

## Chapter 15 Review Guide

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#### I. Psychoanalytic Perspective

Psychoanalysis (FREUD) definition: treating and understanding disorders by exploring unconscious conflicts and the unconscious expression of/or repression of unconscious impulses, thoughts, feeling and desires.

#### Personality Structure

##### ID:

Uses primary process thinking (dreaming, fantasizing, etc. as a way to gratify the id immediately) The id strives to satisfy basic sexual and aggressive drives. The id operates on the pleasure principle.

##### EGO:

Uses secondary process thinking (a method to get what you need in the real world.) The ego tries to make peace between the id, superego, and reality. The ego operates on the reality principle.

##### SUPER-EGO

The conscience. The super-ego strives for perfection and judges actions.

Weak superego: person is selfish and remorseless.

Extremely strong superego: person is guilt-ridden.

#### Psychosexual Stages of Development

Oral (0-18 mos.): Pleasure Zone: mouth: biting, chewing, sucking.

Anal (18-36 mos.): Pleasure Zone: anus : bowel & bladder elimination; coping with demands for control (toilet training).

Phallic (3-6 yrs.): Pleasure Zone: genitals: coping with incestuous sexual feelings (Oedipal complex & Electra complex).

Latency (6-puberty): dormant sexual feelings.

#### Neo-Freudians (cont.)

Erik Erikson:

8 stages of Psychosocial Development:

Erikson stressed the importance of the quality of parent-child relationships in personality development. He did, however agree with most of what Freud said about sexual instincts and the libido.

#### Psychosexual Stages (cont.)

Genital (puberty on): Mature sexual interests.

Fixation can occur at any of the first three stages if during that stage of development the child is either over-gratified or under-gratified. As a result, some sexual energy (libido) becomes fixated at that stage.

#### Defense Mechanisms

The Ego's method of reducing anxiety by distorting reality:

Repression Regression

Projection Reaction Formation

Displacement Rationalization

Sublimation Intellectualization

Identification Denial

#### The Neo-Freudians

Carl Jung

personal unconscious

collective unconscious

archetypes: anima, animus, persona, shadow, hero, savior etc.

Introverts vs. Extroverts

Jung focused less on the sexual and more on the rational & spiritual qualities of people than did Freud.

Alfred Adler:

Inferiority complex

Fictional finalism

Adler focused on directing energy overcoming feelings of inferiority striving toward perfection.

Karen Horney:

She strongly disagreed with Freud's view of women as weak & over-emotional. She focused on how cultural forces can impact personality development.

#### Social-Cognitive (cont.)

Rotter:

Locus of Control: Internal vs. External

Seligman:

Learned Helplessness: uncontrollable bad events+ perceived lack of control+

**II. Humanistic Perspective**

These theories stress the fundamental goodness of people and their striving toward higher levels of functioning.

Carl Rogers:

- actualizing tendency
- fully-functioning person
- unconditional positive regard vs. conditional positive regard
- person-centered therapy

Abraham Maslow:

- self-actualization
- hierarchy of motives

**III. Behavioral Perspective:**

B.F. Skinner:

The environment shapes behavior through reinforcement contingencies. Antecedents=Behaviors=Consequences The theory denies any impact from cognition. unconscious desires or personal striving.

(See unit on Learning Theory)

**IV. Social-Cognitive Perspectives:**

Based on Skinner's learning theory but also incorporates cognition, and social influences.

Bandura: (Social Learning Theory):

*Reciprocal Determinism:*

- Behavior-personal/cognitive factors-environment

*Observation Learning* (modeling)

generalized helpless behavior (depression)

**V. The Trait Perspective**

Theorists are interested in DESCRIBING personality **not** EXPLAINING it.

Sheldon: (Body types): endomorphs, mesomorphs & ectomorphs.

Cattell: By using factor analysis, determined there were 16 basic personality traits. (developed the 16PF)

Eysenk: 2 personality dimensions: stable vs unstable & introverted vs extroverted

BIG 5 Personality Factors: stability, extraversion, openness, agreeableness, & conscientiousness.

**\*\*REMEMBER: Most psychologists today are Eclectic.** They don't adhere to just one personality theory. Instead, they draw from several theories.

**Personality Assessment**

The Personal Interview

Observation

Objective Tests: used to assess personality traits.

16PF (Cattell)-assesses "normal traits

MMPI : intended for psychiatric diagnoses or abnormal traits.

Projective Tests: used to assess unconscious motives & conflicts.

Rorschach : consists of ambiguous inkblots. The way a person interprets them reveals aspects of the personality

TAT: (Thematic Apperception Test): consists of ambiguous pictures

about which a person tells a story.

The stories provide clues as to internal motives, needs, and drives.

Perspective	Emphasis	Theorists	Important Concepts	Assessment	Treatment
<p><b>Biomedical;</b></p> <p><b>Neuro-psychological,</b></p> <p>or physiological psychology</p>	<p>Based on the "Medical Model" which states that mental illnesses are similar to physical illnesses in that both are caused by the <u>physical malfunction of certain systems within the body</u>. The malfunction may be linked to genetics.</p>		<p>Most mental illnesses are caused by a "chemical imbalance" in the brain. Ex: the neurotransmitter Serotonin has been linked to depression and Dopamine has been linked to schizophrenia.</p>	<p>There are no definitive medical tests for mental illness. But, advances are likely in brain-imaging techniques</p>	<p>Electro-convulsive Therapy (ECT); psycho-surgery (lobotomy);</p>

			<b>Stress-diathesis model of mental illness.</b>		drug therapies : anti-depressant (Prozac), antipsychotic (Clozapine, Thorazine), anti-anxiety (Valium, Xanax), & anti-bipolar (Lithium).
<b>Trait</b>	Emphasizes the <u>description</u> & <u>measurement</u> of specific personality traits among individuals.	Sheldon	Endomorphs, mesomorphs, & ectomorphs.	OBJECTIVE personality inventories that assess different traits (e.g., MMPI, 16 PF, CPI, etc.)	Trait theorists are <b>NOT NOT NOT NOT NOT NOT NOT NOT</b> interested in therapy or the origins of mental illness. They simply want to <b>MEASURE &amp; DESCRIBE</b> Personality traits.
		Allport	Identified 200 stable personality traits.		
		Cattell	Through factor-analysis, identified 16 basic personality traits.		
		Eysenk	Identified two personality trait dimensions: stability/instability & introversion/extroversion.		
<b>Behavioral</b>	Behavior is a product of antecedents & consequences in the environment. The importance of "cognition" is dismissed or minimized.	B. F. Skinner	Positive reinforcement, negative reinforcement, punishment, schedules of reinforcement. ABC ♦s of behavior: Antecedents, behaviors, & consequences.	Behavioral observations and ratings.	Behavioral therapies: 1. <u>Classical conditioning</u> : counter-conditioning (both aversive conditioning and systematic desensitization). 2. <u>Operant conditioning</u> : token economies.
<b>Social-cognitive (or Cognitive-behavioral)</b>	Emphasis is on learning (behavioral) AND conscious cognitive processes.	Bandura	Social learning theory (observation & modeling); reciprocal determinism;	Behavioral observations & questionnaires assessing people ♦s thoughts and feelings.	Rational-emotive therapy (Albert Ellis); Beck ♦s Cognitive Therapy for depression.
		Rotter	Internal vs. external locus of control.		
		Seligman	Learned helplessness.		

