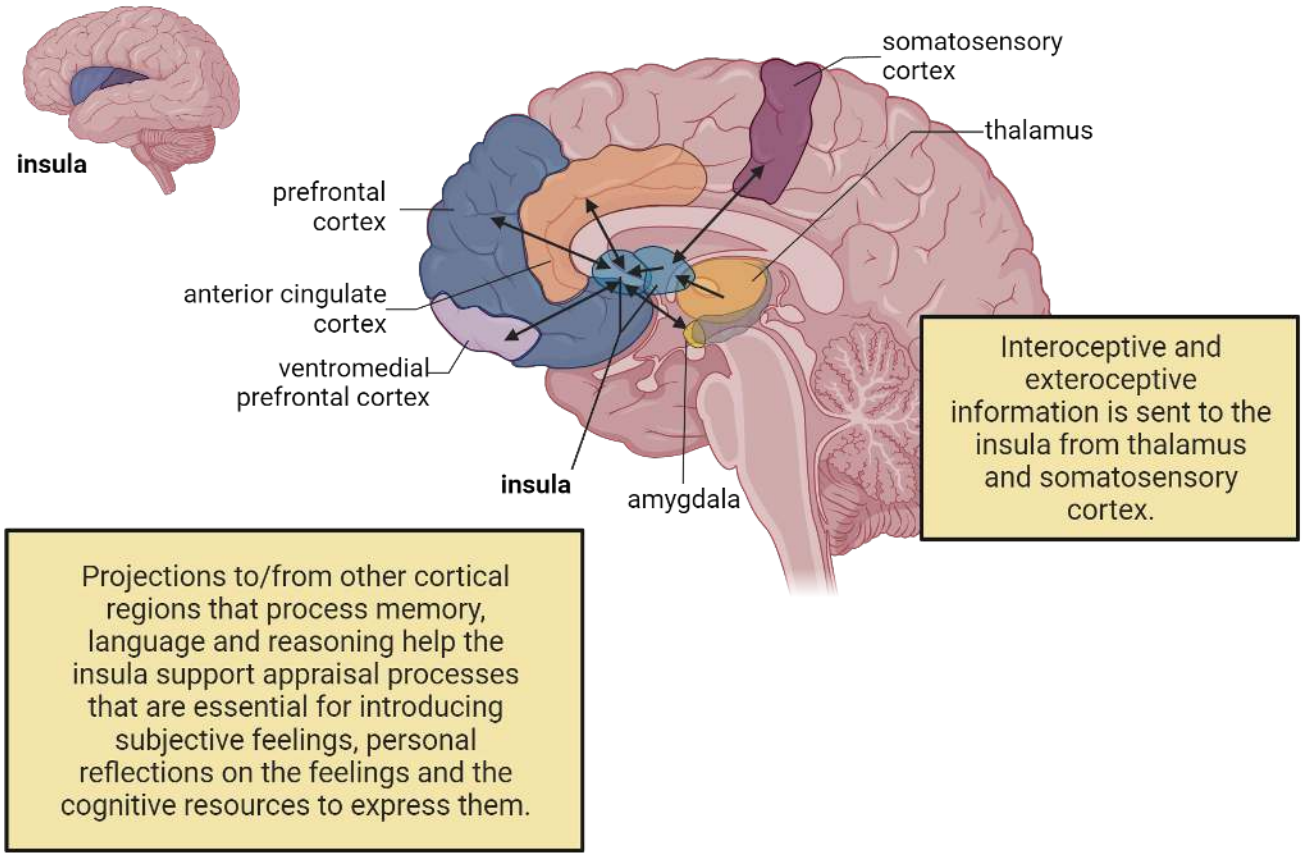


Figure 13.15 Insula cortex connections and function

Prefrontal Cortex

The prefrontal cortex can be functionally divided into two major areas: the orbitofrontal cortex and the dorsolateral prefrontal cortex. Figure 13.16 shows the relative locations of these regions on a 3D human brain surface rendering. Each of these regions has distinct functions in emotions.

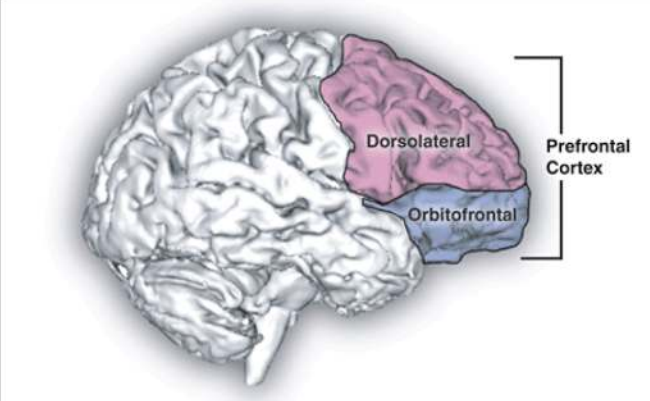


Figure 13.16 Prefrontal cortex regions Image By Natalie M. Zahr, Ph.D., and Edith V. Sullivan, Ph.D. - Natalie M. Zahr, Ph.D., and Edith V. Sullivan, Ph.D. "Translational Studies of Alcoholism Bridging the Gap" Alcohol Research & Health, Volume 31, Number 3, p.215- (2008)[1], Public Domain, https://commons.wikimedia.org/w/inde...?curid=8663554

Orbitofrontal cortex

As shown in Figure 13.17, the ventromedial prefrontal cortex is a part of the prefrontal cortex, located just above the eye sockets (or orbits). This location is why it is also called the orbitofrontal cortex.

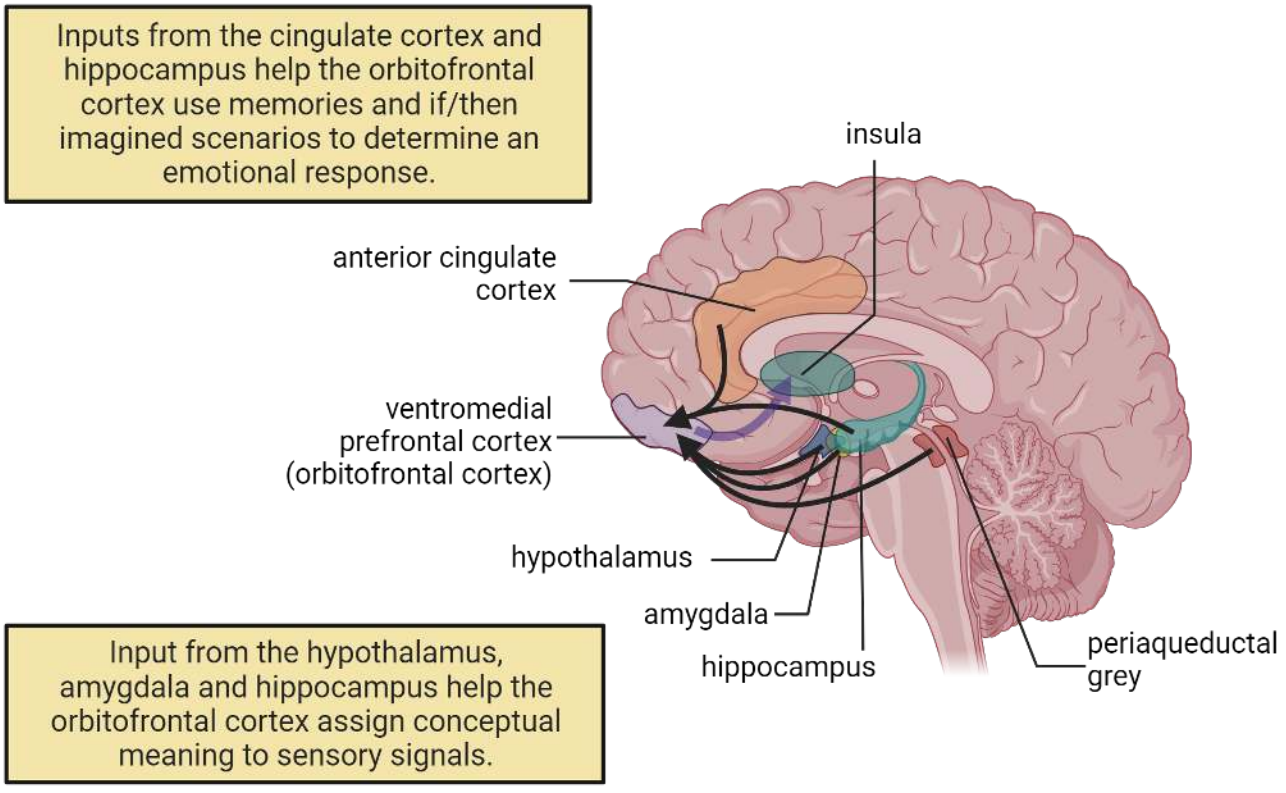


Figure 13.17 Ventromedial prefrontal cortex

The orbitofrontal cortex has multiple reported roles in emotion but we will focus here on 2 major ones: 1) assessing the goal-relevance of exteroceptive signals from the environment and 2) using internally generated thoughts pertaining to both episodic memories (*i.e. memory for personal events*) and imagined future events to determine the types of responses an organism should display to maintain allostasis in the face of new circumstances. The product of these internally generated processes in the

orbitofrontal cortex is submitted to the insula to assist in the appraisal of new events. The importance of this evaluative process makes it easier to understand why humans that lack the vital contribution of the orbitofrontal cortex due to damage or surgery display extreme states of anger, lack self-control, and are more prone to rapid aggression without thinking about the consequences of these negative responses. Below, we discuss some of the connections in the brain that facilitate these two functions, which are also exemplified in Figure 13.17.

- *Assessing goal-relevance of exteroceptive signals*: Orbitofrontal cortex neurons are supplied with neural signals representing every stimulus modality (exteroceptors) in the outer world. This arrangement may explain why neural activity in the orbitofrontal cortex is elevated when humans are exposed to somatosensory stimulation, visually presented scenes of erotic images, or facial expression involving either rewarding stimuli such as smiles or aversive stimuli in the form of angry expressions (for a review see, Dixon, Thiruchselvam, Todd, & Christoff, 2017). Interconnections with the amygdala, hypothalamus, and periaqueductal gray then help with assessing the goal-relevance of these exteroceptive signals. These areas provide information regarding rewards, punishment, current physiological needs and the agonistic or appetitive behaviors to exert on the environment to achieve these goals. The orbitofrontal cortex uses this information to assign positive or negative emotional labels to exteroceptive stimuli by considering how responses exerted on the environment in the past led to either favorable or undesirable consequences for the organism. The assessment role of the orbitofrontal cortex is in many ways an extension of the role of the amygdala in assigning affective value to sensory stimuli. The orbitofrontal cortex extends the role of the amygdala by learning the ever-changing relationships between sensory features of exteroceptive stimuli.
- *Using internal thoughts, memories and imagined events to determine a response*: The orbitofrontal cortex receives a great deal of information from brain structures involved in planning and simulating "if/then" scenarios of the possible outcomes of a given response. It is also the recipient of inputs from brain regions that store long term episodic memories of the outcomes of responses made in the past to exteroceptive stimuli including the hippocampus and cingulate cortex. These kinds of connections are the reason that activity of some orbitofrontal cortex neurons are more readily observed when humans are engaged in internally oriented thinking, but inhibited when it is necessary to focus attention on externally presented stimuli. The orbitofrontal cortex draws on these connections to contribute to an organism's personal appraisal of higher-order internal events, self-reflection of thoughts and memories triggered by a given event.

Dorsolateral Prefrontal Cortex.

The dorsolateral prefrontal cortex is a separate structure attributed a role in the process of emotional appraisal. Cognitive mechanisms in the dorsolateral prefrontal cortex are quite complex and perform a range of high-level computations on the behavioral actions an organism makes. Dorsolateral prefrontal cortex neurons are given the executive task of understanding the rules governing any given social environment, the goals of the organism in terms of allostasis and performing continuous updates or corrections of one's ongoing emotional state (see Chapter 19 Attention and Executive Function). This highly complex responsibility is a necessary component of emotion regulation, the process where value is assigned to emotional feelings created by initial appraisal processes and the behavioral actions that were generated as a result. The dorsolateral prefrontal cortex sits in the "executive's seat" by attending to the emotional evaluation process occurring in the cortical and subcortical structures discussed above. It uses this information to guide responses in specific contexts away from non-adaptive, short term payoffs of immediate rewards, towards more favorable behavioral actions that materialize into beneficial future outcomes.

Anterior Cingulate Cortex

The theories proposed by James-Lange and Cannon-Bard both stressed the importance of physiological reactions within the body as contributors to the development of emotions. We now know that this component of both theories is mediated by neural activation of the anterior cingulate cortex. The functions of the anterior cingulate cortex can be divided into 3 domains, summarized in Figure 13.18.

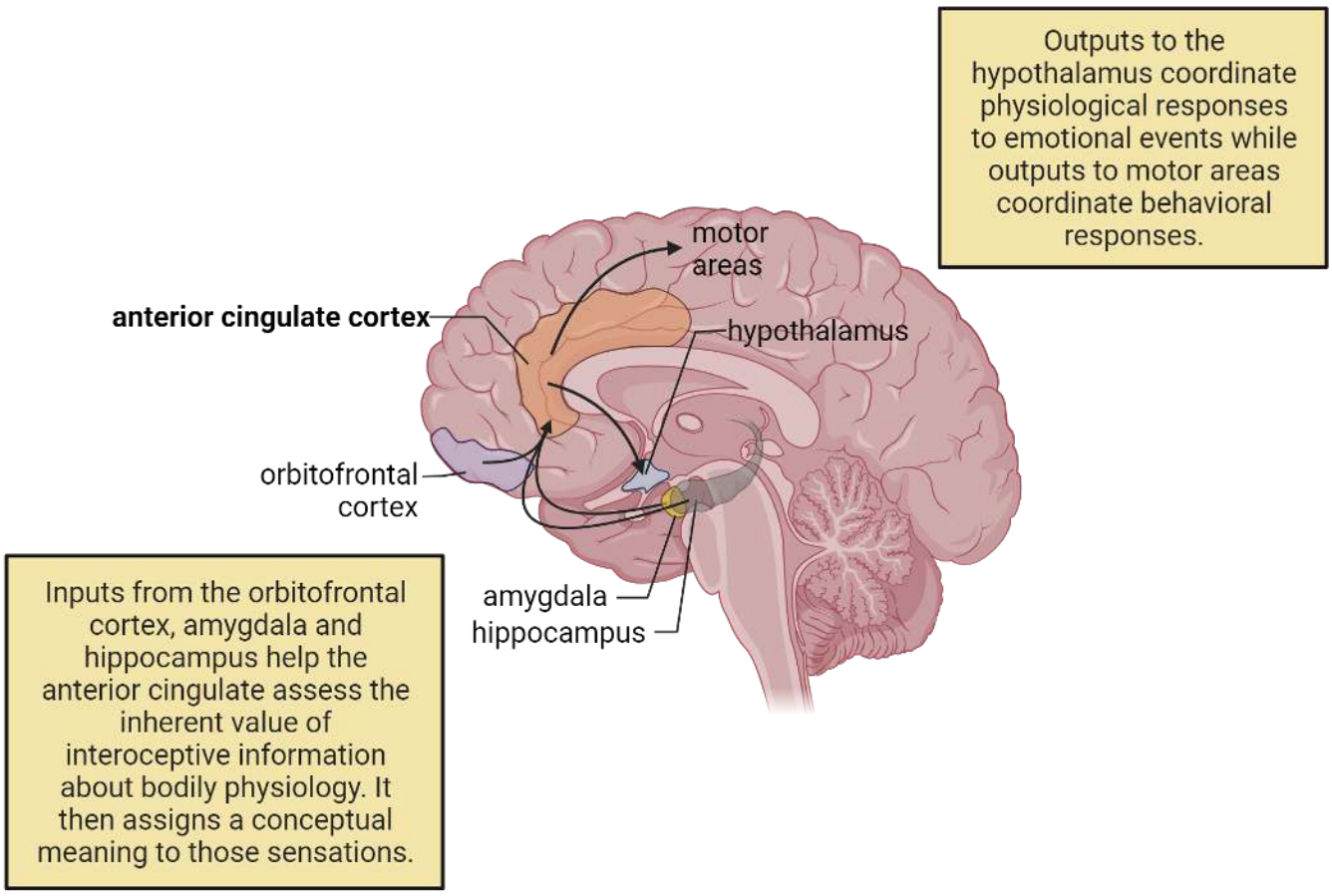


Figure 13.18 Anterior cingulate cortex and emotion

First, the anterior cingulate monitors internal physiology (e.g. heart rate, respiration) and makes evaluations to determine what level or intensity of physiological bodily adjustments are necessary to cope with the challenges posed by new experiences. To make these assessments, it uses important inputs from the orbitofrontal cortex, amygdala and hippocampus that project understanding of the inherent value, meaning, and also anticipated outcomes of a given situation. Downstream connections to the hypothalamus and other brainstem regions then allow it to influence internal physiological reactions.

Second, the cingulate cortex gives conceptual meaning to the physiological information it receives. It generates feelings of satisfaction when it deems the physiological information to reflect adaptation to external events, or states of displeasure when it assesses the behavioral and internal changes as not beneficial to the organism. Please note that the previous sections identified other brainstem and cortical structures that also process interoceptive signals. The contribution of the anterior cingulate cortex to emotions is somewhat different, however, since the appraisal processes undertaken in this area results in organisms developing*conceptual meanings* to the bodily sensations they experience. For example, many individuals avoid public speaking and the anticipation of even being in the stimulus context of an audience produces heightened levels of arousal and a number of unwanted interoceptive changes including raised heart rate, heavy breathing, tight feeling in the stomach or butterflies. These interoceptive changes also occur in experienced speakers, yet the*conceptual meaning* they apply to these changes may not be fear, anxiety or fright, but simply a suite of necessary signals to mark or denote the significance of the behavioral responses they are about to exert on the environment (i.e. public audience). The same application of *conceptual meaning* to internal changes is what distinguishes experienced, accomplished athletes from those who crumble under the stress and anxiety produced by these same interoceptive changes. The cognitive processing that takes place in the anterior cingulate cortex is what engenders one to not only to be aware of fluctuations in their interoceptive sensations, but to use conceptual knowledge to understand and regulate their emotional feelings that emerge in different contextual settings.

Third, the anterior cingulate cortex also assigns some positive or negative value to potential actions. It does this by assessing the degree of effort required to produce any potential action and maintaining a record of the observed consequences of the behavioral

response (i.e. favorable or unfavorable) during an emotional encounter (Rangel, Camerer, & Montague, 2008). Direct anatomical connections with areas of the motor system allow the cingulate to create action or response plans (see Chapter 10 Motor Control).

Neuroscience Across Species

Generalization of findings of fear, threat and anxiety across species

Much of our study of emotions has been informed by animal studies, especially in rodents. While animal studies have greatly advanced our understanding of neural circuitry underlying emotion, not all results from animals have generalized well to humans. The neural circuitry supporting fear provides a good example of the challenges of generalizing from animal models to humans. Fear is a particularly well-studied emotion in rodent models because rodents have characteristic fear-related behaviors that are easy to observe, such as freezing. Early work in animal studies generated the idea that a dedicated fear circuit exists in the brains of both rodents and humans to serve an evolutionary function of survival. The key to the fear circuit idea is that it is a single system and each piece is necessary to produce fear. Numerous animal studies have supported the existence of a fear circuit in rodent models with the amygdala performing a particularly critical role in generating fear.

More contemporary viewpoints challenge the fear circuitry position and propose that emotional responses are generated by a network of brain systems which differ in humans and rodents. Evidence against the fear circuit view in humans was obtained by studies demonstrating that humans with amygdala damage continued to display emotions of fear and threat despite an absence of the primary structure involved in the “fear circuit”. This study permitted three amygdala-lesioned participants to inhale 35% carbon dioxide CO_2, which is known to produce panic attacks and fear in normal participants. Despite having extensive amygdala damage as a result of Urbach-Wieth disease, all three participants displayed excessive fear responses, panic attacks, and elevated physiological markers of fear such as increased respiration and heart rate (Feinstein, et al., 2013). These findings are unique in that previous studies reported a complete absence of fear or threat in Urbach-Wieth participants during presentation of fearful external stimuli including live snakes, spiders, tour of a haunted house or emotionally evocative horror films (Feinstein, Adolphs, Damasio & Tranel, 2011). These findings support the idea of a network of brain emotional systems in humans. This network is capable of responding to external threats (mediated via the amygdala). In addition, other brain emotion systems may elicit fear and threat through connections with acid-detecting chemoreceptors that are sensitive to internal changes produced by elevated concentrations of CO_2 within the body.

The network position considers that, in humans, subjective feelings are mental states of *feeling* that are generated by higher order brain structures such as the prefrontal cortex, insula and cingulate cortices. These cortical structures are involved in planning, decision making, emotional regulation and emotional appraisal processing. According to this view, brain systems that generate*feelings* are completely separate from subcortical structures such as the amygdala and hypothalamus that play primary roles in detecting fear or threat. The major function of the subcortical systems are to prepare the organism by directing physiological changes in the body and defensive behavioral responses when organisms detect immediate sources of harm or danger such as those depicted in Figure 13.2, (or *a rapidly approaching vehicle, animal or human; a surprise quiz*), or when these uncomfortable states are uncertain or implied by some form of environmental stimuli (*e.g. plummeting economy that directly affects your line of employment; changes in the criteria for acceptance into graduate, medical, law or business school*).

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13.2.1.4: Mood and Emotional Disorders Associated with Depression

Learning Objectives

By the end of this section, you should be able to

- 13.4.1 Provide an overview of what is currently known regarding the etiology of mood disorders.
- 13.4.2 Delineate the distinct and overlapping neural circuits underlying depression.
- 13.4.3 Understand the origin of current therapeutic approaches for treating the symptoms underlying depression.

We have learned the critical roles of the amygdala, hypothalamus, insula, anterior cingulate and prefrontal cortex in the regulation of emotions. Disorders of emotion are so difficult to treat because malfunctions within any of these structures, or more commonly between their interconnections, can lead to severe disturbances in behavior. Many of the symptoms of mood disorders involving anxiety or depression include severe changes in the appetitive and agonistic behaviors that are governed by the hypothalamus. Hypothalamic functioning is regulated through strong projections from the amygdala. Hypoactivity in these inputs lead to the characteristic symptoms associated with depression that are described in detail in the Diagnostic and Statistical Manual of Mental Disorders (DSM). The DSM is the handbook psychologists and psychiatrists use to develop diagnoses of patients with mental disorders. Symptoms of depression are manifested by reduced appetite, sex drive, motivation, sleep disturbances and sympathetic autonomic activity. Disruptions in these agonistic behaviors is accompanied by more higher-level disturbances in cognitive functioning leading to increased worrying, obsessive anxiety, sadness, hopelessness, irritability and withdrawal from social forms of engagement. Cortical areas in the Papez circuit add a layer of higher cognitive subjective evaluation of how we think and feel about our environment. Disturbances in this circuitry may constrain the amygdala and hypothalamus to improperly regulate agonistic and appetitive behaviors that are targets of emotional disorders. One variable that distinguishes mental disorders of depression or anxiety from the natural changes in fear or sadness routinely experienced by all is the actual duration the emotional disturbances persist within an individual. For example, a diagnosis of depression in the DSM includes each of the above disturbances in body and thinking that extends consistently beyond a period of two-weeks. This section will explore our emerging understanding of the neural circuitry of depression.

Neurochemical imbalances as a cause of depression

The internal psychological and physiological changes associated with this disease may develop from either extreme reaction to unfortunate environmental events or may be endogenous or internal in nature. Some environmental events producing depression include loneliness, traumatic experiences, grief, romantic rejection, long-term stress, or loss of status or hierarchy from unemployment. The endogenous contributors to depression involve identifiable chemical imbalances in the neural circuits that regulate the neurotransmitters, norepinephrine, serotonin or glutamate.

One of the first clues prompting scientists to examine the role of neurotransmitters in depression originated from observations of patients in Sea View Hospital on Staten Island, New York in the 1950's (reviewed in López-Muñoz, Alamo, Juckel, & Assion, 2007). These patients were forced into the sanitorium after being diagnosed with the very contagious and fatal disease of tuberculosis. You can imagine how patients would develop extreme depression based on the severity of this disease, isolation from family and friends due to forced confinement and loss of employment and careers while being sanctioned to a sanitorium. The patients were treated with the drug iproniazid because of its potent effects on the respiratory system and capacity to increase activity in the central nervous system. These actions are produced by preventing enzymatic breakdown of the neurotransmitter norepinephrine by inhibiting the enzyme monoamine oxidase (MAO). The MAO enzyme plays a role in destroying the residual norepinephrine that is taken back up into the cell after it is released in the synaptic cleft following an action potential. Inhibiting MAO results in elevated levels of norepinephrine that serves as a potent transmitter in activating the amygdala, hypothalamus, hippocampus and several other arousal related structures in the Papez circuit. Surprisingly, patients treated with the MAO inhibitor iproniazid were described as dancing in the halls, in a constant "party mood", and frequently euphoric despite having holes in their lungs from tuberculosis and no hope of a cure from this fatal disease. This effective mood improving drug was soon discontinued because of its toxic effects on the liver and a search for new classes of antidepressants began.

A greater understanding of iproniazid's effectiveness prompted investigations to study a new class of MAO inhibiting drugs known as tricyclic antidepressants. In the 1950's and 60's, clinical signs of depression were experimentally reproduced in the lab by injecting the drug reserpine in monkeys and rabbits (Sandler, 1990). Reserpine treatment destroys norepinephrine molecules within the synaptic vesicles of axons. Administration of the tricyclic antidepressant imipramine was very effective in reversing the depression produced by reserpine treatment and restoring the animals to a sense of well-being. Later investigations revealed that MAO inhibition also elevated brain concentrations of the neurotransmitter serotonin, and this finding is the basis for the discovery of a class of drugs known as selective serotonin reuptake inhibitors (SSRI).

SSRIs work by blocking the reuptake of serotonin at serotonergic synapses (Figure 13.19) (see Chapter 14 Psychopharmacology). This blockade allows serotonin to build up in the synapse and therefore increase activation of postsynaptic receptors.

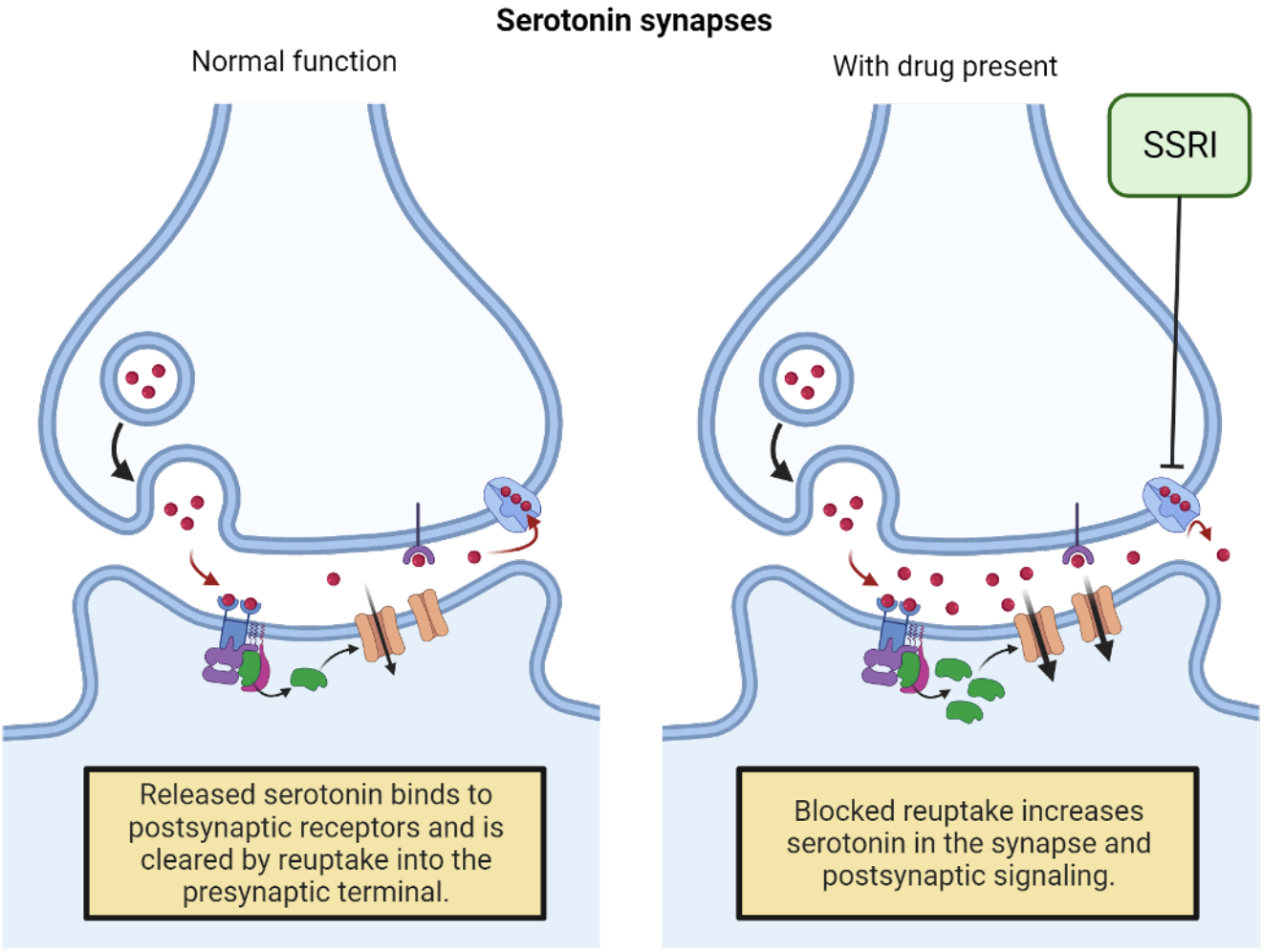


Figure 13.19 SSRI mechanism

The most commonly known SSRI is Prozac, although other compounds in this class such as Paxil and Zoloft are just as effective in alleviating symptoms of depression. All of these SSRIs elevate serotonin in the brain without any direct actions on norepinephrine.

Restoring deficiencies in brain concentrations of norepinephrine and serotonin does alleviate depressive symptoms, but these changes alone are not the only culprits contributing to this disruptive mood disorder. As a reminder from Chapter 3 Basic Neurochemistry, serotonergic and norepinephrine axons originate primarily in discrete brainstem nuclei (the raphe nucleus and locus coeruleus) (Figure 13.20). They send their axons broadly throughout the brain, releasing neurotransmitter in many brain regions of the Papez circuit and in the prefrontal structures that can regulate the Papez circuit.

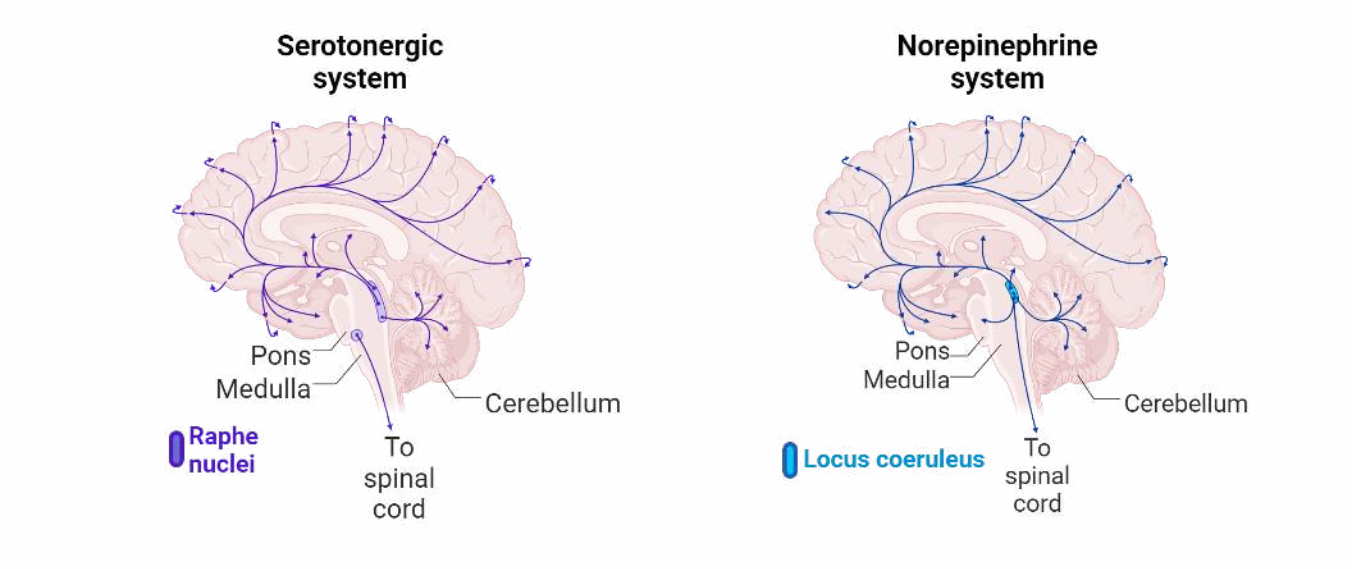


Figure 13.20 Serotonergic and norepinephrine systems

Neurotransmitters play a special role in facilitating or inhibiting neural communication between brain structures, therefore a closer examination of *where* these restorative changes take place will increase our understanding of the etiology of depression. To better understand the brain regions contributing to depression, we next turn to evidence for the role of the prefrontal cortex in onset and relief of depression.

Prefrontal cortical dysfunction as a cause of depression

Michael Koenigs at the University of Wisconsin reported on two unusual case studies that provided answers to the potential sources of depression within emotion-related brain structures comprising the Papez circuit. The two separate case studies involved a woman and man who attempted suicide by self-inflicted wounds to the brain by a gunshot (Koenigs, Huey, Calamia, Raymont, Tranel, & Grafman, 2008) and a cross-bow, respectively (Ellenbogen, Hurford, Liebeskind, Neimark, & Weiss, 2005). Both attempts at suicide were unsuccessful and the patients recovered. In both patients, the wounds produced profound damage to the ventromedial prefrontal cortex (which includes the orbitofrontal cortex) in both hemispheres (see red circles in Figure 13.21 for the location of the gunshot wound) but spared the dorsolateral prefrontal cortex.

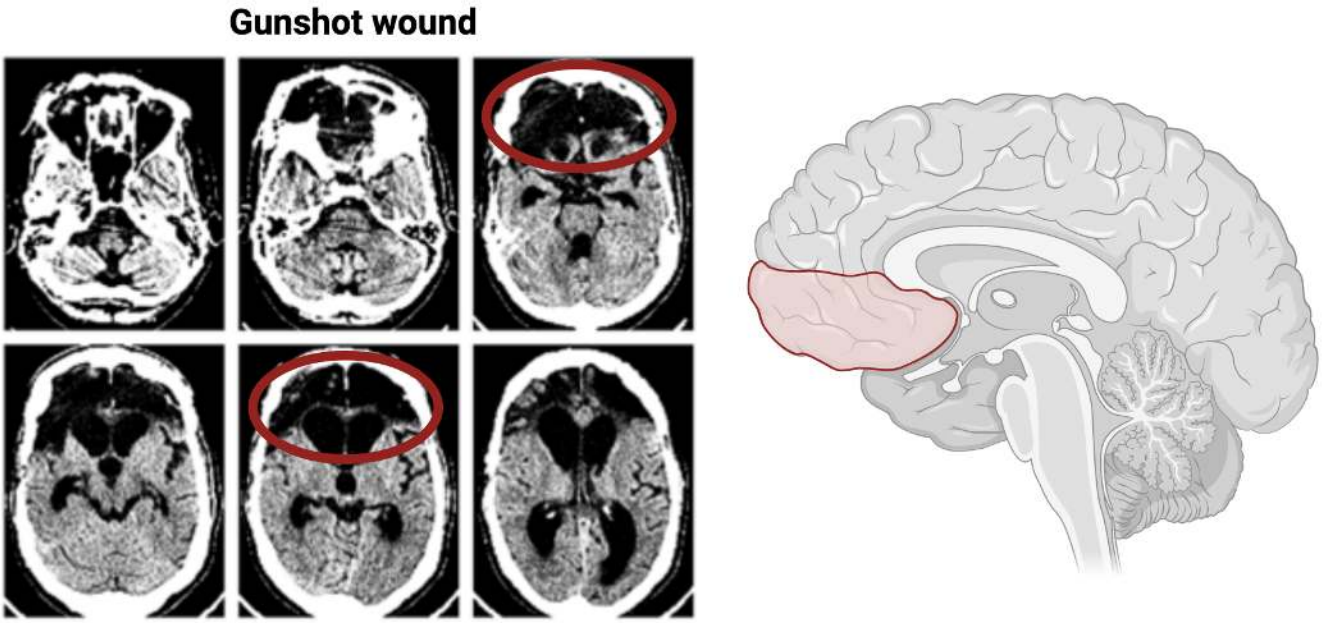


Figure 13.21 Damage in vmPFC after suicide attempts An attempt at suicide with a gunshot wound that damaged the ventromedial PFC in both hemispheres but spared the dorsolateral PFC. The patient reported absolutely no feelings of sadness or suicidal thoughts after recovering. Image credits: Gunshot image from Koenigs M, Huey ED, Calamia M, Raymont V, Tranel D, Grafman J. Distinct regions of prefrontal cortex mediate resistance and vulnerability to depression. J Neurosci. 2008 Nov 19;28(47):12341-8. Copyright 2008 Society for Neuroscience. https://www.jneurosci.org/content/28/47/12341, image located in supplemental material.

Surprisingly, the woman reported absolutely no feelings of sadness or suicidal thoughts after recovering. Her personal observations were corroborated by the patient's boyfriend and clinicians. They all noted a complete absence of depressive symptoms and that her mood disorder was essentially cured after her injury. The man who produced similar damage to this area was reported to be "*inappropriately cheerful and completely indifferent*" to his new state of brain injury. Together, the findings pointed to the ventromedial prefrontal cortex as possible generator of melancholic, morbid and depressive symptoms and highlighted a key brain region where clinicians may exploit to alleviate symptoms of this disease.

Take a moment and consider the magnitude of implications surrounding this discovery. First, the intensity and degree of depression was so severe that both individuals consciously chose death as an alternative to continuing to live in such a debilitating emotional state. This decision also reveals the symptoms they experienced were not mild or moderate forms of depression but the more deep and unrelenting forms that are often unresponsive to therapy or antidepressant treatment. Fortunately, the outcomes of these case studies afforded scientists and clinicians an opportunity to narrow down and isolate a single region of the brain as the dysfunctional key to unlock a mystery of this disease.

While these two case studies are compelling, they cannot prove that loss of the ventromedial prefrontal cortex specifically caused the improved mood of the patients. To provide more conclusive proof, a more formal empirical study was conducted by Michael Koenigs' group in 2008 to determine if abnormal activity in the ventromedial prefrontal cortex contributes to the aberrant emotional symptoms common to depression. Koenig initiated a large-scale study that included participants from the Vietnam Head Injury Study registry and the Patient Registry of the Cognitive Neuroscience Division at the University of Iowa. They limited their selection to individuals with verifiable brain injuries to either the ventromedial prefrontal cortex or dorsolateral prefrontal cortex from penetrating head wounds incurred during the Vietnam War or Iowans with injury to these areas after stroke, accidents or surgery. The Beck Depression Inventory (BDI) was the tool used to assess the severity of depression present in the two groups of brain injured participants. The BDI uses a scale of where scores of 8 or below indicate "no or low depression" whereas "high depression" is marked by scores above 20. Koenig's group not only replicated the observations noted in the case studies, that ventromedial prefrontal cortex damage alleviates depression, but they also discovered that damage to the dorsolateral prefrontal cortex actually exacerbates symptoms associated with this disease.

The overall findings of this study are shown in (Figure 13.22).

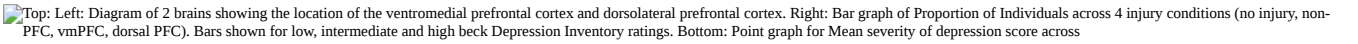


Figure 13.22 Severity of depression in patients with vmPFC vs dlPFC lesions Graphs from Koenigs M, Huey ED, Calamia M, Raymont V, Tranel D, Grafman J. Distinct regions of prefrontal cortex mediate resistance and vulnerability to depression. J Neurosci. 2008 Nov 19;28(47):12341-8. Copyright 2008 Society for Neuroscience. https://www.jneurosci.org/content/28/47/12341

It is important to note that almost 100% of participants with ventromedial prefrontal cortex damage were diagnosed with little or no depression on the BDI. In contrast, over 75% of participants with dorsolateral prefrontal cortex damage displayed symptoms that correspond to high levels of depression on the BDI scale. The graph in Figure 13.22 provides a more comprehensive description of the suite of "Cognitive/Affective" vs "Somatic" or bodily depressive symptoms assessed with the BDI. Note the absence of ratings in most categories by participants with bilateral damage to the ventromedial prefrontal cortex and the opposite results of much higher ratings of pathological symptoms in those with bilateral damage to the dorsolateral prefrontal cortex. A separate important finding to take away from this study is that the behavioral outcomes produced by ventromedial prefrontal cortex damage renders these individuals less susceptible to depression than normal healthy controls (i.e. no lesion group).

So how can the anecdotal case studies and findings from this study be integrated with your understanding of how cortical structures contribute to the development of emotions? In review, we know the range of physiological changes accompanying negative emotions are coordinated through top-down control from the ventromedial prefrontal cortex to the periaqueductal gray, hypothalamus, and amygdala. Thus, damage to this area most likely diminishes the type of physiological responses these patients experience in response to emotional stimuli that generates negative mood in normal individuals. The ventromedial prefrontal cortex is also associated with self-awareness and self-reflection and lesions to this area produce a loss of self-insight that is characterized by reduced negative affect and diminished ability to experience negative emotions such as shame, guilt, embarrassment, and regret, self-dislike, and even sadness (Fitzgerald, 2003). As a consequence, damage to the ventromedial prefrontal cortex may decrease symptoms of depression by blunting self-awareness and self-reflection (Beer, John, Scabini, & Knight, 2006) which is consistent with the self-reported levels of these emotional reactions by ventromedial prefrontal cortex damaged subjects shown in Figure 13.22.

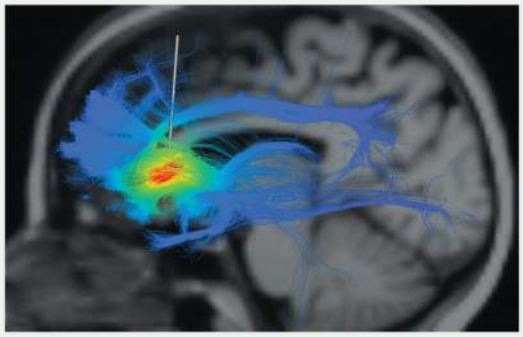
The heightened level of depression evident following dorsolateral prefrontal cortex lesions may be related to the multiple cognitive functions that occur simultaneously in this area. For example, activity in the dorsolateral prefrontal cortex is observed when an individual maintains events in working memory, or is engaged in abstract reasoning or in the process of forming intentions that will be converted into goal directed actions (Phan, Fitzgerald, Nathan, Moore, Uhde, &Tancer, 2005). The consequence or readout of this reappraisal of goal strategies is mediated through dorsolateral prefrontal cortex projections to the pre-, supplemental and motor cortex that ends in some physiological and behavioral response to emotional stimuli. Therefore, if the reappraisal process that may inhibit negative emotions is normally adaptive in protecting against depression, it is clear how disruptions in this process with dorsolateral prefrontal cortex damage may lead to increased symptoms of depression (Ongur & Price, 2000).

Translational applications of understanding the role of cortical and subcortical structures in mood disorders

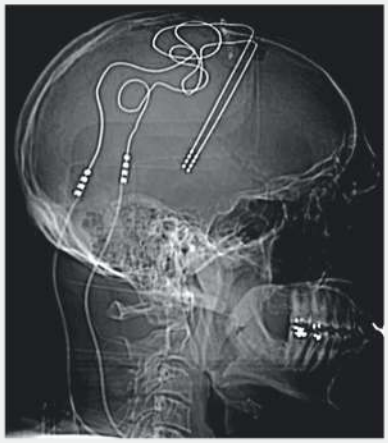
Dr. Helen Mayberg is an initial pioneer in the use of deep-brain stimulation (DBS) as an alternative approach to alleviate mood disorders in patients with persistent depression after prolonged, yet ineffective drug or psychotherapy treatment (Mayberg, 2009) (see Methods: Deep Brain Stimulation). She is co-inventor of using chronic intermittent DBS therapy to target Area 25 (the subcallosal cingulate or SCC) and this approach is now licensed to the pharmaceutical company, Abbott Laboratories. The SCC and nerve tracts surrounding Area 25 are "emotional hubs" in the brain because they communicate the processing of negative, unpleasant, and sad emotional content to other brain regions through the many white matter or nerve pathways depicted in the tractography image in the top right of (Figure 13.23) (Vogt, 2005). These important connections carry the products of emotional processing in temporal lobe structures, hippocampus, amygdala and medial prefrontal cortex to other regions of the emotional circuit (Harnett, Ference, Knight, & Knight, 2020).



Dr. Helen Mayberg showed that deep-brain stimulation (DBS) of Area 25 of both hemispheres suddenly produces a sense of calm, joy and alleviation of depression.



This tractography image shows the extensive connections of **Area 25**, which sits at the junction of major white matter bundle tracts below the cingulate cortex.



An X-ray shows the actual site of electrode placement in a patient. The wires extended down from the back of the brain connect to a battery pack that is programmed to deliver intermittent electrical pulses to Area 25.

Initial responses of patients after 2-3 pulses

"the tension is gone"

"I'm not longer drowning"

"I'm out of the hole"

"the room is brighter"

"I feel lighter"

"I feel like cleaning"

Figure 13.23 Work of Helen Mayberg Image of Helen Mayberg from Heiden P, Pieczewski J and Andrade P (2022) Women in Neuromodulation: Innovative Contributions to Stereotactic and Functional Neurosurgery. Front. Hum. Neurosci. 15:756039. doi: 10.3389/fnhum.2021.756039. CC BY 4.0. Image of tractography courtesy of Wald, L.Reproduced with permission. Image of DBS probes in a braincourtesy of Helen Mayberg, MD. Icahn Scool of Medicine Mount Sinai. Reproduced with permission.

Dr. Mayberg was motivated to examine Area 25 after several reports noted hypermetabolism and *overactivity* in this brain region of depressed patients. Other studies demonstrated that activity in Area 25 was normalized (i.e. reduced) in patients experiencing beneficial outcomes in depressive symptoms after successful drug treatment (reviewed in Mayberg, 2009). It may seem counterintuitive to introduce additional stimulation through DBS to an area already known to be abnormally hyperactive in depressed patients. However, Dr. Mayberg reasoned that stimulating white fiber pathways running under the SCC would serve to reboot or reset the overactivity in the SCC. DBS generally increases neuronal activity in a given area, but the opposite occurs when

stimulation affects a large pool of neurons containing the inhibitory neurotransmitter GABA. Activation of this pool of inhibitory neurons surrounding the SCC serves to reduce ongoing activity in this region and correct or re-balance the overactive signals projected from the SCC to other emotion-processing areas through the nerve tracts shown in Figure 13.23.

Detailed descriptions and interviews of Dr. Mayberg's discovery are profiled in a "CNN Presents" segment hosted by Dr. Sanjay Gupta and a "News Focus" paper in the journal Science, by Emily Underwood (Underwood, 2013). These segments described the initial successful DBS surgeries Dr. Mayberg performed at Emory University with the patient Mrs. Edi Guyton (openstax.org/r/Neuro13Gupta). The interview with Mrs. Guyton reveals that prior to the DBS, she couldn't smile, be happy or even express to others how she felt which led to cutting both of her wrists at attempts of suicide while a college student. This pattern continued for over 40 years with two additional attempts at suicide despite psychotherapy and drug treatment. Mrs. Guyton agreed to surgery to implant electrodes that provide the stimulation to nerve fibers around the SCC.

The lower left X-ray in Figure 13.23 shows what placement of electrodes looks like. Patients for this type of surgery are awake, although lightly sedated so the surgeons may analyze their mental and emotional state prior to, during and after the initial stimulation of area 25 ensues. When Mrs. Guyton used a scale from 1 (feeling pretty good) to 10 (very depressed) to rate her feelings before the stimulation, she offered a score of 8 (8 = dread). Once the DBS electrodes were turned on to deliver electrical pulses to Area 25, she stated "I just almost smiled; something I have not done in a long time". The stimulation also made her think about playing with her granddaughter Susan, even though she stated these are feelings that had never occurred before. In essence, she thought they were gone. Linda Patterson is another one of Dr. Mayberg's patients who noted after the surgery "I felt the best I've felt in my entire life and capable of experiencing the emotions of joy, exhilaration, the calming feeling of contentment as though I'm living in a different world."

What is striking about these positive testimonies is they evolve immediately after the first or second pulses of electricity are emitted through the nerve tracts surrounding the SCC, not after 2 to 3 weeks of stimulation. Two to 3 weeks is the normal time-course for antidepressant drugs to render any positive effects in reducing depression symptoms. A list of some of the phrases Dr. Mayberg's patients expressed in surgery following the initial stimulations of the SCC are shown in the bottom right of Figure 13.23. Follow-up evaluations of Mrs. Guyton 5 years after the surgery for DBS electrodes, revealed that "she feels good, all the time; If there is joy in my life, I have the capacity to feel it. She is thankful for her new life." These testimonies attest to the promise of this new approach of resetting patterns of aberrant neural activity in the junction between Area 25 and the highway of emotion-related pathways that run under this area.

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13.3: Hormones and Behavior

4.3: Hormones and Behavior

Introduction

This section describes the relationship between hormones and behavior. Many readers are likely already familiar with the general idea that hormones can affect behavior. Students are generally familiar with the idea that sex-hormone concentrations increase in the blood during puberty and decrease as we age, especially after about 50 years of age. Sexual behavior shows a similar pattern. Most people also know about the relationship between aggression and anabolic steroid hormones, and they know that administration of artificial steroid hormones sometimes results in uncontrollable, violent behavior called “roid rage.” Many different hormones can influence several types of behavior, but for the purpose of this module, we will restrict our discussion to just a few examples of hormones and behaviors. For example, are behavioral sex differences the result of hormones, the environment, or some combination of factors? Why are men much more likely than women to commit aggressive acts? Are hormones involved in mediating the so-called maternal “instinct”? Behavioral endocrinologists are interested in how the general physiological effects of hormones alter the development and expression of behavior and how behavior may influence the effects of hormones. This module describes, both phenomenologically and functionally, how hormones affect behavior.

To understand the hormone-behavior relationship, it is important briefly to describe hormones. Hormones are organic chemical messengers produced and released by specialized glands called endocrine glands. Hormones are released from these glands into the blood, where they may travel to act on target structures at some distance from their origin. Hormones are similar in function to neurotransmitters, the chemicals used by the nervous system in coordinating animals’ activities. However, hormones can operate over a greater distance and over a much greater temporal range than neurotransmitters (Focus Topic 1). Examples of hormones that influence behavior include steroid hormones such as testosterone (a common type of androgen), estradiol (a common type of estrogen), progesterone (a common type of progestin), and cortisol (a common type of glucocorticoid) (Table 1, A-B). Several types of protein or peptide (small protein) hormones also influence behavior, including oxytocin, vasopressin, prolactin, and leptin.

Focus Topic 1:

Neural Transmission versus Hormonal Communication

Although neural and hormonal communication both rely on chemical signals, several prominent differences exist. Communication in the nervous system is analogous to traveling on a train. You can use the train in your travel plans as long as tracks exist between your proposed origin and destination. Likewise, neural messages can travel only to destinations along existing nerve tracts. Hormonal communication, on the other hand, is like traveling in a car. You can drive to many more destinations than train travel allows because there are many more roads than railroad tracks. Similarly, hormonal messages can travel anywhere in the body via the circulatory system; any cell receiving blood is potentially able to receive a hormonal message.

Neural and hormonal communication differ in other ways as well. To illustrate them, consider the differences between digital and analog technologies. Neural messages are digital, all-or-none events that have rapid onset and offset: neural signals can take place in milliseconds. Accordingly, the nervous system mediates changes in the body that are relatively rapid. For example, the nervous system regulates immediate food intake and directs body movement. In contrast, hormonal messages are analog, graded events that may take seconds, minutes, or even hours to occur. Hormones can mediate long-term processes, such as growth, development, reproduction, and metabolism.

Hormonal and neural messages are both chemical in nature, and they are released and received by cells in a similar manner; however, there are important differences as well. Neurotransmitters, the chemical messengers used by neurons, travel a distance of only 20–30 nanometers (30 X 10–9 m)—to the membrane of the postsynaptic neuron, where they bind with receptors. Hormones enter the circulatory system and may travel from 1 millimeter to >2 meters before arriving at a target cell, where they bind with specific receptors.

Another distinction between neural and hormonal communication is the degree of voluntary control that can be exerted over their functioning. In general, there is more voluntary control of neural than of hormonal signals. It is virtually impossible to will a change in your thyroid hormone levels, for example, whereas moving your limbs on command is easy.

Although these are significant differences, the division between the nervous system and the endocrine system is becoming more blurred as we learn more about how the nervous system regulates hormonal communication. A better understanding of the interface

between the endocrine system and the nervous system, called neuroendocrinology, is likely to yield important advances in the future study of the interaction between hormones and behavior.

Steroid Hormones	
Cortisol	Increases carbohydrate metabolism; mediates stress responses
Estradiol	Uterine and other female tissue development; regulates sexual motivation and performance in females and males
Testosterone	Promotes sperm production and male secondary sexual characteristics; promotes sexual motivation and behavior, typically by being converted to estradiol

Table 1-A: Prominent Hormones That Influence Behavior

Peptides and Protein Hormones	
Oxytocin	Stimulates milk letdown and uterine contractions during birth; Promotes social bonding
Prolactin	Many actions relating to reproduction, water balance, and behavior associated with parental care
Thyroxine	Increases oxidation rates in tissue and affects neural development
Vasopressin	Increases water reabsorption in the kidney and affects learning and memory

Table 1-B: Prominent Hormones That Influence Behavior

Hormones coordinate the physiology and behavior of individuals by regulating, integrating, and controlling bodily functions. Over evolutionary time, hormones have often been co-opted by the nervous system to influence behavior to ensure reproductive success. For example, the same hormones, testosterone and estradiol, that cause gamete (egg or sperm) maturation also promote mating behavior. This dual hormonal function ensures that mating behavior occurs when animals have mature gametes available for fertilization. Another example of endocrine regulation of physiological and behavioral function is provided by pregnancy. Estrogens and progesterone concentrations are elevated during pregnancy, and these hormones are often involved in mediating maternal behavior in the mothers.

Not all cells are influenced by each and every hormone. Rather, any given hormone can directly influence only cells that have specific hormone receptors for that particular hormone. Cells that have these specific receptors are called target cells for the hormone. The interaction of a hormone with its receptor begins a series of cellular events that eventually lead to activation of enzymatic pathways or, alternatively, turns on or turns off gene activation that regulates protein synthesis. The newly synthesized proteins may activate or deactivate other genes, causing yet another cascade of cellular events. Importantly, sufficient numbers of appropriate hormone receptors must be available for a specific hormone to produce any effects. For example, testosterone is important for male sexual behavior. If men have too little testosterone, then sexual motivation may be low, and it can be restored by testosterone treatment. However, if men have normal or even elevated levels of testosterone yet display low sexual drive, then it might be possible for a lack of receptors to be the cause and treatment with additional hormones will not be effective.

How might hormones affect behavior? In terms of their behavior, one can think of humans and other animals conceptually as comprised of three interacting components: (1) input systems (sensory systems), (2) integrators (the central nervous system), and (3) output systems, or effectors (e.g., muscles). Hormones do not *cause* behavioral changes. Rather, hormones influence these three systems so that specific stimuli are more likely to elicit certain responses in the appropriate behavioral or social context. In other words, hormones change the probability that a particular behavior will be emitted in the appropriate situation (Nelson, 2011). This is a critical distinction that can affect how we think of hormone-behavior relationships.

We can apply this three-component behavioral scheme to a simple behavior, singing in zebra finches. Only male zebra finches sing. If the testes of adult male finches are removed, then the birds reduce singing, but castrated finches resume singing if the testes are reimplanted, or if the birds are treated with either testosterone or estradiol. Although we commonly consider androgens to be “male” hormones and estrogens to be “female” hormones, it is common for testosterone to be converted to estradiol in nerve cells (Figure 1). Thus, many male-like behaviors are associated with the actions of estrogens! Indeed, all estrogens must first be converted from androgens because of the typical biochemical synthesis process. If the converting enzyme is low or missing, then it is possible for females to produce excessive androgens and subsequently develop associated male traits. It is also possible for estrogens in the environment to affect the nervous system of animals, including people (e.g., Kidd et al., 2007). Again, singing behavior is most frequent when blood testosterone or estrogen concentrations are high. Males sing to attract mates or ward off potential competitors from their territories.

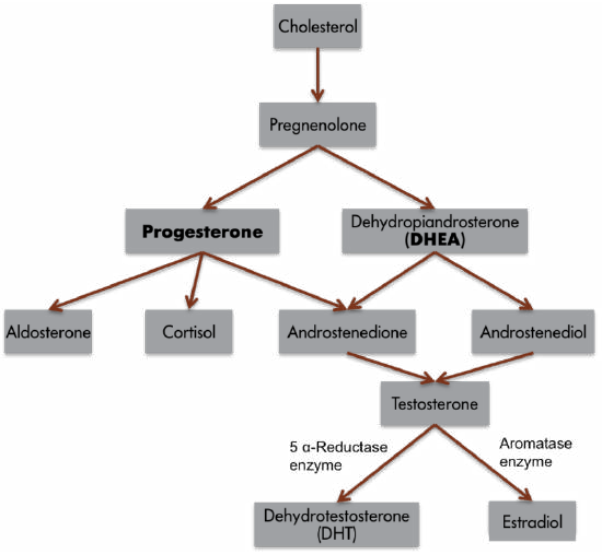


Figure 1: Biochemical Pathway for Steroid Hormone Synthesis: It is important to note that testosterone (an androgen) can be converted to another androgen, DHT, or an estrogen, estradiol. Too much or too little of the converting enzymes can influence brain and behavior.

Although it is apparent from these observations that estrogens are somehow involved in singing, how might the three-component framework just introduced help us to formulate hypotheses to explore estrogen's role in this behavior? By examining input systems, we could determine whether estrogens alter the birds' sensory capabilities, making the environmental cues that normally elicit singing more salient. If this were the case, then females or competitors might be more easily seen or heard. Estrogens also could influence the central nervous system. Neuronal architecture or the speed of neural processing could change in the presence of estrogens. Higher neural processes (e.g., motivation, attention, or perception) also might be influenced. Finally, the effector organs, muscles in this case, could be affected by the presence of estrogens. Blood estrogen concentrations might somehow affect the muscles of a songbird's syrinx (the vocal organ of birds). Estrogens, therefore, could affect birdsong by influencing the sensory capabilities, central processing system, or effector organs of an individual bird. We do not understand completely how estrogen, derived from testosterone, influences birdsong, but in most cases, hormones can be considered to affect behavior by influencing one, two, or all three of these components, and this three-part framework can aid in the design of hypotheses and experiments to explore these issues.

How might behaviors affect hormones? The birdsong example demonstrates how hormones can affect behavior, but as noted, the reciprocal relation also occurs; that is, behavior can affect hormone concentrations. For example, the sight of a territorial intruder may elevate blood testosterone concentrations in resident male birds and thereby stimulate singing or fighting behavior. Similarly, male mice or rhesus monkeys that lose a fight decrease circulating testosterone concentrations for several days or even weeks afterward. Comparable results have also been reported in humans. Testosterone concentrations are affected not only in humans involved in physical combat, but also in those involved in simulated battles. For example, testosterone concentrations were elevated in winners and reduced in losers of regional chess tournaments.



The expectation of events can influence one's hormonal activity. How do you think yours is affected if you anticipate going on a date with a romantic interest soon? [Image: CC0 Public Domain, https://goo.gl/m25gce]

People do not have to be directly involved in a contest to have their hormones affected by the outcome of the contest. Male fans of both the Brazilian and Italian teams were recruited to provide saliva samples to be assayed for testosterone before and after the final game of the World Cup soccer match in 1994. Brazil and Italy were tied going into the final game, but Brazil won on a penalty kick at the last possible moment. The Brazilian fans were elated and the Italian fans were crestfallen. When the samples were assayed, 11 of 12 Brazilian fans who were sampled had increased testosterone concentrations, and 9 of 9 Italian fans had decreased testosterone concentrations, compared with pre-game baseline values (Dabbs, 2000).

In some cases, hormones can be affected by anticipation of behavior. For example, testosterone concentrations also influence sexual motivation and behavior in women. In one study, the interaction between sexual intercourse and testosterone was compared with other activities (cuddling or exercise) in women (van Anders, Hamilton, Schmidt, & Watson, 2007). On three separate occasions, women provided a pre-activity, post-activity, and next-morning saliva sample. After analysis, the women's testosterone was determined to be elevated prior to intercourse as compared to other times. Thus, an anticipatory relationship exists between sexual behavior and testosterone. Testosterone values were higher post-intercourse compared to exercise, suggesting that engaging in sexual behavior may also influence hormone concentrations in women.

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13.3.1: ENDOCRINE HORMONES

PILLS FROM PEE

The medication pictured above with the brand name Progynon was a drug used to control the effects of menopause in women. The pills first appeared in 1928 and contained the human sex hormone estrogen. Estrogen secretion declines in women around the time of menopause and may cause symptoms such as mood swings and hot flashes. The pills were supposed to ease the symptoms by supplementing estrogen in the body. The manufacturer of Progynon obtained estrogen for the pills from the urine of pregnant women because it was a cheap source of the hormone. Progynon is still used today to treat menopausal symptoms. Although the drug has been improved over the years, it still contains estrogen. Estrogen is an example of an endocrine hormone.



Figure **13.3.1.1**: Progynon pills bottle circa 1930 UK

HOW DO ENDOCRINE HORMONES WORK?

Endocrine hormones like estrogen are messenger molecules that are secreted by endocrine glands into the bloodstream. They travel throughout the body in the circulation. Although they reach virtually every cell in the body in this way, each hormone affects only certain cells, called target cells. A **target cell** is the type of cell on which a hormone has an effect. A target cell is affected by a particular hormone because it has receptor proteins — either on the cell surface or within the cell — that are specific to that hormone. An endocrine hormone travels through the bloodstream until it finds a target cell with a matching receptor to which it can bind. When the hormone binds to the receptor, it causes changes within the cell. The manner in which it changes the cell depends on whether the hormone is a steroid hormone or a non-steroid hormone.

STEROID HORMONES

A **steroid hormone** such as estrogen is made of lipids. It is fat soluble, so it can diffuse across a target cell's plasma membrane, which is also made of lipids. Once inside the cell, a steroid hormone binds with receptor proteins in the cytoplasm. As you can see in the diagram below, the steroid hormone and its receptor form a complex, called a steroid complex, which moves into the nucleus where it influences the expression of genes. Examples of steroid hormones include cortisol, which is secreted by the adrenal glands, and sex hormones, which are secreted by the gonads.

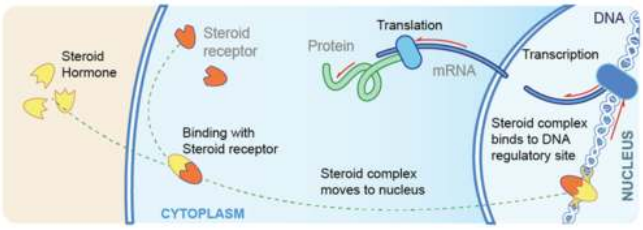


Figure **13.3.1.2**: A steroid hormone crosses the plasma membrane of a target cell, binds with a receptor protein within the cytoplasm, and forms a complex that moves to the nucleus where it affects gene expression.

NON-STEROID HORMONES

A **non-steroid hormone** is made of amino acids. It is not fat soluble, so it cannot diffuse across the plasma membrane of a target cell. Instead, it binds to a receptor protein on the cell membrane. In the following diagram, you can see that the binding of the hormone with the receptor activates an enzyme in the cell membrane. The enzyme then stimulates another molecule, called the second messenger, which influences processes inside the cell. Most endocrine hormones are non-steroid hormones. Examples include glucagon and insulin, both produced by the pancreas.

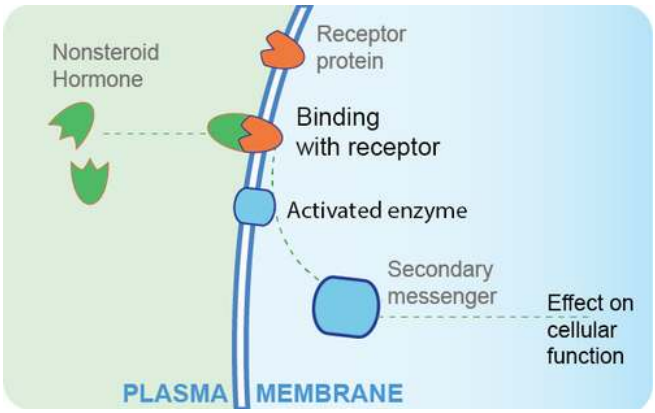


Figure **13.3.1.3**: A non-steroid hormone binds with a receptor protein on the plasma membrane of a target cell. This activates an enzyme, which controls a secondary messenger molecule.

REGULATION OF ENDOCRINE HORMONES

Endocrine hormones regulate many body processes, but what regulates the secretion of endocrine hormones? Most endocrine hormones are controlled by feedback mechanisms. A feedback mechanism is a loop in which a product feeds back to control its own production. Feedback loops may be either negative or positive.

- Most endocrine hormones are regulated by negative feedback loops. Negative feedback keeps the concentration of a hormone within a relatively narrow range and maintains homeostasis.
- Very few endocrine hormones are regulated by positive feedback loops. Positive feedback causes the concentration of a hormone

to become increasingly higher.

REGULATION BY NEGATIVE FEEDBACK

A negative feedback loop controls the synthesis and secretion of hormones by the thyroid gland. This loop includes the hypothalamus and pituitary gland in addition to the thyroid, as shown in Figure **13.3.1.4**. When the levels of thyroid hormones circulating in the blood fall too low, the hypothalamus secretes thyrotropin releasing hormone (TRH). This hormone travels directly to the pituitary gland through the thin stalk connecting the two structures. In the pituitary gland, TRH stimulates the pituitary to secrete thyroid stimulating hormone (TSH). TSH, in turn, travels through the bloodstream to the thyroid gland and stimulates it to secrete thyroid hormones. This continues until the blood levels of thyroid hormones are high enough. At that point, the thyroid hormones feedback to stop the hypothalamus from secreting TRH and the pituitary from secreting TSH. Without the stimulation of TSH, the thyroid gland stops secreting its hormones. Eventually, the levels of thyroid hormones in the blood start to fall too low again. When that happens, the hypothalamus releases TRH, and the loop repeats.

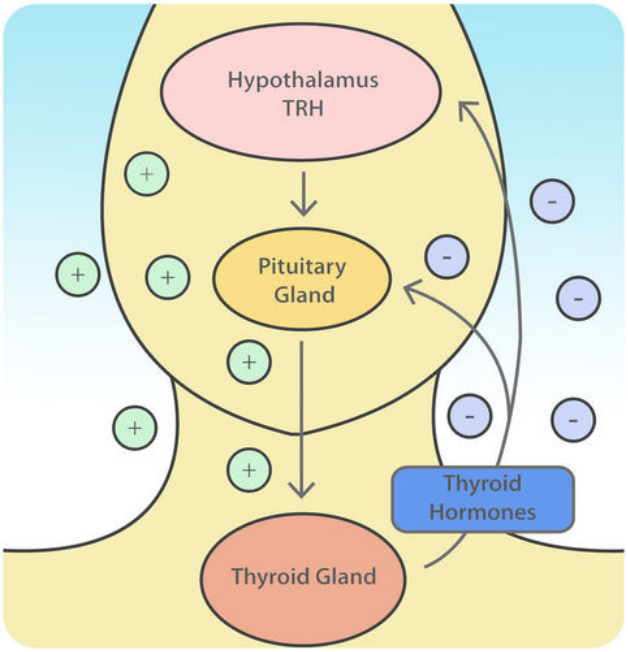


Figure **13.3.1.4**: This diagram shows how the thyroid gland is regulated by a negative feedback loop that also involves the hypothalamus and pituitary gland.

REGULATION BY POSITIVE FEEDBACK

Prolactin is a non-steroid endocrine hormone secreted by the pituitary gland. One of the functions of prolactin is to stimulate a nursing mother's mammary glands to produce milk. The regulation of prolactin in the mother is controlled by a positive feedback loop that involves the nipples, hypothalamus, pituitary gland, and mammary glands. Positive feedback begins when a baby suckles on the mother's nipple. Nerve impulses from the nipple reach the hypothalamus, which stimulates the pituitary gland to secrete prolactin. Prolactin travels in the blood to the mammary glands and stimulates them to produce milk. The release of milk causes the baby to continue suckling, which causes more prolactin to be secreted and more milk to be produced. The positive feedback loop continues until the baby stops suckling at the breast.

FEATURE: MYTH VS. REALITY

Anabolic steroids are synthetic versions of the naturally occurring male sex hormone testosterone. Male hormones have androgenic, or masculinizing, effects, but they also have anabolic, or muscle-building effects. The anabolic effects are the reason that synthetic steroids are used by athletes. In addition to building muscles, they also accelerate the development of bones and red blood cells, increase endurance so athletes can train harder and longer, and speed up muscle recovery. Unfortunately, these benefits of steroid use come with costs. If you ever consider taking anabolic steroids to build muscles and improve athletic performance, consider the following myths and corresponding realities.

Myth: Steroids are safe.

Reality: Steroid use may cause several serious side effects. Prolonged use may increase the risk of liver cancer, heart disease, and high blood pressure.

Myth: Steroids will not stunt your growth.

Reality: Teens who take steroids before they have finished growing in height may have their growth stunted so they remain shorter throughout life than they would otherwise have been. Such stunting occurs because steroids increase the rate at which skeletal maturity is reached. Once skeletal maturity occurs, additional growth in height is impossible.

Myth: Steroids do not cause drug dependency.

Reality: Steroid use may cause dependency as evidenced by the negative effects of stopping steroid use. These negative effects may include insomnia, fatigue, and depressed mood, among others.

Myth: There is no such thing as "roid rage."

Reality: Steroid use has been shown to increase aggressiveness in some people. It has also been implicated in a number of violent acts committed by people who had not demonstrated violent tendencies until they started using steroids.

Myth: Only males use steroids.

Reality: Although steroid use is more common in males than females, some females also use steroids. They use them to build muscle and improve physical performance, generally either for athletic competition or for self-defense.

REVIEW

1. What are endocrine hormones?
2. Define the target cell in the context of endocrine hormones.
3. Explain how steroid hormones influence target cells.
4. How do non-steroid hormones affect target cells?

5. Compare and contrast negative and positive feedback loops.
6. Outline the way feedback controls the production of thyroid hormones.
7. Describe the feedback mechanism that controls milk production by the mammary glands.
8. Why do endocrine hormones only affect some of the cells in the body? Choose the best answer.
   A. They only reach certain cells.
   B. Many hormones cannot cross the plasma membrane of cells.
   C. Some cells feedback negatively in response to a hormone.
   D. Only some cells have receptor proteins that can bind to a given hormone.
9. People with a condition called hyperthyroidism produce too much thyroid hormone. What do you think this does to the level of TSH? Explain your answer.
10. Which is more likely to maintain homeostasis — negative feedback or positive feedback? Explain your answer.
11. Does testosterone bind to receptors on the plasma membrane of target cells or in the cytoplasm of target cells? Explain your answer.
12. *True or False.* Endocrine hormones can affect the expression of genes.
13. *True or False.* Non-steroid hormones cannot affect intracellular processes.
14. *True or False.* Insulin binds to receptors on the plasma membrane of cells.
15. Which hormone is secreted by the pituitary gland?
    A. Prolactin
    B. Insulin
    C. Cortisol
    D. Thyrotropin releasing hormone

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13.3.1.1: CASE STUDY- HORMONES AND HEALTH

CASE STUDY: HORMONAL HAVOC

18-year-old Gabrielle checks her calendar. It has been 42 days since her last menstrual period, two weeks later than the length of the average woman's menstrual cycle. Although many women would suspect pregnancy if their period was late, Gabrielle has not been sexually active. She is not even sure she is "late" because her period has never been regular. Ever since her first period at 13 years of age, her cycle lengths have varied greatly, and there are months where she does not get a period at all. Her mother told her that a girl's period is often irregular when it first starts, but Gabrielle's still has not become regular five years later. She decides to go to the student health center on her college campus to get it checked out.



Figure **13.3.1.1.1**: Calendar

The doctor asks her about the timing of her menstrual periods and performs a pelvic exam. She also notices that Gabrielle is overweight, has acne, and excess facial hair. As she explains to Gabrielle, while these physical characteristics can be perfectly normal, in combination with an irregular period they can be signs of a disorder of the endocrine, or hormonal, system called polycystic ovary syndrome (PCOS).

In order to check for PCOS, the doctor refers Gabrielle for a pelvic ultrasound and sends her to the lab to get blood work done. When her lab results come back, Gabrielle learns that her levels of androgens (a group of hormones) are high, and so is her blood glucose (sugar). The ultrasound showed that she has multiple fluid-filled sacs known as cysts in her ovaries. Based on Gabrielle's symptoms and test results, the doctor tells her that she does indeed have PCOS.

PCOS is common in young women. It is estimated that between 1 in 10 to 20 women of childbearing age have PCOS — as many as five million women in the United States. You may know someone with PCOS or may have it yourself.

Read the rest of this chapter to learn about the glands and hormones of the endocrine system, their functions, how they are regulated, and the disorders — such as PCOS — that can arise when hormones are not regulated properly. At the end of the chapter, you will learn more about PCOS, its possible long-term consequences including fertility problems and diabetes, and how these negative outcomes can sometimes be prevented with lifestyle changes and medications.

CHAPTER OVERVIEW: ENDOCRINE SYSTEM

In this chapter, you will learn about the endocrine system, a system of glands that secrete hormones that regulate many of the body's functions. Specifically, you will learn about:

- The glands that make up the endocrine system and how hormones act as chemical messengers in the body.
- The general types of endocrine system disorders.
- The types of endocrine hormones, including steroid hormones such as sex hormones, and non-steroid hormones such as insulin; and how they affect the functions of their target cells by binding to different types of receptor proteins.
- How the levels of hormones are regulated mostly through negative, but sometimes through positive, feedback loops.
- The master gland of the endocrine system, the pituitary gland, controls other parts of the endocrine system through the hormones that it secretes; and how the pituitary itself is regulated by hormones secreted from the hypothalamus of the brain.
- The thyroid gland and its hormones, which regulate processes such as metabolism and calcium homeostasis; how the thyroid is regulated; and the disorders that can occur when there are problems in thyroid hormone regulation, such as hyperthyroidism and hypothyroidism.
- The adrenal glands, which secrete hormones that regulate processes such as metabolism, electrolyte balance, responses to stress, and reproductive functions; and the disorders that can occur when there are problems in adrenal hormone regulation, such as Cushing's syndrome and Addison's disease.
- The pancreas, which secretes hormones that regulate blood glucose levels such as insulin; and disorders of the pancreas and its hormones including diabetes.

As you read this chapter, think about the following questions:

1. Why can hormones have such a broad-range effect on the body, such as is seen in PCOS?
2. Which hormones normally regulate blood glucose and how is this related to diabetes?
3. What are androgens? How do you think their functions relate to some of the symptoms that Gabrielle is experiencing?

ATTRIBUTIONS

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13.1 Foundational and Contemporary Theories of Emotion

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13.4: Mental Health and Wellness

8.2: Mental Health and Wellness



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Your mental health is very important to your well-being. Just like we strive for to be physically healthy, we must also strive to be mentally, emotionally, and socially healthy.

Positive mental health allows people to:

- Cope with the stresses of life
- Be physically healthy
- Have good relationships
- Make meaningful contributions to your community
- Work productively
- Realize your full potential

Reaching Your Full Potential

What does it take to reach your full human potential, to become everything that you are capable of becoming? Is it important to have air, water, food, and shelter in order for you to strive to reach your human potential? Is it important to feel safe in order to reach your human potential?

In 1943 Abraham Maslow published one of the most cited theories of human behavior called Maslow's Hierarchy of Needs[1]. The purpose of the Hierarchy of Needs was to explain that there are levels of human needs and we need to focus on each of the levels in order to become everything that we are capable of becoming. Maslow's hierarchy of needs is often portrayed in the shape of a pyramid, with the most fundamental levels of needs at the bottom. Maslow developed the hierarchy with order of importance in mind, however noted that although it was observed that most people fulfilled their basic needs in the order of the hierarchy, there are some exceptions. The order of needs as categorized by Maslow from bottom to top are: physiological needs, safety, love and belonging, esteem, and self-actualization. Maslow acknowledged that many different levels of motivation are likely to be present in a human all at once. His focus in discussing the hierarchy was to identify the basic types of motivation and the order that they generally progress as lower needs are reasonably well met.

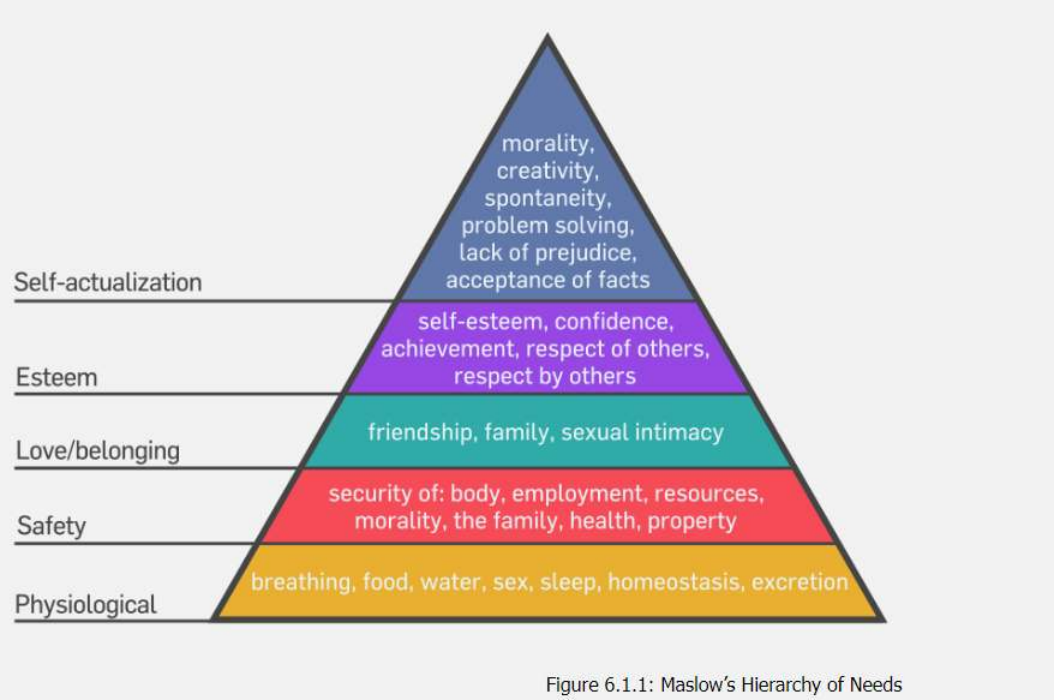


Figure 6.1.1: Maslow's Hierarchy of Needs

Physiological Needs

Physiological needs are generally obvious because they are required for survival. If requirements are not met, the body cannot continue to function. Air, water, food, clothing, and shelter are the basic physiological needs.

Safety Needs

Once physical needs are satisfied, individual safety takes precedence. Safety and Security needs include:

- Personal and family safety
- Financial security
- Health and well-being

Love/belonging Needs

After physiological and safety needs are fulfilled, the third layer of human needs are interpersonal. This involves feelings of belongingness. Humans need to feel a sense of belonging and acceptance, whether it comes from larger community affiliations or simply a few close friends. Without these connections, many people become susceptible to loneliness, social anxiety, and clinical depression. This need for belonging can sometimes overcome physiological and security needs. For example, an anorexic may ignore the need to eat and the security of health for a feeling of control and belonging. Deficiencies in interpersonal needs, due to neglect, shunning, ostracism, etc., can impact an individual's ability to form and maintain emotionally significant relationships.

Esteem

Esteem represents the normal human desire to be accepted and valued by others. People need to engage themselves to gain recognition and have an activity or activities that give the person a sense of contribution, to feel self-valued, be it in a profession or hobby. Imbalances at this level can result in low self-esteem or an inferiority complex. Many people with low self-esteem will not be able to improve their view of themselves simply by receiving fame, respect, and glory externally, but must first accept themselves internally. Psychological imbalances, such as depression, can prevent one from obtaining self-esteem on both levels.

Self-actualization

This level of need refers to what a person's full potential is and the realization of that potential. Maslow describes this level as the desire to accomplish everything that one can, to become the most that one can be. Individuals may perceive or focus on this need very specifically. For example, one individual may have the strong desire to become an ideal parent. In another, the desire may be

expressed athletically. For others, it may be expressed in paintings, pictures, or inventions. Maslow believed that to acquire this level of need, the person must adequately achieve the previous needs.

Examples: The movie Cast Away

The movie, Cast Away, demonstrates Maslow's Hierarchy of Needs. When Tom Hanks character is marooned on a deserted island the first things he does find water and food. These actions satisfy his immediate physiological needs. Next he needs to find shelter for safety and security. To meet his love and belongingness needs he has "Wilson"

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13.5: Psychotherapy

8.3: Psychotherapy

Who seeks treatment?



"person sitting while facing window - Credit to https://myfriendscoffee.com/" by John Beans is licensed under CC BY 2.0.

Would you describe the people who seek treatment as being on the brink, crazy, or desperate? Or can the ordinary Joe in need of advice seek out mental health counseling? The answer is that anyone can. David Sack, M.D. (2013) writes in the article *5 Signs Its Time to Seek Therapy*, published in Psychology Today, that "most people can benefit from therapy at least some point in their lives," and though the signs you need to seek help are obvious at times, we often try "to sustain [our] busy life until it sets in that life has become unmanageable." So, when should we seek help? First, if we feel sad, angry, or not like ourselves. We might be withdrawing from friends and families or sleeping more or less than we usually do. Second, if we are abusing drugs, alcohol, food, or sex to deal with life's problems. In this case, our coping skills may need some work. Third, in instances when we have lost a loved one or something else important to us, whether due to death or divorce, the grief may be too much to process. Fourth, a traumatic event may have occurred, such as abuse, a crime, an accident, chronic illness, or rape. Finally, if you have stopped doing the things you enjoy the most. Sack (2013) says, "If you decide that therapy is worth a try, it doesn't mean you're in for a lifetime of head shrinking." A 2001 study in the Journal of Counseling Psychology found that most people feel better within seven to 10 visits. In another study, published in 2006 in the Journal of Consulting and Clinical Psychology, 88% of therapy-goers reported improvements after just one session."

For more on this article, please visit:

https://www.psychologytoday.com/blog/where-science-meets-the-steps/201303/5-signs-its-time-seek-therapy

When friends, family, and self-healing are not enough.

If you are experiencing any of the aforementioned issues, you should seek help. Instead of facing the potential stigma of talking to a mental health professional, many people think that talking through their problems with friends or family is just as good. Though you will ultimately need these people to see you through your recovery, they do not have the training and years of experience that a psychologist or similar professional has. "Psychologists can recognize behavior or thought patterns objectively, more so than those closest to you who may have stopped noticing — or maybe never noticed. A psychologist might offer remarks or observations similar to those in your existing relationships, but their help may be more effective due to their timing, focus, or your trust in their neutral stance" (www.apa.org/helpcenter/psychotherapy-myths.aspx). You also should not wait to recover on your own. It is not a failure to admit you need help, and there could be a biological issue that makes it almost impossible to heal yourself.

What exactly is psychotherapy?

According to the APA, in **psychotherapy** "psychologists apply scientifically validated procedures to help people develop healthier, more effective habits." Several different approaches can be utilized to include behavior, cognitive and cognitive-behavior,

humanistic-experiential, psychodynamic, couples and family, and biological treatments.

The client-therapist relationship.

What is the ideal client-therapist relationship? APA says, “Psychotherapy is a collaborative treatment based on the relationship between an individual and a psychologist. Grounded in dialogue, it provides a supportive environment that allows you to talk openly with someone who’s objective, neutral and nonjudgmental. You and your psychologist will work together to identify and change the thought and behavior patterns that are keeping you from feeling your best.” It’s not just about solving the problem you saw the therapist for, but also about learning new skills to help you cope better in the future when faced with the same or similar environmental stressors.

So how do you find a psychotherapist? Several strategies may prove fruitful. You could ask family and friends, your primary care physician (PCP), look online, consult an area community mental health center, your local university’s psychology department, state psychological association, or use APA’s Psychologist Locator Service (locator.apa.org/?_ga=2.160567293.1305482682.1516057794-1001575750.1501611950). Once you find a list of psychologists or other practitioners, choose the right one for you by determining if you plan on attending alone or with family, what you wish to get out of your time with a psychotherapist, how much your insurance company pays for and if you have to pay out of pocket how much you can afford, when you can attend sessions, and how far you are willing to travel to see the mental health professional. Once you have done this, make your first appointment.

But what should you bring? APA suggests, “to make the most of your time, make a list of the points you want to cover in your first session and what you want to work on in psychotherapy. Be prepared to share information about what’s bringing you to the psychologist. Even a vague idea of what you want to accomplish can help you and your psychologist proceed efficiently and effectively.” Additionally, they suggest taking report cards, a list of medications, information on the reasons for a referral, a notebook, a calendar to schedule future visits if needed, and a form of payment. What you take depends on the reason for the visit.

In terms of what you should expect, you and your therapist will work to develop a full history which could take several visits. From this, a treatment plan will be developed. “This collaborative goal-setting is important, because both of you need to be invested in achieving your goals. Your psychologist may write down the goals and read them back to you, so you’re both clear about what you’ll be working on. Some psychologists even create a treatment contract that lays out the purpose of treatment, its expected duration and goals, with both the individual’s and psychologist’s responsibilities outlined.”

After the initial visit, the mental health professional may conduct tests to further understand your condition but will continue talking through the issue. He/she may even suggest involving others, especially in cases of relationship issues. Resilience is a skill that will be taught so that you can better handle future situations.

Does it work?

APA writes, “Reviews of these studies show that about 75 percent of people who enter psychotherapy show some benefit. Other reviews have found that the average person who engages in psychotherapy is better off by the end of treatment than 80 percent of those who don’t receive treatment at all.” Treatment works due to finding evidence-based treatment that is specific for the person’s problem; the expertise of the therapist; and the characteristics, values, culture, preferences, and personality of the client.

How do you know you are finished?

“How long psychotherapy takes depends on several factors: the type of problem or disorder, the patient’s characteristics and history, the patient’s goals, what’s going on in the patient’s life outside psychotherapy and how fast the patient is able to make progress.” It is important to note that psychotherapy is not a lifelong commitment, and it is a joint decision of client and therapist as to when it ends. Once over, expect to have a periodic check-up with your therapist. This might be weeks or even months after your last session. If you need to see him/her sooner, schedule an appointment. APA calls this a “mental health tune up” or a “booster session.”

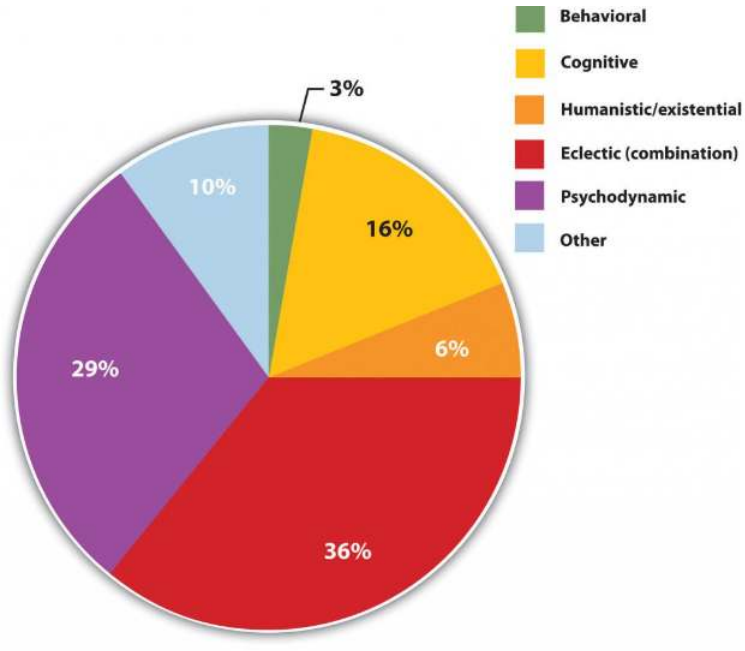


Figure 13.1.2: The Many Types of Therapy Practiced in the United States. These data show the proportion of psychotherapists who reported practicing each type of therapy. Adapted from Norcross, J. C., Hedges, M., & Castle, P. H. (2002). Psychologists conducting psychotherapy in 2001: A study of the Division 29 membership. *Psychotherapy: Theory, Research, Practice, Training*, *39*(1), 97–102.

For more on psychotherapy, please see the very interesting APA article on this matter:

www.apa.org/helpcenter/understanding-psychotherapy.aspx

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13.6: Humanistic and Person-Centered Therapy

8.4: Humanistic and Person-Centered Therapy

One of the next developments in therapy for mental illness, which arrived in the mid-20th century, is called humanistic or person-centered therapy (PCT). Here, the belief is that mental health problems result from an inconsistency between patients' behavior and their true personal identity. Thus, the goal of PCT is to create conditions under which patients can discover their self-worth, feel comfortable exploring their own identity, and alter their behavior to better reflect this identity.

History of Person-Centered Therapy



The quality of the relationship between therapist and patient is of great importance in person-centered therapy. [Image: CC0 Public Domain, https://goo.gl/m25gce]

PCT was developed by a psychologist named Carl Rogers, during a time of significant growth in the movements of humanistic theory and human potential. These perspectives were based on the idea that humans have an inherent drive to realize and express their own capabilities and creativity. Rogers, in particular, believed that all people have the potential to change and improve, and that the role of therapists is to foster self-understanding in an environment where adaptive change is most likely to occur (Rogers, 1951). Rogers suggested that the therapist and patient must engage in a genuine, egalitarian relationship in which the therapist is nonjudgmental and empathetic. In PCT, the patient should experience both a vulnerability to anxiety, which motivates the desire to change, and an appreciation for the therapist's support.

Techniques in Person-Centered Therapy

Humanistic and person-centered therapy, like psychoanalysis, involves a largely unstructured conversation between the therapist and the patient. Unlike psychoanalysis, though, a therapist using PCT takes a passive role, guiding the patient toward his or her own self-discovery. Rogers's original name for PCT was *non-directive therapy*, and this notion is reflected in the flexibility found in PCT. Therapists do not try to change patients' thoughts or behaviors directly. Rather, their role is to provide the therapeutic relationship as a platform for personal growth. In these kinds of sessions, the therapist tends only to ask questions and doesn't provide any judgment or interpretation of what the patient says. Instead, the therapist is present to provide a safe and encouraging environment for the person to explore these issues for him- or herself.

An important aspect of the PCT relationship is the therapist's unconditional positive regard for the patient's feelings and behaviors. That is, the therapist is never to condemn or criticize the patient for what s/he has done or thought; the therapist is only to express

warmth and empathy. This creates an environment free of approval or disapproval, where patients come to appreciate their value and to behave in ways that are congruent with their own identity.

Advantages and Disadvantages of Person-Centered Therapy

One key advantage of person-centered therapy is that it is highly acceptable to patients. In other words, people tend to find the supportive, flexible environment of this approach very rewarding. Furthermore, some of the themes of PCT translate well to other therapeutic approaches. For example, most therapists of any orientation find that clients respond well to being treated with nonjudgmental empathy. The main disadvantage to PCT, however, is that findings about its effectiveness are mixed. One possibility for this could be that the treatment is primarily based on *unspecific treatment factors*. That is, rather than using therapeutic techniques that are specific to the patient and the mental problem (i.e., *specific treatment factors*), the therapy focuses on techniques that can be applied to anyone (e.g., establishing a good relationship with the patient) (Cuijpers et al., 2012; Friedli, King, Lloyd, & Horder, 1997). Similar to how "one-size-fits-all" doesn't really fit every person, PCT uses the same practices for everyone, which may work for some people but not others. Further research is necessary to evaluate its utility as a therapeutic approach.

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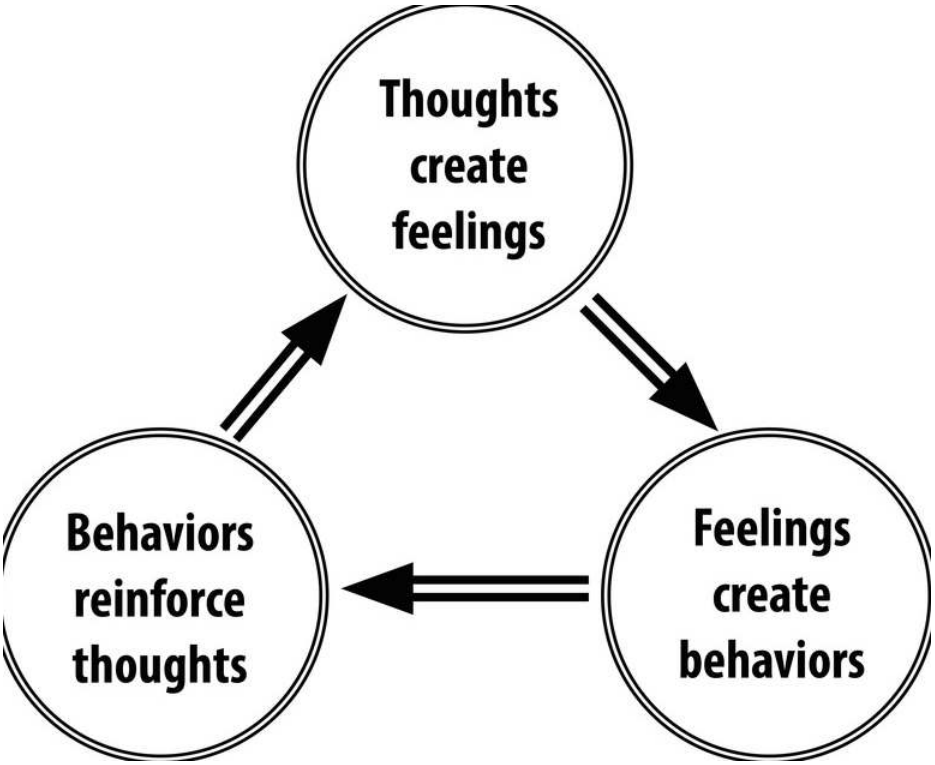
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13.7: Cognitive Behavioral Therapy

8.5: Cognitive Behavioral Therapy

Although both psychoanalysis and PCT are still used today, another therapy, cognitive-behavioral therapy (CBT), has gained more widespread support and practice. CBT refers to a family of therapeutic approaches whose goal is to alleviate psychological symptoms by changing their underlying cognitions and behaviors. The premise of CBT is that thoughts, behaviors, and emotions interact and contribute to various mental disorders. For example, let's consider how a CBT therapist would view a patient who compulsively washes her hands for hours every day. First, the therapist would identify the patient's maladaptive thought: "If I don't wash my hands like this, I will get a disease and die." The therapist then identifies how this maladaptive *thought* leads to a maladaptive *emotion*: the feeling of anxiety when her hands aren't being washed. And finally, this maladaptive emotion leads to the maladaptive behavior: the patient washing her hands for hours every day.

CBT is a present-focused therapy (i.e., focused on the "now" rather than causes from the past, such as childhood relationships) that uses behavioral goals to improve one's mental illness. Often, these behavioral goals involve between-session homework assignments. For example, the therapist may give the hand-washing patient a worksheet to take home; on this worksheet, the woman is to write down every time she feels the urge to wash her hands, how she deals with the urge, and what behavior she replaces that urge with. When the patient has her next therapy session, she and the therapist review her "homework" together. CBT is a relatively brief intervention of 12 to 16 weekly sessions, closely tailored to the nature of the psychopathology and treatment of the specific mental disorder. And, as the empirical data shows, CBT has proven to be highly efficacious for virtually all psychiatric illnesses (Hofmann, Asnaani, Vonk, Sawyer, & Fang, 2012).



Pattern of thoughts, feelings, and behaviors addressed through cognitive-behavioral therapy.

History of Cognitive Behavioral Therapy

CBT developed from clinical work conducted in the mid-20th century by Dr. Aaron T. Beck, a psychiatrist, and Albert Ellis, a psychologist. Beck used the term automatic thoughts to refer to the thoughts depressed patients report experiencing spontaneously. He observed that these thoughts arise from three belief systems, or schemasLinks to an external site.: beliefs about the self, beliefs about the world, and beliefs about the future. In treatment, therapy initially focuses on identifying automatic thoughts (e.g., "If I don't wash my hands constantly, I'll get a disease"), testing their validity, and replacing maladaptive thoughts with more adaptive thoughts (e.g., "Washing my hands three times a day is sufficient to prevent a disease"). In later stages of treatment, the patient's

maladaptive schemas are examined and modified. Ellis (1957) took a comparable approach, in what he called rational-emotive-behavioral therapy (REBT), which also encourages patients to evaluate their own thoughts about situations.

Techniques in CBT

Beck and Ellis strove to help patients identify maladaptive appraisals, or the untrue judgments and evaluations of certain thoughts. For example, if it's your first time meeting new people, you may have the automatic thought, "These people won't like me because I have nothing interesting to share." That thought itself is not what's troublesome; the appraisal (or evaluation) that it might have merit is what's troublesome. The goal of CBT is to help people make adaptive, instead of maladaptive, appraisals (e.g., "I do know interesting things!"). This technique of reappraisal, or cognitive restructuring, is a fundamental aspect of CBT. With cognitive restructuring, it is the therapist's job to help point out when a person has an inaccurate or maladaptive thought, so that the patient can either eliminate it or modify it to be more adaptive.

In addition to *thoughts*, though, another important treatment target of CBT is maladaptive *behavior*. Every time a person engages in maladaptive behavior (e.g., never speaking to someone in new situations), he or she reinforces the validity of the maladaptive thought, thus maintaining or perpetuating the psychological illness. In treatment, the therapist and patient work together to develop healthy behavioral habits (often tracked with worksheet-like homework), so that the patient can break this cycle of maladaptive thoughts and behaviors.

For many mental health problems, especially anxiety disorders, CBT incorporates what is known as exposure therapy. During exposure therapy, a patient confronts a problematic situation and fully engages in the experience instead of avoiding it. For example, imagine a man who is terrified of spiders. Whenever he encounters one, he immediately screams and panics. In exposure therapy, the man would be forced to confront and interact with spiders, rather than simply avoiding them as he usually does. The goal is to reduce the fear associated with the situation through *extinction learning*, a neurobiological and cognitive process by which the patient "unlearns" the irrational fear. For example, exposure therapy for someone terrified of spiders might begin with him looking at a cartoon of a spider, followed by him looking at pictures of real spiders, and later, him handling a plastic spider. After weeks of this incremental exposure, the patient may even be able to hold a live spider. After repeated exposure (starting small and building one's way up), the patient experiences less physiological fear and maladaptive thoughts about spiders, breaking his tendency for anxiety and subsequent avoidance.



"Common jumping/bold jumping spider" by Oregon Department of Agriculture is licensed under CC BY-NC-ND 2.0.

Advantages and Disadvantages of CBT

CBT interventions tend to be relatively brief, making them cost-effective for the average consumer. In addition, CBT is an intuitive treatment that makes logical sense to patients. It can also be adapted to suit the needs of many different populations. One disadvantage, however, is that CBT does involve significant effort on the patient's part, because the patient is an active participant in treatment. Therapists often assign "homework" (e.g., worksheets for recording one's thoughts and behaviors) between sessions to maintain the cognitive and behavioral habits the patient is working on. The greatest strength of CBT is the abundance of empirical support for its effectiveness. Studies have consistently found CBT to be equally or more effective than other forms of

treatment, including medication and other therapies (Butler, Chapman, Forman, & Beck, 2006; Hofmann et al., 2012). For this reason, CBT is considered a first-line treatment for many mental disorders.

Focus Topic:

Pioneers of CBT

The central notion of CBT is the idea that a person's behavioral and emotional responses are causally influenced by one's thinking. The stoic Greek philosopher Epictetus is quoted as saying, "men are not moved by things, but by the view they take of them." Meaning, it is not the event per se, but rather one's assumptions (including interpretations and perceptions) of the event that are responsible for one's emotional response to it. Beck calls these assumptions about events and situations automatic thoughts (Beck, 1979), whereas Ellis (1962) refers to these assumptions as self-statements. The cognitive model assumes that these cognitive processes cause the emotional and behavioral responses to events or stimuli. This causal chain is illustrated in Ellis's ABC model, in which A stands for the antecedent event, B stands for belief, and C stands for consequence. During CBT, the person is encouraged to carefully observe the sequence of events and the response to them, and then explore the validity of the underlying beliefs through behavioral experiments and reasoning, much like a detective or scientist.

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13.8: Acceptance and Mindfulness-Based Approaches

8.6: Acceptance and Mindfullness-Based Approaches

Unlike the preceding therapies, which were developed in the 20th century, this next one was born out of age-old Buddhist and yoga practices. Mindfulness, or a process that tries to cultivate a nonjudgmental, yet attentive, mental state, is a therapy that focuses on one's awareness of bodily sensations, thoughts, and the outside environment. Whereas other therapies work to modify or eliminate these sensations and thoughts, mindfulness focuses on nonjudgmentally accepting them (Kabat-Zinn, 2003; Baer, 2003). For example, whereas CBT may actively confront and work to change a maladaptive thought, mindfulness therapy works to acknowledge and accept the thought, understanding that the thought is spontaneous and not what the person truly believes. There are two important components of mindfulness: (1) self-regulation of attention, and (2) orientation toward the present moment (Bishop et al., 2004). Mindfulness is thought to improve mental health because it draws attention away from past and future stressors, encourages acceptance of troubling thoughts and feelings, and promotes physical relaxation.

Techniques in Mindfulness-Based Therapy

Psychologists have adapted the practice of mindfulness as a form of psychotherapy, generally called mindfulness-based therapy (MBT). Several types of MBT have become popular in recent years, including *mindfulness-based stress reduction* (MBSR) (e.g., Kabat-Zinn, 1982) and *mindfulness-based cognitive therapy* (MBCT) (e.g., Segal, Williams, & Teasdale, 2002).



One of the most important advantages of mindfulness based therapy is its level of accessibility to patients. [Image: Wayne MacPhail, https://goo.gl/aSZanf, CC BY-NC SA 2.0, https://goo.gl/Toc0ZF]

MBSR uses meditation, yoga, and attention to physical experiences to reduce stress. The hope is that reducing a person's overall stress will allow that person to more objectively evaluate his or her thoughts. In MBCT, rather than reducing one's general stress to address a specific problem, attention is focused on one's thoughts and their associated emotions. For example, MBCT helps prevent relapses in depression by encouraging patients to evaluate their own thoughts objectively and without value judgment (Baer, 2003). Although cognitive behavioral therapy (CBT) may seem similar to this, it focuses on "pushing out" the maladaptive thought, whereas mindfulness-based cognitive therapy focuses on "not getting caught up" in it. The treatments used in MBCT have been used to address a wide range of illnesses, including depression, anxiety, chronic pain, coronary artery disease, and fibromyalgia (Hofmann, Sawyer, Witt & Oh, 2010).

Mindfulness and acceptance—in addition to being therapies in their own right—have also been used as "tools" in other cognitive-behavioral therapies, particularly in dialectical behavior therapy (DBT) (e.g., Linehan, Amstrong, Suarez, Allmon, & Heard, 1991). DBT, often used in the treatment of borderline personality disorder, focuses on skills training. That is, it often employs mindfulness and cognitive behavioral therapy practices, but it also works to teach its patients "skills" they can use to correct maladaptive tendencies. For example, one skill DBT teaches patients is called *distress tolerance*—or, ways to cope with maladaptive thoughts and emotions in the moment. For example, people who feel an urge to cut themselves may be taught to snap their arm with a rubber band instead. The primary difference between DBT and CBT is that DBT employs techniques that address the symptoms of the problem (e.g., cutting oneself) rather than the problem itself (e.g., understanding the psychological motivation to cut oneself). CBT does not teach such skills training because of the concern that the skills—even though they may help in the short-term—may be harmful in the long-term, by maintaining maladaptive thoughts and behaviors.

DBT is founded on the perspective of a dialectical worldview. That is, rather than thinking of the world as "black and white," or "only good and only bad," it focuses on accepting that some things can have characteristics of both "good" and "bad." So, in a case involving maladaptive thoughts, instead of teaching that a thought is entirely bad, DBT tries to help patients be less judgmental of their thoughts (as with mindfulness-based therapy) and encourages change through therapeutic progress, using cognitive-behavioral techniques as well as mindfulness exercises.

Another form of treatment that also uses mindfulness techniques is acceptance and commitment therapy (ACT) (Hayes, Strosahl, & Wilson, 1999). In this treatment, patients are taught to observe their thoughts from a detached perspective (Hayes et al., 1999). ACT encourages patients *not* to attempt to change or avoid thoughts and emotions they observe in themselves, but to recognize which are beneficial and which are harmful. However, the differences among ACT, CBT, and other mindfulness-based treatments are a topic of controversy in the current literature.

Advantages and Disadvantages of Mindfulness-Based Therapy

Two key advantages of mindfulness-based therapies are their acceptability and accessibility to patients. Because yoga and meditation are already widely known in popular culture, consumers of mental healthcare are often interested in trying related psychological therapies. Currently, psychologists have not come to a consensus on the efficacy of MBT, though growing evidence supports its effectiveness for treating mood and anxiety disorders. For example, one review of MBT studies for anxiety and depression found that mindfulness-based interventions generally led to moderate symptom improvement (Hofmann et al., 2010).

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13.9: Emerging Treatment Strategies

8.7: Emerging Treatment Strategies

With growth in research and technology, psychologists have been able to develop new treatment strategies in recent years. Often, these approaches focus on enhancing existing treatments, such as cognitive-behavioral therapies, through the use of technological advances. For example, *internet-* and *mobile-delivered therapies* make psychological treatments more available, through smartphones and online access. Clinician-supervised online CBT modules allow patients to access treatment from home on their own schedule—an opportunity particularly important for patients with less geographic or socioeconomic access to traditional treatments. Furthermore, smartphones help extend therapy to patients' daily lives, allowing for symptom tracking, homework reminders, and more frequent therapist contact.

Another benefit of technology is cognitive bias modification. Here, patients are given exercises, often through the use of video games, aimed at changing their problematic thought processes. For example, researchers might use a mobile app to train alcohol abusers to avoid stimuli related to alcohol. One version of this game flashes four pictures on the screen—three alcohol cues (e.g., a can of beer, the front of a bar) and one health-related image (e.g., someone drinking water). The goal is for the patient to tap the healthy picture as fast as s/he can. Games like these aim to target patients' automatic, subconscious thoughts that may be difficult to direct through conscious effort. That is, by repeatedly tapping the healthy image, the patient learns to "ignore" the alcohol cues, so when those cues are encountered in the environment, they will be less likely to trigger the urge to drink. Approaches like these are promising because of their accessibility, however they require further research to establish their effectiveness.

Yet another emerging treatment employs *CBT-enhancing pharmaceutical agents*. These are drugs used to improve the effects of therapeutic interventions. Based on research from animal experiments, researchers have found that certain drugs influence the biological processes known to be involved in learning. Thus, if people take these drugs while going through psychotherapy, they are better able to "learn" the techniques for improvement. For example, the antibiotic d-cycloserine improves treatment for anxiety disorders by facilitating the learning processes that occur during exposure therapy. Ongoing research in this exciting area may prove to be quite fruitful.



"Drugs" by Brandon Giesbrecht is licensed under CC BY 2.0.

Pharmacological Treatments

Up until this point, all the therapies we have discussed have been talk-based or meditative practices. However, psychiatric medications are also frequently used to treat mental disorders, including schizophrenia, bipolar disorder, depression, and anxiety disorders. Psychiatric drugs are commonly used, in part, because they can be prescribed by general medical practitioners, whereas only trained psychologists are qualified to deliver effective psychotherapy. While drugs and CBT therapies tend to be almost equally effective, choosing the best intervention depends on the disorder and individual being treated, as well as other factors—such as treatment availability and comorbidity (i.e., having multiple mental or physical disorders at once). Although many new drugs have been introduced in recent decades, there is still much we do not understand about their mechanism in the brain. Further

research is needed to refine our understanding of both pharmacological and behavioral treatments before we can make firm claims about their effectiveness.

Integrative and Eclectic Psychotherapy

In discussing therapeutic orientations, it is important to note that some clinicians incorporate techniques from multiple approaches, a practice known as integrative or eclectic psychotherapy. For example, a therapist may employ distress tolerance skills from DBT (to resolve short-term problems), cognitive reappraisal from CBT (to address long-standing issues), and mindfulness-based meditation from MBCT (to reduce overall stress). And, in fact, between 13% and 42% of therapists have identified their own approaches as integrative or eclectic (Norcross & Goldfried, 2005).

Conclusion

Throughout human history we have had to deal with mental illness in one form or another. Over time, several schools of thought have emerged for treating these problems. Although various therapies have been shown to work for specific individuals, cognitive behavioral therapy is currently the treatment most widely supported by empirical research. Still, practices like psychodynamic therapies, person-centered therapy, mindfulness-based treatments, and acceptance and commitment therapy have also shown success. And, with recent advances in research and technology, clinicians are able to enhance these and other therapies to treat more patients more effectively than ever before. However, what is important in the end is that people actually seek out mental health specialists to help them with their problems. One of the biggest deterrents to doing so is that people don't understand what psychotherapy really entails. Through understanding how current practices work, not only can we better educate people about how to get the help they need, but we can continue to advance our treatments to be more effective in the future.

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13.10: End of Chapter Wrap-Up

8.8: Chapter 8 Wrap-Up

Here are the key takeaways from Chapter 8:

1. Anyone can seek mental health treatment, not just those in crisis. Therapy can benefit anyone, helping to manage emotions, cope with trauma, or address behavioral issues. Key signs to seek help include persistent sadness, substance abuse, loss, trauma, or disengagement from enjoyable activities. Therapy offers professional guidance that friends and family may not provide. Various approaches, such as cognitive-behavioral and psychodynamic therapy, are used to develop healthier habits. The client-therapist relationship is crucial, focusing on open dialogue and collaboration. Studies show therapy is effective, with most people seeing improvements within a few sessions. Treatment duration varies, and therapy typically ends when both the client and therapist agree on achieved goals.
2. Humanistic or Person-Centered Therapy (PCT), developed by Carl Rogers, focuses on helping patients discover their self-worth and align their behavior with their true identity. Unlike directive therapies, PCT involves unstructured conversations where therapists take a passive role, offering unconditional positive regard and empathy. This approach aims to create a supportive environment that encourages self-exploration and personal growth. While PCT is highly acceptable to patients due to its nonjudgmental and flexible nature, its effectiveness is mixed, potentially due to its use of general techniques rather than specific treatment methods tailored to individual needs. Further research is needed to fully understand its therapeutic utility.
3. Cognitive Behavioral Therapy (CBT) is a widely supported and practiced therapeutic approach that aims to alleviate psychological symptoms by changing underlying thoughts and behaviors. Developed by Aaron T. Beck and Albert Ellis, CBT focuses on present issues rather than past causes and uses structured sessions to identify and modify maladaptive thoughts and behaviors. Techniques like cognitive restructuring and exposure therapy are employed to help patients develop healthier thinking patterns and behaviors. CBT is cost-effective, intuitive, and supported by extensive empirical evidence, making it a first-line treatment for many mental disorders. However, it requires significant patient effort, including homework assignments to reinforce new cognitive and behavioral habits.
4. Mindfulness-based therapy (MBT), rooted in ancient Buddhist and yoga practices, emphasizes nonjudgmental awareness of bodily sensations, thoughts, and the external environment. Unlike other therapies that aim to change or eliminate thoughts, MBT promotes acceptance and presence in the moment. Techniques include mindfulness-based stress reduction (MBSR) and mindfulness-based cognitive therapy (MBCT), which use meditation, yoga, and attention to physical experiences to reduce stress and improve mental health. MBT is accessible and appealing due to its familiarity in popular culture and shows promise in treating mood and anxiety disorders. However, more research is needed to fully establish its efficacy.
5. Recent advancements in research and technology have led to new treatment strategies in psychology, enhancing existing therapies like cognitive-behavioral therapy (CBT). Internet- and mobile-delivered therapies increase accessibility, especially for those with geographic or socioeconomic barriers. Technologies like cognitive bias modification use video games to change problematic thought patterns, while CBT-enhancing pharmaceutical agents can improve the effectiveness of therapeutic interventions. Psychiatric medications remain a common treatment for mental disorders, and integrative or eclectic psychotherapy combines techniques from multiple approaches. These innovations aim to make psychological treatments more effective and accessible, highlighting the importance of seeking professional help for mental health issues.



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CHAPTER OVERVIEW

14: Career Exploration

14.1: Introduction to Career Exploration
14.2: Jobs vs. Careers
14.3: Majors and Careers
14.4: Personality, Skills and Interests
14.5: Social Dimensions of Work
14.6: End of Chapter Wrap-Up

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14.1: Introduction to Career Exploration

7.1: Introduction to Career Exploration

Learning Objectives

1. Identify the components that differentiate the term "job" and "career".
2. List necessary considerations for choosing a college major depending on the career you want.
3. Determine if your skill set compliments your career goal, and if not, what further skills you may need to acquire to reach your career goal.

Career Development

See if you can remember a time in your childhood when you noticed somebody doing professional work. Maybe a nurse or doctor, dressed in a lab coat, was listening to your heartbeat. Maybe a worker at a construction site, decked in a hard hat, was operating noisy machinery. Maybe a cashier at the checkout line in a grocery store was busily scanning bar codes. Each day in your young life you could have seen a hundred people doing various jobs. Surely some of the experiences drew your interest and appealed to your imagination. If you can recall any such times, those are moments from the beginning stage of your career development.

What exactly is career development?

It's a lifelong process in which we become aware of, interested in, knowledgeable about, and skilled in a career. It's a key part of human development as our identity forms and our life unfolds.

Stages of Career Development

There are five main stages of career development (developed by Donald Super). Each stage correlates with attitudes, behaviors, and relationships we all tend to have at that point and age. As we progress through each stage and reach the milestones identified, we prepare to move on to the next one. Which stage of career development do you feel you are in currently? Think about each stage. What challenges are you facing now? Where are you headed?

1. GROWING This is a time in early years (4–13 years old) when you begin to have a sense about the future. You begin to realize that your participation in the world is related to being able to do certain tasks and accomplish certain goals.
2. EXPLORING
   This period begins when you are a teenager, extends into your mid-twenties, and may extend later. In this stage you find that you have specific interests and aptitudes. You are aware of your inclinations to perform and learn about some subjects more than others. You may try out jobs in your community or at your school. You may begin to explore a specific career. At this stage, you have some detailed "data points" about careers, which will guide you in certain directions.
3. ESTABLISHING
   This period covers your mid-twenties through mid-forties. By now you are selecting or entering a field you consider suitable, and you are exploring job opportunities that will be stable. You are also looking for upward growth, so you may be thinking about an advanced degree.
4. MAINTAINING
   This stage is typical for people in their mid-forties to mid-sixties. You may be in an upward pattern of learning new skills and staying engaged. But you might also be merely "coasting and cruising" or even feeling stagnant. You may be taking stock of what you've accomplished and where you still want to go.
5. REINVENTING
   In your mid-sixties, you are likely transitioning into retirement. But retirement in our technologically advanced world can be just the beginning of a new career or pursuit —a time when you can reinvent yourself. There are many new interests to pursue, including teaching others what you've learned, volunteering, starting online businesses, consulting, etc. Keep in mind that your career development path is personal to you, and you may not fit neatly into the categories described above. It's more common than it has been in the past for people to change careers in their thirties, forties, fifties, and even sixties. Perhaps your socioeconomic background changes how you fit into the schema. Perhaps your physical and mental abilities affect how you define the idea of a "career." And for everyone, too, there are factors of chance that can't be predicted or anticipated. You are unique, and your career path can only be developed by you.

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14.2: Jobs vs. Careers

7.2: Jobs vs. Careers

Pursuing Your Professional Interests

One of the most widely known and successful American entrepreneurs of all time is Steve Jobs. He is best known as the co-founder, chairman, and chief executive officer of Apple, Inc. He also co-founded Pixar Animation Studios, and he was a member of the board of directors of the Walt Disney Company. Four hundred eighty-four inventions bear Jobs's name. From early on in his life, Jobs was interested in electronics. When he was thirteen, for instance, he worked at the Hewlett Packard factory, which developed hardware and software components. Jobs later reflected on how he landed this job when he called Mr. Hewlett to ask for parts for an electronics project: "[Hewlett] didn't know me at all, but he ended up giving me some parts and he got me a job that summer working at Hewlett-Packard on the line, assembling frequency counters . . . well, assembling may be too strong. I was putting in screws. It didn't matter; I was in heaven."

Jobs's electronics and computing career quickly unfolded as he pursued his passion for creating and promoting computing products. At age nineteen, he was a technician for Atari, a leading electronics, gaming and home-computer corporation. By twenty-one, he and his two partners had formed Apple, Inc. At thirty-four, he was named "Entrepreneur of the Decade" by Inc. magazine. And at fifty-two, he was inducted into the California Hall of Fame by Governor Arnold Schwarzenegger.

All in all, Jobs was relentless about pursuing his interests and passions. The products he and his associates developed have transformed modern culture, including the iMac, iTunes, Apple Stores, the iPod, the iTunes Store, the iPhone, the App Store, the iPad, the Mac OS, and the Mac OS X. This story of Steve Jobs's professional pursuits illustrates a dream, a goal, and an ambition that many college students share: to be successful in earning money and finding personal satisfaction in employment. His story also illustrates how opportunities are all around us and how random events aren't always so random.

In this section, we explore strategies that can help you chart your professional path and also attain ample reward. We begin by comparing and contrasting jobs and careers. We then look at how to match up your personal characteristics with a specific field or fields. We conclude by detailing a process for actually choosing your career. Throughout, you will find resources for learning more about this vast topic of planning for employment.

Job vs. Career

What is the difference between a job and a career? Do you plan to use college to help you seek one or the other? There is no right or wrong answer, because motivations for being in college are so varied and different for each student, but you can take maximum advantage of your time in college if you develop a clear plan for what you want to accomplish. In summary, a job lets you enjoy at least a minimal level of financial security, and it requires you to show up and do what is required of you. In exchange, you get paid. A career, on the other hand, is more of a means of achieving personal fulfillment through the jobs you hold. In a career, your jobs tend to follow a sequence that leads to increasing mastery, professional development, and personal and financial satisfaction. A career requires planning, knowledge, and skills, too. If it is to be a fulfilling career, it requires that you bring into play your full set of analytical, critical, and creative thinking skills. You will be called upon in a career to make informed decisions that will affect your life in both the short term and the long term. A career also lets you express your unique personality traits, skills, values, and interests.

	JOB	CAREER
Definitions	A job refers to the work a person performs for a living. It can also refer to a specific task done as part of the routine of one's occupation. A person can begin a job by becoming an employee, or by volunteering, for example, by starting a business or becoming a parent.	A career is an occupation (or series of jobs) that you undertake for a significant period of time in your life—perhaps five or ten years, or more. A career typically provides you with opportunities to advance your skills and positions.
Requirements	A job you accept with an employer does not necessarily require special education or training. Sometimes you can get needed learning "on the job."	A career usually requires special learning—perhaps certification or a specific degree.
Risk-Taking	A job may be considered a safe and stable means to get income, but jobs can also quickly change; security can come and go.	A career can also have risk. In today's world, employees need to continually learn new skills and to adapt to changes in order to stay employed. Starting your own business can have risks. Many people thrive on risk-taking, though, and may achieve higher gains. It all depends on your definition of success.
Duration	The duration of a job may range from an hour (in the case of odd jobs, for example,) to a lifetime. Generally a "job" is shorter-term.	A career is typically a long-term pursuit.
Income	Jobs that are not career oriented may not pay as well as career-oriented positions. Jobs often pay an hourly wage.	Career-oriented jobs generally offer an annual salary versus a wage. Career-oriented jobs may also offer appealing benefits, like health insurance and retirement.
Satisfaction and contributing to society	Many jobs are important to society, but some may not bring high levels of personal satisfaction.	Careers allow you to invest time and energy in honing your crafts and experiencing personal satisfaction. Career pursuits may include making contributions to society.

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14.3: Majors and Careers

7.3: Majors and Careers

There are few topics about college that create more controversy than “Does your major really matter to your career?” Many people think it does; others think it’s not so important. Who is right? And who gets to weigh in? Also, how do you measure whether something “matters”—by salary, happiness, personal satisfaction?

It may be difficult to say for sure whether your major truly matters to your career. One’s college major and ultimate career are not necessarily correlated. Consider the following points:

- Fifty to seventy percent of college students change their major at least once during their time in college.
- Most majors lead to a wide variety of opportunities rather than to one specific career, although some majors do indeed lead to specific careers.
- Many students say that skills they gain in college will be useful on the job no matter what they major in.
- Only half of graduating seniors accept a job directly related to their major.
- Career planning for most undergraduates focuses on developing general, transferable skills like speaking, writing, critical thinking, computer literacy, problem-solving, and team building, because these are skills that employers want.
- College graduates often cite the following four factors as being critical to their job and career choices: personal satisfaction, enjoyment, opportunity to use skills and abilities, and personal development.
- Within ten years of graduation, most people work in careers that aren’t directly related to their majors.
- Many or most jobs that exist today will be very different five years from now. It’s also important to talk about financial considerations in choosing a major.
- Any major you choose will likely benefit you because college graduates earn roughly $1 million more than high school graduates, on average, over an entire career.
- Even though humanities and social sciences students may earn less money right after college, they may earn more by the time they reach their peak salary than students who had STEM majors.
- Students who major in the humanities and social science are also more likely to get advanced degrees, which increases annual salary by nearly $20,000 at peak salary.

Students who major in the humanities and social science are also more likely to get advanced degrees, which increases annual salary by nearly $20,000 at peak salary.

So where will you stand with regard to these statistics?

Is it possible to have a good marriage between your major, your skills, job satisfaction, job security, and earnings?

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14.4: Personality, Skills and Interests

7.4: Personality, Skills and Interests

Every artist was first an amateur. —Ralph Waldo Emerson, author

Learning Objectives

By the end of this section, you will be able to:

- Understand personality preferences based on the Myers-Briggs Type Indicator® (MBTI).
- Explore the qualities of personality types that you most identify with.
- Research job titles that matches your preferred work styles.
- List specific skills that will be necessary for your career path
- List transferable skills that will be valuable for any career path
- Identify your skills and interests according to Dr. John Holland's Occupational Themes
- Determine career paths that align with your occupational code
- Explain how to acquire necessary skills, both in and out of class, for your career goals

Now that you have reviewed the concepts of goal setting and identified values most important to you, the next part of the career development process will help you to reflect on personal preferences. By doing this, you will understand the work environment that you will naturally find a greater fit in. The career development process is all about *you*. You are a unique individual with a distinct combination of personality traits, skills, and interests, skills. Self knowledge can help you in your career decision-making process to discover careers that are the best match for you.

Personality Type

Taking the time to ensure that your personality is compatible with your career choice is extremely important. If you do not invest the time now to figure out what makes you happy and keeps you motivated everyday, you could be very unhappy in the future. But why is personality so important? Learning about your personality allows you to think about your emotions, behaviors, and ways of thinking on a day to day basis. For example, do you prefer to work alone or do you prefer to work with others? Would you be content in a career that requires that you are extremely organized and have a set schedule? Or are you the type of person that likes to have an open, flexible schedule that allows you to be spontaneous? This information will assist you in deciding which career(s) match with your personality preferences.

To review personality preferences, one of the most common tools used to understand personality preferences is based on the personality theory from Myers and Briggs. Businesses use the Myers-Briggs Type Indicator® (MBTI) to find out more about the personalities of their potential employees (very commonly used by police departments), some universities use the MBTI to learn more about the personalities of potential graduate students considering psychology, counseling, and social work fields, and it commonly used in couples therapy (to help both individuals in a relationship understand each other and their behaviors better).

Watch the following video to get an introduction of four facets that comprise the 16 possible personality types.



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Personality Theory: The 4 Facets

- Extroversion-Introversion (EI): *how you get your energy and where you prefer to focus your attention*
- Sensing-Intuition (SN): *how you take in information about the world around you*
- Thinking-Feeling (TF): *how you like to make decisions*
- Judging-Perceiving (JP): *how you prefer to organize your life*

Complete the following activity to identify your personality type based on your own self reflection. As part of the course requirement, you will also be taking the MBTI personality test through our career center. Please check the syllabus for instructions. You can complete the following quick activity to self identify your personality type. Then compare the results with the actual MBTI assessment to see how your results are similar and different.

Activity 4.1: What's Your Type?

Read descriptions for the four facets. Pick which is more like you.

- **E** (Extraversion) **or I** (Introversion)?
- **S** (Sensing) **or N?** (Intuition)?
- **T** (Thinking) **or F?** (Feeling)?
- **J** (Judging) **or P?** (Perceiving)?

Could be described as: • Talkative, outgoing • Like to be in a fast-paced environment • Tend to work out ideas with other, think aloud • Enjoy being the center of attention Then you prefer **(E)** Extraversion	Could be described as: • Reserved, private • Prefer a slower pace with time for contemplation • Tend to think things through inside your head • Would rather observe then be the center of attention Then you prefer **(I)** Introversion
Could be described as: • Focus on the reality of how things are • Pay attention to concrete facts and details • Prefer ideas that have practical applications • Like to describe things in a specific, literal way Then you prefer **(S)** Sensing	**Could be described as:** • Imagine the possibilities of how things could be • Notice the big picture, see how everything connects • Enjoy ideas and concepts for their own sake • Like to be describe in a way figurative, poetic Then you prefer **(N)** Intuition
Could be described as: • Make decision in an impersonal way, using logical reasoning • Value justice, fairness • Enjoy finding the flaws in an arguments • Could be described as reasonable, level-headed Then you prefer (T) Thinking	**Could be described as:** • Base you decision on personal values and how our actions affect others • Value harmony, forgiveness • Like to please others and point out the best in people • Could be described as warm empathetic Then you prefer **(F)** Feeling
Could be described as: • Prefer to have matters settled • Think rules and deadlines should be respected • Prefer to have a detailed step-by-step instructions • Make plans, want to know what you're getting into Then you prefer **(J)** Judging	**Could be described as:** • Prefer to leave your options open • See rules and deadlines as flexible • Like to improvise and make things up as you go • Are spontaneous, enjoy surprise and new situations Then you prefer **(P)**Perceiving

What is your 4-letter personality type? __ __ __ __

The following are brief descriptions of the 16 personality types from Humanmetrics. Click on your personality type or a similar type to see which describes you best.

The 16 personality types

ESTJ	ISTJ	ENTJ	INTJ
ESTP	ISTP	ENTP	INTP
ESFJ	ISFJ	ENFJ	INFJ
ESFP	ISFP	ENFP	INFP

Work Styles

O*NET OnLine provides an online tool that helps you to review your personal characteristics and how they can affect how well one performs a job. This tool is available via the Work Styles search function on O*NET OnLine. You can browse O*Net data by clicking on the quality that you think best represents you including achievement, innovation, and leadership to explore the different jobs that will require the specific characteristic.

Skills

In addition to personality, skills are also important to consider in the career development process. If you lived and worked in colonial times in the United States, what skills would you need to be gainfully employed? What kind of person would your employer want you to be? And how different would your skills and aptitudes be then, compared to today?

Many industries that developed during the 1600s–1700s, such as health care, publishing, manufacturing, construction, finance, and farming, are still with us today. And the professional abilities, aptitudes, and values required in those industries are many of the same ones employers seek today.

For example, in the health care field then, just like today, employers looked for professionals with scientific insight, active listening skills, a service orientation, oral comprehension abilities, and teamwork skills. And in the financial field then, just like today, employers looked for economics and accounting skills, mathematical reasoning skills, clerical and administrative skills, and deductive reasoning.

Why is it that with the passage of time and all the changes in the work world, some skills remain unchanged (or little changed)? The answer might lie in the fact there are are two main types of skills that employers look for: hard skills and soft skills.

Hard Skills & Soft Skills

- **Hard skills** are concrete or objective abilities that you learn and perhaps have mastered. They are skills you can easily quantify, like using a computer, speaking a foreign language, or operating a machine. You might earn a certificate, a college degree, or other credentials that attest to your hard-skill competencies. Obviously, because of changes in technology, the hard skills required by industries today are vastly different from those required centuries ago.
- **Soft skills**, on the other hand, are subjective skills that have changed very little over time. Such skills might pertain to the way you relate to people, or the way you think, or the ways in which you behave—for example, listening attentively, working well in groups, and speaking clearly. Soft skills are sometimes also called **“transferable skills”** because you can easily transfer them from job to job or profession to profession without much training.

What Employers Want in an Employee

Employers want individuals who have the necessary hard and soft skills to do the job well and adapt to changes in the workplace. Soft skills may be especially in demand today because employers are generally equipped to train new employees in a hard skill—by training them to use new computer software, for instance—but it’s much more difficult to teach an employee a soft skill such as developing rapport with coworkers or knowing how to manage conflict. An employer might rather hire an inexperienced worker who can pay close attention to details than an experienced worker who might cause problems on a work team.

In this section, you will look at ways of identifying and building particular hard and soft skills that will be necessary for your career path. You will also learn how to use your time and resources wisely to acquire critical skills for your career goals.

Transferable Skills for Any Career Path

Transferable (soft) skills may be used in multiple professions. They include, but are by no means limited to, skills listed below:

- Dependable and punctual (showing up on time, ready to work, not being a liability)
- Self-motivated
- Enthusiastic
- Committed
- Willing to learn (lifelong learner)
- Able to accept constructive criticism
- A good problem solver
- Strong in customer service skills
- Adaptable (willing to change and take on new challenges)
- A team player
- Positive attitude
- Strong communication skills
- Good in essential work skills (following instructions, possessing critical thinking skills, knowing limits)

- Ethical
- Safety conscious
- Honest
- Strong in time management

For more extensive exploration, visit this checklist of transferable skills from Community Employment Services in Woodstock, Ontario.

These skills are transferable because they are positive attributes that are invaluable in practically any kind of work. They also do not require much training from an employer—you have them already and take them with you wherever you go. Soft skills are a big part of your "total me" package.

So, identify the soft skills that show you off the best, and identify the ones that prospective employers are looking for. By comparing both sets, you can more directly gear your job search to your strongest professional qualities.

ACTIVITY 4.2: IDENTIFYING YOUR SKILLS

Objective:

- To self identify your Top 5 transferable (soft) skills, skills you are good at, and those skills you wish to learn or develop further.

Instructions:

1. Review the list of transferable skills list and additional checklist of transferable skills above to complete the chart below.

	Top 5 Skills I Enjoy Using	**Top 5 Skills That Come Naturally**	**Top 5 Skills I Want to Learn**
1			
2			
3			
4			
5			

10 Top Skills You Need to Get a Job When You Graduate

The following video summarizes the ten top skills that the Target corporation believes will get you a job when you graduate. You can read a transcript of the video here.

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Assessing Your Skills and Interests

In this section you will continue to assess your skills and your interests in more depth. Most career assessment tests created to measure skills and interests are based on the career theory developed by Dr. John Holland.

The following video provides you with an introduction to the world of work and Holland's Occupational Themes:

A YouTube element has been excluded from this version of the text. You can view it online here: http://pb.libretexts.org/career/?p=32

As mentioned in the video, Holland defined six categories of people based on personality, interests, and skills:

1. **Realistic:** These people describe themselves as honest, loyal, and practical. They are doers more than thinkers. They have strong mechanical, motor, and athletic abilities; like the outdoors; and prefer working with machines, tools, plants, and animals.
2. **Investigative:** These people love problem solving and analytical skills. They are intellectually stimulated and often mathematically or scientifically inclined; like to observe, learn, and evaluate; prefer working alone; and are reserved.

3. **Artistic:** These people are the “free spirits.” They are creative, emotional, intuitive, and idealistic; have a flair for communicating ideas; dislike structure and prefer working independently; and like to sing, write, act, paint, and think creatively. They are similar to the investigative type but are interested in the artistic and aesthetic aspects of things more than the scientific.
4. **Social:** These are “people” people. They are friendly and outgoing; love to help others, make a difference, or both; have strong verbal and personal skills and teaching abilities; and are less likely to engage in intellectual or physical activity.
5. **Enterprising:** These people are confident, assertive risk takers. They are sociable; enjoy speaking and leadership; like to persuade rather than guide; like to use their influence; have strong interpersonal skills; and are status conscious.
6. **Conventional:** These people are dependable, detail oriented, disciplined, precise, persistent, and practical; value order; and are good at clerical and numerical tasks. They work well with people and data, so they are good organizers, schedulers, and project managers.

ACTIVITY 4.3: What’s Your Occupational Type?

Objective:

- To determine your occupational types and code

Instructions:

1. Using the descriptions above, choose the three types that most closely describe you and list them in order in the following table. Most people are combinations of two or sometimes three types.
2. Then list the specific words or attributes that you feel describe you best.
3. After determining your primary, secondary, and tertiary occupational types, take the first initial for each type, in order, to establish your occupational code.

Occupational Type	Words and Attributes That Closely Describe Me
Primary type (the one I identify with *most closely*)	
Secondary type	
Tertiary type	

Note: Your occupational code is made up of the initials of the three personality types you selected, in order.

My occupational code: ___ ___ ___

(For example: if Social, Enterprising, and Conventional are your top three occupational types, your occupational code would be: SEC)



Exploring Careers and Your Occupational Type

Now that you have determined your top three occupational types, you can begin to explore the types of careers that may be best suited for you. Holland studied people who were successful and happy in many occupations and matched their occupations to their occupational type, creating a description of the types of occupations that are best suited to each personality type. Just as many individuals are more than one personality type, many jobs show a strong correlation to more than one occupational type.

This is a rough beginning to finding your occupational type, but you will soon be seeking out more detailed results from the Strong Interest Inventory assessment as a part of this course.

Use the top thee occupation types you defined in Exercise 4.2 “What’s Your Occupational Type?” to help identify careers you may want to consider from the table below.

Table 4.1 Occupational Options by Type

Ideal Environments	Sample Occupations	
Realistic	• Structured • Clear lines of authority • Work with **things** and **tools** • Casual dress • Focus on tangible results or well-thought-out goals	• Contractor • Emergency medical technician (EMT) • Mechanic • Military career • Packaging engineer
Investigative	• Nonstructured • Research oriented • Intellectual • Work with **ideas** and **data**	• Pharmacist • Lab technician • Nanotechnologist • Geologist • College professor
Artistic	• Nonstructured • Creative • Rewards unconventional and aesthetic approaches • Creation of products and **ideas**	• Advertising career • Architect • Animator • Musician • Journalist
Social	• Collaborative • Collegial • Work with **people** and on people-related problems/issues • Work as a team or community	• Teacher • Geriatric counselor • Correctional officer • Coach • Nurse
Enterprising	• Typical business environment • Results oriented • Driven • Work with **people** and **data** • Entrepreneurial • Power focused	• Sales manager • Banker • Lawyer • Business owner • Restaurant manager
Conventional	• Orderly • Clear rules and policies • Consistent **processes** • Work with systems to manipulate and organize **data** • Control and handling of money	• Auditor • Insurance underwriter • Bank teller • Office manager • Database manager

You can also check out Gottfredson and Holland’s *Dictionary of Holland Occupational Codes* in the reference section of your library or use the Department of Labor’s O*Net (http://online.onetcenter.org/find) to get a deeper understanding of your occupation. For each occupation, O*Net lists the type of work, the work environment, the skills and education required, and the job outlook for that occupation. This is a truly rich resource that you should get to know.

Identify Which Factors Might Affect Your Choice

You may now have a list of careers you want to explore. But there are other factors you will need to take into consideration as well. It is important to use your creative thinking skills to come up with alternative “right” answers to factors that may present an obstacle to pursuing the right career.

- **Timing.** How much time must I invest before I actually start making money in this career? Will I need to spend additional time in school? Is there a certification process that requires a specific amount of experience? If so, can I afford to wait?
- **Finances.** Will this career provide me with the kind of income I need in the short term and the security I'll want in the longer term? What investment will I need to make to be successful in this field (education, tools, franchise fees, etc.)?
- **Location.** Does this career require me to relocate? Is the ideal location for this career somewhere I would like to live? Is it somewhere my family would like to live?
- **Family/personal.** How will this career affect my personal and family life? Do friends and family members who know me well feel strongly (for or against) about this career choice? How important is their input?

Your Next Steps

It may seem odd to be thinking about life after school, especially if you are just getting started. But you will soon be making decisions about your future, and regardless of the direction you may choose, there is a lot you can do while still in college. You will need to focus your studies by choosing a major. You should find opportunities to explore the careers that interest you. You can ensure that you are building the right kind of experience on which to base a successful career. These steps will make your dreams come to life and make them achievable.

Start by developing a relationship with a counselor in the Counseling/Transfer Centers in the S Building, SAC Career/CTE Center staff, or an Undecided Majors Counselor in L-222. Another great resource is SAC's Undecided Majors website http://sac.edu/undecided. It provides several helpful career exploration links.

All too often students engage these counselors only near the end of their college days, when the pressure is just on getting a job—any job—after having completed a degree. But these counselors can be of great help in matching your interests to a career and in ensuring you are gathering the right kind of experience to put you at the top of the recruiting heap.

Keep in mind that deciding on and pursuing a career is an ongoing process. The more you learn about yourself and the career options that best suit you, the more you will need to fine-tune your career plan. Don't be afraid to consider new ideas, but don't make changes without careful consideration. Career planning is exciting: learning about yourself and about career opportunities, and considering the factors that can affect your decision, should be a core part of your thoughts while in college.

Learn Specific Skills Necessary for Your Career Path

The table below lists four resources to help you determine which concrete skills are needed for all kinds of professions. You can even discover where you might gain some of the skills and which courses you might take.

Spend some time reviewing each resource. You will find many interesting and exciting options. When you're finished, you may decide that there are so many interesting professions in the world that it's difficult to choose just one. This is a good problem to have!

Table 4.2 Online Skills Identification Resources

	RESOURCE	DESCRIPTION
1	Career Aptitude Test (Rasmussen College)	This test helps you match your skills to a particular career that's right for you. Use a sliding scale to indicate your level of skill in the following skill areas: artistic, interpersonal, communication, managerial, mathematics, mechanical, and science. Press the Update Results button and receive a customized list customized of career suggestions tailored to you, based on data from the U.S. Bureau of Labor Statistics. You can filter by salary, expected growth, and education.
2	Skills Profiler (Career OneStop from the U.S. Department of Labor)	Use the Skills Profiler to create a list of your skills, and match your skills to job types that use those skills. Plan to spend about 20 minutes completing your profile. You can start with a job type to find skills you need for a current or future job. Or if you are not sure what kind of job is right for you, start by rating your own skills to find a job type match. When your skills profile is complete, you can print it or save it.
3	O*Net OnLine	This U.S. government website helps job seekers answer two of their toughest questions: "What jobs can I get with my skills and training?" and "What skills and training do I need to get this job?" Browse groups of similar occupations to explore careers. Choose from industry, field of work, science area, and more. Focus on occupations that use a specific tool or software. Explore occupations that need your skills. Connect to a wealth of O*NET data. Enter a code or title from another classification to find the related O*NET-SOC occupation.
4	Suggested Courses to Develop Skills that Prospective Employers Want (Psych Web)	If you are trying to strengthen particular skills, certain courses may be helpful. The list at this site is based on courses offered on many campuses and some of the skills the courses emphasize.

Acquiring Necessary Skills (both in and out of class) for Your Career Goals

"Lifelong learning" is a buzz phrase in the twentieth-first century because we are inundated with new technology and information all the time, and those who know *how to learn*, continuously, are in the best position to keep up and take advantage of these changes. Think of all the information resources around you: colleges and universities, libraries, the Internet, videos, games, books, films—the list goes on.

With these resources at your disposal, how can you best position yourself for lifelong learning and a strong, viable career? Which hard and soft skills are most important? What are employers really looking for?

The following list was inspired by the remarks of Mark Atwood, director of open-source engagement at Hewlett-Packard Enterprise. It contains excellent practical advice.

> - Learn how to write clearly. After you've written something, have people edit it. Then rewrite it, taking into account the feedback you received. Write all the time.
> - Learn how to speak. Speak clearly on the phone and at a table. For public speaking, try Toastmasters. "Meet and speak. Speak and write."
> - Be reachable. Publish your email so that people can contact you. Don't worry about spam.
> - Learn about computers and computing, even if you aren't gearing for a career in information technology. Learn something entirely new every six to twelve months.
> - Build relationships within your community. Use tools like Meetup.com and search for clubs at local schools, libraries, and centers. Then, seek out remote people around the country and world. Learn about them and their projects first by searching the Internet.
> - Attend conferences and events. This is a great way to network with people and meet them face-to-face.
> - Find a project and get involved. Start reading questions and answers, then start answering questions.
> - Collaborate with people all over the world.
> - Keep your LinkedIn profile and social media profiles up-to-date. Be findable.
> - Keep learning. Skills will often beat smarts. Be sure to schedule time for learning and having fun!

Just Get Involved

After you've networked with enough people and built up your reputation, your peers can connect you with job openings that may be a good fit for your skills. The video, below, from Monash University in Australia offers the following tips:

> 1. Get involved in part-time work
> 2. Get involved in extracurricular activities
> 3. Get involved with employment and career development

"Just Get involved. There are so many opportunities and open doors for you."

A YouTube element has been excluded from this version of the text. You can view it online here: http://pb.libretexts.org/career/?p=32

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14.5: Social Dimensions of Work

7.5: Social Dimensions of Work

Organizational psychology is the second major branch of study and practice within the discipline of industrial and organizational psychology. In organizational psychology, the focus is on social interactions and their effect on the individual and on the functioning of the organization. In this section, you will learn about the work organizational psychologists have done to understand job satisfaction, different styles of management, different styles of leadership, organizational culture, and teamwork.

Job Satisfaction

Some people love their jobs, some people tolerate their jobs, and some people cannot stand their jobs. Job satisfaction describes the degree to which individuals enjoy their job. It was described by Edwin Locke (1976) as the state of feeling resulting from appraising one's job experiences. While job satisfaction results from both how we think about our work (our cognition) and how we feel about our work (our affect) (Saari & Judge, 2004), it is described in terms of affect. Job satisfaction is impacted by the work itself, our personality, and the culture we come from and live in (Saari & Judge, 2004).

Job satisfaction is typically measured after a change in an organization, such as a shift in the management model, to assess how the change affects employees. It may also be routinely measured by an organization to assess one of many factors expected to affect the organization's performance. In addition, polling companies like Gallup regularly measure job satisfaction on a national scale to gather broad information on the state of the economy and the workforce (Saad, 2012).

Job satisfaction is measured using questionnaires that employees complete. Sometimes a single question might be asked in a very straightforward way to which employees respond using a rating scale, such as a Likert scale, which was discussed in the chapter on personality. A Likert scale (typically) provides five possible answers to a statement or question that allows respondents to indicate their positive-to-negative strength of agreement or strength of feeling regarding the question or statement. Thus the possible responses to a question such as "How satisfied are you with your job today?" might be "Very satisfied," "Somewhat satisfied," "Neither satisfied, nor dissatisfied," "Somewhat dissatisfied," and "Very dissatisfied." More commonly the survey will ask a number of questions about the employee's satisfaction to determine more precisely why he is satisfied or dissatisfied. Sometimes these surveys are created for specific jobs; at other times, they are designed to apply to any job. Job satisfaction can be measured at a global level, meaning how satisfied in general the employee is with work, or at the level of specific factors intended to measure which aspects of the job lead to satisfaction (Table 13.1).

table of factor descriptions

Factor	Description
Autonomy	Individual responsibility, control over decisions
Work content	Variety, challenge, role clarity
Communication	Feedback
Financial rewards	Salary and benefits
Growth and development	Personal growth, training, education
Promotion	Career advancement opportunity
Coworkers	Professional relations or adequacy
Supervision and feedback	Support, recognition, fairness
Workload	Time pressure, tedium
Work demands	Extra work requirements, insecurity of position

Table13.1 Factors Involved in Job Satisfaction–Dissatisfaction

Research has suggested that the work-content factor, which includes variety, difficulty level, and role clarity of the job, is the most strongly predictive factor of overall job satisfaction (Saari & Judge, 2004). In contrast, there is only a weak correlation between pay level and job satisfaction (Judge, Piccolo, Podsakoff, Shaw, & Rich, 2010). Judge et al. (2010) suggest that individuals adjust or

adapt to higher pay levels: Higher pay no longer provides the satisfaction the individual may have initially felt when her salary increased.

Why should we care about job satisfaction? Or more specifically, why should an employer care about job satisfaction? Measures of job satisfaction are somewhat correlated with job performance; in particular, they appear to relate to organizational citizenship or discretionary behaviors on the part of an employee that further the goals of the organization (Judge & Kammeyer-Mueller, 2012). Job satisfaction is related to general life satisfaction, although there has been limited research on how the two influence each other or whether personality and cultural factors affect both job and general life satisfaction. One carefully controlled study suggested that the relationship is reciprocal: Job satisfaction affects life satisfaction positively, and vice versa (Judge & Watanabe, 1993). Of course, organizations cannot control life satisfaction's influence on job satisfaction. Job satisfaction, specifically low job satisfaction, is also related to withdrawal behaviors, such as leaving a job or absenteeism (Judge & Kammeyer-Mueller, 2012). The relationship with turnover itself, however, is weak (Judge & Kammeyer-Mueller, 2012). Finally, it appears that job satisfaction is related to organizational performance, which suggests that implementing organizational changes to improve employee job satisfaction will improve organizational performance (Judge & Kammeyer-Mueller, 2012).

There is opportunity for more research in the area of job satisfaction. For example, Weiss (2002) suggests that the concept of job satisfaction measurements have combined both emotional and cognitive concepts, and measurements would be more reliable and show better relationships with outcomes like performance if the measurement of job satisfaction separated these two possible elements of job satisfaction.

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Job Satisfaction in Federal Government Agencies

A 2013 study of job satisfaction in the U.S. federal government found indexes of job satisfaction plummeting compared to the private sector. The largest factor in the decline was satisfaction with pay, followed by training and development opportunities. The Partnership for Public Service, a nonprofit, nonpartisan organization, has conducted research on federal employee job satisfaction since 2003. Its primary goal is to improve the federal government's management. However, the results also provide information to those interested in obtaining employment with the federal government.

Among large agencies, the highest job satisfaction ranking went to NASA, followed by the Department of Commerce and the intelligence community. The lowest scores went to the Department of Homeland Security.

The data used to derive the job satisfaction score come from three questions on the Federal Employee Viewpoint Survey. The questions are:

> 1. I recommend my organization as a good place to work.
> 2. Considering everything, how satisfied are you with your job?
> 3. Considering everything, how satisfied are you with your organization?

The questions have a range of six possible answers, spanning a range of strong agreement or satisfaction to strong disagreement or dissatisfaction. How would you answer these questions with regard to your own job? Would these questions adequately assess your job satisfaction?

You can explore the Best Places To Work In The Federal Government study at their Web site: www.bestplacestowork.org. The Office of Personnel Management also produces a report based on their survey: www.fedview.opm.gov.

Job stress affects job satisfaction. Job stress, or job strain, is caused by specific stressors in an occupation. Stress can be an ambigious term as it is used in common language. Stress is the perception and response of an individual to events judged as ovewhelming or threatening to the individual's well-being (Gyllensten & Palmer, 2005). The events themselves are the stressors. Stress is a result of an employee's perception that the demands placed on them exceed their ability to meet them (Gyllensten & Palmer, 2005), such as having to fill multiple roles in a job or life in general, workplace role ambiguity, lack of career progress, lack of job security, lack of control over work outcomes, isolation, work overload, discrimination, harrassment, and bullying (Colligan & Higgins, 2005). The stressors are different for women than men and these differences are a significant area of research (Gyllensten & Palmer, 2005). Job stress leads to poor employee health, job performance, and family life (Colligan & Higgins, 2005).

As already mentioned, job insecurity contributes significantly to job stress. Two increasing threats to job security are downsizing events and corporate mergers. Businesses typically involve I-O psychologists in planning for, implementing, and managing these types of organizational change.

Downsizing is an increasingly common response to a business's pronounced failure to achieve profit goals, and it involves laying off a significant percentage of the company's employees. Industrial-organizational psychologists may be involved in all aspects of downsizing: how the news is delivered to employees (both those being let go and those staying), how laid-off employees are supported (e.g., separation packages), and how retained employees are supported. The latter is important for the organization because downsizing events affect the retained employee's intent to quit, organizational commitment, and job insecurity (Ugboro, 2006).

In addition to downsizing as a way of responding to outside strains on a business, corporations often grow larger by combining with other businesses. This can be accomplished through a merger (i.e., the joining of two organizations of equal power and status) or an acquisition (i.e., one organization purchases the other). In an acquisition, the purchasing organization is usually the more powerful or dominant partner. In both cases, there is usually a duplication of services between the two companies, such as two accounting departments and two sales forces. Both departments must be merged, which commonly involves a reduction of staff (Figure 13.13). This leads to organizational processes and stresses similar to those that occur in downsizing events. Mergers require determining how the organizational culture will change, to which employees also must adjust (van Knippenberg, van Knippenberg, Monden, & de Lima, 2002). There can be additional stress on workers as they lose their connection to the old organization and try to make connections with the new combined group (Amiot, Terry, Jimmieson, & Callan, 2006). Research in this area focuses on understanding employee reactions and making practical recommendations for managing these organizational changes.

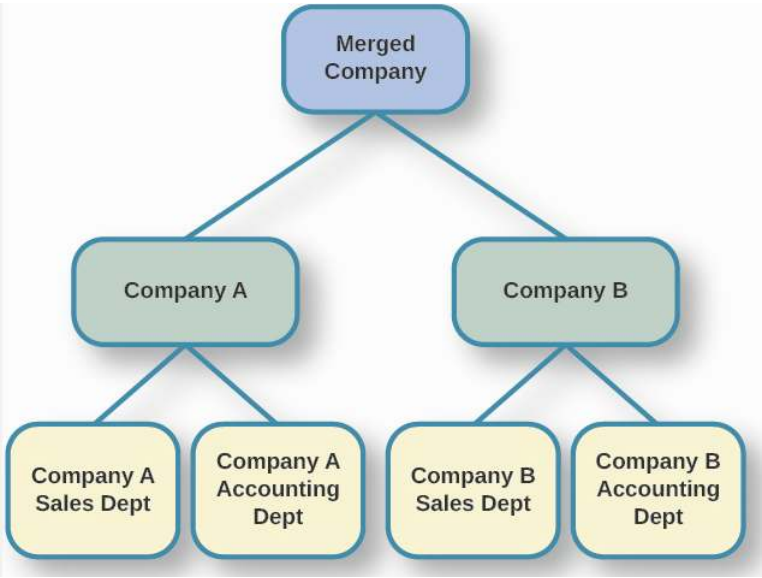


Figure 13.13 When companies are combined through a merger (or acquisition), there are often cuts due to duplication of core functions, like sales and accounting, at each company.

Work–Family Balance

Many people juggle the demands of work life with the demands of their home life, whether it be caring for children or taking care of an elderly parent; this is known as work-family balance. We might commonly think about work interfering with family, but it is also the case that family responsibilities may conflict with work obligations (Carlson, Kacmar, & Williams, 2000). Greenhaus and Beutell (1985) first identified three sources of work–family conflicts:

- time devoted to work makes it difficult to fulfill requirements of family, or vice versa,
- strain from participation in work makes it difficult to fulfill requirements of family, or vice versa, and
- specific behaviors required by work make it difficult to fulfill the requirements of family, or vice versa.

Women often have greater responsibility for family demands, including home care, child care, and caring for aging parents, yet men in the United States are increasingly assuming a greater share of domestic responsibilities. However, research has documented

that women report greater levels of stress from work–family conflict (Gyllensten & Palmer, 2005).

There are many ways to decrease work–family conflict and improve people's job satisfaction (Posig & Kickul, 2004). These include support in the home, which can take various forms: emotional (listening), practical (help with chores). Workplace support can include understanding supervisors, flextime, leave with pay, and telecommuting. Flextime usually involves a requirement of core hours spent in the workplace around which the employee may schedule his arrival and departure from work to meet family demands. Telecommuting involves employees working at home and setting their own hours, which allows them to work during different parts of the day, and to spend part of the day with their family. Recall that Yahoo! had a policy of allowing employees to telecommute and then rescinded the policy. There are also organizations that have onsite daycare centers, and some companies even have onsite fitness centers and health clinics. In a study of the effectiveness of different coping methods, Lapierre & Allen (2006) found practical support from home more important than emotional support. They also found that immediate-supervisor support for a worker significantly reduced work–family conflict through such mechanisms as allowing an employee the flexibility needed to fulfill family obligations. In contrast, flextime did not help with coping and telecommuting actually made things worse, perhaps reflecting the fact that being at home intensifies the conflict between work and family because with the employee in the home, the demands of family are more evident.

Posig & Kickul (2004) identify exemplar corporations with policies designed to reduce work–family conflict. Examples include IBM's policy of three years of job-guaranteed leave after the birth of a child, Lucent Technologies offer of one year's childbirth leave at half pay, and SC Johnson's program of concierge services for daytime errands.

Management and Organizational Structure

A significant portion of I-O research focuses on management and human relations. Douglas McGregor (1960) combined scientific management (a theory of management that analyzes and synthesizes workflows with the main objective of improving economic efficiency, especially labor productivity) and human relations into the notion of leadership behavior. His theory lays out two different styles called Theory X and Theory Y. In the Theory X approach to management, managers assume that most people dislike work and are not innately self-directed. Theory X managers perceive employees as people who prefer to be led and told which tasks to perform and when. Their employees have to be watched carefully to be sure that they work hard enough to fulfill the organization's goals. Theory X workplaces will often have employees punch a clock when arriving and leaving the workplace: Tardiness is punished. Supervisors, not employees, determine whether an employee needs to stay late, and even this decision would require someone higher up in the command chain to approve the extra hours. Theory X supervisors will ignore employees' suggestions for improved efficiency and reprimand employees for speaking out of order. These supervisors blame efficiency failures on individual employees rather than the systems or policies in place. Managerial goals are achieved through a system of punishments and threats rather than enticements and rewards. Managers are suspicious of employees' motivations and always suspect selfish motivations for their behavior at work (e.g., being paid is their sole motivation for working).

In the Theory Y approach, on the other hand, managers assume that most people seek inner satisfaction and fulfillment from their work. Employees function better under leadership that allows them to participate in, and provide input about, setting their personal and work goals. In Theory Y workplaces, employees participate in decisions about prioritizing tasks; they may belong to teams that, once given a goal, decide themselves how it will be accomplished. In such a workplace, employees are able to provide input on matters of efficiency and safety. One example of Theroy Y in action is the policy of Toyota production lines that allows any employee to stop the entire line if a defect or other issue appears, so that the defect can be fixed and its cause remedied (Toyota Motor Manufacturing, 2013). A Theory Y workplace will also meaningfully consult employees on any changes to the work process or management system. In addition, the organization will encourage employees to contribute their own ideas. McGregor (1960) characterized Theory X as the traditional method of management used in the United States. He agued that a Theory Y approach was needed to improve organizational output and the wellbeing of individuals. Table 13.2 summarizes how these two management approaches differ.

data table

Theory X	Theory Y
People dislike work and avoid it.	People enjoy work and find it natural.
People avoid responsibility.	People are more satisified when given responsibility.
People want to be told what to do.	People want to take part in setting their own work goals.
Goals are achieved through rules and punishments.	Goals are achieved through enticements and rewards.

Table13.2 Theory X and Theory Y Management Styles

Another management style was described by Donald Clifton, who focused his research on how an organization can best use an individual's strengths, an approach he called strengths-based management. He and his colleagues interviewed 8,000 managers and concluded that it is important to focus on a person's strengths, not their weaknesses. A strength is a particular enduring talent possessed by an individual that allows her to provide consistent, near-perfect performance in tasks involving that talent. Clifton argued that our strengths provide the greatest opportunity for growth (Buckingham & Clifton, 2001). An example of a strength is public speaking or the ability to plan a successful event. The strengths-based approach is very popular although its effect on organization performance is not well-studied. However, Kaiser & Overfield (2011) found that managers often neglected improving their weaknesses and overused their strengths, both of which interfered with performance.

Leadership is an important element of management. Leadership styles have been of major interest within I-O research, and researchers have proposed numerous theories of leadership. Bass (1985) popularized and developed the concepts of transactional leadership versus transformational leadership styles. In transactional leadership, the focus is on supervision and organizational goals, which are achieved through a system of rewards and punishments (i.e., transactions). Transactional leaders maintain the status quo: They are managers. This is in contrast to the transformational leader. People who have transformational leadershippossess four attributes to varying degrees: They are charismatic (highly liked role models), inspirational (optimistic about goal attainment), intellectually stimulating (encourage critical thinking and problem solving), and considerate (Bass, Avolio, & Atwater, 1996).

As women increasingly take on leadership roles in corporations, questions have arisen as to whether there are differences in leadership styles between men and women (Eagly, Johannesen-Schmidt, & van Engen, 2003). Eagly & Johnson (1990) conducted a meta-analysis to examine gender and leadership style. They found, to a slight but significant degree, that women tend to practice an interpersonal style of leadership (i.e., she focuses on the morale and welfare of the employees) and men practice a task-oriented style (i.e., he focuses on accomplishing tasks). However, the differences were less pronounced when one looked only at organizational studies and excluded laboratory experiments or surveys that did not involve actual organizational leaders. Larger sex-related differences were observed when leadership style was categorized as democratic or autocratic, and these differences were consistent across all types of studies. The authors suggest that similarities between the sexes in leadership styles are attributable to both sexes needing to conform the organization's culture; additionally, they propose that sex-related differences reflect inherent differences in the strengths each sex brings to bear on leadership practice. In another meta-analysis of leadership style, Eagly, Johannesen-Schmidt, & van Engen (2003) found that women tended to exhibit the characteristics of transformational leaders, while men were more likely to be transactional leaders. However, the differences are not absolute; for example, women were found to use methods of reward for performance more often than men, which is a component of transactional leadership. The differences they found were relatively small. As Eagly, Johannesen-Schmidt, & van Engen (2003) point out, research shows that transformational leadership approaches are more effective than transactional approaches, although individual leaders typically exhibit elements of both approaches.

Goals, Teamwork and Work Teams

The workplace today is rapidly changing due to a variety of factors, such as shifts in technology, economics, foreign competition, globalization, and workplace demographics. Organizations need to respond quickly to changes in these factors. Many companies are responding to these changes by structuring their organizations so that work can be delegated to work teams, which bring together diverse skills, experience, and expertise. This is in contrast to organizational structures that have individuals at their base (Naquin & Tynan, 2003). In the team-based approach, teams are brought together and given a specific task or goal to accomplish. Despite their burgeoning popularity, team structures do not always deliver greater productivity—the work of teams is an active area of research (Naquin & Tynan, 2003).

Why do some teams work well while others do not? There are many contributing factors. For example, teams can mask team members that are not working (i.e., social loafing). Teams can be inefficient due to poor communication; they can have poor decision-making skills due to conformity effects; and, they can have conflict within the group. The popularity of teams may in part result from the team halo effect: Teams are given credit for their successes. but individuals within a team are blamed for team failures (Naquin & Tynan, 2003). One aspect of team diversity is their gender mix. Researchers have explored whether gender mix has an effect on team performance. On the one hand, diversity can introduce communication and interpersonal-relationship problems that hinder performance, but on the other hand diversity can also increase the team's skill set, which may include skills that can actually improve team member interactions. Hoogendoorn, Oosterbeek, & van Praag (2013) studied project teams in a university business school in which the gender mix of the teams was manipulated. They found that gender-balanced teams (i.e., nearly equal numbers of men and women) performed better, as measured by sales and profits, than predominantly male teams. The study did not have enough data to determine the relative performance of female dominated teams. The study was unsuccessful in identifying which mechanism (interpersonal relationships, learning, or skills mixes) accounted for performance improvement.

There are three basic types of teams: problem resolution teams, creative teams, and tactical teams. Problem resolution teams are created for the purpose of solving a particular problem or issue; for example, the diagnostic teams at the Centers for Disease Control. Creative teams are used to develop innovative possibilities or solutions; for example, design teams for car manufacturers create new vehicle models. Tactical teams are used to execute a well-defined plan or objective, such as a police or FBI SWAT team handling a hostage situation (Larson & LaFasto, 1989). One area of active research involves a fourth kind of team—the virtual team; these studies examine how groups of geographically disparate people brought together using digital communications technology function (Powell, Piccoli, & Ives, 2004). Virtual teams are more common due to the growing globalization of organizations and the use of consulting and partnerships facilitated by digital communication.

Organizational Culture

Each company and organization has an organizational culture. Organizational culture encompasses the values, visions, hierarchies, norms, and interactions among its employees. It is how an organization is run, how it operates, and how it makes decisions—the industry in which the organization participates may have an influence. Different departments within one company can develop their own subculture within the organization's culture. Ostroff, Kinicki, and Tamkins (2003) identify three layers in organizational culture: observable artifacts, espoused values, and basic assumptions. Observable artifacts are the symbols, language (jargon, slang, and humor), narratives (stories and legends), and practices (rituals) that represent the underlying cultural assumptions. Espoused values are concepts or beliefs that the management or the entire organization endorses. They are the rules that allow employees to know which actions they should take in different situations and which information they should adhere to. These basic assumptions generally are unobservable and unquestioned. Researchers have developed survey instruments to measure organizational culture.

With the workforce being a global marketplace, your company may have a supplier in Korea and another in Honduras and have employees in the United States, China, and South Africa. You may have coworkers of different religious, ethnic, or racial backgrounds than yourself. Your coworkers may be from different places around the globe. Many workplaces offer diversity training to help everyone involved bridge and understand cultural differences. Diversity training educates participants about cultural differences with the goal of improving teamwork. There is always the potential for prejudice between members of two groups, but the evidence suggests that simply working together, particularly if the conditions of work are set carefully that such prejudice can be reduced or eliminated. Pettigrew and Tropp (2006) conducted a meta-analysis to examine the question of whether contact between groups reduced prejudice between those groups. They found that there was a moderate but significant effect. They also found that, as previously theorized, the effect was enhanced when the two groups met under conditions in which they have equal standing, common goals, cooperation between the groups, and especially support on the part of the institution or authorities for the contact.

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Managing Generational Differences

An important consideration in managing employees is age. Workers' expectations and attitudes are developed in part by experience in particular cultural time periods. Generational constructs are somewhat arbitrary, yet they may be helpful in setting broad directions to organizational management as one generation leaves the workforce and another enters it. The baby boomer generation (born between 1946 and 1964) is in the process of leaving the workforce and will continue to depart it for a decade or more. Generation X (born between the early 1960s and the 1980s) are now in the middle of their careers. Millennials (born from 1979 to the early 1994) began to come of age at the turn of the century, and are early in their careers.

Today, as these three different generations work side by side in the workplace, employers and managers need to be able to identify their unique characteristics. Each generation has distinctive expectations, habits, attitudes, and motivations (Elmore, 2010). One of the major differences among these generations is knowledge of the use of technology in the workplace. Millennials are technologically sophisticated and believe their use of technology sets them apart from other generations. They have also been characterized as self-centered and overly self-confident. Their attitudinal differences have raised concerns for managers about maintaining their motivation as employees and their ability to integrate into organizational culture created by baby boomers (Myers & Sadaghiani, 2010). For example, millennials may expect to hear that they need to pay their dues in their jobs from baby boomers who believe they paid their dues in their time. Yet millennials may resist doing so because they value life outside of work to a greater degree (Myers & Sadaghiani, 2010). Meister & Willyerd (2010) suggest alternative approaches to training and mentoring that will engage millennials and adapt to their need for feedback from supervisors: reverse mentoring, in which a younger employee educates a senior employee in social media or other digital resources. The senior employee then has the opportunity to provide useful guidance within a less demanding role.

Recruiting and retaining millennials and Generation X employees poses challenges that did not exist in previous generations. The concept of building a career with the company is not relatable to most Generation X employees, who do not expect to stay with one employer for their career. This expectation arises from of a reduced sense of loyalty because they do not expect their employer to be loyal to them (Gibson, Greenwood, & Murphy, 2009). Retaining Generation X workers thus relies on motivating them by making their work meaningful (Gibson, Greenwood, & Murphy, 2009). Since millennials lack an inherent loyalty to the company, retaining them also requires effort in the form of nurturing through frequent rewards, praise, and feedback.

Millennials are also interested in having many choices, including options in work scheduling, choice of job duties, and so on. They also expect more training and education from their employers. Companies that offer the best benefit package and brand attract millennials (Myers & Sadaghiani, 2010).

One well-recognized negative aspect of organizational culture is a culture of harassment, including sexual harassment. Most organizations of any size have developed sexual harassment policies that define sexual harassment (or harassment in general) and the procedures the organization has set in place to prevent and address it when it does occur. Thus, in most jobs you have held, you were probably made aware of the company's sexual harassment policy and procedures, and may have received training related to the policy. The U.S. Equal Employment Opportunity Commission (n.d.) provides the following description of sexual harassment:

> *Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when this conduct explicitly or implicitly affects an individual's employment, unreasonably interferes with an individual's work performance, or creates an intimidating, hostile, or offensive work environment. (par. 2)*

One form of sexual harassment is called quid pro quo. Quid pro quo means you give something to get something, and it refers to a situation in which organizational rewards are offered in exchange for sexual favors. Quid pro quo harassment is often between an employee and a person with greater power in the organization. For example, a supervisor might request an action, such as a kiss or a touch, in exchange for a promotion, a positive performance review, or a pay raise. Another form of sexual harassment is the threat of withholding a reward if a sexual request is refused. Hostile environment sexual harassment is another type of workplace harassment. In this situation, an employee experiences conditions in the workplace that are considered hostile or intimidating. For example, a work environment that allows offensive language or jokes or displays sexually explicit images. Isolated occurrences of these events do not constitute harassment, but a pattern of repeated occurrences does. In addition to violating organizational policies against sexual harassment, these forms of harassment are illegal.

Harassment does not have to be sexual; it may be related to any of the protected classes in the statutes regulated by the EEOC: race, national origin, religion, or age.

Violence in the Workplace

In the summer of August 1986, a part-time postal worker with a troubled work history walked into the Edmond, Oklahoma, post office and shot and killed 15 people, including himself. From his action, the term "going postal" was coined, describing a troubled employee who engages in extreme violence.

Workplace violence is one aspect of workplace safety that I-O psychologists study. Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening, disruptive behavior that occurs at the workplace. It ranges from threats and verbal abuse to physical assaults and even homicide (Occupational Safety & Health Administration, 2014).

There are different targets of workplace violence: a person could commit violence against coworkers, supervisors, or property. Warning signs often precede such actions: intimidating behavior, threats, sabotaging equipment, or radical changes in a coworker's behavior. Often there is intimidation and then escalation that leads to even further escalation. It is important for employees to involve their immediate supervisor if they ever feel intimidated or unsafe.

Murder is the second leading cause of death in the workplace. It is also the primary cause of death for women in the workplace. Every year there are nearly two million workers who are physically assaulted or threatened with assault. Many are murdered in domestic violence situations by boyfriends or husbands who chose the woman's workplace to commit their crimes.

There are many triggers for workplace violence. A significant trigger is the feeling of being treated unfairly, unjustly, or disrespectfully. In a research experiment, Greenberg (1993) examined the reactions of students who were given pay for a task. In one group, the students were given extensive explanations for the pay rate. In the second group, the students were given a curt uninformative explanation. The students were made to believe the supervisor would not know how much money the student withdrew for payment. The rate of stealing (taking more pay than they were told they deserved) was higher in the group who had been given the limited explanation. This is a demonstration of the importance of procedural justice in organizations. Procedural justice refers to the fairness of the processes by which outcomes are determined in conflicts with or among employees.

In another study by Greenberg & Barling (1999), they found a history of aggression and amount of alcohol consumed to be accurate predictors of workplace violence against a coworker. Aggression against a supervisor was predicted if a worker felt unfairly treated or untrusted. Job security and alcohol consumption predicted aggression against a subordinate. To understand and predict workplace violence, Greenberg & Barling (1999) emphasize the importance of considering the employee target of aggression or violence and characteristics of both the workplace characteristics and the aggressive or violent person.

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14.6: End of Chapter Wrap-Up

7.6: Chapter 7 Wrap-Up

Here are the key takeaways from Chapter 7:

- Steve Jobs, a co-founder of Apple Inc. and Pixar Animation Studios, exemplifies relentless pursuit of passion and innovation, leading to significant cultural transformations with products like the iPhone and iPad. His journey from a teenage electronics enthusiast to a celebrated entrepreneur illustrates the potential for success through seizing opportunities and following one's interests. Jobs's story underscores the difference between a job and a career: a job offers financial security, while a career provides personal fulfillment and professional development. Planning and aligning personal characteristics with career choices are essential for achieving both satisfaction and success in the professional realm.
- The significance of your college major to your career is widely debated and nuanced. While some believe it heavily influences career outcomes, evidence suggests a more flexible relationship. Many students change majors, and only half of graduates work in fields directly related to their major. Career success often hinges on transferable skills like critical thinking and communication, rather than specific academic backgrounds. Factors such as personal satisfaction, skill utilization, and development play crucial roles in career choices. Financially, college graduates generally out-earn high school graduates, and advanced degrees can further boost earnings. Ultimately, the best path combines your major with your skills, interests, and career aspirations for overall satisfaction and security.
- Understanding your personality preferences and skills is crucial for career development. Using tools like the Myers-Briggs Type Indicator (MBTI) and Dr. John Holland’s Occupational Themes can help you identify careers that align with your personality traits and interests. Distinguishing between hard skills (technical abilities) and soft skills (transferable abilities) is essential for career planning. Employers value both, but especially seek out soft skills such as communication, problem-solving, and adaptability. Lifelong learning, networking, and gaining practical experience through part-time work and extracurricular activities can significantly enhance your career prospects. Ultimately, aligning your career with your personal preferences and skills leads to greater job satisfaction and success.
- Organizational psychology focuses on the social interactions within workplaces and their impact on individuals and organizational performance. Key areas of study include job satisfaction, management and leadership styles, organizational culture, teamwork, and work-family balance. Job satisfaction is influenced by work content, personality, and culture, and can affect overall life satisfaction and organizational performance. Effective management styles, such as Theory Y and strengths-based management, can enhance employee motivation and productivity. Leadership styles, including transformational and transactional approaches, also play a crucial role. Understanding organizational culture and addressing issues like job stress, work-family conflict, and workplace violence are essential for fostering a positive work environment and improving organizational outcomes.



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