

Psychology Final Exam Study Guide

- A. Personality is patterns of behavior like actions, feelings, thoughts, and interactions that are consistent over time and across circumstances. They are unique characteristics that account for our enduring patterns of inner experience and outward behavior. Personality theories are attempts at describing and explaining why, how, when, someone acts. They are not facts and are bound to change over time.
- a. Freud's psychodynamic theory has three mental processes (conscious, preconscious, and unconscious), a structural model (id, ego, superego, reality principle), and defense mechanisms.
 - i. Unconsciousness is out of awareness. The motivated unconscious is a purposeful exclusion of information or material from the conscious awareness because it threatens the stability and integrity of one's self. Freud believed this was a defense mechanism.
 - ii. The structural model is three systems that make up personality
 1. Id (pleasure principle): original system, instinctive, libidinal energy, focused on maximizing pleasure and minimizing pain, and the primary thinking process is unconscious, irrational, and primitive.
 2. Ego (reality principle): develops from the id and restrains the id's impulses because of the external world. It operates according to the reality principle, which is need fulfillment and secondary process thinking. It is rational and reasonable and a strong ego leads to good psychological health.
 3. Superego (our conscience): internalized standards and cultural ideals. The two aspects are the ego ideal and conscience. It is non-rational, harsh, demanding, and unrealistic. This restrains the id as well.
 4. Defense mechanisms are unconscious processes that the ego produces to protect from anxiety and distress. These often involve denial and distortion of reality to make it less threatening. Examples:
 - a. Repression: keeping thoughts or memories that would be too threatening to acknowledge from awareness.
 - b. Denial: refusing to acknowledge external realities or emotions.
 - c. Projection: attributing one's own unacknowledged feelings or impulses onto others.
 - d. Reaction formation: turning unacceptable feelings or impulses into their opposites.
 - e. Sublimation: converting sexual or aggressive impulses into socially acceptable activities.
 - f. Rationalization: explaining away actions in a seemingly logical way to avoid uncomfortable feelings like guilt or shame.
 - iii. Freud's theory was shaped by observations of patients with hysterical physical symptoms. His theory was designed to explain or interpret behaviors based on natural and innate processes.
 - iv. Criticisms of Freud's theory: there is insufficient attention to conscious experience, an exclusive focus on childhood, little emphasis on social context, excessive focus on sex, pathology-oriented, and little scientific support.
 - v. Psychodynamic theory today involves more ego and less id, has less focus on childhood, less unconscious conflict, less sex and aggression, and more emphasis on culture and social influences.
 - b. Humanistic theory was a reaction to Freud's theory and was focused on basic good, positive nature of humanity, and self-determinism instead of the dark forces that Freud focused on. Maslow observed healthy individuals rather than people in distress like Freud did. Maslow

did not like that psychology was focused on psychopathology and weakness. This theory highlights each person's consciousness, free will, and other special human qualities.

- i. Self-actualization is the highest level on Maslow's hierarchy of needs. It involves morality, creativity, spontaneity, problem solving, lack of prejudice, and acceptance of facts. Characteristics of self-actualizers include realist, accepting, problem centered, spontaneous, flexible, need for solitude, freshness of appreciation, and they have peak experience and flow.
 - ii. Carl Rogers believed that humans are basically good. Unconditional positive regard (client-centered therapy) is when the therapist accepts the patient for who they are and does not impose conditions of worth. This method promotes self-awareness and creative choice. Unconditional positive regard encourages people to be their best self. Self-concept is a pattern of perception that can be used to characterize an individual.
 - iii. Criticisms of humanistic theories: it is simplistic and naïve, it has abstract concepts that are difficult to investigate, it is focused more on positive aspects, and it emphasizes universality, which is not good because everyone is different.
- c. Trait theory is an approach to personality that is more about what rather than how or why. The theory comes from statistical attempts at finding core dimensions or traits (ex: personality test). It is focused on description of personality, common elements in personality, and individual variation in common elements.
- i. Traits are inborn stable characteristics that vary between individuals or emotional, cognitive, and behavioral tendencies that are consistent through situations and constitute underlying personality dimensions. Allport says the two aspects of traits are observed patterns of behavior that occur frequently and inferred underlying dimensions or disposition from which the behavior emanates.
 - ii. Eysenck's 3 factors or superfactors are: extroversion-introversion, neuroticism-emotional stability, and psychoticism-impulse control.
 - iii. Five factor model (Costa and McCrae) are five subordinate factors that are empirically derived rather than theoretically. They are not always found but mostly they are.
 1. Openness to experience: creative and open-minded vs. simple and narrow-minded. More flexible people are generally happier.
 2. Conscientiousness: organized and responsible vs. careless and frivolous.
 3. Extroversion: talkative and energetic vs. quiet and reserved.
 4. Agreeable: kind and affectionate vs. cold, cruel, and quarrelsome.
 5. Neuroticism: stable and calm vs. anxious and irritable.
 - iv. Traits determine behavior. Trait theory is more consistent across similar situations and less consistent over long periods of time. Specific behaviors can be enacted with effort.
 - v. Situationism means that behavior is controlled by situational factors rather than internal traits. BF Skinner showed that situational reinforcers shape response tendencies.
 - vi. Interactionism is the relationship between someone's traits and the situations they choose to be in. Traits are activated by situations but situations are influenced by tendencies or behaviors.
 - vii. Heritability is the portion of population variance in a particular trait that is due to inherited genetic influence. The heritability rate is between 20-55% depending on the trait. Personality traits are influenced by genetics.
 - viii. Clark and Watson attempted to organize data into broad categories of biologically based temperament. Independent dimensions have different but overlapping

putative biological roots. The 3 dimensions are negative emotionality, positive emotionality, and disinhibition vs. constraint.

- ix. Gender differences in personality: women are socially attuned and have emotional intelligence, whereas men decide based on abstract ideas and aggression. Social role theory says gender differences are due to the way we are socialized to particular gender role expectations.

B. Psychopathology is defined as “problematic patterns of thought, feeling or behavior that disrupt an individual’s sense of well-being or social or occupational functioning”.

- a. Abnormality is characterized as deviance, personal distress or pain, danger to self or others, and dysfunction. Models of normality and abnormality are structures that provide similarity to reality. The functions of models are to organize data, help us remember, and provide a theory that constrains and directs our thinking.
 - i. Statistical abnormality: it provides logical form of abnormality but no content.
 - 1. Scientific: model of average frequency for normality and abnormality is unidirectional and bidirectional.
 - 2. Common sense: frequent/consistent self perceptions and perceptions of others for normality and abnormality involves infrequent/inconsistent perceptions.
 - ii. Health: normal health is universal. Abnormality involves psychiatric diagnosis, presence in a hospital, etc. This is a problem because it is a cop-out.
 - iii. Utopian: normality is self-actualization and abnormality is loss of balance in psychological forces, immaturity, etc. Problem with this is that the concept of normality is too far-fetched, expensive, etc.
 - iv. Process: normality is the end-point of temporal progression. Abnormality is the early stage of development and prior stage of evolution. Problems are that it must be combined with another model.
- b. Some criticisms about abnormality and mental illness include people believing it is used as a social construct. Thomas Szasz believes the labels of mental illness force people to conform to social norms. The labeling theory says stigmatization and self-fulfilling prophecies are related to poverty and social class.
- c. Diathesis-stress relationship: people with biological predisposition develop a disorder only if certain kinds of psychological events, personal stress, or societal expectations are also present.
- d. DSM-IV (Diagnostic and Statistical Manual of Mental Disorders 4th edition) is a descriptive approach that is symptom and syndrome based and atheoretical. Axis I disorders are not necessarily permanent, whereas Axis II are life-long pervasive disorders that are highly resistant to change and treatment.
 - i. Axis I
 - 1. Anxiety disorders (OCD, panic, PTSD)
 - 2. Mood disorders (depression, bipolar)
 - 3. Schizophrenia/psychotic disorders (delusion, thought disturbance)
 - 4. Somatoform disorder (complaint is a physical symptom)
 - 5. Dissociative disorders (disturbance in memory, identity, or consciousness, example multiple personality)
 - 6. Impulse-control disorders (loss of impulse control, example compulsive gambling)
 - 7. Sexual disorders (sexual dysfunction disorders like erectile dysfunction or sexual deviation disorders)
 - 8. Substance-related disorders (addictive behaviors)